

# THE EDUCATION OF PREGNANT YOUNG WOMEN AND YOUNG MOTHERS IN ENGLAND

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NEWCASTLE



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The views expressed in this report are the authors' and do not necessarily reflect those of the Department for Education and Skills.

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## **List of Abbreviations**

|        |  |
|--------|--|
| ABI    | Area-based Initiative  |
| ALSPAC | Avon Longitudinal Study of Parents and Children  |
| CDS    | Centre for Development Studies   |
| CDT    | Craft, Design and Technology   |
| CICRED | Comite International de Cooperation dans les Recherches Nationales en Demographie (Committee for International Cooperation in National Research in Demography) |
| CS     | Connexions Service   |
| DETR   | Department of Environment, Transport & the Regions)  |
| DfEE   | Department for Education & Employment  |
| DfES   | Department for Education & Skills  |
| DSS    | Dept of Social Security  |
| DTLR   | Dept for Transport, Local Government & the Regions   |
| EAZ    | Education Action Zone  |
| EiC    | Excellence in Cities   |
| EDO    | Education Other  |
| EDOps  | Education Other (pregnancy specific)   |
| EDOg   | Education Other (generic)  |
| EMA    | Education Maintenance Allowance  |
| EOTAS  | Education Other Than At School   |
| ESF    | European Social Fund   |
| ETE    | Education, training and employment   |
| EWO    | Education welfare officer  |
| EYPCD  | Early Years Development and Childcare Partnership  |
| FE     | Further Education  |
| GCSE   | General Certificate of Secondary Education   |
| GNVQ   | General National Vocational Qualification  |
| HAZ    | Health Action Zone   |
| HT     | Home Tuition   |
| IS     | Interview Sample   |
| IT     | Information Technology   |
| JRF    | Joseph Rowntree Foundation   |
| LEA    | Local Education Authority  |
| LEASIS | LEA and School Information Service   |
| LTPC   | Local Teenage Pregnancy Co-ordinator   |
| NCDS   | National Child Development Study   |
| NDC    | New Deal for Communities   |
| NDLP   | New Deal for Lone Parents  |
| NTPRG  | National Teenage Parent Research Group   |
| OBS    | Overall Baseline Sample  |
| OFSTED | Office for Standards in Education  |
| PCT    | Primary Care Trust   |
| PRU    | Pupil Referral Unit  |
| PSHE   | Personal, Social and Health Education  |
| PSM    | Post-statutory aged mothers  |
| RE     | Religious Education  |
| RO     | Reintegration Officer (or equivalent)  |
| SAPA   | Seoul Association for Public Administration  |
| SEED   | Scottish Executive Education Department  |
| SEU    | Social Exclusion Unit  |

|        |  |
|--------|--|
| SFG    | Standards Fund Grant   |
| SFGTP  | Standards Fund Grant: Teenage Pregnancy  |
| SM     | Statutory aged mothers   |
| SMCN   | Subgroup on Maternal and Child Nutrition<br>- Scientific Advisory Committee on Nutrition |
| SP     | Statutory aged pregnant young women  |
| SPU    | Specialist unit for pregnant young women and young mothers                               |
| SRE    | Sex and Relationship Education   |
| SS     | Sure Start   |
| SS+    | Sure Start Plus  |
| SSD    | Social Services Department   |
| TPC    | Teenage Pregnancy Co-ordinator   |
| TPU    | Teenage Pregnancy Unit   |
| UA     | Unitary Authority  |
| UCL    | University College London  |
| UNICEF | United Nations Children's Fund   |
| VTS    | Visiting Teacher Service   |
| WHO    | World Health Organisation  |

## **Executive Summary**

Selman P. & Hosie A.

### **Introduction**

The aim of the study was to explore the educational experience of pregnant young women and young mothers of school age in England and to identify what factors, and forms of provision, determine both academic and broader success in returning to or continuing with education.

### **Background**

In 1999 the Social Exclusion Unit report on Teenage Pregnancy noted that “teenagers who become parents should not lose out on opportunities for the future” and that “young parents should have the chance to complete their education and prepare to support themselves and their families”. This was translated into the specific target of “getting more teenage parents into education, training or employment to reduce their risk of long term social exclusion” (SEU 1999). In 1999 a new *Standards Fund Teenage Pregnancy Grant* was introduced for areas with high teenage pregnancy rates to encourage the reintegration of school age mothers into the education system and provide support to pregnant teenagers and school age parents. This has now been absorbed into the wider *Vulnerable Children’s Grant*, offering the opportunity for extending this support to school age parents in all LEAs. Additional support is available through a range of initiatives such as Connexions and Sure Start Plus

The DfES published guidelines in 2001 (DfES 2001) on the education of young mothers of school age, which stressed that pregnancy was not a reason for school exclusion and that LEAs had a duty to provide suitable education (at an individual level) for all who become pregnant while of compulsory school age. Later relevant initiatives have included the introduction of *Care to Learn* for 16-19 years olds in 2003 and its extension to young women of school age from August 2004.

It is against this background of evolving policy for the support for young pregnant women and young mothers that this research has sought to look in detail at the experiences and needs of pregnant young women and young mothers of school age.

### **The Research**

The research was carried out in ten Local Education Authorities in England, chosen to represent LEAs with: a range of different forms of educational provision available during pregnancy (i.e. mainstream school, specialist units for pregnant young women and young mothers, home tuition, PRUs and FE college); varying government initiatives to support the educational needs of young people and pregnant young women; varying levels of teenage conceptions and levels of deprivation; different geographical characteristics including rural and city based LEAs and varying levels of ethnic minority groupings.

### **Methods used**

This research used three methods of data collection. A general picture of the experience of pregnant young women and young mothers was sought through the collection of baseline data using a spreadsheet developed in a previous study for



the DfES (Selman *et al.* 2001). The direct educational experiences of a sample of pregnant young women and young mothers in the ten LEAs were sought through semi-structured interviews with 93 young women; 28 pregnant young women of statutory school age (SP); 35 young mothers of statutory school age (SM); and 30 post-statutory mothers who had been pregnant or given birth for the first time while of statutory school age (PSM).

Finally, the views of schools and key professionals in the ten LEAs were explored through the use of postal questionnaires to all schools in the area and to a wide range of "professionals" involved in the support of young mothers. Responses were received from 138 schools and 106 professionals.

The research was guided by an advisory group, which included: two young mothers; a reintegration officer; a teenage pregnancy specific midwife; a social worker; A DfES Standards Fund Grant representative; the TPU research manager and 2 further researchers who specialise in issues relating to young parenting.

### **Key Findings**

- It was clear that for many of the pregnant young women and young mothers disengagement from education occurred prior to pregnancy with less than half of the young women attending school regularly at the point of conception. Difficulty with work, bullying from pupils and staff, as well as a sense of failure often led to truancing. However a majority of these young women reported improved attendance and a greater willingness to engage with education following pregnancy, especially if offered appropriate non-judgemental support.
- The suitability and acceptability of different forms of educational provisions during and following pregnancy is influenced by a range of factors including: the young woman's health, previous educational experiences, her relationships with peers and the setting's ability and willingness to accommodate her changing needs and recognise her new status as a mother of a young child.
- Young women who had had a positive experience of schooling and had been regular attendees with good academic achievements pre-pregnancy were more likely to be met by a supportive attitude by their schools when disclosing their pregnancy and most continued to have a good record of attendance and achievement, whether in mainstream schooling or alternative provision.
- According to the young women the most valuable ways in which a school could encourage a pregnant young woman to remain were by: openly discussing her fears and needs; being generally supportive and encouraging, rather than judgemental; and allowing her choice in how her education is handled.
- Schools themselves had had varied experience of school age mothers, with two thirds reporting no more than one young mother in years 7-11 in the previous year and 30 per cent with none. At the other extreme twelve schools (9 per cent) reported three or more school age mothers in the previous year and five schools had had five or more. Most schools said that they saw the continuing presence of young mothers in classes in

positive terms as indicative of the caring nature of the school. However, this was not found to be the case for many young women, half of whom reported negative attitudes from their school.

- There was clear evidence that those young women who had been poor attendees or excluded prior to pregnancy benefited hugely from attending specialist units and education other than school provisions (education other). Specialist provision for pregnant young women and young mothers was most likely to lead such young women to continue with her education post 16, as well as leading to much improved attendance during and after pregnancy.
- The features of specialist units which were cited as of particular importance include: the onsite childcare facilities; work, practical and emotional support; and the locations are often set up to deal with post-birth issues (such as ill-health of mother/ or baby). Other features identified as important by those attending such units were that they were respected and treated like adults; allowed to be educated at the same time as enjoying being mothers and in many cases be educated alongside their babies; able to undertake more flexible timetables; that there was more one-on-one level teaching and that they had the ability to play an active role in decisions about their education.
- Whether in mainstream school or alternative provision, those young women living in areas where there was a re-integration officer or an equivalent felt better supported and had been enabled to make appropriate decisions about how best to continue education after their pregnancy. The role of re-integration officers was, therefore, crucial and was particularly effective where they spent a significant amount of time working with mainstream schools. This was important if schools were to develop their role alongside specialist units rather than assuming that all young mothers were best served by such alternative provision.
- A lack of affordable and accessible childcare was seen by both schools and professionals as a major barrier to continuing education for young mothers and this was reflected in the views of the young women interviewed, who saw the availability of acceptable childcare as crucial. A majority of the young mothers interviewed used either on-site crèche facilities or their family as their main childcare resource and reported satisfaction with these, but over half said that if they had not been able to have their preferred choice they would either not be able to attend or not want to. A key factor in their preferences was the feeling that they wanted their babies to be near at hand, especially if they were breast-feeding.

### **Recommendations**

- Although the main recommendations of this report focus on the support needed for young women who become pregnant whilst of compulsory school age, the findings show clearly that for many of the young mothers disengagement from education began much earlier and was often a key factor in their pregnancy. Policies to encourage the re-engagement of young mothers must, therefore, address the problems experienced prior to their pregnancy.

- Early and consistent intervention in poor attendance is required to prevent this becoming habitual. Although many schools expressed a positive attitude towards the retention of young mothers in mainstream schooling, there is still more to be done in improving the attitudes of some and this may need to be addressed at teacher training level if the future generation of teachers in England are to be more supportive of pregnant young women and young parents in school.
- The role of the re-integration officer was crucial in those areas in receipt of the DfES *Standards Fund Grant: Teenage Pregnancy*, especially if they made a significant input into mainstream schools. As of April 2003, the grant ceased to be ring-fenced and has been contained within the Vulnerable Children's Grant. It is vital that this funding should not only continue to fund the work of established Reintegration Officers but also that funds are made available in areas previously not in receipt of the grant to enable the development of this role in all/more LEAs.
- The suitability of different forms of provision for different young women is influenced by a range of factors including the young woman's health, previous educational experiences, her relationship with teachers. For this reason young women should be offered a choice between a return to mainstream schooling and alternative forms of education outside school.
- Specialist units or other non-mainstream flexible provision should be available in all LEAs especially for those with poor attendance. They should be seen as a method of inclusion, rather than exclusion. For areas where specialist units are not practical it is essential to incorporate the positive features of these units into other alternative forms of provision but there are also many lessons for mainstream schools. This means listening to the views of the young women in terms of their need for a supportive non-judgmental ethos in whatever setting, ideally combined with a flexible approach to timetabling and the availability of acceptable childcare.
- Consideration should also be given to the possibility of young mothers continuing in these units after the age of 16, where there is a lack of alternative supportive provision, and to ensuring that adequate free transport is provided to and from the units for young women above compulsory school age.
- If the Government wishes to encourage more young mothers to continue in education and training it must build on the Care to Learn Initiative to ensure the all young mothers have access to affordable and appropriate childcare and access to both this and educational provision through effective transport. It is also important to acknowledge their preferences for type of childcare, noting the doubts of many about childminders, the positive attitudes towards on-site childcare in specialist units and FE colleges and the preference of many for provision by their family.
- If young mothers are to return to education they must be happy with the placement of their child. If childminders are to be a major resource for these young women, there is a need for more specialised training in working with and supporting young mothers as well as looking after their

child and clearer opportunities for the mother to choose who will care for their child and build a relationship with them, ideally during pregnancy. This has been achieved in some areas, notably Fife in Scotland, where childminders have become the most commonly used form of childcare for young mothers.

### **Conclusion**

This study has explored the educational experiences of pregnant young women and young mothers of statutory school age from their own viewpoint and that of teachers and other professionals. Those young women who were well engaged, enjoying education and succeeding prior to conception are likely to remain so with some small amount of support and some practical adjustments for their safety and comfort. However, for the majority, who were not well engaged and had not enjoyed or succeeded in education prior to conception, there is need for considerable support in a range of settings, offering them choice in the form of provision and in the childcare needed to ensure they can benefit. School age pregnancy in those coping well with mainstream schooling should not lead to disengagement from the school system, while for those who were disengaged before pregnancy, there is an opportunity to re-motivate and re-engage if suitable support is provided.

## **Introduction**

This report presents the findings of a 22-month study into the education of pregnant young women and young mothers in ten LEAs in England. In 1999 the Social Exclusion Unit set new targets for a national campaign: “reducing the rate of teenage conceptions, with the specific aim of halving the rate of conceptions among under 18s by 2010” and “getting more teenage parents into education, training or employment to reduce their risk of long term social exclusion” (Social Exclusion Unit 1999 p.8). This report is concerned primarily with the second goal.

The aim of the study was to explore the educational experience of pregnant young women and young mothers of school age in England and to identify what factors, and forms of provision, determine both academic and broader success in returning to or continuing with education. At the outset, the research had six key objectives, however, for reasons highlighted in the Chapter 2, this report focuses on five of the original key objectives, namely:

**Objective 1:** To understand the previous educational experience of young mothers

**Objective 2:** To highlight how education might be improved to prevent disengagement either prior to pregnancy or because of it

**Objective 3:** To identify and compare the experience of remaining in, or returning to, mainstream education, against the experience of specialist and non-specialist PRUs, further education colleges or accessing home tuition

**Objective 4:** To identify how childcare considerations impact upon continuation or re-engagement in education

**Objective 5:** To highlight how education can best encourage young mothers to continue into post-16 education and training

This report begins in Chapter 1 with a broad review of the general antecedents and characteristics of young mothers in England, and current approaches about their education. A general overview of government initiatives to support pregnant young women and young parents is then provided.

The empirical studies reported next were carried out between November 2002 and September 2003 in 10 LEAs, and were chosen to represent a range of educational, institutional and geographical contexts. The LEAs are not identified in this report. The study involved detailed face-to-face interviews with 93 young women who were currently, or had been, pregnant (and possibly mothers) before they reached statutory school leaving age. Their data was supplemented with baseline data producing a comparable data set of a total of 456 young pregnant women or young mothers. The experiences of these young women was set against the perceptions of teachers and other professionals, which were collected through questionnaires to all mainstream and special schools<sup>1</sup> in the ten LEAs and a range of other professionals with practical and/or strategic responsibility for the education of pregnant young women and young mothers within the LEAs. Chapter 2 outlines the methods used in this study in further detail.

The findings from the interviews (Chapter 3) and the survey of schools (Chapter 4) and professionals (Chapter 5) are presented as independent chapters prior to the concluding discussion presented in Chapter 6 which draws on the themes emerging from these results which are discussed in the light of current policy. The structure of the discussion in this final Chapter is based on the Key Objectives outlined above.

The report concludes with a discussion of policy points and recommendations made in light of the findings of this study.

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<sup>1</sup> Due to the rare event of pregnancy in Special schools and their low response rate, the data provided from special schools has not been included within the main report. A brief summary of this data is provided in appendix 5.

# **Chapter 1: A review of selected literature and policy initiatives relating to the education of pregnant young women and young mothers in England**

Dawson N. & Selman P.

## **1. Introduction**

This review considers some of the more recent literature primarily from the UK and relevant to the education of pregnant young women and young mothers. It notes the background and characteristics of young mothers in England and the context of neighbourhood deprivation and educational disadvantage.

### **1.1 The Background Characteristics of Young Mothers in England**

Several research studies in the UK show that young women who become pregnant and proceed to motherhood have a higher rate of disadvantage and poor educational achievement, both before and after teenage pregnancy and motherhood, than women who defer parenthood until their twenties or later. Such young women are more likely to have a history of educational failure, to have parents whose own educational achievement was at a low level, and to have suffered a wide range of socio-economic and psychosocial difficulties in childhood: they and their children are at increased risk of similar difficulties later in their lives (Bynner et al. 1997; Kiernan 1995; Maughan & Lindelow 1997; Meadows & Dawson 1998; Meadows, Heron & the ALSPAC Study Team, paper submitted; Moffitt & the E-Risk Study Team 2002; Russell 2002; SEU 1999; Wellings et al. 1999).

Pre-existing differences between teenage mothers and other adolescents account for a large part of the observed adverse consequences of teenage motherhood (Chevalier & Viitanen 2000; Hobcraft & Kiernan 2001; Meadows, Heron & the ALSPAC Study Team paper submitted; Swann et al. 2003; Turley 2003). However, teenage motherhood may disrupt education, and low educational attainment and lower levels of attendance in post-compulsory education are associated with worse employment prospects and lower incomes (Power et al. 2002; Whitty 2001).

*"The low educational attainment among women who become mothers at such an early age is an important factor determining life chances, since*

*lack of qualifications will compound the barriers to employment resulting from difficulties with childcare and of balancing responsibilities of early motherhood and work...Those for whom educational prospects are poor are more likely to become sexually active, more likely to conceive if they are sexually active and, if they conceive, are more likely to take the pregnancy to term than to terminate it" (Wellings et al. 1999 p.187).*

Many people in disadvantaged circumstances find that their opportunities to benefit from education and from the role it may have in countering other forms of social exclusion are severely limited (Lall 2004). Bynner *et al.* (2004) in their study of the impact of government policy on young people highlight the association between longer-term poverty and social exclusion and having a child at a young age. They note that this relationship is seen to have arisen from the fact that a young woman's education is likely to have been disrupted due to her pregnancy and later her access to employment is likely to be hampered due to her lack of education and to factors such as access to childcare (Bynner *et al.* 2004).

Wellings (2001) further suggests that for many young mothers, suffering early family disadvantage, disaffection from school, and lack of career plans other than for early motherhood, issues which are further compounded by the difficulties consequent on becoming a parent when very young, the risk of long-term deprivation and social exclusion of young mother is high.

It has long been accepted that the rates of teenage pregnancy (births and abortion) vary throughout England and associations exist between areas with higher rates of teenage pregnancy and high deprivation (McLeod 2001; Wellings *et al.* 2002) and high unemployment (Botting *et al.* 1998). As such many sources of funding to tackle teenage pregnancy have been area-based to target specific geographical areas.

However, these young women are also likely to be affected by gender issues, which have often been ignored in studies of disengagement from education, and school exclusions, which have traditionally been associated with young men (Osler *et al.* 2002; Lall 2004).

In Osler *et al.*'s (2002) in-depth qualitative study of girls and school exclusion in England the researchers found that girls are generally not a priority in schools'



thinking about behaviour management and school exclusion. The 'invisibility' of girls often has serious consequences for their ability to get help, although it is assumed that provision is equally available for both boys and girls. Self-exclusion and internal exclusion (e.g. truancy or being removed from class) appeared to be widespread. Bullying was a serious problem and appeared to be a significant factor in girls' decisions to self-exclude. There was often an institutional failure to recognise or tackle bullying among girls effectively. Identification of girls' needs and the subsequent provision of services are compartmentalised. This applies particularly to girls who are pregnant or have other health needs. Many girls felt that schools used exclusion inconsistently. Professionals also reported differences in the way boys and girls are disciplined.

From NCDS data, teenage childbearing in Britain decreases the probability of post-16 schooling by 12 to 24 per cent. Employment experience is reduced by up to 3 years, and the adult pay differentials range from 5 to 22 per cent (Bynner; et al. 1997; Chevalier & Viitanen 2000):

*"Teenage motherhood appears to have long-term consequences on the career development of women and hence is likely to lead to the transmission of poverty from one generation to the next. It would thus appear that policies preventing the long-term consequences of teenage motherhood should focus first on helping teenage mothers to achieve their potential schooling. The effect of teenage motherhood may be substantial even after accounting for educational differential, which suggests that teenage mothers have difficulties combining labour market participation and child rearing" (Chevalier & Viitanen 2000 p. 20).*

*"As a group, lone mothers have low levels of qualifications and work experience. This means that they stand little chance of getting anything other than a low-paid job. If they get a job, the cost of childcare is substantial, which in many cases forces them to stay on benefit. Over half of all lone mothers have no educational qualifications at all" (The Prince's Trust 2000: p.3).*

Young women's attitudes to motherhood are linked to their experience of school to work transition and post-school education and training. Researchers describe a polarisation of work and parenting experiences along class and educational-attainment lines (Kenway 2000; Wellings et al. 1999) with an increase in deferred

motherhood amongst highly educated young women in professional occupations, and longer-term economic and educational disadvantage amongst younger mothers. This would compound the disadvantage of low SES young women. Young women have to perform better in school and stay longer than young men in order to access a roughly equal place in the labour market (Kenway 2000; Hayes 1998; Biggart 2000).

Thus, given the confounding of teenage motherhood with prior educational difficulties and neighbourhood disadvantage, the role of education in young mothers' socio-economic careers is complex. Young women with little expectation of acquiring educational qualifications and without expectations of benefiting from them in employment may perceive little value in delaying motherhood and fewer opportunity costs associated with teenage motherhood. They may already have experienced exclusion from school, probably through their own self-exclusion associated with bullying and/or low achievement. Some young women who become teenage mothers have difficulty in engaging with schooling and so lose opportunities to gain qualifications and acquire skills recognised by the labour market:

*"Many start with a background of poor experience and attainment at school, and exclusion during pregnancy. On top of this, the interruption of the birth, the stress of coping with a young child or children and the cost and availability of childcare are often the final straw (Social Exclusion Unit 1999 p 63).*

*"For the teenage mother, the arrival of a baby can instigate a further spiral into social exclusion where educational underachievement, dependency on benefits and narrower life chances become the norm" (The Prince's Trust 2000 p.1).*

Since the SEU report in 1999 the government has expressed its intention to support the inclusion of young parents in education, training and employment as a means of increasing the life opportunities and reducing the social exclusion of young parents (Blunkett 1999; SEU 1999). The recommendation of educational inclusion for young women who are of compulsory school age is not, however, straightforward. There are several major issues, the first of which is what form this education should take, which is one focus of this present study.

One solution, advocated by Miles *et al.* (1979), is that the pregnant schoolgirl should remain in mainstream education, with special provision to consist of home tuition towards the latter end of pregnancy and in the first few weeks of motherhood, and a return to school as soon as possible to benefit from the broader curriculum a school provides. However, it is clear from previous research that for many young women school education has not been fulfilling and many did not attend school regularly prior to pregnancy (Dawson 1997; Hosie & Selman 2006 forthcoming; Selman *et al.* 2001; Wellings *et al.* 2002). The reality was often that disengagement with school occurred prior to pregnancy and reintegration into mainstream education would not necessarily be appropriate and may actually place them at an educational disadvantage in relation to their peers (Selman *et al.* 2001).

A linked difficulty is that some schools have been reluctant to have young women remain with them during their pregnancy and motherhood (Dawson 1997; Baragnawath 1999; Lall 2004; Hosie & Selman 2006 *forthcoming*). However, research has shown that when pregnant young women and young mothers attend specialist units, alongside a peer group of young mothers, attendance often increases dramatically (Selman *et al.* 2001; Hosie & Selman 2006 forthcoming). Such units have recently been praised by OFSTED (2002. p 28).

Another major issue is a tension between the dual role a mother has of looking after her child, and of being in education or employment. As Levitas (1998) highlighted mothers who are married and who chose to stay at home are seen as 'good' mothers, whereas lone parents (although not all young mothers are single) who chose this path are often condemned as irresponsible. It is also sometimes assumed that young mothers of school age should continue in education and not be full-time mothers even for a short period in order that they can gain the required schooling to go on and provide financially for their child in the future (Dawson 1997).

Concerns are also often raised about the ability of young parents to be good parents (Dawson 1997). The evidence on how far those parenting difficulties, that are more common in very young mothers, are caused by their age, rather than by their increased risk of disadvantage in their own childhoods, is still under debate (Meadows and Dawson 1998; Meadows, Heron and the ALSPAC Study Team submitted). This has important implications for how young mothers are

supported to be good enough parents, and what type of quality of care their child will receive.

There is a two-part concern that those mothers who opt to continue to care for their small child rather than to enter employment will be disadvantaged (Levitas 1998) and that the children of working mothers may also be disadvantaged if the childcare is not good (Gregg et al. 2004). In the Employment Service review on lone parents and the labour market a need to construct a coherent policy framework and discourse which considers mothers as both carers and workers is identified (Holterman *et al.* 1999).

## **1.2 Government initiatives to support young mothers in England**

Since 1997 the Government has introduced a number of new policy initiatives, many of which as noted already are area-based, such as *Health Action Zones*, *Education Action Zones* and *New Deal for Communities* (Selman 2003c). Several of these have relevance to the needs of young pregnant women and mothers and some have been targeted specifically at this group. In this final section of this chapter we review briefly some of the initiatives, some of which form an integral part of the Teenage Pregnancy Strategy.

### **1.21 Care to Learn**

The Government's National Childcare Strategy plans to have created places for 1.6 million children by the year 2004, in fulfilment of the Government's pledge to provide universal nursery provision for 3 year olds by September 2004. It is intended that a large part of the new childcare funding will help low-income families and lone parents: this includes many teenage parents and their children.

*Care to Learn*, introduced in August 2003, was a further development aimed at giving financial support to teenage parents (including young fathers) who want to continue their education or training, or are returning to education or training and need help with the cost of their childcare and/or transport. The *Care to Learn* website states that "being a good parent does not mean you cannot continue to learn".

*Care to Learn* provided funding up to £5,000 per child per year in 2003-2004 (rising to £5125 in 2004-2005) to cover childcare costs and any additional travel costs needed to enable a parent to get to and from their childcare. In order to qualify, the parent had to be 16 or over but under 19 or have started a course

before they were 19. Parents had to have started learning after 1 August 2003 or be continuing a course in a school, a school sixth form or a sixth form college in order to qualify. Initially *Care to Learn* did not extend to parents of compulsory school age unless they lived in one of four pilot areas in England, but from 1 August 2004 all young parents under 19 have been able to apply.

### **1.22 Sure Start and Sure Start Plus**

*Sure Start* was the name given to a government initiative launched in 1998 which aimed to help enhance the possibility of children having a 'sure start' in life by tackling disadvantage and 'social exclusion'. It is a radical, cross-departmental strategy to improve services for young children and families. It is targeted at children under four and their families in areas of need. It is key to the Government's drive to prevent social exclusion, raise educational standards, reduce health inequalities and promote opportunity.

In the Social Exclusion Unit's report on teenage pregnancy, the *Sure Start Plus* initiative was identified as point 28 in the proposed Action Plan under the heading of "supporting teenage parents" (SEU, 1999 p 101). The new programme was to "give co-ordinated support for pregnant teenagers and teenage parents under 18" (ibid.) and was to be piloted in 20 areas (covering 35 LAs with high rates of teenage conceptions) also covered by *Sure Start* and *Health Action Zones*.

The two key elements were to be:

- **Pregnancy Advisers**, who would offer "comprehensive advice to enable pregnant teenagers to make a positive choice between continuing with pregnancy, adoption or abortion" (ibid.), as well as providing advice on future contraception to reduce chances of repeat unplanned conceptions.
- **New co-ordinated support packages** for young parents to help them with housing, health care, parenting skills, education and childcare. These packages were to be based on assessment of the individual needs of each family, including the mother and child and the father, if possible.

The pilot is being evaluated nationally by the Social Science Research Unit of the Institute of Education in London and a summary of interim findings was published in January 2004 (Rosato et al 2004). A final national evaluation report of *Sure Start Plus* was being published in May 2005.

### **1.23 The Standards Fund Teenage Pregnancy Grant**

The Standards Fund was the Government's main channel for targeting funds towards national priorities to be delivered by LEAs and schools. It has provided funding for the "Excellence in Cities" (EiC) programme and other major initiatives such as the *Literacy and Numeracy Strategies*, but has also funded a series of more narrowly focused initiatives. The latter includes the *Teenage Pregnancy Grant*, which was announced on 29 December 1999 by the then Education Minister Estelle Morris as part of the Department of Education and Employment (DfEE) response to the Social Exclusion Unit's report on Teenage Pregnancy.

The initial objectives of the *Standards Fund: Teenage Pregnancy Grant* were:

- To reintegrate school age mothers back into the education system and provide support to pregnant teenagers and school age parents in education.
- To support age appropriate educational projects in schools aimed at reducing the rate of teenage conceptions by raising pupils' self-esteem, exploring issues of choice, responsibility and peer pressure.

For 2000-2001 allocations were made to 48 authorities (the 24 LEAs involved in phase 1 of the EiC initiative and 24 other areas with high incidence of teenage pregnancy). The size of allocation was based on the number of conceptions to women aged 15-17 and secondary school pupil numbers. For 2002-2003 a further 41 areas were added and authorities were required to focus spending on the first objective of reintegration. From April 2003 the Standards Fund Grant: Teenage Pregnancy became un-ring fenced funding contained within the new *Vulnerable Children Grant*.

An evaluation of the first year of the *Standards Fund Grant: Teenage Pregnancy* (Selman et al 2001) found many positive points and noted that:

*...despite a relatively short time in post, all Reintegration Officers have made significant achievements in their LEAs (Hosie 2003 p.4).*

The report recommended a continuation of the grant and was used by the TPU as the basis for a briefing paper (Hosie 2003) which recommended that the

*Vulnerable Children Grant* should be used to continue funding of established reintegration officers and used to develop this role within LEAs which had not been in receipt of the Standard Fund Grant, a recommendation endorsed by Bynner *et al.* (2004), Kendall *et al.* (2004) and the YWCA (2004).

### **1.24 Connexions**

*Connexions* is another new service set up in England with the broad aim of tackling disadvantage and social exclusion by helping young people during the transition to adult life. It offers a range of guidance and support for young people who are up to 19 years old. It has taken over the role of careers guidance and aspects of personal guidance. The service is provided through local Partnerships who employ 'Personal Advisors'. The scheme also involves help-line and internet advice services (Connexions Direct).

The role of Connexions in relation to the education of young mothers has been examined in a report entitled *Working together; Connexions and Teenage Pregnancy* (Connexions, Sure Start Plus and Teenage Pregnancy Unit 2001), which looks at the respective roles of the Sure Start and Connexions Personal Advisers and Reintegration Officers in respect of school-age mothers; and in the later publication *Making a Difference – Emerging Practice – Connexions and Teenage Pregnancy* (Connexions 2003), which builds on the earlier report and includes feedback from the Sure Start Plus pilots. Further funding has been provided by the TPU to regional Teenage Pregnancy Co-ordinators to work with Connexions Partnerships to strengthen local networks of all those involved in supporting teenage parents.

### **1.25 DfES Guidance on the education of school age parents**

In 2001 the Department for Education and Skills issued their *Guidance on the education of school age mothers* (DfES 2001), which aimed to provide information for schools and LEAS on supporting pregnant young women and young mothers and young fathers and fathers-to-be of compulsory school age. It stresses that pregnancy is not a reason for school exclusion, that LEAs have a duty to provide "suitable education" for all pupils, including those of compulsory school age who become parents and that this means education suitable for the individual.

The guidance looks at the role of local teenage pregnancy co-ordinators and reintegration officers alongside the Connexions Service and Sure Start Plus. LEAs are required to nominate an officer to be responsible, normally a member of the

Education Welfare Service or the specialist reintegration officer in areas which have them. The importance of childcare is stressed and LEAs are advised to work with their local EYDCPs (Early Years Development and Childcare Partnerships) who are charged with improving childcare provision.

The Guidance also acknowledges the importance of home-school transport and reminds LEAs that free transport must be provided for pupils of compulsory school age if the nearest suitable school is beyond walking distance.

### **1.26 Education Maintenance Allowances**

In 1999 the Government presented a White Paper proposing a new framework for post-16 learning which would allow lone parents to upgrade their skills through access to further education without having to pay fees. Subsequently the Secretary of State for Education and Employment announced new proposals to help young people to stay in learning including extending the *Education Maintenance Allowance* pilots to include transport and single parents.

The EMA scheme was introduced nationally from September 2004 following the success of pilot schemes. Eight different models of the EMA have been piloted across 56 local education authorities (LEAs) in England. The pilots mainly took place in areas with high levels of economic deprivation, low participation in post-16 education and low attainment at 16. Over 120,000 young people participated.

An evaluation by Loughborough University and the Institute for Fiscal Studies (Middleton et al 2003) reported that:

- The EMA has had a positive impact on participation in post-16 education, in pilot areas in Years 12, 13 and 14, particularly among young men in urban areas.
- The main mechanism for encouraging participation and retention in education is the EMA weekly payment and termly bonuses, both of which can be withheld if the young person does not meet EMA requirements.

Many of the projects described above have been or are in the process of being evaluated and it is to be hoped that the subsequent reports<sup>2</sup> will feed into

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<sup>2</sup> DfES published in March 2005 further research by Loughborough University using the EMA pilot data looking at teenage mothers and SEN: Perren & Middleton (2005).



constructive revisions to the emerging strategy to support young mothers to continue in education. In Chapter 6 when we explore the policy implications of this piece of research, further comment is made on how pregnant young women and young mothers of school age have engaged with some of these initiatives.

## **Chapter 2: Methodology, Methods & Research Design**

Hosie A. Speak S. Dawson N. & Selman P.

### **2. Overall Research Design**

This research used three methods of data collection to provide an overall picture of provision and support for the education of pregnant young women and young mothers in ten LEAs in England. Firstly, a general picture of the experience of pregnant young women and young mothers was sought through the collection of baseline data using a spreadsheet developed in a previous study for the DfES (Selman et al. 2001). Secondly, the direct educational experiences of a sample of pregnant young women and young mothers in ten LEAs were sought through semi-structured interviews. Thirdly, the views of schools and key professionals in the ten LEAs were explored through the use of postal questionnaires.

A scientific realist framework was employed, which is widely recognised as the most efficient and robust model of evaluation research design (Tilley & Pawson 1994). This means that close attention has been paid to the way in which different types of educational support are delivered, the experiences of both providers and participants, the circumstances of their involvement, and the means and methods of service delivery and participation. This has enabled us to respond not only to the question of the impact of different structures of support ('what works'), but also to ask which processes and mechanisms succeed (or fail), under what conditions, in what setting, and for which participants.

A more detailed account of the methodology involved in the research of the pregnant young women and young mothers through the interviews and baseline data is given below in section 2.2; the methodology for the postal survey of schools and professionals is found in section 2.3. Section 2.1 below, briefly examines the choice of LEAs under study and some of their key social and demographic characteristics. More detailed data on the ten research LEAs is found in Appendix 1.

#### **2.1 Sampling of Local Education Authorities**

The primary aim of this research was to identify what factors determined both academic and broader success for pregnant young women and young mothers, remaining in, or returning to, education. It was felt that a number of key factors

would influence this “success” and that these should be taken into account when selecting LEAs for study. These are discussed below.

### **2.11 The forms of provision available**

Previous research on the Teenage Pregnancy Standards Fund Grant (Selman et al. 2001) showed that the main types of educational provision for young pregnant women and young mothers varied across different LEAs. The most common forms of provision were: mainstream school; specialist ‘full time’ mother and baby units (SPUs); ‘part time’ maternity-leave only units; mixed general PRUs; home tuition; and FE college-based provision. Therefore, the ten LEAs chosen for this study provided examples of these (see Table 2.1 below).

### **2.12 LEA-based initiatives to support educational needs**

A number of new initiatives have been introduced by the government to support the educational needs of young people. The range was represented in the LEA sample (see Table 2.1 below).

### **2.13 Level of teenage conceptions in each LEA**

The research focused largely on LEAs with high teenage pregnancy rates. However, some LEAs where numbers were lower or concentrated in sub-areas of a larger rural LEA were also included. Three of the urban LEAs had an under 18 conception rate in 2001 which was more than a third higher than the English average, and three of the rural LEAs had one district with similar levels. Four of the ten LEAs had under 16 conception rates 40% higher than England as a whole and had experienced a rising rate of under 16 conceptions over the previous four years. The number of under 16 conceptions in 2001 ranged from 32 to over 120. Under 18 conception rates were used in formulae allocating funding under the Teenage Pregnancy Local Implementation Grant and the DfES Standards Fund allocation.

**Table 2.1 Key Characteristics of the 10 areas studied**

| LEA    | Under 16 conception rate* (per 1,000 women aged 13-15) 2001 | Under 18 Rate* (per 1,000 aged under 18) 2001 | STANDARDS FUND GRANT**<br>Teenage Pregnancy 2002-2003 | Sure Start Plus | Connexions  | Excellence In Cities | EMA pilot | Rural/ Urban context) *** | Ethnicity (% non-white)        | Educational provisions available other than mainstream   |
|--------|---|---|---|-----------------|-------------|----------------------|-----------|---------------------------|--------------------------------|--|
| Area A | 11.1  | 59.3  | A (£40-79,000)  | Yes             | Yes         | Yes (2000)           | No        | Urban                     | 4.8%                           | SPU full time  |
| Area B | 12.7  | 57.2  | A (£40-79,000)  | Yes             | Yes         | Yes (1999)           | Yes       | Inner City urban          | 42.3%                          | Tuition with reintegration officer in general PRU/ home tuition  |
| Area C | 7.5   | 36.9  | N/A   | No              | Yes (2003)  | No                   | No        | Rural (29.7%)             | 0.88%                          | Grouped tuition (generic)/ home tuition  |
| Area D | 5.5   | 36.3  | A (£40-79,000)  | No              | Yes (2003)  | No                   | Yes       | Rural (20.8%)             | <b>0.51%</b>                   | Grouped tuition (pregnant young women)/ home tuition   |
| Area E | 13.5  | 63.8  | A (£40-79,000)  | Yes             | Yes         | No                   | Yes       | Urban                     | 17% (- area1)<br>12% (- area2) | SPU full time  |
| Area F | 11.4  | 52.3  | A (£40-79,000)  | No              | Yes         | Yes (2000)           | No        | Urban                     | 4.86%                          | SPU full time  |
| Area G | 6.9   | 34.1  | N/A   | No              | Yes (Pilot) | No                   | Yes       | Rural (36.1%)             | 0.54%                          | Grouped tuition (generic)/ home tuition  |
| Area H | 8.3   | 44.5  | B (£80-119,000)                                       | No              | Yes         | No                   | No        | Rural (13.8%)             | 0.74%                          | SPU part time  |
| Area I | 8.8   | 46.7  | B (£80-119,000)                                       | Yes             | Yes         | Yes (1999)           | Yes       | Urban                     | 8.58%                          | Specialist programme for pregnant young women and young mothers (combining FE, school & City learning centres) |
| Area J | 6.4   | 44.8  | B (£80-119,000)                                       | Yes             | Yes         | Yes (2000)           | Yes       | Urban                     | 3.64%                          | Home tuition with reintegration officer  |

\* Provisional Conception Rates for 2001 (TPU March 2004)

\*\* Allocations have been grouped as A (£40-79,000) and B (£80-119,000) to preserve anonymity.

\*\*\* In county LEAs bracketed figures show range for districts.

## **2.14 Deprivation Levels**

High levels of deprivation have been associated with high teenage conception rates and poor school attendance. The DETR *Indices of Deprivation 2000* provided a detailed ranking of both districts and wards and the district rankings were used to ensure a good sample of high deprivation areas where the problem of disengagement from school was likely to be acute. Four of the LEAs fell into the 10% (34) most deprived<sup>3</sup> districts in England and three of the county LEAs had at least one district in the worst 10%.

## **2.15 Ethnicity**

A young mother's ethnicity could have profound implications for her perceptions of, and ability to continue in education during pregnancy and after the birth. Therefore, the research included three LEAs with ethnic minority populations above the national average; three with proportions near or slightly below the average; and four with less than one per cent from ethnic minorities.

## **2.16 Maximising existing data and contacts**

Finally, in order to build on previous research and maximise existing data and contacts, five of the LEAs studied in our previous research for the DfES (Selman et al. 2001) were included. A profile of the ten research LEAs can be found in tables in Appendix 1. Table 2.1 below summarises some of the key factors.

## **2.2 The Study of Young Mothers**

### **2.21 Research Design & Methods**

The primary aim of this element of the study was to give young mothers a voice and to corroborate their comments, as far as possible, with data from other sources. The main method used for this was in-depth, semi-structured interviews with 93 young women (plus five pilot interviews) from 10 LEAs. To substantiate the mothers' arguments and perceptions, additional baseline data was collected in all ten of the LEAs<sup>4</sup>.

### **2.22 Confidentiality and ethics**

Any work with minors or other vulnerable people raises ethical issues. In this study the researchers faced the possibility that young women might disclose child protection issues. To address this all interviews began by the researcher informing the young woman that anything she said would be treated in

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<sup>3</sup> As measured by their ranking by average ward rank within 345 LA districts in England

<sup>4</sup> See pg. 17 for details of baseline collection problems.

confidence (for exact wording see Appendix 2). However, in order to support any young women who might have issues they wished to discuss, a list of local agencies and their contact numbers was prepared for each LEA and given to the mothers at the start of the interview.

All mothers were invited to 'opt into' the study and were put in touch with researchers only with their agreement and, if they were of statutory school age, the agreement of their parents or guardians. Throughout this report each quote is followed by the pseudonym (that the young women were asked to pick at the start of each interview), with the age and area of residence of the young woman – e.g **Laura, 19, Area F**. The young women preferred this to being identified by numbers as it allows them to see how their words were used. The baseline data, collected by LEAs was also anonymised by the person collecting it before it was sent to the research team.

All transport and childcare costs for interviews were covered by the research and, where it was considered appropriate by the introducing agency, a gratuity, in the form of a retail voucher was offered. However, in some areas professionals preferred that no gratuity was offered, so as to avoid jealousy or disappointment by those young women not involved.

### **2.23 The Interview Pilot Study**

In order to inform the data collection methods, and to test the interview schedules for the qualitative research, a pilot study involving interviews with four young mothers and one pregnant young woman in one LEA in the North-East of England<sup>5</sup> were conducted in late November 2002. All interviewees had, at some point during their pregnancy, moved to a specialist unit in their LEA. The four mothers in this sample had also remained within the specialist unit post birth, rather than reintegrating into mainstream school. Table 2.2 presents a profile of the young women involved in the pilot.

The young women were asked to express their experiences of education and to give their personal stories, but also to comment on questions that didn't make sense or seemed inappropriate, and to highlight important missing questions. The young women were also asked about the format of the interview, its length and ways in which it could be improved.

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<sup>5</sup> This LEA later became one of the main study areas with an additional ten interviewees.

**Table 2.2: Profile of pilot interview mothers**

| Status <sup>6</sup> | Age at conception | School yr at conception | Relationship with father of child | Age of father at conception | Attendance prior to pregnancy | Attendance during pregnancy | Attendance Post-birth |
|---------------------|-------------------|-------------------------|-----------------------------------|-----------------------------|-------------------------------|-----------------------------|-----------------------|
| PSM                 | 13                | 9                       | Over but good contact with child  | 14                          | Poor                          | Excellent                   | Excellent             |
| PSM                 | 16                | 11                      | Still in relationship             | 19                          | Poor                          | Excellent                   | Excellent             |
| SM                  | 14                | 9                       | Still in relationship             | 18                          | Poor                          | Good                        | Good                  |
| SM                  | 15                | 11                      | Still in relationship             | 16                          | Good                          | Good                        | Good                  |
| SP                  | 15                | 10                      | Still in relationship             | 15                          | Poor                          | Good                        | N/a                   |

Prior to the main study the schedule was reviewed and reproduced in line with the comments made in the pilot. In particular the young women highlighted potential barriers to education, which had not been included within the original schedule. This omission was corrected for the main study. This process was also aided by two young mothers joining the advisory group<sup>7</sup> for the project who provided further comment about the pilot schedule.

Those involved in the pilot interviews also expressed great interest in the purpose of the research and how their stories would be used. Therefore, in the main study interviewees were provided with more information on the purpose of the work and how they might access the findings once it was published.

The main limitation of the pilot study was the fact that it was only conducted in one LEA due to time constraints. This LEA provided specialist education for pregnant young women and young mothers, which all pilot interviewees attended. Thus, no pilot data was collected from young women in mainstream schools or other forms of education.

### 2.24 Sampling of mothers for interview

The main interviews were conducted between December 2002 and September 2003 with three groups of young women: the first two groups included those who

<sup>6</sup> PSM = post-statutory mother, SM = statutory aged mother, SP = pregnant young woman of statutory school age.

<sup>7</sup> The advisory group consisted of a range of individuals in addition to the two young mothers, including: a reintegration officer; a teenage pregnancy specific midwife; a social worker; A DfES Standards Fund Grant representative; the TPU research manager and 2 further researchers who specialise in issues relating to young parenting.

conceived whilst they were of compulsory school age, and in the academic year 2002-3 were either pregnant or mothers. This allowed the research to explore these young women's current experiences of being "school-age" pregnant young women or mothers. The third group included those who conceived whilst of compulsory school age but who were now currently aged 16-19 and past statutory school leaving age. This was in order to explore their experiences of being pregnant or mothers whilst of school age retrospectively, and to explore any later involvement in education, training or employment.

The young women were selected to provide:

- a range of experience of different educational provisions in each LEA e.g. mainstream school, home tuition and other specialist/ alternative forms of provision,
- a range of educational experiences prior to pregnancy (based on attendance) and other factors highlighted for LEA selection, as discussed in Section 2.1.

They were also, where appropriate, selected to represent the ethnic mix of the LEA.

The original aim had been to interview 100 young women, 30 school-aged pregnant young women, 30 school-aged mothers and 40 young women who were no longer school aged but had conceived whilst of school age. Ultimately ninety-eight young women were interviewed. As presented above, five of the 98 were interviewed for the purposes of a pilot study (and therefore not included within the main analysis).

Sampling of the first two groups was purposive. In the eight LEAs in receipt of the Standards Fund Grant, samples of the statutory school-age young women were identified through the reintegration officer (or equivalent<sup>8</sup>) and/or teachers working within specialist units. In the remaining two LEAs a variety of individuals were approached to help provide a sample, those who were most helpful included the local teenage pregnancy co-ordinator and LEA officers with special

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<sup>8</sup> In this Research we refer often to the reintegration officer. In a number of LEAs the person undertaking what we would define as the reintegration officer's job description, does not always have this title. In some areas this person is a specialist-learning mentor, teenage pregnancy inclusion officer, officer with responsibility for pregnant teenagers in school and so on. Therefore when reference is made throughout to the reintegration officer, this should be taken to mean reintegration officer or equivalent.



responsibility for “education otherwise” such as the home tuition/visiting teacher services.

The post-statutory sample contained some mothers who had, and others who had not, continued with education, training or employment. This was important in order to identify what led to their post-16 choices, and what if anything would they would change about their post-16 activities given the options and support. The young mothers in this sub-sample were identified through a number of different sources including reintegration officers, who still had contact with them from previous years, Sure Start Plus workers, colleges of further education and teenage pregnancy coordinators. We acknowledge that this means that the sample is somewhat biased towards young women who maintained engagement or interest in education or training post 16. However even this group proved difficult to contact. As a result the final sub-sample for post-16 mothers was 30 rather than the proposed 40.

A total of 93 young women were successfully interviewed for the main part of the study; 28 pregnant young women of statutory school age (SP); 35 young mothers of statutory school age (SM); and 30 post-statutory mothers who had been pregnant or given birth for the first time while of statutory school age (PSM). Each group had experienced pregnancy while at school but in different school years (see Table 2.3 below), so that potentially differences in responses could be related to different time periods and potential improvements or differences over time.

**Table 2.3: Academic year of conception of the three interview samples**

| Pregnancy or motherhood status | Academic year of conception |        |           |        |        |        |       |
|--------------------------------|-----------------------------|--------|-----------|--------|--------|--------|-------|
|                                | 1997-8                      | 1998-9 | 1999-2000 | 2000-1 | 2001-2 | 2002-3 | Total |
| SP                             |                             |        |           |        | 2      | 26     | 28    |
| SM                             |                             |        |           | 2      | 33     |        | 25    |
| PSM                            | 2                           |        | 6*        | 12*    | 3      |        | 31*   |
| <b>Total</b>                   | n=2                         |        | n=6       | n=14   | n=38   | n=26   | n=94  |

\*The total number equals 94 rather than 93 because this includes one mother who conceived twice whilst of statutory school age, once in year 9 (aged 14) and once in year 11 (aged 16)

## **2.25 Collection and analysis of in-depth interviews with young mothers who conceived under the age of 16**

Semi-structured interviews were used to allow for the collection of comparable data on a range of young women's experiences. The use of semi-structured interviews also reflects the use of a grounded exploration approach, rather than a hypothesis-based approach, to the research.

Interviews were constructed around four main themes to draw out an oral history of each young woman's experiences of:

*Education* - from primary school, to secondary school and through to post statutory education (where appropriate).

*Pregnancy* - from pre-conception sexual activity to conception, disclosure and maternity absence period.

*Motherhood* - from authorised maternity absence<sup>9</sup> period to birth and through motherhood to point of interview.

*Family and relationship backgrounds* - with parents, friends, peers and partners, including the baby's father and any subsequent relationships.

Subsequently it was possible to analyse the interview data using the same themes and to draw out comparable data to build a picture of young women with similar experiences at specific points in their lives.

Three interview schedules were developed. One was designed for those who had experienced only pregnancy at school. A second went further, to explore the experiences of pregnancy and motherhood at school. The final schedule was for those post-16 mothers who had experienced pregnancy and possibly motherhood during statutory schooling and also life beyond compulsory schooling. The schedules were developed from one used in the Standards Fund Grant study (Selman et al. 2001). A copy of the subject areas covered in the three interview schedules can be found in Appendix 3 and full copies of the interview schedules can be made available on request<sup>10</sup>.

All of the young women were interviewed in a setting that they were comfortable with (often at home or in school) and each interview lasted between 30 to 80 minutes averaging at 50. All of the young women agreed to their interviews

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<sup>9</sup> The authorised maternity absence period for young women of statutory school ages is up to 18 calendar weeks from school immediately before and after the birth.

<sup>10</sup> Contact Dr. Hosie regarding interview schedules on [ali@alisonhosie.co.uk](mailto:ali@alisonhosie.co.uk)

being tape-recorded. The young women were interviewed by two researchers (Alison Hosie, covering eight LEAs and Suzanne Speak, covering two). The interviews were then fully transcribed by the research associate responsible for each interview in order to aid the preliminary analysis process and give the researchers detailed insight into each case.

A second reason for this method of transcription grew from experience of the Standards Fund Grant study (Selman et al. 2001). Although all of the young women who were interviewed allowed their interviews to be tape-recorded, and anonymised verbatim quotes to be used in the report, many expressed a desire that no-one but the researcher should actually listen to the tapes. Therefore the researchers themselves undertook the transcription of all interview data.

Following transcription the qualitative analysis package, NVivo, was used, primarily to allow for thematic coding of the interviews. NVivo allows researchers to integrate the processes of focused inquiry and data analysis. Thus, unlike some qualitative packages, which merely allow you to code and retrieve data, NVivo supports flexible and complex analysis of data combined with theory evolution and development (see [www.qsr.com.au](http://www.qsr.com.au) for further details on NVivo). Due to the semi-structured nature of the interviews, it was possible to quantify a great deal of the data collected and analyse much of that data comparatively using SPSS as well as NVivo. A further bonus of utilising NVivo is the way in which SPSS and NVivo files can be merged to allow integrated searches for qualitative questioning which, in this project, provided a much richer level of analysis than had been anticipated at the start of the research. Additionally, a range of the key questions quantified from the interview data, have been compared directly with the baseline data.

In order to insure the validity of the coding and analysis, both of the researchers who had conducted the interviews coded a random selection of interviews to ensure unanimity prior to Alison Hosie undertaking the coding (qualitative and quantitative) of all interviews (and baseline data). After this first round of coding Suzanne Speak re-checked for validity of the codes and a second round of coding was then undertaken by Alison Hosie to incorporate additional codes that had been introduced by Suzanne Speak.

## **2.26 Collection and analysis of baseline data on school-age mothers**

The baseline data collection tool used in this study was originally developed for similar data collection during the study of the Standards Fund Grant (Selman et al. 2001). The term 'baseline' was used for the data collected with this tool for this project as this was the code name used on the previous project. The tool<sup>11</sup> was essentially developed to facilitate the collection of LEA data about all young women of statutory school age who were either pregnant or mothers. At a meeting hosted by the DfES, of all new reintegration officers in early 2001, a template (developed by Selman et al 2001 and one of the LEAs involved in that study) for the collection of this baseline data was presented. In turn many LEAs at that time adopted this format for collecting their data which allowed for comparability with colleagues in other LEAs.

At the start of this study, therefore, this data collection system was already in place in seven of the LEAs (which were included in the original allocation of the Standards Fund Teenage Pregnancy Grant) and was quickly adopted by an eighth LEA (which was included in the second allocation of the Standards Fund Teenage Pregnancy Grant). The study originally aimed to use this instrument to collect data in all of the ten LEAs. However, although LEAs are required to keep records on all school-aged pregnant young women and young mothers, collection of baseline data where there was no one person with the responsibility for collecting this data, was somewhat unreliable.

For this project baseline data collection was dependent on the willingness of an individual or group of people in each LEA. In one LEA, four people had been expected to provide the baseline data for their individual sections of the LEA. However, ultimately only one did so. Therefore, the total number of young women included in the baseline for one LEA only represents approximately one third of what was expected. In another LEA, there was no one individual in the LEA who had responsibility for the collection of information about pregnant young women or young mothers. As such, despite apparent willingness from this LEA throughout the study for this information to be collected, in the end it never materialised. The Teenage Pregnancy Co-ordinator, however, managed to provide some data that enabled age of conception data to be calculated for that LEA.

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<sup>11</sup> Further details of the spread-sheet used to collect baseline data can be found in Appendix 4

This lack of co-ordination over the collection of data about young mothers and pregnant young women within LEAs remains quite common in England<sup>12</sup>. However, it is important to highlight that the data collected from the eight LEAs who utilised this tool were thorough representations of the situations in those LEAs. It is impossible to produce a direct comparison of the total number of young women in each LEA's baseline with birth statistics for all young women of statutory school age in each LEA, because a large proportion of young women who conceive whilst of statutory school age actually give birth after the end of Year 11. However, reintegration officers in each of these LEAs noted that when they compared their LEA's birth statistics for those aged 13 to 15 at the point of birth, they were indeed picking up these young women on their records.

The main concern about this tool was that it might pick up only those young women who were engaged (or re-engaged) with education. However, reintegration officers responsible for collecting data stated that they worked with a full range of young women, including many who continued to refuse to re-engage with 'mainstream' education or alternatives. Often this would mean that the reintegration officer had to visit the young woman at home, or use the telephone to keep in contact and maintain an open link with a representative of the education system, even if they were refusing to engage formally. This, coupled with the comparison with available local birth statistics has led the research team to believe that the baseline data presented in this report is a true reflection of the situation, at least in the eight LEAs which provided complete data sets.

The information collected with this instrument included a number of key baseline variables such as: age at conception, ethnicity, family situation, contact with and age (at conception) of baby's father and school attended prior to pregnancy. Additional educational variables included regularity of attendance (prior to pregnancy) and GCSE (and other) exam entrances.

Outcome variables which have been successfully recorded, include outcome of pregnancy (including adoption; miscarriage and abortion); choices on education during pregnancy and birth; childcare arrangements; school (or alternative educational location) attendance during and after pregnancy; educational

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<sup>12</sup> This lack of data collection is returned to later in section 3.12.

achievements and qualifications (GCSEs, GNVQs etc) and plans for post-16 education and training.

The availability of baseline data has enabled the research team to develop a more robust understanding of current provision for pregnant young women and young mother of school-age (beyond the interview sample). It allowed for a better understanding of links between educational provision during pregnancy, and subsequent educational performance and achievements, that emerged from the interview data, with controls on key variables such as previous school attendance, ethnicity and family situation. It further allowed for the substantiation of some of the issues arising from the interviews.

## **2.3 The survey of schools and professionals: Research Design & Methods**

### **2.31 The Survey Pilot Study**

A pilot survey of schools and professionals was conducted in 2003 in a LEA, which was not part of the main study. The research instruments were received well by the participants. Two changes were made on their recommendation: the addition of questions asking about religious organisations and about community possibly having some impact on the education of pregnant young women and young mothers.

Although none of the participants in the pilot reported any difficulty with the terminology in the questionnaires, feedback from the main survey did reveal a number of problems with the complexities about titles. In discussion of the data, we differentiate the term "specialist units for young mothers (and young pregnant women)", or "SPU", from "PRUs", the mixed units which professionals saw as usually unsuitable for young mothers. We also use "reintegration officer" to refer to those individuals who were funded initially by the Standards Fund Grant: teenage pregnancy, for work with young pregnant women and young mothers of statutory school age, including professionals who did not use this title.

Although none of the participants in the pilot reported any difficulty with the terminology in the questionnaires, this may have arisen from the fact that the pilot LEA was not in receipt of the Standards Fund Grant (and hence did not have a teenage pregnancy 'reintegration officer') and did not have a specialist unit for young mothers and the teachers and professionals responding seemed to be happy with the questions about "specialist PRUs".

### **2.32 The Main Survey- sampling**

In the main survey, three samples were surveyed: mainstream schools, special schools, and professionals who worked with and/or had strategic responsibility for, the education of pregnant young women and young mothers in the ten LEAs. Separate questionnaires were used for schools and for professionals, which had similar questions where possible, but allowed for the particular perspectives of the two groups<sup>13</sup>.

The school questionnaire was sent to head teachers in the ten LEAs and completed by the person they nominated as responsible for pregnant young women and teenage mothers at their school, usually the deputy head. The second questionnaire was sent to a sample of professionals identified with the help of key contacts in each LEA. In most cases the Teenage Pregnancy Co-ordinator; reintegration officer; specialist units and key education workers could be identified but finding appropriate contacts within health or social services proved more difficult and there was a wide variation between authorities in the existence of mothers' support groups or other possibly relevant voluntary bodies.

### **2.33 Questionnaire content, distribution and response rates**

Questionnaires were sent directly to schools, accompanied by a letter of support and encouragement from the Director of Education in a majority of the LEAs. For professionals a letter was included from the Teenage Pregnancy Co-ordinator in most cases and in one LEA where the Teenage Pregnancy Co-ordinator was about to leave post, the reintegration officer provided support. All questionnaires were posted with a stamped addressed envelope for return and a second mailing was organised at a specific date to increase returns. School questionnaires were sent at an earlier date in one large mailing. Those for professionals were sent over a longer period due to variations in local help in creating lists and the incremental addition of additional relevant workers. All respondents were assured of anonymity.

Questions for both mainstream and special schools included the number of young mothers in the school, how the school learned about a young woman's pregnancy, arrangements for the education of pregnant young women and young mothers, involvement of parents and the perceived barriers to education for these young women. Questions for professionals explored perceptions of the number of

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<sup>13</sup> Copies of these questionnaires can be accessed via contact with Dr. Dawson at [NonaCDawson@aol.com](mailto:NonaCDawson@aol.com)

young mothers in their LEA, awareness and experience of support services, views on the government's policy aims, problems with childcare and other barriers to educational involvement.

The response rate for the mainstream schools was 51 per cent, and 35 per cent for the special schools, after the second mailing. Although the response rate for professionals appears low at only 33%, there were significant variations in the response rate for different professional groups. Almost all of those who were key to this study had responded such as the Teenage Pregnancy Coordinators, reintegration officers, those working in specialist units responded and Connexions and Sure Start Plus workers had high response rates. However, only a few Directors of Education or educational psychologists completed a questionnaire and there was a low response from voluntary groups in some LEAs. Further information about the responses from the different professional groups can be found in Chapter 5.

It appeared that cases of teenage pregnancy and motherhood were rare in special schools and in the caseloads of certain groups of educational professionals who therefore did not return their questionnaires.

### **2.34 Data Analysis**

The quantitative data was analysed by Nona Dawson through the use of SPSS. The open-ended questions were analysed through the use of NVivo. Many of the respondents to both the schools' and the professionals' questionnaires provided detailed and insightful comments to such open ended questions and these have proved a rich source of additional data.

### **2.35 Limitations to the main survey**

In the main survey some of the professionals responding felt that specialist PRU should have been replaced by "specialist units for young mothers (and young pregnant women)", leaving the term PRU to refer to the mixed units which are usually seen as unsuitable for young mothers. As this was also the term used by young women who had attended such units, we have used this, abbreviated as SPU, in the written report. Quantified responses on the professionals' data will, however, have been made in some questions to the titles part or full-time PRUs and therefore this data must be read with caution.



There was also a feeling by a number of those working in Standards Fund Grant LEAs that “reintegration” officer was not a clear term. This was because officers with this title had existed for many years in some LEAs dealing primarily with all excluded pupils. For the purpose of differentiating the roles, some LEAs were using other titles such as teenage pregnancy inclusion officer, or officer with responsibility for pregnant teenagers in school. Also in some LEAs teams of professionals such as specialist learning mentors were utilised.

In this report we have used “reintegration officer” to refer to those workers who were funded initially by the Standards Fund Grant for work with young pregnant women and young mothers of statutory school age, including professionals who did not use this title. Therefore when reference is made throughout to the reintegration officer, this should be taken to mean reintegration officer or equivalent.

However, we acknowledge that because many LEAs did not use this title, responses by professionals and teachers about reintegration officers may have been affected. For example some professionals may not have stated that they were aware of reintegration officers as we defined them because they did not realise who we were referring to. Therefore again, when the survey data is being discussed, this needs to be taken into account.

## **2.4 Research questions**

### **2.41 Aims**

The primary aim of this research was to explore the educational experience of pregnant young women and young mothers of school age and to identify what factors, and what forms of provision, affect both academic and broader success in returning to or continuing with education.

A secondary aim is to present that information in a way which will inform policy and practice, to help increase the number of young mothers who engage with education and training and employment in line with Government strategy.

### **2.42 Objectives**

As noted within the introduction there were a number of key objectives that this study aimed to explore. Within each of the core objectives, there were a number of specific key research questions this study set out to explore. These were as follows:

**Objective 1:** To understand the previous educational experience of young mothers.

- What is their 'lived experience' of education prior to pregnancy (attendance, achievement and enjoyment)?

**Objective 2:** To highlight how education might be improved to prevent disengagement either prior to pregnancy or because of it.

- What are the key reasons for young women becoming disengaged or poor attendees prior to pregnancy?
- How does the handling of pregnancy by the school or others impact on a young woman's willingness to remain in education?
- How can mainstream education be improved to support young mothers?
- How have government initiatives (e.g. Connexions, Sure Start Plus, Re-Integration Officers) improved young mothers' access to education?

**Objective 3:** To identify and compare the experience of remaining in, or returning to, mainstream education, against the experience of specialist and non-specialist PRUs, further education colleges or accessing home tuition.

- *What makes different forms of provision more or less suitable for different young women, and, in locations with a choice of provision, what are the factors influencing a young mother's choice?*
- *Which forms of provision are likely to maximise a young mother's academic, vocational and developmental potential?*
- *What effect does the form of provision have on broader outcomes for young women in terms of mental, physical and social well-being, the development of parenting skills and self esteem?*
- *How is the effectiveness of different forms of provision influenced by local contexts, such as topography or additional forms of support or levels of teenage pregnancy?*

**Objective 4:** To identify how childcare considerations impact upon continuation or re-engagement in education.

- *How central is the availability of childcare to a young mother's ability to return to education pre and post 16?*

- *What forms of childcare do young mothers prefer, and how crucial is the availability of their preferred type to their willingness to return to, and settle in, education?*
- *What are the limitations of childcare being experienced by young mothers and those working with them?*

**Objective 5:** To highlight how education can best encourage young mothers to continue into post-16 education and training.

- *What types of educational provision are most likely to encourage a young mother to continue with education and training post-16?*
- *What forms of post-16 provision are most attractive to a young mother?*
- *Does the locating of pre-16 provision in or near FE act as a stimulus for mothers to continue post-16?*

As noted in the introduction, this research originally had a wider remit for the sixth objective, which was to also explore the influence of ethnicity, religion, socio-economic background and family composition on engagement with education. Specifically the research wanted to explore, whether there were any special childcare needs for looked after young mothers? How far does socio-economic background influence perceptions of post-16 education? How does ethnicity affect how the young mother and others view her educational potential? And does religion present specific problems in relation to re-integration into education?

However, it was decided after all data had been collected that there was not enough data to do justice to answering these specific questions. However, some discussion on the issues of ethnicity and religion can be found in Appendix 6 as specific issues of concern were raised that we recommend warrant further research.

## **Chapter 3: Interview study of young pregnant women and young mothers**

Hosie A. & Speak S.

### **3. Introduction**

This chapter presents the direct experiences of education of a sample of pregnant young women and young mothers in ten LEAs in England by presenting data from 93 in-depth semi-structured interviews. A range of baseline data has supplemented the interview data in order to substantiate some of the theories and arguments proposed by that data. A number of objectives and key research questions were identified and formed the main routes of inquiry of this element of the overall research project and the following sections explore in depth the following areas:

- Contextual profile of the young women,
- Decisions, Influences and Success: Young women's journeys through pregnancy and education,
- Decisions young woman are making about the authorised maternity absence period from school,
- Decisions, Influences and Success: Young women's journeys through motherhood and education,
- Education, Training and Employment: the route to social inclusion for post-16 mothers.

### **3.1 Contextual profile of the young women**

This section provides a profile of the 93 young women interviewed in order to set the work in context. This is supplemented, where possible, with additional baseline data on 456 young women collected from the 10<sup>14</sup> LEAs. Table 3.1 shows the pregnancy or maternity status of the final samples.

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<sup>14</sup> Data from one LEA is limited to additional information on age of conception only; therefore total baseline without this LEA's conception data is 401. Also another Area is limited to only ¼ of potential baseline data, for reasons explained in Chapter 2.

**Table 3.1: Status of overall baseline and interview samples**

| <b>Pregnancy or maternity status</b>          | <b>Frequency in overall baseline sample</b> | <b>Frequency in interview sample</b> |
|---|---|--------------------------------------|
| <b>School age pregnant</b>                    | 77  | 28                                   |
| <b>School age mother</b>                      | 306   | 35                                   |
| <b>Post school age mother</b>                 | 56  | 30                                   |
| <b>Miscarried/ adopted/ fostered/ aborted</b> | 17  | 0                                    |
| <b>Total</b>                                  | n=456                                       | n=93                                 |

The young women in the interview sample were only interviewed if they were currently pregnant or a mother, hence why this figure for miscarried/adopted in the interview sample is zero. However, within the interview sample of 93 young women there were known to have occurred two miscarriages and three abortions (1 before current pregnancy and 2 after the birth of their 1<sup>st</sup> child). It is worth noting here that whilst this study did not explore the support or educational needs of young women who had abortions, many of the issues are likely to be similar and further study is needed on this subject.

### **3.11 Profile of the mothers interviewed**

Tables 3.2 and 3.3, below, highlight the age and school year at conception of the young women interviewed (and within the overall baseline sample). As can be seen from these tables the majority of young women in the interview sample (IS) conceived between the ages of 14 and 15, with an average of 14.7, and for just over 50 per cent, conception was in year 10. The overall baseline sample (OBS) has very similar average age of conceptions and the same modal Year (10) of conception. There were, however, more conceptions in year 10 within the interview sample than in the overall baseline sample, where there was a more even spread of conceptions between years 10 and 11.

**Table 3.2: Age at conception**

| Age at conception | Frequency (IS)     | Valid Percent (IS) | Average (mean) age at conception (IS) | Frequency (OBS) | Valid Percent (OBS) | Average (mean) age at conception (OBS) |
|-------------------|--------------------|--------------------|---------------------------------------|-----------------|---------------------|--|
| 13                | 5                  | 5                  |                                       | 22              | 5                   |  |
| 14                | 33                 | 35                 |                                       | 101             | 22                  |  |
| 15                | 49                 | 52                 |                                       | 248             | 54                  |  |
| 16                | 7                  | 8                  |                                       | 85              | 19                  |  |
| <b>Total</b>      | n=94 <sup>15</sup> | 100                | 14.7                                  | n=456           | 100                 | 14.9                                   |

**Table 3.3: School year at conception**

| School year at conception | Frequency (IS)     | Valid % (IS) | Average (mode) School year at conception (IS) | Frequency (OBS) | Valid % (OBS) | Average (mode) school year at conception (OBS) |
|---------------------------|--------------------|--------------|---|-----------------|---------------|--|
| Year 8                    | 2                  | 2            |   | 10              | 3             |  |
| Year 9                    | 14                 | 15           |   | 43              | 11            |  |
| Year 10                   | 50                 | 54           |   | 181             | 46            |  |
| Year 11                   | 27                 | 29           |   | 164             | 41            |  |
| <b>Total</b>              | n=93 <sup>16</sup> | 100          | Year 10                                       | n=399           | 100           | Year 10  |

Tables 3.4 and 3.5 display nationality and ethnicity data. The majority of women in both the interview sample and the overall baseline sample were white and British/mixed British. In one LEA, whose population is a mixture of nationalities (many African and predominantly Black African or Black Caribbean ethnicity), six out of ten of the interview sample were not of British or dual British nationality (25 per cent in OBS) and only two out of ten of the interview sample were white (35 per cent in OBS).

**Table 3.4: Nationality**

| Nationality            | Frequency (IS) | Frequency (OBS) |
|------------------------|----------------|-----------------|
| British/ mixed British | 86             | 370             |
| Other                  | 7              | 30              |
| <b>Total</b>           | n=93           | n=400           |

<sup>15</sup> The total of 94 here is due to one mother who had two conceptions and births whilst of statutory school age.

<sup>16</sup> This figure is 93 rather than 94 because one young woman had only just arrived in the country from Ghana when she discovered that she was pregnant and had no high school experience prior to pregnancy.

**Table 3.5: Ethnicity**

| <b>Ethnicity</b>                     | <b>Frequency (IS)</b> | <b>Valid Percent (IS)</b> | <b>Frequency (OBS)</b> | <b>Valid Percent (OBS)</b> |
|--------------------------------------|-----------------------|---------------------------|------------------------|----------------------------|
| <b>White</b>                         | 79                    | 84.9                      | 338                    | 86.5                       |
| <b>Black African</b>                 | 5                     | 5.4                       | 15                     | 3.8                        |
| <b>Black Caribbean</b>               | 3                     | 3.2                       | 16                     | 4.1                        |
| <b>Bangladeshi</b>                   | 2                     | 2.2                       | 3                      | 0.8                        |
| <b>Asian &amp; white</b>             | 1                     | 1.0                       | 1                      | 0.3                        |
| <b>Other mixed ethnic background</b> | 3                     | 3.3                       | 18                     | 4.6                        |
| <b>Total</b>                         | n=93                  | 100                       | n=391                  | 100                        |

Table 3.6 shows the overall attendance prior to pregnancy. A high proportion of the young women interviewed were poor attendees or had disengaged from education prior to becoming pregnant. A notable difference between the two samples was a higher proportion of poor attendees in the baseline sample compared with the interview sample. This perhaps reflects the fact that the interview sample was obtained, in the most part, through educational contacts. Therefore the young women agreeing to be interviewed were likely to be those with whom the education authorities had more contact, which in turn were likely to be those more engaged with the education system.

**Table 3.6: Attendance levels prior to pregnancy**

| <b>Attendance levels prior to pregnancy</b> | <b>Frequency (IS)</b> | <b>Valid Percent (IS)</b> | <b>Frequency (OBS)</b> | <b>Valid Percent (OBS)</b> |
|---|-----------------------|---------------------------|------------------------|----------------------------|
| <b>Poor</b>                                 | 27                    | 31.0                      | 154                    | 43.0                       |
| <b>Average</b>                              | 19                    | 21.8                      | 50                     | 14.0                       |
| <b>Good</b>                                 | 19                    | 21.8                      | 89                     | 24.9                       |
| <b>Excellent</b>                            | 22                    | 25.4                      | 63                     | 17.6                       |
| <b>Total</b>                                | n=87                  | 100                       | n=358                  | 100                        |

It is also possible that these frequencies were affected by the fact that the young women themselves assessed their own attendance in the interviews, whereas the baseline data came from schools and other professionals. However, subjective issues arising from the interviews, such as levels of attendance, were cross references with professionals who knew the young woman and her history and background. The possibility of bias in the findings is addressed in Chapter 2.

Of those within the interview sample who regarded their attendance as 'less than good', two-fifths stated that the school and/or LEA had done nothing about their lack of attendance. The remaining three-fifths, who noted some form of LEA or school intervention, reported such interventions as a letter to the young woman's parents in two-thirds of those cases, to parental fines and court appearances or exclusion from school in one-third of those cases.

Of those attending at the point that they discovered that they were pregnant, 77 per cent (75 per cent OBS) stated that they were within mainstream school and 9 per cent (6 per cent OBS) were being educated outside mainstream schooling, such as in home tuition, student support units or PRUs and so on. The remaining 14 per cent (19 per cent OBS) were either not attending school or not being educated in England at the point of conception.

The issue of the young women's attendance was an important theme in this research particularly in light of the marked improvement in the attendance of many of the young women after disclosure of pregnancy. This is discussed in greater detail throughout this chapter and later in the report in Chapter 6.

### **3.12 Data on the babies' fathers**

Information was sought about the fathers of the babies. This information is important for at least two key reasons. First, they have not been as well researched as young mothers and current information gathering may not be effective. The DfES baseline data collection system on school-aged parents (for LEAs in receipt of the Standards Fund Grant), which had to be submitted each year that the Grant ran, was changed for its last year in 2002-3. Although it included a gender box, implying that they wished to know about school age fathers as well as mothers, it no longer asked for data on partners<sup>17</sup>. As the data will show below, the majority of fathers are not school age, but one to two years older. Therefore, by no longer collecting data about the partners of the young mothers that information would not necessarily help in any meaningful way in targeting support and services to many young fathers/ fathers to be. Second, it is important to profile fathers in order to target the appropriate age group for future prevention work, and to provide support for current fathers.

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<sup>17</sup> Although DfES guidance currently includes an encouragement that data be collected on the educational activities of all pregnant young women and young parents by all LEAs, and that if possible it should complement data collected by Connexions, there is no standard format for such data collection. It is also not a requirement that this data be sent to the DfES.



Table 3.7 outlines the proportion of the fathers who were school age (attending or not), and the occupations of those beyond school age. The average (mean) age of the babies' fathers in the interview sample was 17.1, which included 26 per cent who were 16 and 26 per cent who were 17 (17.6 OBS). The average age difference between the mothers and fathers in the interview sample was 2.4 years and 2.7 years for the overall baseline sample. The range of fathers' ages was 13 to 23 for the interview sample and 13 to 38 for the overall baseline sample. Ninety-five per cent of both samples were aged 20 or under.

**Table 3.7: Occupation of babies' fathers, interview sample**

| <b>Occupation/ Activity of baby's father</b>  | <b>Frequency</b> |
|---|------------------|
| <b>Not employed nor in education</b>          | 25               |
| <b>Works full time</b>                        | 22               |
| <b>At college</b>                             | 12               |
| <b>At school</b>                              | 10               |
| <b>Excluded/non attendee</b>                  | 9                |
| <b>Works part time</b>                        | 7                |
| <b>Training scheme/ modern apprenticeship</b> | 4                |
| <b>Unknown</b>                                | 4                |
| <b>In prison</b>                              | 1                |
| <b>Total</b>                                  | 93               |

All but two of the young women said that the father of the baby had been told about the child (almost always by the young woman). Of those who were told, 80 per cent knew of the pregnancy within a day of the young woman finding out and by two weeks 90 per cent had been told. All but 1 of those told had been informed before the birth of the child.

The common reactions of the young men on being told the news of impending fatherhood were: general disbelief and shock (31 per cent); denial of paternity or did not want the baby/ refusal to have anything to do with mother or child (22 per cent); upset and/or angry (14 per cent); happy or excited (14 per cent); mixed emotions, usually not happy but supportive and accepting none the less (13 per cent). The remaining reactions included attempts or promises to be supportive that failed and resulted in the father disappearing.

The young women within the interview sample were asked about their relationships with the baby's father, and what contact he had with themselves and the child. One-fifth (2/5s OBS) stated that they were still in a relationship with baby's father, though not necessarily co-habiting with him. There is a noted

difference here between the interview sample and the overall baseline, with more than double in the baseline said to be in a current relationship with the father. This difference may be accounted for in part by the fact that this question may well have been asked of the young woman when she first had contact with the reintegration officer (or individual who gathered this information) whereas the question posed in the interview would have provided the most up-to-date information. As some of the young women themselves noted, their relationships with the father of their child often changed frequently, and the timing of that question may have had a bearing on this finding. A further two-fifths stated that although they were no longer in a relationship, the father was still in contact with the child.

Of those whose relationships were on-going, the relationships ranged in length from five weeks to 5.7 years with an average (mean) of 2 years. For those no longer in a relationship, the relationship had lasted from one night to 4.8 years, with an average (mean) of eleven months.

Regardless of whether a relationship was still on-going, a third of the young women stated that the baby's father had been actively involved in discussions and decisions about her education. Also even though some had not been actively involved in discussions, of all the young women interviewed almost half stated that the baby's father had actively supported their decision to remain in or re-engage with education.

### **3.2 Decisions, Influences and Success: Young women's journeys through pregnancy and education**

#### **3.21 Introduction**

This section draws from the interviews with the pregnant young women and young mothers and focuses on three key issues:

1. What decisions young women are making in relation to education during pregnancy,
2. What the main influences are which have led to those decisions,
3. The success of the decision, in terms of educational attainment, personal satisfaction and development of future plans.

### 3.22 Decisions young women are making regarding education during pregnancy

#### *How soon to tell the school*

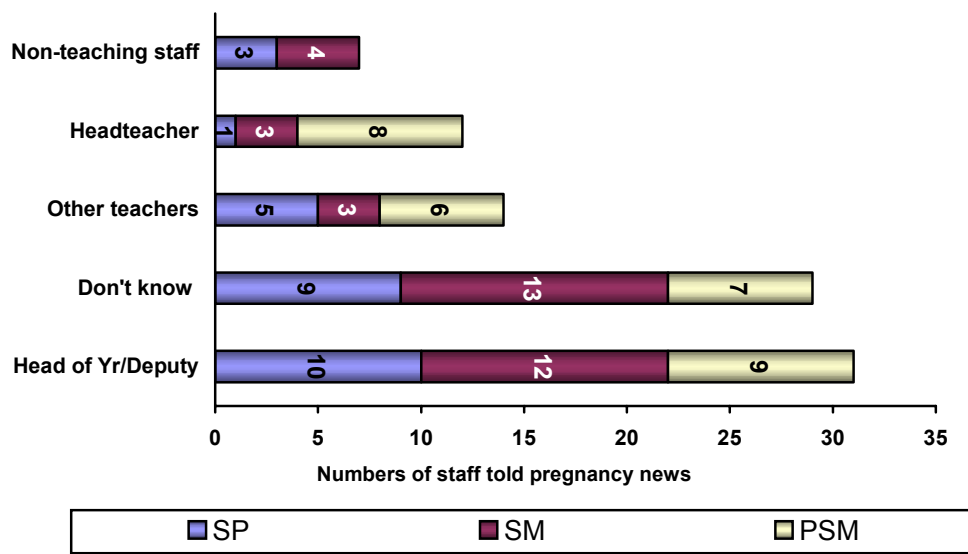
Young women are faced with a range of decisions in relation to education once they discover that they are pregnant. The first of these is how soon to tell the school following confirmation of pregnancy, which is important because the sooner the school knows, the sooner plans can be made to support the young woman and, where necessary, repair the pupil / school relationship. Overall 54 of the young women (60%) interviewed informed someone at school within two weeks of the pregnancy confirmation and very few waited longer than two months (often due to school being closed for the holidays).

Just over three-quarters of the currently pregnant sample told the school about their pregnancy within two weeks of discovering they were pregnant, in comparison to only half of those mothers who were now post statutory mothers. Although sample sizes limit how representative this discovery is, what was most encouraging was the finding that young women seem to be telling the school about their pregnancy sooner than they were a few years ago.

#### *Who to tell first in school*

Figure 3.1 below presents who it was in the school that the young women first confided in.

**Figure 3.1: Who in school was first told of pregnancy news**



The staff member most often informed first was the Head of year; Post-statutory mothers had almost as often informed the Head Teacher first but this was rare for current young women who were pregnant or mothers in school. Also of interest is the proportion of current school age young women who have started approaching non-teaching members of staff, which perhaps reflects the increased use of school nurses and particularly school learning mentors within mainstream schools in recent years. This could, in part, explain the small rise in the proportion of young women being offered support to help remain in school in the most current sample of pregnant young women (54 per cent) compared with those young women who were already mothers (SM and PSMs) (41 per cent).

It was disappointing, to note that only two young women mentioned the fact that the teacher they had gone to was the 'nominated' teacher for teenage pregnancy in their school. Many reintegration officers encouraged the appointment of a 'nominated teacher' during the Standards Fund Grant study (Selman et al. 2001). This was later endorsed as 'good practice' for referral and support. The degree to which such teachers have been appointed, and pupils made aware of their appointment, is unclear. Mothers in the interview sample seemed unaware of them.

There was no significant relationship found between who was first told and the school's reaction. However, it is worth noting that when the young woman was not aware of who in the school had been told and was therefore not active in the process of telling the school, she was more than twice as likely to have a negative rather than a positive response from her school (18 negative; 8 positive). Of further interest is that of the 25 who were unaware of who had been informed, 19 had poor-average attendance and of those 19 specifically, 13 felt that they had received a negative reaction from their school.

#### *Who tells the school?*

The involvement of parents in disclosing the pregnancy to the school could signify some level of concern, on the part of the young woman's parents, about how pregnancy might affect her education. Moreover, it might be assumed that the involvement of parents would encourage schools to show support and offer a range of options for continued education, which a young woman alone might not press for. From the interview sample, however, this does not appear to be the case. If anything the data tended to suggest that where a young women

informed the school by herself without her parents present, she was in fact twice as likely to have a positive response overall from the school than if she was with her parents.

The pattern of the young women's answers tends to suggest, however, that this may be due to the fact that the young women who informed the school by themselves were those who were more confident, enjoyed school more and got on relatively well with most teachers, rather than those who were poor attendees and had a poor relationship with school and teachers prior to pregnancy. The two contrasting stories below highlight the difference between those who were good attendees and felt to have good relations with teachers and those who did not.

*I liked school; my attendance was really good, I never used to bunk off. I was a school councillor for 5 years. Sports I loved sports, I was in the netball team, the rounders team, the hockey team, the basketball team... all of them. I was a good girl!... I got on with the teachers and relationships with other pupils, yup, they were good and of different ages from being a councillor a lot of kids looked up to you.... When I found out I just told them myself, I knew it would be fine, they were happy with me staying on. In fact, they just assumed I would stay on... They were just nice. **Sarah, 17, Area I.***

*What did I like about high school? Well nothing really, well I liked some subjects, I liked, computers and history and PE studies... I hated Maths and French... My attendance, It were ok in year 8 when I was at [secondary 1] and then, well when I moved to [secondary 2] I left all me friends behind at the other school, I got separated from all me friends and it just put us off going to school cause I was with people I didn't know anyone n' that. I wagged school and I got caught when I was at [secondary 1] and that's why me mam moved us to [secondary 2] cause it was closer to home. So I just stopped going I was hardly there in year 9 and I'd stopped going by year 10. I was not going very often when I found out (about the pregnancy), so it was me mam that told them. She told me head of year, and they wanted us out of school straight away in case anything happened to us in the corridor or anything... Then they were meant to contact here (specialist unit) for me, but they never did so we done it ourselves. **Kay, 15, Area A.***

It seems likely that young women who were well engaged with school would be more likely to receive a supportive response from the school regardless of whether their parents were present or not when they informed the school.

*Staying on or moving to a new educational establishment*

Once a pregnancy has been disclosed the decision needs to be made about whether to stay in the same educational establishment or to take up alternative provision if available. This could include educational locations aimed at supporting pregnant young women and young mothers (e.g. specialist units, young mother’s education groups, lap-top links with school, combinations of specialist provisions at college and school). Alternatively it might involve educational locations which are generic and utilised for all young people out of school for whatever reason (e.g. home tuition, PRU, alternative school, general FE education).

The majority of young women in both the interview and baseline samples were attending a mainstream school at the point that they discovered they were pregnant (77 per cent and 75 per cent respectively). After the discovery of the pregnancy, however, 61 per cent of the interview sample (76 per cent of the OBS) moved to an alternative form of education at some point during their pregnancy. Table 3.8, below, highlights the choices the young women made about where to spend the majority of their pregnancy.

**Table 3.8: Educational location during pregnancy**

| Location   | Frequency (IS) | Frequency (OBS) |
|--|----------------|-----------------|
| <b>Mainstream school / school + home tuition for maternity</b> | 32             | 108             |
| <b>Home tuition (majority of pregnancy)</b>                    | 9              | 55              |
| <b>Specialist unit (SPU)</b>                                   | 30             | 124             |
| <b>Education other (pregnancy specific)<sup>18</sup></b>       | 11             | 50              |
| <b>Education other (generic)<sup>19</sup></b>                  | 6              | 21              |
| <b>Not receiving any education</b>                             | 5              | 28              |
| <b>Total</b>   | n=93           | n=386           |

<sup>18</sup> Education other (pregnancy specific) (EDOps) refers to provisions (other than SPUs) which have been developed to provide education for pregnant young women and young mothers that is sensitive to their needs as pregnant/parents as well as their educational needs. In one LEA for example, pregnant young women could attend a mix of school, FE college, learning centres and so on.

<sup>19</sup> Education other (generic) or EDOg refers to provisions such as general PRUs, student support units and so on. These provisions are for all young people out of education e.g. school refusers and excluded pupils. The majority of young women interviewed who attended these provisions, however, were already attending prior to pregnancy. EDOg does not include specialist units for pregnant young women and young mothers (SPU).

A high proportion of young women were located within specialist units during their pregnancy. However, the data in Table 3.8 is cumulative for all ten areas, only four of which have specialist unit provisions. When the data are broken down by whether or not a specialist unit was available (see Table 3.9 below), it is possible to see that almost three-quarters of the young women in the areas with units chose to be educated at a unit rather than in mainstream school. Even in the six areas without units, however, only half of the young women in the interview sample, and two-fifths in the overall baseline sample remained within mainstream during their pregnancy.

**Table 3.9: Location during pregnancy by LEAs with/ without specialist units**

| Location                                     | Frequency (IS) Unit areas | Frequency (OBS) Unit areas | Frequency (IS) Non-Unit areas | Frequency (OBS) Non- Unit areas |
|--|---------------------------|----------------------------|-------------------------------|---------------------------------|
| Mainstream school/ school + HT for maternity | 5                         | 19                         | 27                            | 91                              |
| Home tuition (majority of pregnancy)         | 3                         | 17                         | 6                             | 37                              |
| Specialist unit                              | 30                        | 120                        | 0                             | 0                               |
| Education otherwise (pregnancy specific)     | 0                         | 0                          | 6                             | 49                              |
| Education otherwise (generic)                | 0                         | 2                          | 11                            | 20                              |
| Not receiving any education                  | 2                         | 8                          | 4                             | 32                              |
| <b>Total</b>                                 | n=40                      | n=166                      | n=54                          | n=229                           |

*How soon did pregnant young women move?*

Thirteen of the young women were already attending an alternative to mainstream school when they discovered that they were pregnant and chose to remain within that alternative through the pregnancy. Seventeen had not been attending school when they discovered they were pregnant and moved straight to an alternative when it was offered. Thirty-two of those who had been attending school chose to move to an alternative within the first month of the school being informed.

Of the remaining young women, 27 moved between 3-4 months after informing the school (in some cases waiting until the school holidays came about and then

moving after the holidays) and four did not move until after the birth of their child.

*Who is advising young women of their choices?*

Of the young women who moved to an alternative provision during their pregnancy, three-fifths stated that they had been informed about the alternative by their school. A relatively high proportion of young women who became pregnant were poor attendees prior to pregnancy and thus might not have been advised by the school. It is, therefore, encouraging to note that a wide range of agencies were involved in informing the remaining two-fifths of young women about their educational options. As one pregnant young woman responded, when asked how she found out about the education initiative in her LEA:

*Well, not because of the school, but I got this leaflet from the doctors and it had lots of things on it, sort of what you could do while you were pregnant so, I phoned up this place called (voluntary agency) and I went down there and found out about all my options that I could do and they phoned up (FE college) and the (initiative for pregnant young women and young mothers) straight away and that started getting me somewhere. I wanted to do something I was so bored. **Lateesha, 15, Area I.***

A key action point of all Local Authority Teenage Pregnancy strategies since the beginning of the overall strategy in 1999, has been to improve the referral systems for pregnant young women and young mothers in all aspects of potential need, including education. Every area had to produce a flow chart for professionals who may come into contact with pregnant young women and young mothers, which would help them to refer a young woman to appropriate support. Table 3.10 below highlights the diversity of agencies involved in referring the young women in this sample. It signifies some degree of success in 'joined-up' working.

*It was my midwife who put me in touch with the [specialist] unit. My midwife told us about it, and I said I was interested and then she phoned [reintegration officer] and arranged it for us. And then [reintegration officer] came out to see us. **Louise, 19 Area H.***



**Table 3.10: Referral routes to educational alternatives**

| referral route | School | Family | Education worker* | Doctor/midwife | Social worker |
|----------------|--------|--------|-------------------|----------------|---------------|
| Frequency      | 60     | 9      | 19                | 7              | 5             |

\* This includes agencies such as Reintegration Officers /Education Welfare Officers/Connexions/Home Tutors.

As the next section shows, however, in some LEAs pregnant young women expressed the feeling that they had little option about where they continued their education during pregnancy. The decision about where to be located during pregnancy, and when to move there, was often not made by the young woman but rather by her school.

### **3.23 Influences on the decisions young women are making regarding education during pregnancy**

As can be seen from the profile of LEAs in section 2.21, a range of educational options was available for pregnant young women of statutory school age. A young woman can only choose between the options available in her own LEA, and there is no single option best for all individuals. That an LEA has a specialist unit for young women does not mean that they will automatically choose this. That there is no specialist unit does not mean that young women will necessarily stay in mainstream school. Preferred options may be changing over time, particularly in the LEAs where reintegration officers have been effective in changing the ethos in schools towards supporting women to remain in mainstream. There are many influences on the educational choices that a young woman makes. This section presents interview sample data on the influences behind educational decisions in pregnancy.

Thirty-one young women who were attending mainstream school when they discovered they were pregnant chose to stay at school throughout their pregnancy. A further seven young women already attended alternative education prior to their pregnancy and they all chose to remain in that alternative throughout their pregnancy. Many of these young women noted that they had decided to stay in school (or other alternative) because of the support offered by their school (or other alternative) and the friendships that they had with both pupils and teachers. Four-fifths of all young women who stayed in school had been offered some help to help them stay on at school during their pregnancy (half of whom received significant amounts of support). This compared to only

one-quarter of women being offered help who later chose to move from school (and only 1/5 of those cases were offered significant amounts of support).

Those mothers who moved from their original educational establishment following the disclosure of pregnancy were asked why they moved. Table 3.11 highlights their initial responses.

**Table 3.11: Reason for moving to another establishment during pregnancy**

| Reason for move  | Frequency (IS) |
|--|----------------|
| School said or 'suggested' I had to leave                | 23             |
| Wasn't attending school – offered the alternative option | 17             |
| It was my choice, I thought it would easier              | 10             |
| Didn't feel safe in school / bullying                    | 5              |
| <b>Total</b>   | <b>55</b>      |

*Reaction of the school*

The school's reaction to a pregnancy is undoubtedly influential on a young woman's decision about education. Seventy-nine per cent of schools in the (questionnaire) sample stated that they believed that having a teenage pregnancy or parent in their school would show the inclusive or non-judgemental nature of the school (See Chapter 4). Of the young women interviewed, however, only 47 stated that their schools had responded positively to the news of their pregnancy. The remaining 46 had received either a very or mostly negative reaction from their school.

It was encouraging, however, that the sample of currently pregnant young women noted a slightly higher percentage of positive reactions from the school (56 per cent) compared with the other 2 samples of women, who had been pregnant in earlier years (mean: 49 per cent). The improvement in schools' responses was particularly noted in two LEAs where extensive work had been done to 're-educate' schools about being inclusive and supportive towards pregnant young women and parents.

Amongst those who received a negative reaction were some concerning cases of young women being encouraged, or directly asked, to leave. In the survey of schools only 12 per cent of schools stated that they felt pregnancy in school was 'infectious' and only 4 per cent stated that it would be 'disruptive to classes'.

Nevertheless, of the 82 young women in the interview sample who responded to the question 'did the school suggest you should stay, leave?', 23 (28 per cent) said that their school had strongly suggested or directly told them to leave, or had stated that they could not return if they were already excluded.

The 19 young women who were directly told to leave reported being given a range of reasons. Six young women said that their school told them that they could stay up until a certain point, usually 'when they started showing'. One was simply told it was the 'school rule' and a further six young women said that their schools had told them that their continued presence would damage the 'school's reputation':

*She (EWO) told the school and they said I couldn't go back because it was a Catholic school and so I had to have a home tutor. It was all pretty negative. Cause we rang her (EWO) back up and asked what was happening and she said well it's not good news I'm afraid, they said they won't have Lucy back because of it being a Catholic school an' that. She was a bit annoyed about it because I needed support... The school didn't suggest anything else they said I could not go back there because it was a Catholic school and I was pregnant. The school didn't give me any choices; they never even spoke to me about it all. **Lucy, 15, Area F.***

Poor attendance prior to pregnancy was only specified directly to two young women as the reason they were asked to leave. However, of those 19 directly asked to leave, 15 had poor to average, as opposed to good to excellent, attendance prior to pregnancy.

Some women also commented that the school had strongly suggested they go to an alternative, or placed conditions on their return, such as repeating a year or being educated alone:

*Well one of the teachers she wanted me to do this project at college but its only for over 16s and they wouldn't pay for that out of the school funding and so I cannot do that and she said that the only other options would be like out of school education or going back and year 10 again. Because I'd missed so much they'd make me do year 10 again. I didn't want to do that. **Bonnie, 14, Area G***

*Well, when I asked again about coming into school they eventually said that I could continue at the unit or come back to school but I could only come back if I came in twice a week and worked in a separate classroom. But I thought that the atmosphere was crap and didn't want that. Jane, 16, Area H.*

There was no significant difference between the three sub-samples in terms of proportions of young women who were being asked, or encouraged, to leave school. The main reason given to half of the 23 who were directly told (or strongly encouraged) to leave was for the health and safety of the young women and their unborn child and this justification was equally common amongst all three groups of young women. In the past, as is noted by the post-statutory mothers in this research and also by young women interviewed in previous research (Hosie 2002: Selman *et al.* 2001), it was common for schools to use health and safety as grounds to ask women to leave. Reintegration officers noted in previous research that for some schools this was an attempt to hide pregnancy within their school, for others it was due to a genuine concern about safety or about litigation if a pregnant young woman in their care had an accident (*ibid.*). Concern remains, however, about the use of health and safety justifications by schools:

*They wanted us out of school straight away in case anything happened to us in the corridor or anything. They just said I should leave... Well they said I could stay but for my own safety I should go immediately. I think they just wanted us out.. Kay, 15, Area A.*

*She (head teacher) said I shouldn't really be at school from about 5 months of pregnancy, in case I got knocked and it gave the baby brain damage or something. Louise, 18, Area H*

Part of the re-education of schools by reintegration officers, on the issue of legality and health and safety, has encouraged schools to think of how they would deal with a pregnant teacher and to produce a policy for pregnant young women that would ensure everybody understood their legal obligations and responsibilities.

There was a notable difference between LEAs in typical reactions to pregnancy. There was less chance of a positive reaction from schools in five out of the ten

LEAs, including the four which had established specialist units. The likelihood of this occurring has decreased slightly over the last academic year (between the SP and SM samples).

The evidence suggests that in the areas which have long-standing, well established specialist units, schools may be more likely to have a negative reaction to a young woman's pregnancy, and ask the young women to leave because of her pregnancy, than in those areas without an obvious alternative to mainstream. This research acknowledges that the specialist units are extremely successful and highly rated by the young women who use them (as discussed in later sections) as well as by Ofsted (2002 p.28). Nevertheless, reintegration officers have emphasised, in this and in prior research (Selman et al. 2001; Hosie 2002), that their biggest challenge in areas with specialist units has been in trying to get schools to recognise that the young women should be offered the choice of mainstream or specialist unit, no matter how good the unit is. Where the level of reintegration officer work with schools was high, more young women reported a positive school reaction to pregnancy.

**Table 3.12 Young women's perceptions of school response compared to availability of Standards Fund Grant and specialist units and work undertaken by reintegration officers with schools**

| LEA      | Standards fund grant? | Specialist Unit available? | Level of reintegration officer work with schools<br><b>High in bold</b> | Young women's perception of positive school reaction to pregnancy<br>– 50%+ in bold |
|----------|-----------------------|----------------------------|---|---|
| <b>A</b> | Yes                   | Yes (more than 10 years)   | Low   | 1/10  |
| <b>B</b> | Yes                   | No                         | <b>High</b>   | <b>7/8</b>  |
| <b>C</b> | No                    | No                         | None (No RO)  | 3/8   |
| <b>D</b> | Yes                   | No                         | Low   | 4/9   |
| <b>E</b> | Yes                   | Yes (more than 10 years)   | Medium  | 3/10  |
| <b>F</b> | Yes from 2002         | Yes (more than 10 years)   | None (No RO)  | 3/9   |
| <b>G</b> | No                    | No                         | None (No RO)  | <b>6/10</b>   |
| <b>H</b> | Yes                   | Yes (less than 10 years)   | <b>High</b>   | <b>5/10</b>   |
| <b>I</b> | Yes                   | No                         | <b>High</b>   | <b>6/10</b>   |
| <b>J</b> | Yes                   | No                         | Low   | <b>4/8</b>  |

Of the ten LEAs studied, seven had reintegration officers funded under the Standards Fund. In three of these areas the reintegration officer/s had done a significant level of work with schools around supporting pregnant young women to remain in their original school. In these three LEAs, young women were more likely to be offered a choice of location for education throughout their pregnancy and less likely to be asked to leave the school because of pregnancy.

Whilst most of the above discussion has focused on schools' negative behaviour in terms of asking or encouraging young women to leave school, in some instances the opposite has been occurring. In some LEAs a school's financial best interest has taken priority over what is the best educational option for a particular young woman. In other words, particularly where there is no reintegration officer to act as an advocate for a pregnant young woman, some education officials in this research remarked that schools may not allow a young woman to take part in education out of school, because the school would lose out financially by paying for these activities. Past research (Selman et al. 2001) has highlighted that schools are much less likely to be willing to pay for any alternative education if the pupil had been a poor attendee prior to pregnancy.

#### *Management of work and pregnancy*

Fifty-seven of the 93 young women in the interview sample moved to alternative provision for some part of their pregnancy. The decision to move, and when to go was influenced, in part, by how easy it was for them to manage both pregnancy and school work in the original educational establishment. As was seen earlier in Table 3.11, 15 women chose to leave their original school because they felt that, for a number of reasons, it would be easier to manage their pregnancy and schoolwork in a different establishment. Reasons included escaping bullying, personal safety, ill health or chronic morning sickness, or more generally, a perception that an alternative provision offered the young woman a more relaxed atmosphere in which to conduct schoolwork at her own pace.

The monitoring of the Standards Fund Grant (Selman et al. 2001) highlighted that many of the reasons young women moved to an alternative related to issues which could have been addressed within a school setting. Many reintegration officers had attempted to make schools aware of the things they could do to help pregnant young women. This included: allowing water in classrooms; a toilet pass; the facility to arrive and leave classes at slightly different times to help avoid busy corridors; providing a rest room facility; offering additional work

support where required and allowing the young woman to drop some lessons or adopt a part-time timetable.

The young women in this research were asked whether or not they had been offered any specific help to make it easier for them to remain in school, 42 of the 80 young women who responded said that they had received nothing. Often young women would note that they felt the school deliberately offered no help so that they would be encouraged to leave, as one young mother who fought hard to stay at school described:

*They never directly said anything, but they indicated right up until I had her that they didn't really want me to come back. I got the real feeling that they did not want me there when I was pregnant. I got the feeling they thought pregnancy was infectious... They did nothing to help; I think they made it as difficult as possible for me. **Sarah, 16, Area G.***

A further 22 stated that they had received very little help to remain in school, for example:

*Well they didn't do anything to help really, just like I could have a bottle of water in class but it had to be plastic. **Jessica, 15, Area E.***

Across all three groups, only 16 of the young women interviewed stated that they had received a lot of help to remain in school.

Of the 42 young women who stated that they had received no help at all 28 said that they had received an overall negative reaction from the school when they first disclosed the pregnancy. This compared with only 3 of the 16 who had been offered a lot of help.

Apart from emotional support, the type of help the young women most valued was to have their timetable reviewed. In some cases young women commented that being able to drop a particular subject with which they were struggling, had made them much more willing to go to school, as one young mother notes below:

*Yes, yeah they did, they offered me a part-time timetable... I was a lot happier than before, once I'd got my timetable changed and stuff like that*

*sorted. I chose the subjects I wanted to and I did my main ones. Lisa, 15, Area I*

The young women were also asked who in school had been most supportive and helpful after the school had been informed about their pregnancy. Of the 75 who responded to this question, teachers were mentioned by nearly half. About half of those mentioned specific teachers, whilst the others felt teachers in general had been supportive. Non-teaching staff, for example, learning-mentors, the school nurse or dinner ladies were mentioned by 8 of the respondents. 19 mentioned their friends as having been the most supportive and 11 said no-one had been helpful.

The support provided by friends was almost exclusively emotional in nature. Teachers, specific teachers and non-teaching staff gave a range of types of support, emotional support, learning related support, such as being allocated a learning-mentor or extra study support, and practical (pregnancy related) support. Some young women included simply having teachers deal with the fact that they were pregnant rather than ignoring it and pretending it wasn't happening, as one young mother described:

*They were all willing to talk about it instead of trying to avoid it. They were all all right about it.. Courtney, 16, Area I.*

#### *Previous attendance*

Although only 27 of the young women interviewed stated that their overall attendance prior to pregnancy had been poor, at the point of conception eleven said that they were not attending at all and a further 44 were not attending regularly; only 38 said that they were actually attending school regularly at the point of conception. Of the 11 young women who were not attending school at all when they became pregnant, all but one chose to move to a new educational establishment after disclosing the pregnancy, rather than returning to their own school. Almost half of both regular and non-regular attendees chose to move.

Often, the reason for a young woman's poor attendance was difficulties with one specific subject, teacher or pupil. Where the school and the young woman were prepared to work together to identify a mutually acceptable timetable, the dropping of a problematic subject often proved a way of re-engaging the young woman. As has been discussed earlier in this section, there is some relationship



between a young woman's previously poor attendance and the school's reaction to, and degree of support during, her pregnancy.

#### *Reaction of and support from peers*

The second strongest influence on a young woman's decision to move from school, or not to return, was the reaction of her peers. Five of the young women noted specifically that bullying because of the pregnancy was their reason for moving. In a number of cases it was boys who were responsible. Those who cited poor peer support or reaction as a problem also noted that the school had failed to intervene. Where a school made no effort to deal with the underlying reason behind such a problem, re-engagement was not considered as an acceptable option, as one young woman notes below:

*I just didn't like it there, I didn't get on. I got bullied towards the end of year 8 and so I just didn't go back. My head teacher tried to make me go back, but he weren't very helpful. They knew about the bullying but they weren't doing nothing about it. It was like they'd rather make me stay at home than deal with the bullies at school. **Melissa, 15 Area C.***

#### *Reaction of own parents*

The young women were asked if their own parents had encouraged them to do well in school prior to pregnancy and whether or not they had been concerned about how pregnancy might affect their education. All but one young woman responded to these questions and 75 commented that their parents, more often the mother, had encouraged them to go to school prior to pregnancy. In relation to pregnancy, 60 stated that their parent(s) had an opinion about how pregnancy may affect their education. Nine of the 60 stated that their parent(s) had said that they were not concerned because they knew that their daughter would continue her education, as one young mother states below:

*I think my mum knew I'd not let it affect me. She knew how much I loved school and how I wanted to go to college so I think she thought like me, just get on with it it's a bit inconvenient, that's all, but it's not like the end of the world for goodness sake, **Amanda, 17, Area E.***

The remaining 51 stated that they were concerned that their daughters would not continue their education as one pregnant young woman notes below:

*Mum went off it, that's all she were bothered about, 'how you going to get your exams now!' and on and on and on... **Lesley, 15, Area E.***

Parents generally were said to support their daughter's decision to continue with the pregnancy, rather than terminate it. However, this support might have been affected, to some degree, by the availability of specialist units. In LEAs where there was a specialist unit, once parents became aware of it, they seemed less concerned about how pregnancy might affect their daughters' education and more supportive of continuing with the pregnancy. Seven young women discussed how their parent(s) had been very concerned about how pregnancy would affect their education, often suggesting abortion to avoid ruining their education. Once they were informed about the alternative, however, the parent(s) were happy, or happier, for the pregnancy to continue, as one young mother describes below:

*Me dad did, he was telling us to have an abortion because having a baby would nack up me life and education an' all that, until me ma found out I could come here. When they found out about [specialist unit], me dad was quite all right with it then. **Lindsay, 15, Area A.***

### **3.24 The success of decisions young women are making regarding education during pregnancy**

The 'success' of the decisions made by the young women in relation to their education can be defined in many ways. We discuss academic success first in terms of attendance, and then in terms of changed opinions about the value of education for themselves and their children and, crucially, longer term planning for education, work and motherhood.

#### *Attendance*

Young women were asked to rate their attendance at school prior to pregnancy, during pregnancy and post-birth. Table 3.13 shows how they rated their overall attendance prior to pregnancy and shows a relatively even spread across four categories for the interview sample. The baseline sample was more heavily skewed towards poor attendance, possibly reflecting the fact that the women who were interviewed had been to some extent purposively selected to provide an equal spread of the range of attendee types. The fact that the baseline sample itself includes a high proportion of poor attendees prior to pregnancy should be viewed as quite positive in that the poor attendees probably represent the most disaffected of pregnant young women. It is probable (and suggested by a

number of reintegration officers) that, until recently, these young women would have been invisible to the education authorities and other agencies. The fact that the LEAs have their records on file and are aware of their existence is progress.

**Table 3.13: What was your attendance like overall in secondary school?**

| <b>Overall attendance in secondary school?</b> | <b>Frequency (Interview sample)</b> | <b>Frequency (Overall baseline sample)</b> |
|--|-------------------------------------|--|
| <b>poor</b>                                    | 26                                  | 152  |
| <b>average</b>                                 | 20                                  | 50   |
| <b>good</b>                                    | 18                                  | 89   |
| <b>excellent</b>                               | 22                                  | 63   |
| <b>Sub-Total</b>                               | 86                                  | 354  |
| <b>Missing/ no history*</b>                    | 7                                   | 55   |
| <b>Total</b>                                   | 93                                  | 401  |

\* A small number of asylum seekers had no educational history in the UK.

When the young women were then asked to break down their attendance across the different years of secondary school it was common for the young women to have 'good to excellent' attendance in Year 7. In years 8 and 9, however, the proportion of young women with good and excellent attendance decreased. The greatest decrease was amongst those with previously excellent attendance, as is seen in Table 3.14 below.

**Table 3.14: Changes in Attendance levels (prior to pregnancy) Year 7 in comparison to Years 8 and 9.**

|                             |                       | <b>Attendance in year 7</b> |                       |
|-----------------------------|-----------------------|-----------------------------|-----------------------|
|                             |                       | <b>Poor-average</b>         | <b>Good-excellent</b> |
| <b>Attendance in year 8</b> | <b>Poor-average</b>   | 12                          | 20                    |
|                             | <b>Good-excellent</b> | 1                           | 50                    |
| <b>Attendance in year 9</b> | <b>Poor-average</b>   | 8                           | 31                    |
|                             | <b>Good-excellent</b> | 3                           | 32                    |

This trend then appears to level off in Year 10, with a slight improvement again in Year 11<sup>20</sup>. Many of the young women whose attendance had improved in years 10 and/or 11 prior to pregnancy stated that this had occurred because they realised the value of getting their GCSEs.

<sup>20</sup> Attendance was only requested for each year prior to pregnancy and some young women did not answer these questions, therefore the numbers of women replying for each year vary and generally decrease as the Year group increases. Year 7 is lower than Year 8 however because a number of young women attended a middle school and therefore their high school years did not commence until Year 8. Year 7 = 79 responses, Year 8 = 86, Year 9 = 86, Year 10 = 74, Year 11 = 28.

**Table 3.15: Attendance levels (prior to pregnancy) Year 7-Year 11**

| <b>Attendance prior to pregnancy</b> | <b>Year 7<br/>Percent<br/>(frequency)</b> | <b>Year 8<br/>Percent<br/>(frequency)</b> | <b>Year 9<br/>Percent<br/>(frequency)</b> | <b>Year 10<br/>Percent<br/>(frequency)</b> | <b>Year 11<br/>Percent<br/>(frequency)</b> |
|--------------------------------------|---|---|---|--|--|
| <b>poor</b>                          | 10 (n=8)                                  | 23 (n=20 )                                | 40 (n=34)                                 | 36 (n=27)                                  | 36 (n=10)                                  |
| <b>average</b>                       | 6 (n=5)                                   | 16 (n=14)                                 | 17 (n=15)                                 | 23 (n=17)                                  | 18 (n=5)                                   |
| <b>good</b>                          | 15 (n=12)                                 | 13 (n=11)                                 | 9 (n=8)                                   | 15 (n=11)                                  | 14 (n=4)                                   |
| <b>excellent</b>                     | 69 (n=54)                                 | 48 (n=41)                                 | 34 (n=29)                                 | 26 (n=19 )                                 | 32 (n=9)                                   |
| <b>Total (<sup>21</sup>)</b>         | 100 (n=79)                                | 100 (n=86)                                | 100 (n=86)                                | 100 (n=74)                                 | 100 (n=28)                                 |

What is most striking in relation to attendance levels, however, is the high proportion of young women reporting their attendance had improved during pregnancy. Table 3.16, below, shows how the young women believed their attendance had changed (if at all) since becoming pregnant.

**Table 3.16: Did your attendance change after you became pregnant?**

| <b>Attendance changes during pregnancy?</b> | <b>Frequency</b> |
|---|------------------|
| <b>No it's just as good</b>                 | 29               |
| <b>Yes, it is worse</b>                     | 9                |
| <b>Yes it is better</b>                     | 52               |
| <b>Total</b>                                | 90               |

This change in attendance was particularly notable at two levels<sup>22</sup>. First, as shown in Table 3.17 below, young women whose attendance was excellent prior to pregnancy generally continued to have good or excellent attendance during pregnancy. Those who had poor or average attendance pre-pregnancy, however, displayed improvement to good or excellent attendance during pregnancy.

<sup>21</sup> Attendance was only requested for each year prior to pregnancy and some young women did not answer these questions. Therefore the numbers of women replying for each year vary and generally decrease as the Year group increases. Year 7 is lower than Year 8 however because a number of young women attended a middle school and therefore their high school years did not commence until Year 8. Year 7 = 79 responses, Year 8 = 86, Year 9 = 86, Year 10 = 74, Year 11 = 28.

<sup>22</sup> These patterns were equally noted within the overall baseline data.

**Table 3.17: Attendance rates during pregnancy by pre-pregnancy levels of attendance**

|                             |           | Attendance during pregnancy |         |      |           |
|-----------------------------|-----------|-----------------------------|---------|------|-----------|
|                             |           | Poor                        | Average | Good | Excellent |
| Attendance before pregnancy | Poor      | 1                           | 7       | 7    | 10        |
|                             | Average   | 3                           | 0       | 4    | 13        |
|                             | Good      | 1                           | 0       | 11   | 6         |
|                             | Excellent | 2                           | 0       | 3    | 15        |

Second, improvements in attendance varied between settings. Young women who attended school (with some home tuition) during pregnancy had mainly (70-80 per cent) been good attendees before the pregnancy and attendance remained at this level during it. Half of the young women who attended specialist units (SPUs) and Education Other than school: pregnancy specific (EDOps) had been poor attendees before the pregnancy, but attendance at these units during the pregnancy was good or excellent for over 80 per cent in the EDOPs and 90 per cent for the SPUs. Almost all the young women who attended Education other than school: generic (EDOG) or had only home tuition in pregnancy had been poor attendees before it, but the majority in both categories said that their attendance was good in pregnancy. Therefore, for those who were good-excellent attendees prior to pregnancy (mostly in mainstream school), on the whole they remained good-excellent during pregnancy. However, for many of those who were poor attendees prior to pregnancy, a marked increase in attendance was noted during pregnancy and the majority of the young women attributed this increase (at least in part) to being able to attend somewhere other than a mainstream school.

*Increased interest or belief in education*

In relation to the decisions being made by young women regarding their education during pregnancy, having an increased interest in and improved attitude to education and having a desire to continue within education are further examples of 'success'. The interviewees were asked specifically: if their opinion of education had changed from that held before their pregnancy and if so why and in what ways; how they felt they would try and encourage their own children to go to school; and what they felt that they would be doing now if they had not become pregnant when they did. Table 3.18 highlights the changing attitudes during pregnancy of many of the young women to education in general.

**Table 3.18: Changing attitudes to education since becoming pregnant**

| Has how you feel about education changed since you became pregnant? | Frequency |
|---|-----------|
| No I still dislike it   | 11        |
| No, it is just as important as before                               | 20        |
| Yes, I like it more   | 6         |
| Yes, I think it is more important                                   | 50        |
| It is still as important, but baby takes priority                   | 2         |
| Don't know  | 4         |
| Total   | 93        |

As can be seen from this Table, only eleven young women did not like school or education after becoming pregnant. A further 20 rated it as important as it was before they had become pregnant. Most importantly, however, 56 (60 per cent) now enjoyed education more once they became pregnant, or believed that education was more important, irrespective of whether they liked it.

Asked whether they thought it was important for young people in general to be going to school, one stated that they were not sure, ninety thought that it was important and only two of the interview sample thought it wasn't important. Some comments suggested hindsight in the slightly older mothers:

*I think it's more important. When I was younger I was like why bother, you know? Then I was glad not to go, now I wish I'd stayed. **Sam, 16, Area D.***

Almost all of the young women interviewed stated that they would try and encourage their own children to go to school. Interestingly when questioned on how they would try and encourage their child to go, about a quarter stated that they 'would make them go', which is exactly what they stated that they had resented their own parent/s having done.

A small number of young women, mostly those who had chronic non-attendance problems, could see no way of making a child do something, as had been the case for themselves. As one pregnant young women stated;

*I'd tell him to go to school but if he don't wanna go then I can't make him. **Hayley, 15, Area D.***

A further quarter of the sample stated that they would simply try and make their child understand the importance of education by using themselves as an example, as one young mother states:

*Probably, I'd just show them what happened to me and how much I gained from starting to go to school, even although I hadn't been for a long time. Erica, 18, Area A.*

Some others, who had come to enjoy school during their pregnancy, stated that school should be fun for children, and that enjoyment was a key factor to their attendance now. A number of these women said they would try and find ways of making learning fun for their own children.

Some expressed their concern over their child's schooling in terms of who their friends were. Many also recognised the difficulties young people faced, especially peer pressure and expressed a desire to try and 'keep in touch' with who their children were mixing with. At the same time, however, they recognised how little their parents really knew about their lives and how difficult it would be for them to know everything about their own child's life. As one pregnant young woman noted:

*I think you've got to talk to them, not let them get on with the wrong lot, you know. It's hard because you can't know I suppose like my mum never knew half of what I was up to most of them time. I'd just try to know what my kid were doing and who they were doing it with! Lesley, 15, Area E.*

A number of young women's views of education were conditioned by the way in which they were treated at school. Most of these stated that this would make them really listen to their child and not assume they were exaggerating any problems they said they had at school. As one young mother who suffered a lot of bullying at school stated:

*I think if, when she grows up I might listen to her more if she complains about something because when I said something to my mum when I was younger I don't think she believed me or really listened. Sarah, 16, Area G.*

The young women were also asked what they believed they would be doing at that point if they had not become pregnant (see Table 3.19 below). Encouragingly, very few young women had adopted the popular perception of young women having ruined their lives by becoming pregnant. Instead, many viewed their pregnancy as, perhaps not the best-timed event in their life, but one that they refused to regret. Rather they had chosen to get on with their lives and make the most of their situation.

Only two of the young women stated that becoming pregnant when they did had a negative impact on their life. For a third, the timing of their pregnancy had simply meant that their life plans would be delayed for a couple of years. For the remaining 58 young women, the timing of the pregnancy, although not planned<sup>23</sup>, was viewed as having a positive effect. A large proportion of the young women stated that they would: not have been attending school; have been permanently excluded from school; have been attending but not really paying attention or would have been in trouble with the police; instead they were in education and benefiting from it. These claims to a positive outcome of pregnancy need examination, and are discussed below.

**Table 3.19: Perceived current activity if not pregnant at school**

| <b>What would you be doing now if not pregnant when you did?</b> | <b>Positive or negative change?</b> | <b>Frequency</b> |
|--|-------------------------------------|------------------|
| <b>Going to college/uni (currently not)</b>                      | (-ve change)                        | 3                |
| <b>Having a life!</b>  | (-ve change)                        | 3                |
| <b>At school (same as now)</b>                                   | (=)                                 | 16               |
| <b>The same as now, I've just been a bit delayed</b>             | (=)                                 | 14               |
| <b>Not attending education</b>                                   | (+ve change)                        | 27               |
| <b>At school but messing about</b>                               | (+ve change)                        | 11               |
| <b>Crap job, not in education</b>                                | (+ve change)                        | 5                |
| <b>In trouble with the police/ in prison</b>                     | (+ve change)                        | 5                |
| <b>Excluded from school</b>                                      | (+ve change)                        | 3                |
| <b>Don't know</b>  |                                     | 9                |
| <b>Total</b>   |                                     | 93               |

#### *Development of longer term plans*

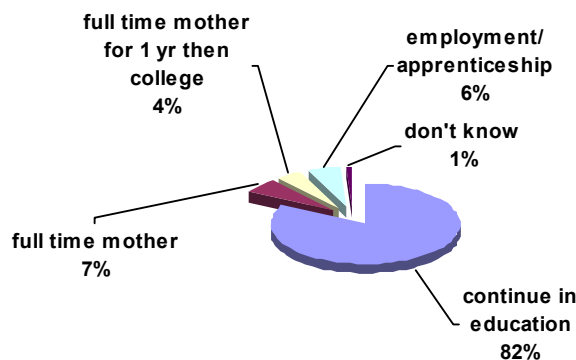
Young women were asked about their future plans following the birth of their babies. This was particularly relevant for those who gave birth during Year 11, as

<sup>23</sup> This is with one exception. One young woman stated that although she became pregnant whilst taking the pill, she and her partner had talked about trying to get pregnant and she was planning to come off the pill. Therefore, although it wasn't technically planned, she classed it as planned.



they could officially leave school at the end of that year. It was interesting to note that a large proportion wanted to continue in education or, at least, to make positive plans for education, once they had settled down following the birth. Figure 3.2 below, shows the breakdown of what the young women stated they would like to do once they had finished compulsory schooling. It is encouraging to note that 82 per cent desired to continue in education, a somewhat higher figure than the national average of 75 per cent for young people in education and training aged 16-18<sup>24</sup>. This is an important finding especially given the relatively low current levels of engagement of young parents in education, training and employment and the fact that one of the specific targets of the Teenage Pregnancy Strategy is to increase the proportion of young parents in education, training or employment to 60% (a target that would appear more than achievable given the figures below).

**Figure 3.2: Post-16 plans for the young women in the interview sample**



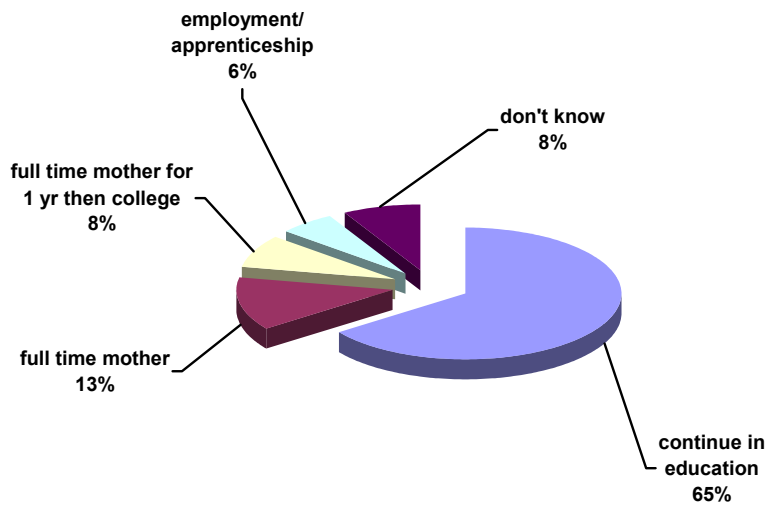
In attempting to explain the high proportion expressing a desire to continue in education given the current lower levels of engagement post-16, it may be the case that this sample may be skewed slightly by the fact that many of this sample were engaged with education (and hence would perhaps be more likely to want to continue in education). It could also reflect an increased desire amongst pregnant young women and young mothers to engage in post-16 education as a result of the support, help and encouragement they received at the pre-16 level. However, it could also reflect a gap between what these young women want to achieve and what reality they are faced with when they leave school and try to balance post-16 education and the needs of their child, without necessarily having

<sup>24</sup> <http://www.dfes.gov.uk/rsgateway/DB/SFR/s000426/tab001.xls>

the same level of supportive mechanisms in place that they were used to receiving whilst of school age.

Figure 3.3 below shows the same information for the overall baseline sample. The proportion of the baseline sample wishing to remain in education is notably lower than for the interview sample. A higher proportion of young women had not yet decided what they wished to do, wished to be full time mothers, or wished to be full time mothers having a 'gap' year from education. A likely explanatory factor is that the young women who were involved with the interviews were all engaged with education agencies, if not in education. Therefore, one would expect to find a greater desire to continue with education, amongst those who were actively (re)engaged with education prior to the birth of their child. Again, however, it is encouraging to note how close the proportions of young women who stated that they wanted to be in education are close to the national average of young people in education and training aged 16-18 (75 per cent). Overall 73 per cent of the baseline sample wanted to return to education; 65 per cent hoped to return immediately and 8 per cent wanted to return after a 'gap' year.

**Figure 3.3: Post-16 plans for the young women in the overall baseline sample**



The fact that many of these young women have future plans, whether they be in education, employment or motherhood, should be viewed as a mark of success. Some women were quite concrete about their plans, others were not so sure, but were still aware of who they needed to talk to, or what they needed to do, to take their plans further. Very few women had no idea about what they would like to,

or planned to do. Only a small proportion expressed no particular interest in their future. The three following quotations illustrate the different levels of future planning presented by the interview sample:

*Dunno, but I ain't going back to school* **Hayley, 15, Area D**

*Well I told this woman that I was thinking about college and she was asking what I wanted to do an' that. So I might be doing that next year now. I wanted to wait a year for college cause I want time to be a mum. I wanted to be a mum and then start thinking about college and stuff.*

**Stacey, 17, Area D**

*I had a Connexions meeting and I told them that I wanted to start A level philosophy. I told them that I wanted to do one over the 2 years and then after that's finished do another one and so on until the baby's ready to go to school cause I don't want him to be in the crèche all day, until he goes to school and then I'll be at school in the same hours as he is. I'm happy with that, I think it will have to be at a college though cause I don't think 6th form will let you do just one A level, they like you to do four. And they are more 'schoolified' and they want you to be on the school premises for so long and stuff, so I think I'll go to do it at college.* **Danielle, 15,**

**Area H.**

Although the level of desire to continue in education was lower in the baseline sample, there was little difference in the proportions of young women who planned to continue their education when compared by location during pregnancy.

The proportion of young women who had been poor-average attendees prior to pregnancy but expressed a desire to continue post-16 education, training or employment was lower than the young women who had been average or better attendees prior to the pregnancy, but was still high, at two thirds in the baseline sample and four fifths in the interview sample.

There was a strong belief amongst those interviewed (90%) that school age mothers should be encouraged or expected to return to education if they are properly supported to do so. Almost all, however, felt that they should not be expected to return to mainstream education if they did not wish to. Further to

this, when many of the young women talked about their desire to continue their education, or find worthwhile employment (rather than any job simply for money), they stated that they wanted to do this because of and for their child.

#### *Valuing motherhood*

Becoming a mother was viewed by the majority as a great responsibility, and one that meant they had to 'get serious' and think about their child as well as themselves. Many expressed the desire to combine the two roles of motherhood and student or employee, rather than a desire to do one or the other and a number stated that they believed it was their right to be able to be both:

*Well I think 'expected' [to come back to education] is not right encouraged yes, but not expected because especially if they are younger mums, it is very difficult to leave your child and some people just couldn't cope with that and probably wouldn't do well if they were forced to. But I think they should be encouraged not to give up on education and that if you have a break at first you come back maybe after a year... It's been hard work and I can totally understand why at times people just want to give up doing college, with childcare costs and inflexible colleges and stuff, but it's been worth it. I feel a lot more enthusiastic about what I'm doing now, wanting to get an education and being a mum and with what I'm doing I now understand a lot more about 'good' schooling... I probably would have been thinking of college, but I wasn't really motivated at school so I might have done college but I wouldn't be thinking about university I don't think. It's given me a real focus, I want a decent wage, not just one to get by on, I want him to see me happy studying and in a job I like. **Laura, 19, Area F.***

### **3.25 Examining the success of decisions young women are making regarding education during pregnancy**

This section examines both the positive and negative outcomes of the decisions and the potential reasons for those outcomes. It particularly focuses on changed behaviour in relation to attendance described by the young women in the previous section. Understanding the reasons is not simply important in terms of policies to support future pregnant young women and mothers. It may also allow us to improve education for disenfranchised young women, re-engaging them before they become pregnant.

### *Improved Attendance*

The increase in the willingness of many young women to attend an educational establishment once pregnant, shown in earlier in this chapter needs further exploration and a number of reasons were indicated.

### *Reduced Timetables*

First, it should be noted that many young women had their timetables reduced throughout their pregnancies. This was either because they moved to a location other than school which had limited hours, or because the original educational establishment reduced the timetable to support the young woman, as noted below:

*Well since my pregnancy my attendance improved dramatically. Towards the end it stayed high because they shortened the time-table to help me cope with the workload and pregnancy. And I remember at the last parents evening before I gave birth, mum has said that she was really pleased with me because the teachers were very enthusiastic about my progress and increased attendance and the fact that I seemed to be enjoying my courses and school again. **Debbi, 16, Area D.***

The number of hours of education per week received by the young women interviewed ranged from 3 to 30 hours. This is an average of 20.6 hours per week of those young women in the interview sample as opposed to an average school week (approximately 30 hours). Table 3.20 below, shows the average number of hours provided per week by the different educational locations. It is clear that for many young women, their expected attendance was often reduced. Therefore, those who said they went 100 per cent of the time may have been referring to 100 per cent of a shortened week.

When the young women were asked about their satisfaction with the amount of time and work expected of them, 80% were happy with the time. Of those remaining, half would have liked some more time, and half would have preferred to have done less time: 85 per cent were satisfied with the amount of work; and again of those remaining half wanted more work, and half less work.

Those most satisfied with the time and work expected of them were attending specialist units. Those least happy with their level of provision were those on full time home tuition (generally wanted more time and work), in mainstream school

(generally wanted less time but were more happy overall with work levels), or attending education otherwise: pregnancy specific.

**Table 3.20: Educational provision per week by location during pregnancy**

| Location during pregnancy                     | Number of young women in sub-sample | Average number of hours per week | Satisfied with amount of provision | Satisfied with amount of work |
|---|-------------------------------------|----------------------------------|------------------------------------|-------------------------------|
| Home tuition                                  | 9                                   | 7.7                              | 6                                  | 6                             |
| Specialist unit                               | 30                                  | 20.2                             | 28                                 | 28                            |
| Education otherwise generic                   | 11                                  | 10.4                             | 9                                  | 9                             |
| Education otherwise pregnancy specific        | 6                                   | 25                               | 4                                  | 3                             |
| School/ School and home tuition for maternity | 32                                  | 27.2                             | 24                                 | 28                            |
| All locations                                 | 88                                  | 20.6                             | 71                                 | 74                            |

For those attending education otherwise: pregnancy specific (which was often a mixture of locations including school), the proportion who said they were happy with both the amount of time and the workload was only two-thirds. The remaining third stated, however, that they were not dissatisfied with the time or the workload as such, rather, they enjoyed certain locations (non-school based) more than others (school-based) and would have preferred all the time and work they did to have been in the non-school based locations, as one pregnant young women discusses below:

*I don't like school and I wish I could come to college full time. Well I like school, education, it's just the people there that spoil it for you, you know, if they weren't there I would go. My attendance at school is still not very good, I didn't go last week I said I was poorly. But at the college it's excellent. I like it here it is different here from what it is like at school, there aren't bullies here like there are at school. And there are other people here who know what you are going through as well. It's much better than school you've got to attend everyday here but it's still better than school, I like it here, I don't mind coming every day I'm meant to, but I don't like going to school. **Madonna, 16, Area I.***

For those with reduced or changed timetables, however, it was often not so much the decreased time that influenced their attendance as the fact that they had been able to drop a specific subject or teacher, or change the teacher providing that subject. A number of young women commented that they had begun to drop out of school because they had either fallen behind with a subject or had difficulty with the teacher or other pupils in the class. These common difficulties often go un-addressed, until a young woman becomes pregnant, when she may be encouraged to drop some subjects she is struggling with in order to have time to concentrate on others and to shorten her timetable, as one young woman describes below:

*I was really behind and I didn't like the teacher and I hadn't been to English for ages... I started to come here [PRU] for English once, no twice a week and that were better, I caught up loads with [reintegration officer] ... I dropped some classes I remember I dropped, what were it...Like English like I said I came here and I stopped science, that's right cause that took up like 3 periods and that meant I could catch up on what I'd missed bunking off. It was good, you know kind of sorted me out loads. I suppose cause I didn't have to go to classes I didn't like, like I'd dropped science and I hated that and I were coming here for English to catch up and I didn't go to that because I couldn't stand the teacher so really there was no need to bunk off anymore anyway. **Zoë, 18, Area B.***

A number of women noted that falling behind was the result of learning difficulties, such as dyslexia. In some cases this was made visible by the school, by sending the young women to a separate work group for 'special people', which the young women resented. Alternatively, it was not recognised by the school at all, as one pregnant young woman describes:

*Well I'm dyslexic and they never picked it up and I had problems so I didn't always go [to primary] by [middle school] I didn't really bother with school, I had problems with everything so I didn't go. I attended a few months in year 8 and then I just stopped altogether. **Hayley, 15, Area D.***

Another aspect that often made young women happier about coming to education was the feeling that they were in control of their own choices. Being asked about what they wanted to do, what subjects they wanted to choose, or what timetable they wished to follow, was valued by the young women. Being involved with

decisions about their education gave some degree of control back to those who often felt as if everyone else was making their decisions for them. Offering young women this degree of choice and control was, however, confined to the eight areas that previously received Standards Fund Grant before this was replaced with the Vulnerable Children Grant. The young women in these areas were asked about their choices by a range of people including: specialist unit teachers, reintegration officers and schoolteachers, as the following quotes show:

*The teachers here [specialist unit] they were talking to me about it, asking me what I wanted. And then when I needed to talk to them about wanting more time they were there for me, we changed to 5 days after about 3 weeks. **Hailey, 15, Area F.***

*Well the school really wanted me out, so they weren't interested in asking me what I wanted, I tried to tell them but it was only when I got to see [reintegration officer] that someone bothered to listen to what I wanted. **Jane, 16, Area H.***

*Not until I got to [specialist unit], but they asked me once I got to [specialist unit]. Once I got to [specialist unit] I got to choose my subjects. **Michelle, 17 Area A.***

*[Reintegration officer] and the school asked me. They let me drop one of my subjects cause it was too hard for us. Everything was getting on top and I just said I can't do this, I was a little bit behind anyway but then when I found out [about the pregnancy], I couldn't concentrate and all me stuff got a bit behind, and I just said to them, this is just getting too hard for us I won't do well with the rest so they let me drop it. I was happy with that. **Elizabeth, 16, Area D.***

#### *Environment during Pregnancy*

Young women who attended locations other than school for their pregnancies, especially pregnancy specific locations (education other pregnancy specific and specialist units), were, on the whole, very clear about the fact that their attendance had improved because they liked the new establishment, the teachers and teaching style. Several commented that they would have responded better to mainstream school if it had been more like the specialist provision. In



particular, being treated like an adult and with respect from the teachers was very important, as one young mother notes below:

*It's ok here, different, like you know, no uniforms and none of them stupid rules. If they tell you something here, there's like a good reason and that, more relaxed and more grown up, they speak to you like grown ups.*  
**Abigail, 16, Area E.**

Where schools maintained a normal environment for the young woman, however, a conscious decision was made not to transfer to an alternative, as one pregnant young woman states below:

*I think its because they've been really ok about the whole thing, no fuss, just let me carry on and not made a fuss. I could have left, if they'd made me feel bad I might have gone to that place, [specialist unit] but they've been good so I didn't get messed up in my head and my work.*  
**Heidi, 16 Area E.**

Those who did move to alternative provision during pregnancy identified a range of positive changes that made them enjoy their new educational experience. For some, escaping bullying at school, which may, or may not have been a result of the pregnancy, was a key factor as one young mother describes:

*I don't get bullied here and it's a nice place to go to school.*  
**Jane, 16, Area H.**

For some, coping with education had always been a problem. A number of women stated that the reason they had begun to truant from school was because they could not cope with work levels and the pressure to succeed that they had felt from their school. Thus, a number of young women stated that they enjoyed the alternatives because they were generally not as full time as school, and this allowed the young women to focus on subjects they wanted to, at a pace they could handle. Moreover, they provided extra support where required. As one young woman describes below:

*I just used to stay off it at mainstream school, but here I'm only off if I'm really ill cause everyone enjoys it so much. Everyone is much more*

*friendly, it's a nicer atmosphere; there just wasn't all the pressure that there is in the mainstream schools. Erica, 18, Area A.*

In addition to the easier pace, a number of young women commented on the level of understanding amongst staff and the other young women within the alternatives (SPUs and EDOps) about what they were going through and how they were feeling. This support was often felt from both the staff and from the other pupils, as two of the young women state below:

*It was a better place, easier place and people were nice to you, the other girls were in the same boat. Maria, 18, Area H.*

*They're not moaning at you all the time and they're not boring you. They understand you better there and if you don't feel up to doing something they don't push you. Lateesha, 15, Area I.*

Poor health, particularly morning sickness during pregnancy was a common reason for young women to move to alternative education. The easier pace at some of the alternatives made it possible for some, who would not have coped in mainstream school, to remain in education, as one pregnant young woman notes:

*I don't think my attendance would have been as good if I had stayed at school because I hadn't been very well. But I can really take it in my stride here. It's easier, you can take things at your own pace, there's less pressure. Caitlin, 15, Area A.*

Finally, a number of the young women who attended a specialist unit stated that they particularly enjoyed receiving education about parenting as well as academic education. Many were scared at the prospect of motherhood and the parenting education helped to prepare them for forthcoming changes in their lives, as one young mother notes below:

*It was good because you got to learn about the baby and delivery and all that as well as school. Eva, 15, Area A.*

#### *More work support*

Just over half of the interview sample stated that they had fallen behind with schoolwork to some degree during their pregnancy and half of those young

women stated that they had fallen behind significantly. Only those young women who attended the specialist units stated that they had received a lot of help to aid them to catch up. In all other locations only half stated that they had received enough help.

Where support was described as adequate by the young women, it made a considerable difference to how they felt they were coping. This often lowered their stress levels, as one young mother describes below:

*I think it was better because I had more help from the teachers an' that and I had this friend who was a teacher and she helped us a lot. And she used to help us learn in a fun way without stressing us out. **Stacey, 17, Area A.***

It also often encouraged young women to continue further with their education than they would previously have considered was possible for them. A number of young women stated that, when found out they were pregnant, they were so far behind that sitting their GCSEs seemed impossible. With the additional support, some were able to continue with their GCSEs without having to re-sit years of missed schooling, as one young mother states below:

*They've helped me here, I've just about caught up now and I never went at all in year 10. They've helped me, catch up with all my course work, they just sit beside you and give you one-to-one help to get you through it all. So I've done like 2 years work in one year. **Sheerce-Leigh, 15, Area A.***

Previous research (Dawson & Meadows 1995; Dawson & Meadows 2001; Selman et al. 2001; Hosie & Selman 2006 forthcoming) has noted that home tuition is often seen as inadequate provision for pregnant young women and young mothers out of school. Within this research, however, two thirds of the young women on home tuition were very happy with their levels of provision. In one LEA, this appears to be in part because the home tutor was also the reintegration officer and therefore the relationship was generally more supportive, as one young mother states below:

*Well [reintegration officer] the home tutor got in touch with me and then she came to do home tuition with me and that started just before I left*

*school. It was good to have that support. It was good, we got on well.*

**Kate, 16, Area J.**

In other LEAs many of the young women on home tuition also stated that the one-on-one level of tuition made the atmosphere better and the few hours of home tuition seem much more, as one young mother notes:

*The home tuition started as soon as I stopped at school. I got 5 hours a week. It was funny though cause I thought it wouldn't be very much, but when she came for the 5 hours, it does seem like longer, you do get a fair amount of work done, because of the one-on-one.* **Sarah, 16, Area G.**

In addition a number of young women stated that having home tuition often took away the 'big class' effect that they had not liked at mainstream school. This was also a frequent comment from those young women attending specialist provisions, where classes are small, as one young mother noted below:

*The tutor was really good. I felt more relaxed, you know in a lesson you're quiet because you're not brave enough to shout out an answer, so that was good.* **Kelly, 15, Area J**

### *Transport*

For many, transport presents a significant barrier to continued education through pregnancy for a number of reasons. First, as a pregnancy develops walking to school can become physically more difficult. A number of the young women walked to school and described their 'waddle-like' attempts as they neared the end of the pregnancy as very difficult, to the point where many could not make the effort.

Sixteen of the young women interviewed relied on public transport to get to their educational establishment and this often presented a range of problems. The biggest problem noted by the young women was over-crowded public/ school buses. A number of young women said that every time they got on a bus they risked their bumps being hit by other people and/or their bags. Many would frequently have to stand for the full length of a journey, because no-one would give up a seat. This problem was overcome to some degree, however, when the educational location would allow a later start to the school day in order that the 'peak' time public transport could be avoided.

*I got a taxi at first and then the school bus.*

**Interviewer:** *If you did not have that transport, how would you attend?*

*I would have had to find a normal bus.*

**Interviewer:** *Would this affect your attendance?*

*Yes, the school bus makes it much easier –it would be hard getting on and off a (public) bus and the nearest bus stop is a bit away, which wouldn't be easy when you're pregnant so I probably wouldn't have come as much.*

**Jay, 15, Area F.**

One of the main problems with location specific specialist units, is that the location cannot suit everybody. Often young women would travel great distances to attend. Therefore as the young mother below describes, without the taxis provided, attendance would not be possible:

*I get taxis provided.*

**Interviewer:** *If you did not have that transport, how would you attend?*

*I wouldn't have come because the hassle with 2 different buses from [different LEA] and everything – it would be too far. I wouldn't have come, it would have been too far by bus. **Lucy, 15, Area F.***

Of the young women attending specialist units 17 were provided with taxis, a private mini-bus/ school bus picked up 12 and one was given a lift by parents. [None were using public transport.] With the exception of the one young woman who had a lift from her family, the other 29 young women relied on transport provided for them. During the interviews, young women were asked how they would have gone to school if they could not have used the transport they did and if their attendance have been affected.

Half of these young women stated that, had they not been able to use the transport provided to get to the unit, they would either not have been able to come at all, or probably not come as much. There was a range of reasons for this. For some, especially those whose attendance was not the best, having transport pick them up every day made it harder to say that they were not going in. Thus if they had been dependent on public transport their attendance would have been a lot poorer.

### *Father's support*

Just over one third of the sample stated that the baby's father (whether they were still together or not) had talked to them about their education and what they planned to do. An even higher proportion (48 per cent) stated that the baby's father had been supportive about their decision to remain in education. The young women discussed the different ways in which the baby's father had supported them educationally during their pregnancy. For some the father was supportive just by simply 'being there' for the young woman whenever she needed support as a couple of young mothers note below:

*He's there whenever I need to talk to him* **Sarah, 15, Area A.**

*He's been there for everything I need; he was there for me, great boyfriend! And well just everything.* **Debbi, 16, Area D.**

A considerable proportion of the young women stated that the baby's father had been supportive specifically about their education, providing positive encouragement to continue their education as one young mother notes below:

*Yes, he just said whatever I want to do he's happy with because if it hadn't happened I'd be going to college and like getting a job and stuff, so he just said whatever I want to do he'll support us.* **Lindy, 15, Area H.**

Finally, a number of young women stated that even although the baby's father may have been excluded or a poor attendee himself, he was still supportive of the young women to continue attending, as one young woman notes below:

*Yeah, even though he never went he was always on at us to go and we talk about it. Cause he was a one-day school wonderer and he dropped out and he's got no qualifications so, yes, he was, he wanted us to go to school* **Elizabeth, 16, Area D.**

### *Changed responsibilities*

Several young women stated that, even although they still disliked school, their attendance had improved because they recognised the importance of education now they were having a baby as two young mothers note below:

*Well I wasn't really bothered before about getting good marks and GCSEs but now I am, because I was going to be a mum. **Marianne, 16 Area H.***

*It's fantastic. Better than ever [attendance]. I just got on with it, I suppose it was a bit exciting at first all the attention and then I got so much help that I started to catch up and really enjoy it. People treat you different, with a little more respect I suppose so I really liked that it was just different after I got pregnant, I felt special and proud to be there and still going and I wanted to prove I could do it. I guess it was me that changed; I wasn't as mouthy as I used to be. You realise... you don't know everything and it's time to get on with it for the baby really. **Sarah, 15, Area B.***

It was also common for some young women to feel that they now had to prove that they were not the popular stereotype of a young mother and that they could succeed, as two more mothers note below:

*There's more like, reason to come here, isn't there? I have to get on and prove I can catch up and that this isn't the end of my life. **Louise, 19, Area E.***

*I didn't bunk off at all, I wanted to prove them wrong, show them, so I thought I have to go and show them I'm not just one of them slags what gets pregnant and lives off the social for the rest of the time, that I can do it and prove it to them and get my exams and GCSEs and that and go to college, so I went every day. Ironic isn't it? **Zoë, 18, Area B.***

#### *Improved perceptions of education and the future*

Some young women had enjoyed the alternative education they had undertaken, or the way in which the school had responded to them during their pregnancy. This had succeeded in changing their perceptions of education, especially as they could begin to see the possibility that education could mean something other than school.

**Interview:** *What about the college experience you've had?*

*Well, yeah I've liked that so maybe yeah a different kind of education, maybe I wouldn't mind going on with a different kind of education, BUT not school. **Hailey, 15, Area J.***

*Yes, I don't like school much. But I think college will be different, cause I'll be going to college with other people who've had babies and they won't all be going on about someone having a baby, so I don't think there were be the hassle with people asking about it all the time. **Madonna, 15, Area J.***

It was common for young women attending specialist units and FE college (as part of education other) to say that they would never have considered going on to post-16 education if it hadn't been for their experience during pregnancy. Those in specialist units often had the opportunity to return to the unit for a further one or two years, from 16 to 18. This made entry into post-16 education easy. It was common for the young women to say that had that not been offered they probably would not have even thought about it.

Although the overall numbers are too small to note any statistical significance, all of the young women who had attended college as part of their education otherwise, stated that they now wanted to come back to college to continue their education post-16. For many having already experienced college, and realised that it was a very different environment to school, was enough to encourage them to give it a go. The two pregnant young women below were chronic non-attendees prior to pregnancy. Both were now very keen to continue post-16 at the college where they had spent some of their pregnancy:

*I'm not going back to school I don't have to but I do fancy coming to college after my baby's born. I'd take a few months off after the birth and that's when college starts so I'd try and start in the January. **Madonna, 16, Area I.***

*Well I'm going to come back to the college and do what I'm doing now. And then in September I'll continue at college, I'll be college age by then. So, I'll be starting college full time, well not full time 3-4 days per week. I'm hoping to do a course and maybe my GCSEs. I don't know which ones, but I have to do some so I can go to the college, but that's fine. **Lateesha, 15, Area I.***



### *Negative change to attendance*

This section so far has discussed the many successes of the decisions made by the young women, however, there have also been negative outcomes for some young women. Nearly 10 per cent of the interview and overall baseline samples stated that their attendance had become worse after the discovery of the pregnancy. A variety of explanations were offered by the young women for the negative changes in attendance.

### *Morning sickness*

One of the most common causes of reduced attendance was morning sickness. For some young women in the interview sample, chronic morning sickness resulted in frequent hospitalisation due to lack of fluids. For some, although not as serious, the morning sickness was severe enough that even when they made it to school (or other location), they would often have to be sent home. One young mother notes below:

*It [attendance] hadn't been that good.*

**Interviewer:** *Had that changed from before you became pregnant?*

*Yes it wasn't as good.*

**Interviewer:** *Why?*

*Because of morning sickness and having to come home. Marie, 15, Area J.*

The only venues that were set up to deal with this situation, with suitable resting facilities, were the specialist units.

For some young women, however, even although they stated that their attendance was not as good as it could be due to their morning sickness, they still believed it was considerably better than it had been at school prior to pregnancy. As one pregnant young woman notes below:

*It's not been very good because I've had a really bad pregnancy but I've come whenever I've felt well enough. It was still better than it had been at school. I just didn't like school at all, the people here are better and friendly. But my health has meant my attendance is not so good as it could be. Kay, 15, Area A.*

*Attitudes in school: staff and pupils*

An explanation for poorer attendance offered by some women was the schools' attitude to them remaining in school during the pregnancy. For some, mostly those who did not have the option to attend any alternative location during pregnancy, the attitudes of staff and other pupils made attending very unpleasant, as one young mother notes:

*I was meant to be there full time, but they didn't want me to be there when I was pregnant, I felt terrible.*

**Interviewer:** *Had that changed from before you became pregnant?*

*It was much worse.*

**Interviewer:** *why?*

*I just didn't want to be there the way I was treated. **Katie, 16, Area J.***

*Baby's father present at school*

The average age in the interview sample of the fathers was 17 (17.5 OBS), therefore, it was not very common for the father of a child to be in school, even less so, in the same school as the young woman. In the interview sample, 69 out of the 93 fathers were no longer at school. Of the 24 who were school age, 9 were either excluded or chronic non-attendeers, 5 were in different schools. Thus, only 10 fathers were actually at the same school as the mother. Of those ten, three of the young women stated that the father's presence at school was a problem for them. Only one school offered any support to help both the mother and father deal with the fact that they were in the same school. Our information from the schools (see Chapter 4) suggested that they felt this was a very rare problem.

Whilst the figures of those having problems with the baby's fathers was very small, it is important to note that when problems existed they were often severe and the young women felt that the schools did nothing to help. For one young mother, (see below), the school did nothing to support her when she suffered bullying from the baby's father and his friends. As a result, she had to find another school to be able to continue her education.

*It [attendance] was ok at the middle school, but it's not been good at the high school.*

**Interviewer:** *why?*

*Because of the father. Well the problem is that because the dad's been in school more, all the pupils have heard really is his side of things and so they all believe him and it's made it very difficult for me. It was hard but I had to ignore them and that is part of the reason I am changing schools now.*

**Interviewer:** *How did that make you feel?*

*It's crap. The school haven't really done anything to help, they don't want to interfere and so I'm the one who's moving schools now. Fred, 14, Area D.*

#### *No school concessions for pregnancy*

Some schools did not make practical concessions such as allowing a young pregnant woman to arrive and leave at different times, or developing a special timetable to support her. Where no alternative locations existed, attendance often suffered, as one young mother notes:

*Well, it was not as good because I'd rather have cut down the amount I was doing, it would have been good if they had offered me like a reduced timetable. It was quite a lot of time and was a bit hard going at times.*

**Jayne, 16, Area G.**

Other young women simply found that their schools did not seem to take into consideration 'where their head was at' in relation to coping with pregnancy. It was relatively common amongst those whose attendance suffered during pregnancy (and had been relatively good prior to pregnancy) for the school to continue insisting on attendance when a young woman's mental health was at issue, as one pregnant young woman states below:

*At first it was quite positive but towards the middle and the end it was quite negative. I couldn't cope with going to school, I could cope with it but I just didn't want to stay because I had so much other things on my mind. And they kept saying you have to, you have to go, you have to. They were expecting me to keep going until I drop basically. Yeah they wanted me to still be there until now and I just couldn't cope with that. I just couldn't cope with it. Bonnie, 14, Area G.*

*What's the point?*

For some young women, particularly but not exclusively those who did not receive continued encouragement from reintegration officers, teachers or other interested parties, there was no reason or incentive to continue with something they had fallen so far behind with. At the point of interview some young women could see no reason to continuing, as one new young mother noted:

*I was too far behind and I'm not that bothered anyway. **Carmel, 16, Area J.***

It is relevant to note, however, that of all the young women who could see no point in trying to catch up pre or post-16, none had the opportunity to attend a pregnancy specific form of education during pregnancy, where the evidence has shown that all young women were happy with the level of support they had to catch up with work.

Other young women did not believe that continued education would help mothers who were content to simply find a job that would provide enough money to support the child. Others also stated that if the job was not quite sufficient to provide, any additional finance required should come from the baby's father, as one pregnant young women highlights below:

*Not really, if you can get a job why bother*

**Interviewer:** *But don't you think you might get a better job if you stay on at school?*

*Depends what you want to do like if you want to work in a shop, like at Top Shop and that, then what are you going to learn at school to help you tell some one how much something costs?*

**Interviewer:** *But you can't earn much at Top Shop and if you have a baby to keep, don't you think it might be better to get a good job?*

*Suppose don't know, the dads should pay something too **Natasha, 13, Area B.***

A small number of young women displayed what we have defined as the 'baby doll syndrome', whereby the realities of being a mother had not been fully understood by the pregnant young women. Rather, the young women viewed their child (to be), as a doll to be looked after. Where this was a particularly strong view held by the young women, there was often no interest in any future

planning other than being a good mother, as one pregnant young woman describes below:

*No man, init, I'm finished this year man I'm 16 I can leave in the summer, I ain't coming back no more*

**Interviewer:** *Is that what you want?*

*Yes course, I ain't clever, I ain't going to go to college or nothing. I just want to look after the baby. I gonna be a good momma and look after the baby and take it out and that. [Baby's father] gonna look after us and that. **Tanya, 15, Area E.***

### **3.3 Decisions young woman are making about maternity absence period**

A range of decisions to be made around maternity absence period include when to leave school, what to do about education during maternity absence period, how to manage examinations which fall during maternity absence period and at what point to return post-birth.

#### **3.31 Timing of maternity absence period**

DfES guidance (DfES/0629/2001, paragraph 14.5) advises school that a pupil who becomes pregnant has up to 18 calendar weeks' authorised absence (termed maternity absence period in this report) from school to cover the time immediately before and after the birth of the child. It is a maximum authorised absence period and the full 18 weeks do not need to be taken and some young pregnant women take less or continue with home tuition during the absence period, particularly if close to sitting examinations. In theory, a pupil could begin the authorised absence period 12 weeks pre birth if she wished, leaving the 6 weeks required for a post-natal check before returning to school. Many of the young women, however, expressed a desire to remain in education as long as possible prior to the birth, for two main reasons. First, many young women simply wanted to miss as little schooling as possible and therefore stayed as late as possible. Second, staying as late as possible allows more time with the child post-birth, as one young mother notes below:

*I stayed right up until the last minute, I didn't take maternity before he was born. I went back after about 3 months, when he was three months. I needed to do my GCSEs so I needed to go back really, to go back then. I was happy how it worked out. **Sarah, 17, Area I.***

Of the sample of pregnant young women only 5 had gone on maternity absence period at the point of interview and 4 of those were on early maternity absence period for reasons of ill health. For the 23 in the SP group who were not yet on maternity absence period, ten wanted to stay as late as possible, five wanted to go at about four weeks before the birth, two would have finished Year 11 by the birth and six hadn't decided when they wanted to go. Of those who had made their decision to stay as late as possible, the majority were within specialist provisions. It was common in the specialist units for young women to stay as late as they could because the units were prepared for the possibility that a young woman could go into labour at any time.

*I'm just going to continue working on what I am doing now and I'm gonna stay here till it comes! **Shreece-Leigh, 15, Area A. (Attending SPU)***

*Well I don't know when exactly because the baby's due around exam time, in which case I'd come everyday until it's born. **Caitlin, 15, Area A. (Attending SPU).***

Of the other two groups of young women who had already given birth, 21 stayed until the last minute, 10 stayed until between 1-6 weeks pre birth, 15 stayed until 7-10+ weeks pre-birth, 9 gave birth during the holidays and came back after the holidays and the final 6 had either finished year 11 or gave birth during their exams.

About a fifth of young women attending school during pregnancy gave birth after finishing year 11 or during their exams. Less than a third of young women in mainstream schools continued in education beyond six weeks before their child was expected, while the majority of young women in specialist units or generic units or receiving home tuition did so, half of them still being in education in the week of the child's birth.

*I was here when I went into labour, so I was here till the last second!  
**Brittney, 16, Area I, (Attending a SPU)***

Of the 59 mothers (SM and PSM) who responded to the questions on maternity, 43 stated that the decision about when to stop education prior to birth had been their decision. For 8 the decision had been made due to the timing of the school holidays and for 6 it was due to health concerns. Only 2 of the young women

stated that the decision of when to stop had been made by someone else, as in the case of the young mother below:

*3 weeks before I was due to deliver I asked for the next three weeks off, and I was told, no you are not allowed the next three weeks off. They said working women don't get that so you don't and I said well actually working women get up to 6 weeks prior to birth off and they said well you're not a working woman so you can't have it! I couldn't win. So I didn't GO on maternity leave!! It wasn't my decision. **Saskia, 16, Area C.***

Fifty-two women stated that they were happy with the timing of their maternity absence period. Two stated that they would have like to have stayed longer but that they knew it would not have been sensible due to their health condition. The remaining five stated that, with hindsight, they would have liked more time off, as the young mother notes below:

**Interviewer:** *How close were to giving birth when you went on maternity leave?*

*About 5 weeks I think*

**Interviewer:** *Were you happy with that?*

*No, I think I needed longer, I was really tired by then, you hear of women who work right up to going into labour, I don't know how they do it.*

**Interviewer:** *Was it your decision?*

*Yes, it's my own fault, I'm not blaming anyone else. **Sarah, 15, Area B.***

### **3.32 Education during maternity absence period**

Depending on the LEA, and the type of educational establishment the mother attends, there is a range of educational support for mothers during their maternity absence period. In one LEA in this study specialist provision is available specifically for this period (and sometimes women stay for longer than the 'maternity' period, especially if they were not coping with mainstream school). In other LEAs, if a young woman has been attending a specialist unit for young mothers, the unit will continue to provide educational support and encourage the mother to remain in the unit as late as possible, providing she is in good health, which in effect means that little or no 'maternity absence period' is actually taken by young women attending specialist units. The 18 weeks authorised absence period does not have to be a period of complete inactivity and some tuition is commonplace during final period of pregnancy depending on the

health of the mother. However, in areas where there was no specialist provision, once a girl went on the authorised maternity absence period, support was found to be more limited.

The most common types of provision during maternity absence period varied across the ten LEAS. In three areas it was most common was young women on maternity to make use of home tuition and any work sent home by their school. In one further LEA, home tuition was also the main source of education, but this LEA differed because the home tutor was also the reintegration officer and hence these young women also received emotional and practical support in addition to their educational support. In another LEA, young women would most commonly combine home tuition, work sent from school and attendance within a general PRU, under the support of the LEA reintegration officer. In another three LEAs the majority of young women attended the specialist unit that was available and in one further LEA, young women most commonly attended one of a number of part-time specialist unit provisions available. In the final LEA, young women would commonly combine time spent in an FE college and city learning centres with work sent from school. Some women also had the opportunity to make use of Lap-top learning from home.

Lack of appropriate provision during this period is problematic in two ways. First, if maternity absence period coincides with the run up to exams the young women might find herself cut adrift from school at precisely the time when she needs the school most. Second, failing to provide adequate education during maternity absence period breaks the already delicate ties some young women have with the school, and may diminish their willingness to re-engage post-birth.

### **3.33 Educational support from school during maternity absence period**

Young women on maternity absence period, and those who had gone through maternity absence period, were asked how they had experienced the tuition they received during their confinement. In particular, all young women were asked what level of support the school had offered once they were on maternity absence period or attending an alternative location for pregnancy including the maternity period.



Three quarters of the young women<sup>25</sup> who received at least some of their maternity education completely outside of mainstream school stated that once they were out of the school environment, they had received no support or contact from their school. This is despite the fact that schools were meant to be providing work for the young women to undertake in their new location. Only a quarter had any sort of contact with the school after they moved. Of these, 6 had been checked on occasionally by their school to see how they were doing; 5 had stayed in good contact, been provided with work and received occasional visits; a further 3 had received work only on request and finally, the parents of 1 still received letters informing them that their daughter had been missing school and possibly truanting.

Where schools were very supportive, the young women valued the contact and said this made them feel as if they were not losing touch. This helped them focus on returning, as one new young mother describes below:

*I did home tuition from about 4 weeks before Easter, because the baby was originally due on the 28th. So 6 weeks before the baby was due. I just continued doing what I'd been doing until I got too tired and then I moved onto home tuition. And I'll stay with home tuition until my exams are done as well as going back to school but because it's study leave time (reintegration officer/home tutor) is going to keep coming for home tuition until the exams are over. And the deputy head has been great, he's been coming round to bring me work and take work back to get marked. I'm going to go back for a week, the week after next and carry on to do my GCSEs and then hopefully I'll go back in September to do 6th form.*  
**Lindsay, 16, Area J.**

### **3.34 Duration of maternity absence period**

The majority of the young women gave birth (or were due to give birth) during year 11. For the 6 who would reach the end of year 11 or the age at which they could leave school before, during or very shortly after their maternity absence period, there was no requirement to return to school post-birth; a further four young women were planning to return only for their exams. Those who were still younger than the statutory school leaving age after their official maternity period

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<sup>25</sup> At this point, only 5 of the 26 pregnant young women (who answered this question) had gone on maternity absence period at this point, hence total sample for this point is 72.

had different ideas as to how soon they should return. Of the 26 who were currently pregnant nine wanted to return within two weeks, one between four and eight weeks, and one between nine and 12 weeks. A further four felt that it would take longer than 12 weeks to recover and be ready for school. Only one said that she was refusing to go back to school. The vast majority 23 stated that they were happy with the planned timing of return, but 3 stated that they would prefer a bit longer than they had been told that they were allowed.

For those young women who had already returned to education post-birth, the proportions returning at certain points (i.e. after 2 weeks, between four and eight weeks, etc.) were very similar to those presented above for the pregnant sample. Where these two samples differ however is in the satisfaction levels. Only 35 of those who were mothers were happy with their decision. Thirteen stated that wished they'd had more time than they had taken and six would have like to have come back sooner.

### **3.4 Decisions, Influences and Success: Young women's journeys through motherhood and education**

#### **3.41 Introduction**

This section on the findings from the qualitative data draws from interviews with pregnant young women and young mothers and focuses on three key issues:

1. What decisions young women are making in relation to education post-birth,
2. What are the main influences which have led to those decisions,
3. The success of the decision, in terms of educational attainment, personal satisfaction and development of future plans.

#### **3.42 Decisions young women are making regarding education post-birth**

Young mothers are faced with a range of decisions in relation to their education after the birth of their child. This section explores some of the proposed and actual decisions and choices made by the mothers.

##### *Timing and location of post-birth return*

The majority of births occur at the end of Year 10 or in Year 11. Of those which occur in Year 11<sup>26</sup>, a proportion fall at a point in the year which means that the

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<sup>26</sup> This was the pattern from the interview sample; however, it does appear that the baseline is beginning to show a change of trend with proportionately more pregnancies than before in years 10

school summer holidays begin before the end of the mother's maternity absence period. Thus, she is not obliged to return to school. Nevertheless, the majority of mothers are required to return because of their age, and others choose to return post statutory school age, either to re-sit GCSEs or to take 'A' levels or other qualifications. In the case of some specialist units, mothers may return to take additional education to 'compensate' for time missed before or during pregnancy.

As discussed in the previous section on maternity, mothers were broadly happy to return to school as soon as possible following the birth. Eleven of the mothers had their babies during the school holidays. A third stated that had their maternity period not been forced on them by the holidays, they would have liked to have returned sooner. The remaining two-thirds were happy with the break that the holiday had given them. Overall, including those giving birth during the holidays, all but one of those who returned, did so within the 18-week maternity period. The average (mean) return period was seven weeks post-birth.

From the interview sample only two young mothers out of the 62 who answered this question did not return to education post-birth, one because she gave birth just after her Year 11 exams and the other because of the way teachers had treated her at school during her pregnancy. From the baseline sample, of 350 young women for whom information was provided on this topic, 38 were still on maternity absence period and planned to return post-birth, 235 had returned post-birth and 77 had not returned post-birth. Of those that did not return post-birth, three had pregnancies that did not end in a live birth (no further data was therefore collected and it is not known when or if they returned to school). Of the remaining 74, 30 did not want to return to school, although legally they should have and 44 were post-16 by the birth.

As can be seen in Table 3.21 below, most young women in both samples returned to mainstream schools or specialist units. As only 4 LEAs have specialist units (one with part-time units) it is important to break the sample into unit and non-unit areas. In the LEAs with units, the majority in both samples return to units for post-birth education, with the remainder going to mainstream school; almost no young women had home tuition as their main provision, or were not being educated at all.

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and 11 rather than 9 and 10. This could have implications for future support if more young women are finishing their pre-16 education prior to birth.

**Table 3.21: Education Reintegration locations post-birth**

| Education Reintegration locations | Frequency (Interview sample) | Frequency (Overall baseline sample) |
|-----------------------------------|------------------------------|-------------------------------------|
| Home Tuition                      | 7                            | 12                                  |
| Specialist unit                   | 23                           | 104                                 |
| EDO (generic)                     | 2                            | 10                                  |
| EDO (PS)                          | 0                            | 18                                  |
| School/School & Home Tuition (HT) | 27                           | 65                                  |
| College                           | 1                            | 5                                   |
| No return (pre-16)                | 2                            | 20                                  |
| <b>Total</b>                      | 62                           | 234                                 |

In non-unit areas, schools took more young mothers than was the case for any other type of provision. In the interview sample, there were 34 women in non-unit LEAs: 7 of these young women were in long-term home tuition, and smaller numbers in EDOg, Colleges and EDOps. In the baseline sample, EDOg, EDOps and College were more common than HT but 19 of 148 young mothers were not receiving any education at all. The proportions of those in non-unit areas attending mainstream schools are still relatively low (59 per cent IS, 40 per cent OBS) although these figures are higher than their pre-birth counterparts.

**Table 3.22: Location post-birth by LEAs with/ without specialist units**

| Location                                 | Percent %<br>(Interview sample)<br>Unit areas | Percent %<br>(Overall baseline sample)<br>Unit areas | Percent %<br>(Interview sample)<br>Non-Unit areas | Percent %<br>(Overall baseline sample)<br>Non-Unit areas |
|--|---|--|---|--|
| Mainstream school                        | 22 (6)  | 14 (18)  | 59 (20)   | 50 (74)  |
| Home tuition (long-term)                 | 0   | 1 (1)  | 21 (7)  | 9 (13)   |
| Specialist unit                          | 88 (21)                                       | 84 (107)   | 0   | 0  |
| Education otherwise (pregnancy specific) | 0   | 0  | 2.5 (1)   | 13 (19)  |
| Education otherwise (generic)            | 0   | 0  | 9 (3)   | 10 (15)  |
| Not receiving any education              | 0   | 1 (1)  | 2.5 (1)   | 13 (19)  |
| College                                  |   |  | 6 (2)   | 5 (7)  |
| <b>Total</b>                             | 100 (n=27)                                    | 100 (n=127)  | 100 (n=34)  | 100 (n=148)  |

What is also interesting when considering the Table above, is the notably higher proportion of school-refusers in the non-unit areas in comparison to the unit

areas. This and previous research (Selman et al. 2001; Hosie 2002) has highlighted that the prior attendance of those attending specialist units is poor, in comparison to those attending mainstream school. In other words, specialist units are providing an education location for some of the most disaffected young women. This raises an interesting issue in relation to the question of what is 'inclusive' education, which is discussed in section 6.32.

#### *Workload and subject choices*

All of the young women were asked during the interviews about whether the number of subjects or type of qualifications they were taking pre-birth had changed post-birth. Forty-eight were studying for GCSEs, eight for a combination of GCSEs and GNVQs, five were studying for Key Stage Basic Skills (or equivalent), two would be GCSE candidates but were still in Year 9 and one was not doing any qualifications at that point.

Those who did not consider themselves to be doing what was the norm for their age group (i.e. GCSE or GNVQs in Year 10/11) offered a variety of explanations. These included: three who felt they had fallen too far behind, one of whom wanted to give up working towards qualifications, two wished to re-sit them the next year; one did not want to do exams at all. Two young women were asylum seekers, whose prior education was too basic for them to be entered for examinations. One young woman was not entered for exams at the appropriate time by her school.

It was also not uncommon to find that schools had not entered some young women for as many exams as they would like, as one young mother describes below:

*Well I'm ok with it I just wish the school would let me do what I want exam-wise, it shouldn't be their choice. If I don't do well I don't do well, but I'd like the chance. **Marianne, 16, Area H.***

For those undertaking GCSEs and GNVQs, the range of qualifications being sought was quite wide (Table 3.23). There were both similarities and differences of subject choice between educational locations. In the interview sample, the five young women doing GCSEs on home tuition studied between 3-10 GCSEs (average 7). The 20 young women doing GCSEs/GNVQs in a specialist unit also studied between 3-10 subjects, with an average of 6. The 23 doing

GCSEs/GNVQs in mainstream schools studied between 2-11 subjects, with an average of 7.5.

The proportion of women taking key subjects such as English and Maths was almost identical regardless of whether they were attending mainstream school or specialist units. Within mainstream school notably more young women took languages, Geography, History and more than one Science. Within specialist units considerably more young women took Food Technology and Citizenship. It is noteworthy that three-quarters of the young women attending specialist units chose to study child development, compared to less than a fifth in mainstream. This reflects the emphasis placed by many specialist provisions on preparation for motherhood as well as pursuing academic subjects. A number of the young women taking child development explained how their teachers had said they might as well get a qualification for learning what they needed to know about being a parent.

**Table 3.23: Range of subjects studied by the young mothers**

|                         |    |                       |    |
|-------------------------|----|-----------------------|----|
| GCSE English Literature | 50 | GCSE Geography        | 12 |
| GCSE English Language   | 55 | GCSE History          | 11 |
| GCSE Maths              | 53 | GCSE Travel & Tourism | 2  |
| GCSE 1 x Science        | 36 | GCSE Citizenship      | 6  |
| GCSE 2 x Science        | 10 | GCSE Consumer studies | 1  |
| GCSE 3 X Science        | 2  | GCSE RE               | 20 |
| GCSE French             | 17 | GCSE Child Dev.       | 25 |
| GCSE German             | 4  | GNVQ Health & Social  | 8  |
| GCSE Spanish            | 2  | GCSE Art              | 20 |
| GCSE IT                 | 8  | GCSE Music            | 1  |
| GNVQ IT                 | 2  | GCSE Textiles         | 4  |
| GCSE Technology         | 3  | GCSE Drama            | 7  |
| GCSE Business           | 2  | GCSE Food Tech.       | 10 |
| GCSE Law                | 1  | GCSE Other            | 8  |

On return to education post-birth, there were some changes in the number of subjects being pursued by the young women, as shown in Table 3.24 below. In every location a small proportion took fewer subjects post-birth than pre-birth. The highest consistency of subjects was within specialist units.

**Table 3.24: Change in number of subjects taken post-birth**

| Location        | Sat fewer subjects | Sat equal number of subjects | Sat more subjects | Total |
|-----------------|--------------------|------------------------------|-------------------|-------|
| Home Tuition    | 1                  | 4                            | 0                 | 5     |
| Specialist Unit | 2                  | 18                           | 0                 | 20    |
| School          | 6                  | 14                           | 2                 | 22    |
| <b>Total</b>    | 9                  | 36                           | 2                 | 47    |

**3.43 Decisions on Childcare**

All young women were asked about their childcare choices and decisions either in terms of what they would like (pregnant young women) or what they had used (mothers) as shown in Table 3.25 below.

Across all three samples there was a high use of on-site provision (36-41 per cent), including on-site provision in specialist units (most common), schools and colleges. About 10 per cent of the interview sample had chosen a nursery or crèche (6 per cent OBS), and the numbers of all other forms of provision were very low in all samples. Only a fifth of the currently pregnant young women expected to rely on family or friends, in comparison to almost a third of current school age mothers and half of post-school age mothers interviewed, (2/5<sup>ths</sup> of the OBS). Encouragingly only two post-school age mothers and none of the current school age samples had not had any childcare available, but 8 of the OBS said no childcare had been available.

**Table 3.25: Childcare choices of the pregnant young women and young mothers**

| Childcare choice  | SP | SM | PSM | Overall baseline sample |
|---|----|----|-----|-------------------------|
| Family/friend   | 5  | 10 | 12  | 130                     |
| Crèche/nursery  | 2  | 4  | 2   | 20                      |
| Childminder   | 2  | 1  | 0   | 12                      |
| Onsite Specialist unit/<br>college/ school              | 9  | 13 | 9   | 115                     |
| Family training to be<br>childminder                    | 1  | 0  | 0   | 8                       |
| Combination of family and<br>nursery or onsite facility | 2  | 2  | 0   | 10                      |
| None available  | 0  | 0  | 2   | 8                       |
| Don't want any  | 1  | 0  | 0   | 8                       |
| Baby in care/ adopted                                   | 0  | 1  | 0   | 6                       |
| Undecided   | 3  | 1  | 0   | 6                       |
| <b>Total</b>  | 25 | 32 | 25  | 323                     |

### **3.44 Influences on the decisions young women are making regarding education post-birth**

The previous section described the various decisions that young women had made regarding their education post-birth, including: timing and location of post-birth return, workload and subject choices and decisions about childcare. As with the decisions made during pregnancy, there are a variety of factors influencing the choices made post-birth, which are discussed below.

#### *Timing of return*

The young women were asked for their opinions about when they considered it to be a suitable time for mothers to return to school if they were pre 16. The majority of responses correlated strongly with the length of time the person responding had had off and whether they considered that to have been enough time for them. There were no differences between the three samples interviewed. Where a time was specified, the most common was 9-12 weeks. However, more than half of all the young women said that it should be the young woman's decision when she felt ready.

#### *Recovering from the birth*

How quickly a young women returns to education post-birth is dependent on a number of factors, some within her control others not. Those beyond the control of the young women include the difficulty and/or type of birth, including any post-birth complications with mother and/or child. Often, despite wanting to return as quickly as possible, many had underestimated how tired they would be post-birth, as one young mother notes below:

*I went back to school I think it was 6 weeks after she was born and home tuition for 2 weeks before that. But I think a few more weeks to recover would have been better. **Kelly, 15. Area J.***

Other factors beyond a young woman's control include the location she is returning to. For example, mainstream school or education other (generic) locations are not set up to deal with early post-birth returns. Six of the nine who stated that they wished that they could have returned sooner were prevented from doing so because of the school's requirement to have a 6-week post-natal check before returning.



*I wish I could have stayed at school for longer and gone back quicker, I just missed too much. I would have liked to have gone back earlier but I was told I had to wait for the 6-week post-natal check. **Louisa, 18, Area H.***

This was not the case in specialist provisions, because they are set up to deal with earlier returns. In general, as long as there had been no birth complications, young women could return as quickly as they desired to specialist units, often within two weeks of the birth.

### *Breastfeeding*

A desire to breast-feed was another reason for a very small number of women choosing to delay their return by a few months rather than weeks. This is a case where government policy to get young mothers to return to education clashes with desire to see more women in general breastfeeding. Unless the women are located on the same site as their childcare provision, there were serious impracticalities of combining breast-feeding and school. When asked about how long mothers should be able to have off post-birth one young mother noted:

*As long as it takes to get past the feeding part cause I breast-fed and it wouldn't be practical to go back while I was doing that. **Kerry, 16, Area G.***

Even when the young women did not like the idea of breast-feeding themselves, they could see the value of the onsite location making that an option, as one mother notes:

*Oh yes it's very good. You can have your baby with you and you know they'll look after it right and they come to get you if the baby cries too much or if he needs you and you can feed him, like if you want like, I didn't do it you know I put him on a bottle from the first but there is girls what breast feed yuk (squirms) and you can do that easy here **Abigayle, 16, Area E.***

### *Childcare*

Childcare, or lack of it, could potentially impact on the return schedule of a young mother to education, for a number of reasons. First, if affordable childcare is not available in a location that is reasonably close to the mother and her educational

location, a young woman may be prevented from returning to education at all, or to be delayed. Of the interview sample, 38 per cent chose their childcare because it was either on-site or located very close to where the young mother was being educated. A further 42 per cent stated that their primary reason for choosing the childcare they had was because it was available and acceptable.

Second, a large number of childcare providers will not take babies under a certain age (often one year to 18 months). Due to the fact that staff to child ratios have to be higher for younger babies, it is more expensive to provide and hence many places do not offer childcare for younger babies:

*Also I was quite lucky with childcare but if I hadn't had my family I don't know how I would have coped, I don't know if I would have gone back to college without that support. Definitely not at first because most college nurseries won't take them till they are 18 months. **Amber, 18, Area G.***

A young woman's happiness with the childcare available to her is often a key factor in her willingness to return to education and the speed at which she does so. As with any new mother, a number of young women (especially in the SP sample) did not want to leave their child with anyone but family. Others were only happy to have their babies near them. They would be unwilling to return to education if those types of childcare were not available to them. Therefore, onsite facilities provide an excellent support to assist young women to return to education with a minimum of delay. Childcare facilities in specialist units (and in some school and college sites) are often set up to take younger babies. This is reflected by the fact that young women returned to mainstream school on average after 9.5 weeks, compared to 5.5 weeks for those on home tuition and only 3.5 weeks for those in specialist units.

School aged mothers are aware of the public perception of them as having failed educationally and 'ruined' their lives. They face criticism for being too young to be good mothers but equally they are criticised if they stay at home to look after their child, and don't finish their education. Whilst these young women are 'pupils' rather than 'workers', it is crucial to remember that they are also mothers and like any working mother, they face the guilt of leaving their babies with strangers. The main reason offered by women who had wanted to delay returning post-birth was that they wanted more time with their child. In the case

of the young mother below, starting home tuition again was not problematic, but returning to school and not being with her baby was:

*I started home tuition after a few weeks, that was fine, and then after about 9 weeks I went back to school. I did want to go back to school, like I wanted to be seeing me friends as well, but it was hard because I didn't want to leave the baby. **Katie, 16, Area J.***

This issue was generally confined to those attending mainstream school or generic education other, because generally, those locations did not have on-site childcare. A number of the women attending specialist units stated that the on-site childcare allowed them to successfully combine the roles of mother and pupil and focus on their studies.

*It was good because it was here and you could check on your child when you wanted to if they were with a child minder or another nursery you wouldn't have that contact so it meant you could build a relationship with them but still be at school. **Laura, 19, Area F.***

*I'm not sure, perhaps I would have her in another nursery but I would not focus on my work I don't think, I would still come but I think my brain would be elsewhere wondering if she was ok. **Jay, 15, Area F.***

Due to the unique on-site location, the young women in specialist units have the time, while they are pregnant, to get to know the people who will provide their childcare. This normalisation of a certain type of childcare could potentially be used for any form of childcare, as has been achieved with childminders in Fife (Raymond 2003). As one young mother notes below:

*I was really happy with it. Because I'd met all the nursery nurses when I was pregnant, so I got on with them all really well, so I was confident about leaving her there. I like, wouldn't want to leave her at a proper nursery. I'm fine with the one in [specialist unit], but I wouldn't leave her at nursery where I had to go and pick her up or anything. I just wouldn't want to, I'm not sure about leaving her with people that are far away from me. I wouldn't leave her with someone other than [specialist unit] or family. **Hayley, 15, Area F.***

### *Availability of educational location post-birth*

There were different patterns and degrees of success in relation to reintegration post-birth in the different LEAs, and a range of key influences on where a young mother will go in order to continue her education.

Not all educational locations used during pregnancy, were meant as long-term alternatives. For example, the specialist units in one LEA were devised to provide an alternative for maternity, with a view to mainstream reintegration between 6-12 weeks post-birth. Similarly, in another area, with pregnancy specific education other, which included college, laptop learning and learning centres, emphasis is placed on reintegration into mainstream post-birth (at least part-time), particularly for those who are aspiring to achieve GCSE or GNVQ qualifications. Although this was officially the case in these areas, where reintegration to mainstream school had failed, unit teachers would sometimes agree to take pupils back if it meant that they would not otherwise continue their education at all. As one young mother describes below:

*Well the teachers at the unit were helpful in trying to get me back into school, but I just didn't feel able to cope, as I was tired all the time. Back at school it was full time and too much, I couldn't cope so I came back here and I came back to the unit and it was 4 days, 2 hours each day. So even although I wasn't meant to they let me come back to the unit.*

**Marianne, 16, Area H.**

A small number of young women who had not opted to move to an alternative during pregnancy found that post-birth, this was an option they wanted to take up. For some, it was because they were not coping at school and for others, it was a result of fear of bullying, as one young mother who moved to an alternative post-birth describes below:

*I didn't want people to be saying things, and I was scared to go back, didn't want to, not yet... Marie, 14, Area B.*

### *Cost of childcare*

The Standards Fund Grant was set up to facilitate the breakdown of barriers to young mothers returning to education. In many LEAs the fund has been used to pay for childcare. In two non-Standards Fund LEAs, where free or low cost childcare was not so readily available, the cost of childcare presented a barrier to

a small number of women, (although this should no longer occur with the advent of Care to Learn). As one young mother describes below:

*The teacher from the VTS and the young women's project helped too.*

**Interviewer:** *What did they do?*

*They made lots of phone calls about childcare and found out where my expenses would come from cause I couldn't afford to pay for anything, I got no income support because of my age so I was really stuck. She tried everything but the [Area C tuition service] could only cover my time in this building no-one else would support my childcare needs for college.*

**Interviewer** *Are you happy there?*

*Well yes I am but I would rather be at college. I had no money for childcare and all my family and his relatives work. [Area C tuition service] could only pay for the childcare when I was here they couldn't cover the college and no-one else would pay for it. **Lucy, 15, Area C.***

In one of these LEAs it was relatively common for schools to have onsite nurseries for staff because of the rural nature of the area. For a couple of other young mothers, however, although childcare was located on-site at school, there were no discounted places for pupils and so they could not afford to use this provision.

The cost of transport to and from childcare, where it is not available on-site, was an additional barrier to returning to school.

#### *Failed reintegration to mainstream school*

Young women who had remained in school during pregnancy, even though they felt the school to have been unsupportive, or who had experienced a lack of support or bullying from peers, were more likely to take the opportunity to move post-birth. There were also young women who found that promised post-birth support from the school failed to materialise in reality. For some this meant continuing at school was not an option and they changed their location. As one young mother notes below:

*It took them ages to sort out the reduced timetable cause when I went back I was still there full time. At school I was not very happy, I wanted to have shorter days and [reintegration officer] come in with me to talk to me head of year and I just said I didn't want to be in school all the time,*

*but that was after she was born. But she said I could go home a little bit early but she always tried to keep me there longer deliberately, she would oh just do this or that, so I didn't really get to leave early. I didn't really like going, so I went for a couple of weeks and then I'd be off a few days and then go, and then be off, and then go, and then be off and then.... I think I stayed for just over 5 weeks and then I did nothing, I just stayed at home with the baby. The school said they were going to de-register me...*

**Reintegration officer** – *and we tried hard to sort that out and finally it had to go before a panel and they said that the LEA would fund her to the [alternate non-school] course, which she started this week.*

*Yes. It's good to be there now, the computer course is good, hair and beauty [teacher] is an older women, and I'm like blow drying hair and stuff, I've only been there once and I was just like sat there not quite sure what to do, but I'm going back next week. And I'm doing maths as well. I'll do the hair and beauty for 5 weeks and the other courses for 9-10 weeks. **Katie, 16, Area J.***

A number of young women, however, were determined to prove the school's attitudes wrong. The school's attitude was exactly what made this young mother determined to return and to do well.

*Well they didn't really ask me about my plans too much after the first talk because I really don't think they expected me to come back, because the other two people that had had babies [at this school] didn't go back. I think that actually made me more determined to go back, the fact that they thought I would just give up. **Sarah, 16, Area G.***

Reintegration to mainstream also sometimes failed because some young mothers found being away from their child too difficult. Some schools were, however, understanding of this and helped to rearrange alternative forms of education instead, as one young mother describes below:

*My head of year kept encouraging me to go back to school but I was really reluctant to go back. She would offer me free periods in school and like she arranged for me to be able to come in later so I could drop him off at nursery and that but I just didn't really want to leave him. I'm happy*

*now, the school was good but I really didn't want to leave him to go to school, so I am happier here [on home tuition] now. **Ann, 16, Area C.***

It was rare to have fathers of the babies in the same school as the mother. However, where they were, if it was problematic in pregnancy, it remained so post-birth, as one young mother describes:

*Just his being there at the school, and the problems that caused and the fact that it is me that has to move. Because of the problems with the father I am out of school at the moment but [reintegration officer] is helping me to get into another school for the start of year 10. I wanted to be at school, it was just hard with him there. It will be good when I change school. **Fred, 14, Area D.***

#### *Satisfaction during pregnancy and encouragement to return*

As might be expected, where a mother had been supported during pregnancy she was more likely to wish to return to that establishment post-birth. This was equally true of schools and other locations, but more common amongst the specialist units. The very great degree of satisfaction with specialist units meant that mothers who had very poor attendance prior to pregnancy frequently chose to return to the unit post-birth, even once they reached statutory school leaving age.

The levels to which the young women were satisfied with educational support provided during pregnancy and maternity varied notably. The highest level of perceived support was provided by specialist units and the least support overall was provided by mainstream schools. This was particularly noted by young women who had moved to an alternative for their pregnancy with a view to possibly returning to school. The few who had maintained contact with their school, through home visits and work being brought to the young mothers and marked, expressed a desire to return to their mainstream school when their maternity period was over.

The young women were asked whether or not anyone had asked them about their education plans for after the birth. About 20 per cent stated that no-one had talked to them. However, half of those were currently pregnant and may have been consulted at a later stage.

What can be seen clearly from this interview data is that there was a wide range of agencies involved in the process of consultation with pregnant young women about their educational plans. The most common, however, were teachers within alternative provision (most commonly specialist units) and reintegration officers. This is followed next by schoolteachers and careers officers or Connexions PAs. Only one young woman attending a specialist unit had not received any consultation at the point of interview. The majority of young women at units were spoken to either by a teacher at the unit or their reintegration officer.

The highest proportion of those receiving no consultation were attending mainstream school, (the remainder receiving no consultation were evenly spread across the other locations). Almost half of those consulted in mainstream school had talked with their reintegration officer. The next most likely professional to consult them was a schoolteacher. Only one was consulted by a Sure Start Plus worker (although only five of the ten LEAs in the study were Sure Start Plus pilots). For those in education other pregnancy specific locations the majority were consulted again either by their reintegration officer or a schoolteacher.

Broadly where mothers were happy with the level of work support they had received during pregnancy, this continued post-birth, and generally encouraged the young women to return to the same location. Overall, 86 per cent of the young mothers interviewed stated that they were happy with the plans that they had made for their post-birth education. Only 2 per cent were not at all happy and a further 12 per cent thought that their plans were ok, but they would rather be doing something different. A range of reasons was offered for this dissatisfaction, including a desire for more subjects; a fuller timetable; more help to catch up or to move to a different location (college or specialist unit).

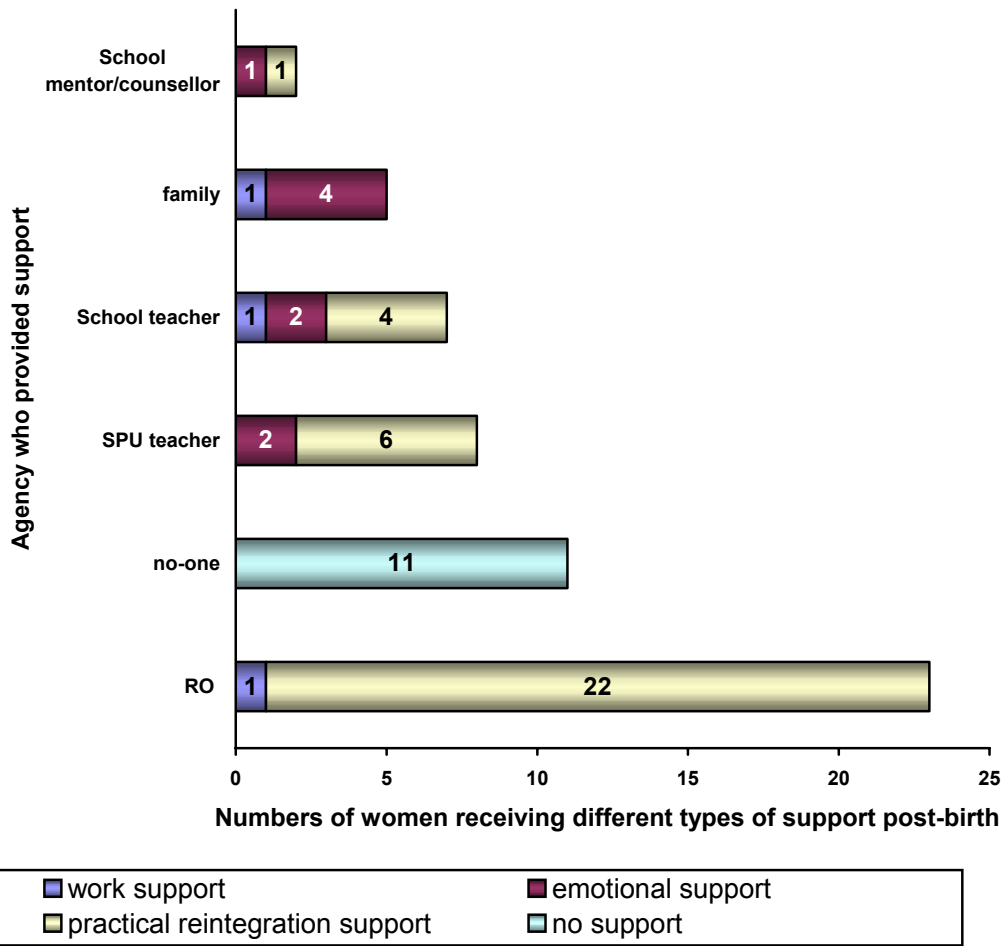
The level of support and encouragement a young woman received to return to her pre-birth location also appeared to have a significant impact on a young woman's willingness to return. Forty-nine young women responded to questioning about their post-birth support to return to education. Figure 3.4 below highlights who the young women stated had offered them the most support (some offered more than one individual) and the type of support<sup>27</sup> they felt they had received.

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<sup>27</sup> Reference to practical reintegration support covers a range of things, such as organising childcare and/or transport and acting as an advocate, often between mother and school.



**Figure 3.4: Types of support offered by key professionals to help return to education post-birth**



Practical reintegration support, support that helped the young women return to education, was the most common form of support, mentioned by 33 women, and it was generally provided by reintegration officers. As one young mother describes below:

*Well [reintegration officer] got me back into school, to be honest if she hadn't contacted us I would never have gone back. She arranged the transport and she offered me childcare but my mum was happy to do that and she worked with the school to sort out the special arrangements for me. **Sam, 16, Area D.***

Emotional support was also mentioned, coming from both family and teachers. 11 young women felt they had received no support at all.

Young women were asked separately and specifically if they had received help to organise childcare. Ten of the young women stated that no-one had helped them. When helped, it was commonly by reintegration officers (21), teachers at a specialist unit (13) or family (9). The remaining seven received support from a range of agencies including: Sure Start, social work, home tutor service, learning mentors, teachers at education other (generic). Only one young mother received help from a schoolteacher.

A number of young women noted that they really felt that their educational location wanted them to return, and had made special preparations. In turn this fostered a strong desire to go back. As the following young women explain:

*Everyone talked to me, [reintegration officer], really and the teachers at [secondary school] they all asked what I wanted to do too. I felt they really wanted me to go back there, that was nice. **Sarah, 15, Area B.***

*They'd (SPU teacher & reintegration officer] set it all up for me to come back so I didn't need any help. **Helen, 16, Area A.***

This was important in particular for young women who did not have an extremely strong desire to continue their education. If all the barriers are removed, it makes it more difficult to turn the opportunity down. The fact that the young women now had children to consider was a strong influence on their decision to re-engage with education. The increased incentive to get an education during pregnancy continued for most young women into the post-birth phase, in every type of educational location. The post-birth attendance levels of the young mothers are explored in more depth in Section 3.45.

#### *Work load and subjects choices*

As was the case with pregnant young women, the young mothers were often offered the opportunity to change their timetables in order to help catch up on certain subjects, or to ease the transition. This was undoubtedly an influence on a woman's willingness and ability to manage school workloads post-birth.

Mothers in specialist units were, on average, taking fewer GCSEs during their pregnancy than those in mainstream school or on home tuition. They were, however, more consistent with their choice post-birth, than those on home tuition

or in mainstream, who tended to drop some GCSE subjects in order to manage once they returned to school.

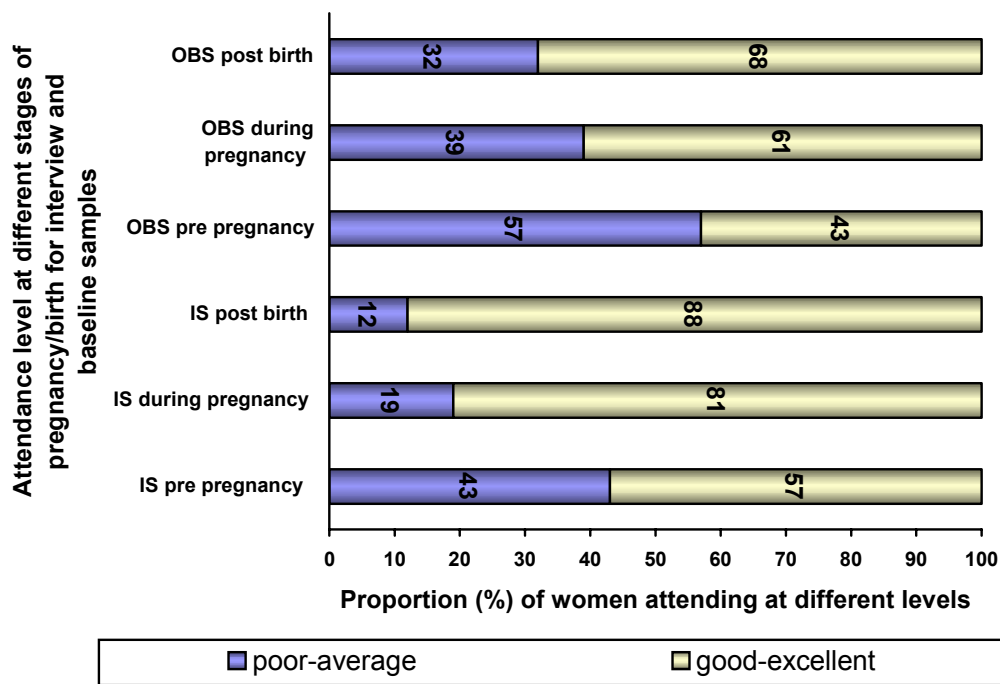
### 3.45 The success of decisions young women are making regarding education post-birth

This section explores the success of the decisions made by the young women in relation to their education post-birth. As was highlighted earlier, success can be defined in many ways and therefore although discussion begins with attendance and attainment, it is not confined only to these two aspects.

#### *Attendance post-birth*

The pattern that appears to have developed within both the interview and overall baseline samples (although less dramatic for the latter) is one where pregnancy has, for a variety of reasons, triggered a significant improvement in attendance. This improvement is then for the most part maintained through pregnancy and the post-birth phase of compulsory education. Figure 3.5 highlights these patterns below.

**Figure 3.5: Change in attendance from pre-pregnancy to post-birth for the interview and overall baseline samples**



A mother's attendance post-birth is conditioned by a range of issues including her recovery from the birth, the health and well being of her baby, transport and childcare. Nevertheless, post-birth attendance was generally reported to be good and the majority of women maintained the increased level of attendance that they had achieved during pregnancy.

For the interview sample a large proportion of the attendance levels remained either good or excellent. Overall 37 out of 50 mothers stated that their attendance had remained the same post-birth as during their pregnancy, six stated that it was worse and seven better. The only poor attendance levels of the educational locations were in mainstream school. This is particularly interesting in light of the fact that 40 out of 56 women attending educational locations other than school (combined) had been poor-average attendees prior to pregnancy, compared to only 8 out of 29 in mainstream schools.

Perhaps of most concern within the post-birth attending-mainstream figures were those who were classed by their school (according to their reintegration officer) as successfully re-integrated back from home tuition or specialist provisions into mainstream. Although this was only the case for a small number of young women (3), these young mothers stated that their attendance at school had been poor post-birth, but had previously risen to good or excellent at a non-school location during pregnancy. In this respect, reintegration into mainstream could not be classed as a success if it resulted in poorer attendance.

The patterns for the overall baseline sample were similar in terms of the maintenance of better attendance than pre-pregnancy. However, overall there were higher proportions of poor-average attendees in each location. Within the baseline, however, the overall change in attendance from during pregnancy to post-birth was not notably different from the interview sample. In the baseline 150 young women maintained their attendance levels, 35 stated they had become worse and 55 stated that they had improved.

Unlike the interview sample, where poor-average post-birth attendance was confined to mainstream school, in the baseline sample all locations had some whose attendance was poor-average. The proportions of poor attendees at the specialist units, however, were considerably lower than for other locations.

### *Increased interest or belief in education*

A major influence on many pregnant young women's willingness to continue in education during their pregnancy was a changed belief in the importance of education. On the whole, this was also maintained through the post-birth phase. Most mothers agreed that they felt education was more important than they had believed prior to pregnancy. For the majority this realisation occurred at the point of pregnancy. For some, however, it did not occur until after the birth. Their explanations for the change in how they felt about education and its importance in their lives were, however, very similar to those made by the pregnant young women in the same way. As two of young mothers note below:

*I just know now, it's not about you, it's about my son. It's not so much anything else, but I've got to do it for him. I want to finish my courses and then I want to start work but I don't know what I want to do yet. I don't want to stay on the social for the rest of my life. **Tella 16, Area F.***

*Yes, it's so important and becoming a mum has made me wish I'd not skived off the way I did. I'm not skiving school now! I want to come and get some GCSEs and then get a job for him to be proud of me you know. **Lucy, 15, Area F.***

### *Development of longer term plans*

For a number of mothers, success could be measured by the fact that they not only had an increased interest in education but also were making future plans. For some this included considering a wider variety of jobs than they might otherwise have thought themselves capable of, as Kate, quoted below explains:

*Yeah, I wanted to be a hairdresser, now I want to do more than that, not that's not a good thing to do, but I want to do more than that, aim higher... now, I'll finish my exams and go to college, so I've got the forms to fill in now. The course is only three days a week so I should be able to cope with that. And me mum's still able to provide the childcare. **Kate, 16, Area J.***

Table 3.26 below shows the variety of jobs that the young women stated they wished to pursue.

**Table 3.26: Job interests of the young mothers in the interview sample**

| <b>Job Interests</b>              | <b>Frequency</b> |
|-----------------------------------|------------------|
| <b>Midwife</b>                    | 8                |
| <b>Childcare (nursery/crèche)</b> | 7                |
| <b>Hairdresser</b>                | 4                |
| <b>Youth worker</b>               | 3                |
| <b>Travel rep</b>                 | 3                |
| <b>Police</b>                     | 2                |
| <b>Early years Educator</b>       | 2                |
| <b>Teacher</b>                    | 2                |
| <b>IT consultant</b>              | 2                |
| <b>Model</b>                      | 2                |
| <b>Solicitor</b>                  | 2                |
| <b>Journalist</b>                 | 2                |
| <b>Crime Scene Investigator</b>   | 1                |
| <b>Dance Teacher</b>              | 1                |
| <b>Florist</b>                    | 1                |
| <b>Bar manager</b>                | 1                |

A high proportion had developed an interest in jobs relating to children and babies, which they would not previously have considered.

*Well after I finish this course I would like to do a nursing course, because I would like to become a midwife... you do a 2-year course to get onto the main course and there is a special midwifery course as well. I think just having kids, it just seems really interesting. Before I had kids it only crossed my mind as job I wouldn't be interested in, but now, well, I think it would be good. **Heather, 18, Area G.***

Broadly the majority of plans for employment involved further education prior to gaining a job. Encouragingly for the government strategy to increase participation, a high proportion of those women who were pregnant as well as mothers had a desire to continue their education post-16. Only 3 of the 28 pregnant young women had decided that they did not wish to continue (all 3 wanted to take up employment straightaway). A further 8 wanted some time out before returning and 17 were keen to continue immediately after they finished compulsory education. Of those who were current mothers in compulsory education, 2 out of the 32 who responded to this question wanted to be full-time mothers and a further 2 wanted to be in employment or take up an apprenticeship.

The remaining 28 wanted to be in some form of education such as 6<sup>th</sup> form alternative SPU, 6<sup>th</sup> form college or FE college.

Therefore, a very high proportion (over 4/5ths of all samples) wished to continue in education as opposed to employment in the first instance. This has important policy implications because although many barriers to post-16 education are now being tackled more effectively, some still remain. This issue will be returned to later in Chapter 6.

#### *Attainment post-birth*

Only post-statutory mothers had actually taken their exams and could provide results to be quantified for this section. The baseline sample could only provide results for 194 women out of 307. There could be a variety of reasons for the missing cases, including young women who did not enter or sit exams, or who sat and failed their exams, or were undertaking Key stage or Basic skills work (or equivalents) rather than GCSEs and/or GNVQs; or results may not have been available when those who provided the information for each LEA had to pass their baseline data to the research team. We know that all the young women who sat their GNVQ in Health and Social Care passed that qualification, but as this is not a GCSE examination no point grades were provided and the results are not included in the following statistics. As a result, any conclusions drawn from these results should be regarded with caution.

We report here on the results for those young women who we know sat their GCSEs in the academic year 2002-3. For 27 of the 30 post-statutory mothers in the interview sample who stated that they had taken some GCSEs, the overall grade point ranged from 4 to 61. The average (mean) was 31, which would equate overall to 5 GCSEs at A-C. When these figures are averaged by post-birth educational location, they were very similar for all locations, with 33 for those at school, 27 for those at specialist units and 27 at education other (combined). Therefore the difference between those within mainstream and other locations is equivalent to one grade B examination.

Within the baseline data information that was available, the overall grade point ranged from 0 to 61. The average in this case was 24 overall, which would equate to either 3 GCSEs at A-C or 5 at A-D. In this instance the breakdown by education location was 26 points in mainstream school, 25 for those attending specialist units, and 16 for those at education other (combined). If this latter

figure is broken down to different sorts of provision, there are similar results for home tuition and education other (pregnancy specific) at 20 points. It was the relatively poor success within education other (generic) at 9 that brought the average down to 16.

### **3.46 Explanations behind the success of decisions young women are making regarding education post-birth**

A great deal of the discussion below focuses on the levels of attendance in and attempt to understand what it was that encouraged most young mothers to maintain, post-birth, the high levels of attendance witnessed during pregnancy. Attention then focuses on exploring the changed attitudes to education and finally with academic attainment.

#### *Maintenance and changes to attendance levels*

A key factor in willingness to attend education is the level of overall happiness expressed by the young mothers with their post-birth education. On the whole, three-quarters of mothers (38) were very satisfied with their educational experience post-birth and a further 8 stated that they were happy most of the time. Only 4 expressed unhappiness with their education and as Figure 3.6 below shows, they were within mainstream school.

Reasons for this, often new found satisfaction with education were varied as presented below.

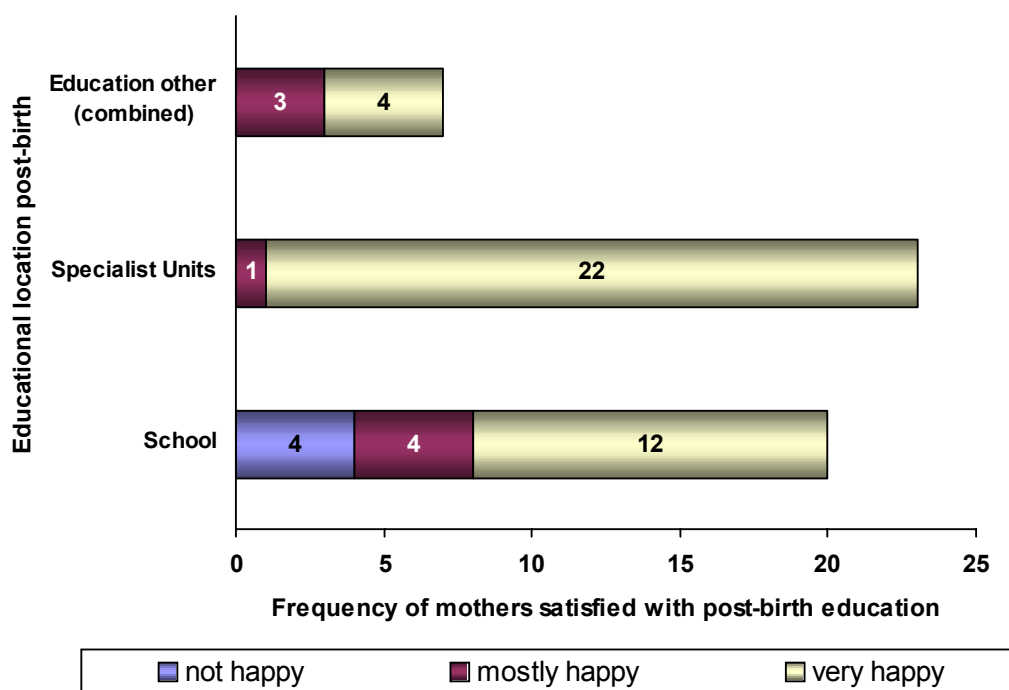
#### *Transport*

In order to keep attendance levels high, young mothers need to be able to get to their educational location with relative ease. The problems related to the location of specialist units and transport, experienced during pregnancy remained post-birth, but there was a range of other transport related issues that were new to the post-birth phase.

Those young women who did not use family as their childcare usually had to take their child to their childcare provision before going on to their educational location. Where childcare was not onsite, or at least, very close to the educational location, young women had to negotiate public transport with their child. For some the fact that their homes, childcare and educational locations were far apart was a barrier to full attendance.



**Figure 3.6: Young mothers' expressed happiness with their educational location**



Most of the young women using public buses had pushchairs, and often found that the buses were not low-liners and therefore presented access difficulties. In addition, they complained about lack of seats at peak times, when they were trying to get to school on time.

Twenty-one of the mothers were provided with taxis to enable them to attend their education. Paradoxically, many of those using taxis or the school (mini)buses, first had to be able to afford a car seat to transport their child in. This was an additional expense many could not afford without the help of reintegration officers. Reintegration officers also often helped to arrange transport for those who had missed their morning lift because of hospital appointments or sick children as one mother describes below.

*If I was late because he'd had me up all night [reintegration officer] would come and pick us up and take us to school [specialist unit] late. **Michelle, 17, Area A.***

The importance of transport for successful continuation in education post-birth is highlighted by the fact that 40 per cent of the mothers stated that not having the transport they did would have meant they would either not be able to attend at all, or their attendance would not be as frequent, as two young mothers describe below:

**Interview:** *How do you get to the school/ education you attend?*

*The minibus*

**Interview:** *If you did not have that transport, how would you attend?*

*Well it would be hard, cause I live quite a bit away and to bring one of the babies [twins] here by myself that would be hard. I'm sure I could find a bus, but it would be really hard. Sarah, 15, Area A.*

**Interview:** *How do you get to the school/ education you attend?*

*I still get a taxi.*

**Interview:** *If you did not have that transport, how would you attend?*

*It would be so much more difficult, two buses and if I've been up with the baby, can you imagine? I think I'd just go back to bed some days. Sarah, 15, Area B.*

#### *Childcare*

Childcare is one of the greatest potential barriers to education for young mothers. For some affordability and availability of suitable childcare remains an issue. This problem has been alleviated somewhat in some LEAs since the introduction of the Standards Fund Grant: Teenage pregnancy (continued through the Vulnerable Children Grant) from April 2003 in all LEAs and from 1<sup>st</sup> August 2004, *Care to Learn* for pre-16s.

Nevertheless a major barrier remains in that young women, ever conscious of their role as mothers, find it difficult to trust someone else to look after their children. Therefore, one of the most common reasons for young women appreciating the on-site provisions at specialist units (and some schools and colleges) was that it allowed their child to be located very close to them. It also allowed them to be mothers as well (and breast feed if they chose to) as one mother states below:

*It was great, you did a few lessons then lunch and you'd see your baby and feed them and then a few lessons and then home. It was more relaxed, less stressed and I liked it. **Laura, 19, Area F.***

The majority of young mothers used either an onsite facility or their family as their main childcare provision (22 each), with 6 in a crèche or nursery, and only one or two in other categories of care.

Overall, there was no difference in attendance levels of the young mothers by childcare location. This is perhaps reflected by the very high levels of satisfaction expressed by the young mothers for their childcare, which, no doubt, goes some way to explaining the maintenance of high attendance levels post-birth.

The young mothers were also asked what they would have done about childcare had their first choice not been available. The results of this question are presented in Table 3.27 below. As can be seen from the table, the majority of mothers would either not have been able to, or would not have wanted to attend education, if their first choice of childcare was not available. Almost four-fifths of those using on-site provision stated that they would not want to attend if that provision was not available.

**Table 3.27: Childcare choice if 1st choice not available**

| <b>2<sup>nd</sup> choice childcare</b> | <b>Total</b> |
|--|--------------|
| <b>Would not be able to attend</b>     | 20           |
| <b>Would not want to attend</b>        | 13           |
| <b>Would take anything available</b>   | 11           |
| <b>Crèche/nursery</b>                  | 4            |
| <b>Onsite Specialist unit</b>          | 3            |
| <b>Don't know</b>                      | 2            |
| <b>Family/friend</b>                   | 1            |
| <b>Total</b>                           | 53           |

*Timetabling and educational provision*

Another reason for the success in maintaining high attendance post-birth was changes to timetables. The number of hours of education mothers received each week, and their satisfaction with the amount of time and level of work differed

depending on the type of establishment they attended post-birth. Table 3.28 highlights mothers' satisfaction with what was expected of them.

**Table 3.28: Educational provision per week by location post-birth**

| Location during pregnancy<br>(no. of young mothers) | Average number of<br>hours per week | Satisfied with<br>amount of<br>provision | Satisfied with<br>amount<br>of work |
|---|-------------------------------------|--|-------------------------------------|
| <b>Specialist unit</b> (23)                         | 23                                  | 20                                       | 22                                  |
| <b>School</b> (20)                                  | 21                                  | 16                                       | 17                                  |
| <b>Education otherwise (combined)</b><br>(7)        | 11                                  | 5  | 5                                   |

The average (mean) number of hours for all locations was 18 hours, which was less than during pregnancy. The highest level of satisfaction with the amount of provision and workload was within the specialist units, as it was during pregnancy. Encouragingly, however, the slight drop in satisfaction is due to a small number of young mothers who wanted more time in education, rather than less, as might have been expected.

Only a small number of women in mainstream education were able to reduce their timetables if they had not already done so during pregnancy. However, when they were allowed to, although they were in school full time, they were happier post-birth because they had finally been allowed to drop subjects in order to focus on others, as one young mother describes:

*Well not when I was pregnant but when I came back I was allowed to stop Spanish so I wasn't full time so I could catch up with the other subjects. I dropped Spanish so I was in full time and did extra work in those lessons that I would have done Spanish to catch up. Being able to drop Spanish so I could do the extra work in those lessons, meant I could catch up. **Kate, 16, Area J.***

There were still some young women, however, who were not allowed to decrease their timetable, and this did affect their satisfaction levels with school and their attendance overall post-birth.

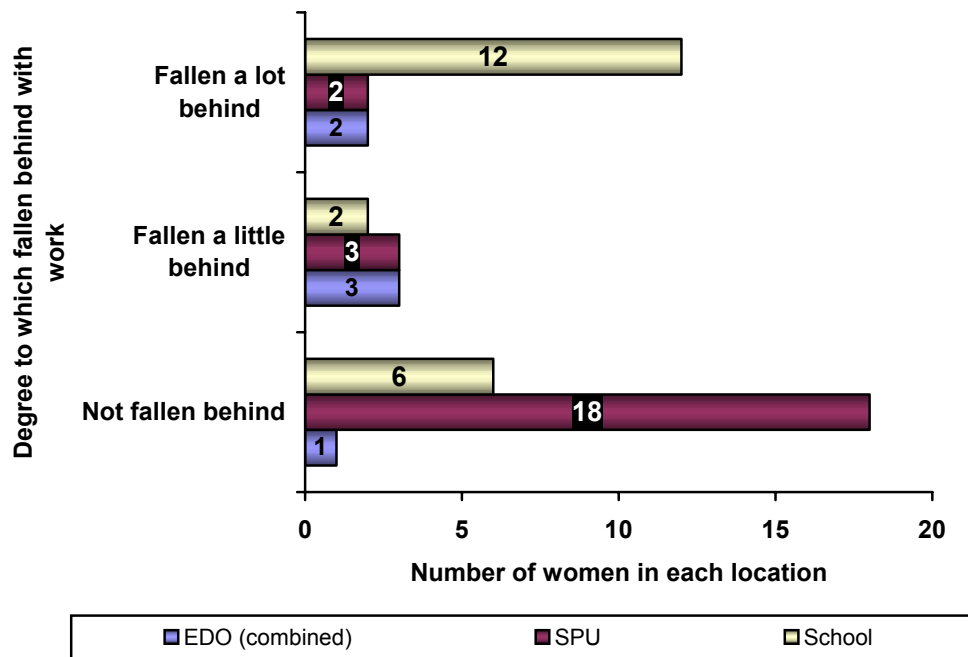
For those attending education other (combined) the satisfaction levels with provision overall (general happiness with location) and workload post-birth were almost identical (72 per cent and 76 per cent respectively). This is perhaps

explained by the lack of change in the levels of provision or workload from pre-birth. The only dissatisfaction that did arise was from two young mothers who now wanted more time and more work. For some of these young women adjusting to the pregnancy had not been easy and at that point less time was a positive thing. Now, however, especially for those wanting to pursue their exams, there did not appear to be enough support. One young mother took it upon herself to turn up at her student support unit early and stay for an extra few hours each day to give herself the time, but not all were able to do this.

*More work support*

The young mothers were asked if they felt that they had fallen behind during their maternity period, and if so what levels of help they had received to catch up. Unlike the pre-birth statistics, post-birth there were differences both in the proportions who had fallen behind and the amount of help provided post-birth to help catch up. The majority of young women who attended alternatives other than a specialist unit during maternity felt that on return post-birth they had fallen behind, as is shown in Figure 3.7 below. Most striking perhaps are the numbers of young women who had fallen behind 'a lot' in schools. Those attending a specialist unit through the maternity period were the most likely to return feeling that they had not fallen behind at all.

**Figure 3.7: Numbers of young mothers falling behind with work over maternity period**

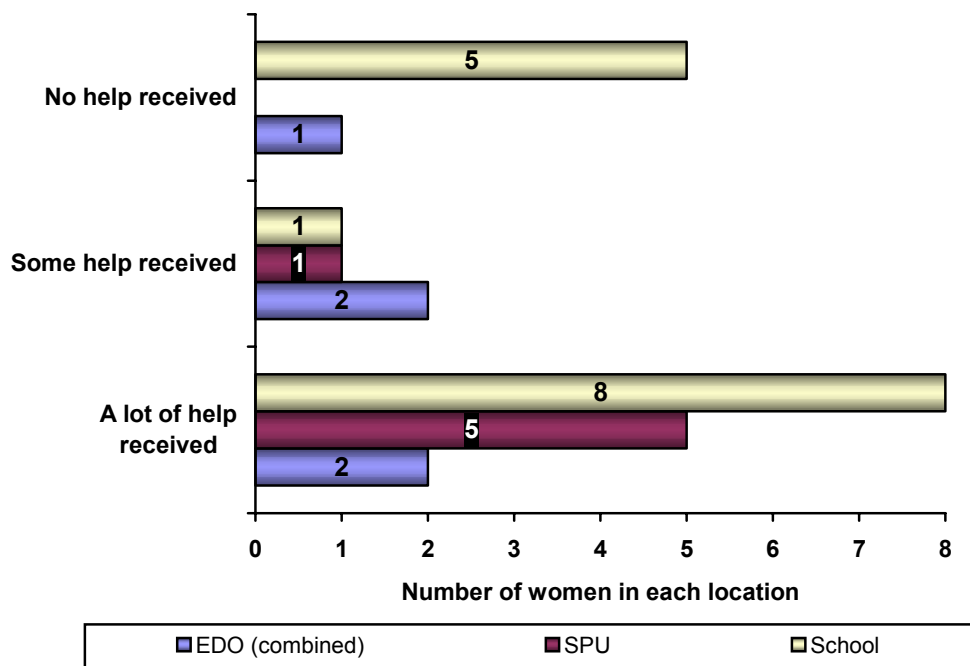


In terms of help on return, again only the specialist unit could be seen to be providing the support required by young women as noted by two young mothers and Figure 3,9 below:

*The teachers were great, they gave me the most important stuff, they didn't give me stuff I already knew. **Hayley, 15, Area F.***

*Teachers would give you extra lessons if you asked or if they thought you needed it they would offer. And the teachers had asked if I wanted to take work home with me as well, which I had so that was fine. **Jay, 15, Area F.***

**Figure 3.8: Levels of work-support provision during post-birth to help young mothers**

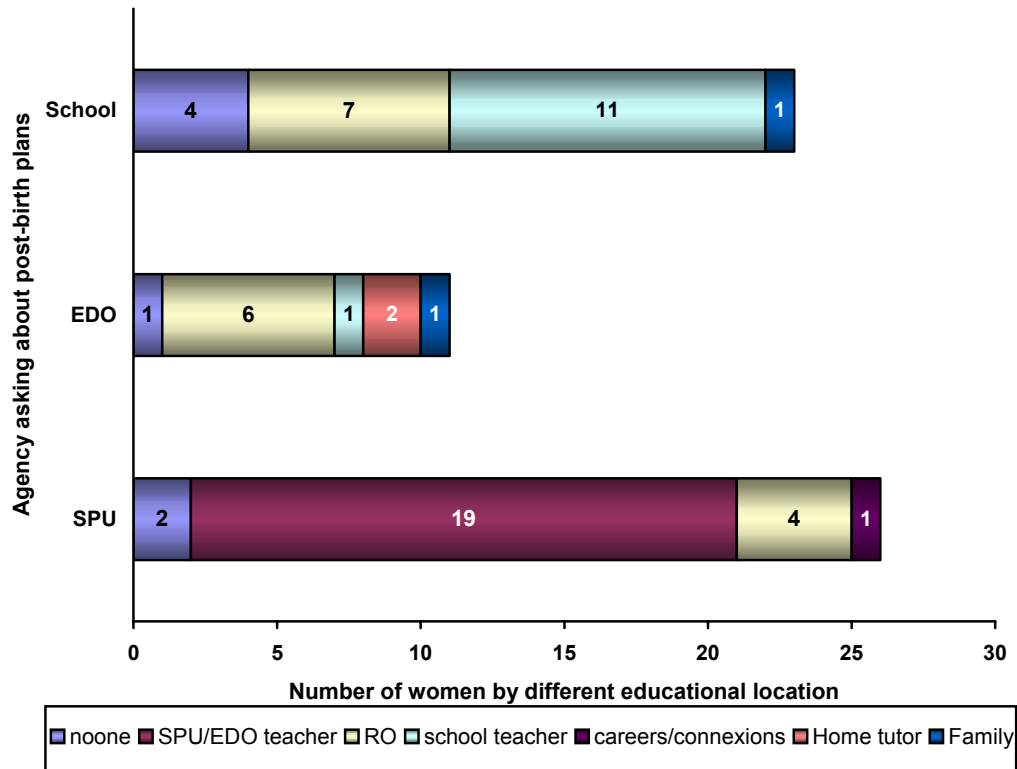


*Consultation over post-birth education plans*

The young women valued being asked about what they wanted to do, what subjects they wanted to choose, or what timetable they wished to follow. It often made young women happier about attending as they believed they were in control of their own choices.

Not all young women were consulted or advised, however, about post birth plans for education, prior to birth. Figure 3.9 below, shows the numbers of young women who stated that they had been consulted about their education post birth, by whom and by their location post-birth<sup>28</sup>.

**Figure 3.9: Number of young women asked about their post-birth education plans, by location post-birth**



More young women were consulted about their post birth plans than had been about their pre-birth plans. However, the lowest proportion to be consulted were again were in mainstream school. The proportions being consulted by a reintegration officer or schoolteacher remained almost identical to the pre-birth figures. Young women attending a specialist unit were most likely to be consulted by a teacher at their unit, with only a small number having been consulted by the reintegration officer. This perhaps reflects the decreased need for reintegration officer help once a young woman has been fully integrated into a specialist unit environment.

<sup>28</sup>The overall numbers represented here are higher than the number of young women who responded because 15 young women stated that two agencies had helped them, usually school teacher/ unit teacher and reintegration officer. Each has therefore been counted separately.

All but one of the mothers in post-birth education other (combined) were supported, however, the numbers were quite low. The majority were supported by a reintegration officer (or equivalent) and the remainder by their home tutor, schoolteacher or family as one young mother notes below:

*Just before I went back I met with the school to talk about what I would do. They asked me what I wanted to do and [reintegration mentor] acted as an advocate for me. The childcare was very difficult to sort out and [reintegration mentor] helped with that. **Courtney, 16, Area I.***

#### *Equal investment*

During their interviews a number of young women talked about the tremendous support they had received from different individuals. For some, having received this level of support often made them feel obliged to give something back, and in turn, because they were willing to work hard, they received further support. As one young mother explains below:

*The teachers at school were really helpful with catching up. I think because I showed I really was willing to work hard they could see that and they put the work in too. **Liz, 18, Area H.***

#### *Something to prove*

Some young women expressed the need, during pregnancy, to prove people's negative perceptions of them wrong. They wanted to prove that they could become mothers who were responsible for their children *and* aim for more than being reliant on social security. Similarly post-birth, a number of young women said that they felt they had something to prove. For many this impacted positively on their attendance as one young mother states below:

*Excellent, yes, say excellent, I go all the time, it's important, I've got something to prove and a reason to go. It's much better now. **Sarah, 15, Area B.***

#### *Mainstream School – a sense of something normal*

For a small number of women, attendance post-birth at mainstream school was important for a sense of normality. At a point when their lives had changed quite dramatically, going to school was something that 'normal' young women did. As the mother below describes, although being a mum sometimes made her feel



older than her peer group, going to mainstream school allowed her to act like a teenager for a while:

*It's ok but coming back it's changed a lot, I said before I don't want to, like, change cause I'll be a mum cause I'll still like be me, but when I came back, people have said that they don't know what to say and stuff and I don't know but I feel that they are like younger and a bit immature at times. But sometimes it's nice to act like silly because I still am 16!*  
**Jane, 16, Area G.**

#### *Sheer determination*

The experiences of those who remained in mainstream school post-birth were mixed and whilst some experienced a noted improvement in their school's willingness to be supportive and helpful, others were not so fortunate. As the example below shows, some mothers did feel that because their school had been 'forced' to accept their attendance during pregnancy, they went out of their way post-birth to make things difficult. Rather than putting them off, however, it had the opposite effect for a small number who chose not to let the school dictate their future:

*It was when I came back that the problems started it was like they were punishing me for wanting to come back, I had to be there... Well when I went into school after I'd had her, my head of year had automatically assumed that I was coming into school to tell her I wasn't coming back and what I was coming in to tell her was that I was coming back 2 days a week. And then once that was organised that I was coming back 2 times a week, she wanted me there every week for those 2 days and if I had one day off she really complained.*

*Also there was one teacher, who when I went back to school I was behind in her lesson and she was like, right no baby talk, I don't want to hear anything about that. And when I showed her my work which I didn't have any help with, my friend is anorexic and she's been off school slightly longer than I have and she's still got a tutor and she's got work sent home to her to help her, and I didn't have anything sent home to me I just had my tutor. So anything I did, was what I chose to do and I didn't have any help except from my tutor, whose specialist subject is English, so with anything else I had to guess most things and I went to my textiles teacher and she just said well this is rubbish. And this won't get you your GCSE in*

*fact you might as well not bother doing it. And I was like, fine thanks, right, and I was annoyed because it was a fun lesson except for the teacher. Sarah, 16, Area G.*

#### *Better than being bored*

For some, generally those less motivated in terms of academic subjects and those who had moved to a specialist unit during pregnancy, attendance levels remained good post-birth simply because the alternative was not attractive. As two mothers describe below:

*Well the first few times, it did drop to 60 something percent when I first came back, but now it's gone up again cause I just get really bored at home an' that. I just want to come. Lucy, 15, Area F.*

*Why do I come, cause it's boring at home and I prefer to be here. Eva, 15, Area A.*

#### *Environment post-birth*

There were not as many changes of location post-birth as during pregnancy, however, a small number of women had decided not to move until post-birth. For these women, and for those who continued attending their supportive locations, the atmosphere and friendly environment was again a reason for an increased desire to maintain good attendance. A couple of young mothers who moved post-birth had the following to say about their new location:

*It's good support, cause they like understand as well when you're having a bad day an' that, they understand. And everyone's in the same boat. Ruby 15, Area F.*

*All the staff are really lovely, you feel almost at home, it doesn't feel like school, you can make your tea and toast. I would even say it was fun! Jay, 15, Area F.*

For some who had had various problems with mainstream school during pregnancy, the changed location also helped to raise their own self-esteem by providing a supportive environment where young women were aware that they were not alone. As one young mother who had felt the need to move from mainstream because of the baby's father describes below:

*It was the college I liked most that, made me feel good about my self. I did like the school I just didn't always like being there because of John. The college helped me a lot actually, it helped me cause I got to meet new people and to know that there were other people, to know that it wasn't just me, there were other people, and it made me feel a lot better about myself, they made me feel like I wasn't alone. **Mary, 18, Area I.***

One final issue in relation to the environment of the educational location was that many of the young women noted that one of the hardest things about being a mum and a pupil was when their child had been ill (or just being a typical child) and kept them up all night. Having somewhere where they could go to sleep for an hour or so if needed was therefore seen as an added incentive to attend when some days staying in bed felt like the easier option. A few women attending mainstream school stated that there was a room they could rest in if they needed to, but nowhere except two of the specialist units had specific sleep rooms set up for mothers:

*Mmm, well just like support, like at our school if your baby has been playing up at night time like kept you awake all night, they have a sleep room, where you can sleep. Which is helpful cause like the baby's in nursery and you can get some sleep if she's kept you up all night, which is really helpful. Especially for the single mums that is really helpful. For me it isn't as much of problem cause I'll make him [baby's father] get up and see to her! But it is good to have if you need it. **Hayley, 15, Area F.***

#### *Negative changes to attendance*

This section so far has discussed the many reasons for the maintenance of high attendance levels post-birth; there have also been negative outcomes for some young women. Fifteen percent of the overall baseline sample and 16 per cent (9) of the interview sample stated that their attendance had become worse after the birth of their child. All these young women were placed in mainstream school, and perhaps of most concern are those in the interview sample who have been classed by their school (according to reintegration officers) as successfully re-integrated back from home tuition or specialist provisions into mainstream, three of whom now stated poor attendance. From the interview data, the explanations given by the young women who perceived their attendance to have decreased are discussed below.

Some discussed how they did not like being away from their child for the length of the school day. Even in some instances where schools tried to be encouraging and provide different timetables, being away from their child was causing mental health problems, as one mother describes below:

*Well I wanted to be at home for a while, and then when I went to go back I ended up depressed so I decided to continue myself at home and the school supported me to do that. I'm happy now, I really didn't want to leave him to go to school, so I am happier here now. **Ann, 16, Area C.***

For another particular young mother her attendance on return to a specialist unit (with her child) had been excellent, but as soon as she returned to mainstream (without her child) her attendance deteriorated. She did not like being away from her child.

Some mothers were not coping as well as others with combining motherhood and education. This was particularly noted at times when the child was ill and the mother did not want to leave her child, as one would expect would be the case for any mother:

*My baby's been quite ill so it's [attendance] been really poor since December. So they've given me work to take home for when I cannot come in. **Tella, 16, Area F.***

This difficulty of combining motherhood and education was also apparent amongst those who wished to breastfeed as one mother describes below:

*I was only there part-time which was good in a way cause I was breastfeeding but in a way I would have like to have been back on a full timetable, I wanted more time in school, but because of feeding I couldn't. **Fred, 14, Area D.***

Finally, some mothers felt that they no longer fitted in at school, were not supported by staff to help return or catch up with missed work, or were being bullied by pupils and/or staff. Often the young women noted that pupils would bully them, with staff knowing exactly what was happening but choosing to do nothing about it.

### *Improved perceptions of education and the future*

Section 3.24 explored in depth the potential reasons for the positive changes in attitudes that many of the young women in the interview sample had about education and their futures. The positive attitudes and the reasons for them remained the same for the most part through post-birth as well. For a small number of young mothers however, actually having their child, rather than a child on the way, made everything that bit more real. For some it was a case of re-thinking life priorities as one young mother describes below:

*I'd don't think I'd be back at the [student support unit], I'd probably still be at home. But for him it's made me think no I've got to do something for him, and my boyfriend as well, he weren't working until he realised that he had the baby and he needed to get a job and so if I'd not been pregnant I'd probably have spent my time with him and he wouldn't be working. So it's been positive for both of us! **Melissa, 15, Area C.***

For some, having their child provided them with the added inspiration that they needed to get them through their exams:

*I'd probably be working in a factory or something by now, cause I was getting fed up with my courses, and without her as an inspiration to finish them, I probably would have given up. **Louise-Marie, 19, Area H.***

For some, however, motherhood changed their perceptions from a desire to pursue education straight away to a desire to be a mother first. A number of young mothers stated that they did want to continue education at some point, but they wanted to take a 'gap' year first and enjoy being mothers:

*Mmm, well, before I had him I felt really enthusiastic, but since I've had him I'm not as enthusiastic, I want to be a mum for now. **Ann, 16, Area C.***

### *Attainment*

Earlier the available GCSE results of the interview sample were presented and discussed. It is also important, however, not to focus solely on GCSEs/GNVQs. Three of the young women did not do GCSEs or GNVQs and focused instead on basic skills or Key stage work. This could have been portrayed as a failure

because they were meant to be at GCSE level by their age. However, if a young woman has received little or no formal education, for whatever reason, prior to her pregnancy, it would not be realistic to expect GCSE entry. Each case must be explored as an individual experience. In these cases, the young women's pursuit of any level of educational attainment should be seen as a remarkable success.

One of these young mothers, Tella, had experienced much personal tragedy during her young life, with the death of her father affecting her so severely she ended up in care. She was formally excluded from two secondary schools and two colleges as a result of her behaviour. In the end, pregnancy instigated a re-engagement with education. When she started attending the specialist unit at the age of 15, her mental reading age was 7 and she was very far behind with her schoolwork:

*Well I couldn't really fall behind any more than I had already, I was age 7 reading when I got here and they've got me up to age 14 now. **Tella, 16, Area F.***

This improvement in reading age was achieved within one year and although she was unable to think of GCSEs in that year, now, past the age of compulsory schooling, she had chosen to return to the unit:

*I'm just trying to catch up on my GCSEs really, cause I had problems with school anyway [prior to pregnancy]. This year I've got a one-to-one tutor and I'm doing stained glass and next year I'm going up to do more. **Tella, 16 Area F.***

In relation to those who did sit their exams, the fact that there was little difference between the results of those in mainstream schools and other provisions is important. It would be easy to interpret this to mean that there was no benefit in attending an alternative provision and therefore, all young mothers should be encouraged to attend mainstream. What is most important to note, however, is the fact that those returning to specialist provisions and other alternatives to sit their GCSEs were predominantly those with very poor attendance prior to pregnancy. Their attendance improved dramatically when they were introduced to an alternative to mainstream school. It is extremely likely that many of these mothers would not have been entered for any exams or

have achieved the same level of attainment, had they not attended a changed education location during pregnancy.

### **3.5 Education, Training and Employment: the route to social inclusion for post 16 mothers**

#### **3.51 Introduction**

'Social exclusion' is the current term used to describe people who are in some way not part of the normally expected course of life. One of the key policy goals of the current government teenage pregnancy strategy is to achieve a reduction in the risk of long-term social exclusion for teenage parents and their children by increased participation of young parents in employment, training or education (Social Exclusion Unit 1999). There is a concern that this 'cycle of disadvantage' will affect the educational experiences and outcomes for the children of teenage parents.

There has now been a sustained effort to tackle some of the issues relating to the education of pregnant young women and young mothers of school age. Policy is less clear, however, in respect of support for these mothers after the age of 16 whether they are still in education or not. A range of initiatives have been (or are currently being) piloted and rolled out to facilitate an increase in educational engagement at the post-16 stage. There appeared, however, to be a gap between the support provided in many areas at school age and the services and support available for those post-16, within no obvious links between the two.

This study has involved interviewing thirty young women who became pregnant or mothers whilst of compulsory school age but are now post-16. The purpose of the inclusion of this sample was two-fold. First, this sample contained some who had experienced statutory education prior to the introduction of the Standards Fund Grant and other initiatives for young mothers and some who experienced the early stages of the development of these initiatives. By comparing their experiences with those currently pregnant or mothers of school age, we have been able to note where changes and improvements have been made in the education of pregnant young women and young mothers in recent years. This insight will be reflected in suggestions made later in the discussion Chapter 6.

The second key reason was to enable a more in-depth exploration of the transition that these young women made from compulsory level education to

motherhood, education, employment and life beyond school. Having explored their prior experiences of education, and the aspirations they had for themselves at that time, we have been able to explore the realities of what they have done since then.

This has been an important aim of the research, because many reintegration officers have noted that having re-engaged many of these young women with education pre-16, the majority had high aspirations post-16. The reality that they had often witnessed, however, was a high continuation rate in education, followed by a rapid drop out within six months, due to a lack of continued support. A main concern therefore was the longer-term ramifications that this 'failure' could have on the self-esteem levels of the young mothers and their perceived ability to achieve something in the future.

The interviews with this particular sample, therefore, included: exploring what support these women did or did not receive to help them during this transition period; what barriers if any that they faced in achieving their goals; and if and how they were able to overcome those barriers. The interviews finished by exploring what these young women believed other mothers would need to enable them to achieve success in their lives post compulsory school age.

### **3.52 Post-16 aspirations and realities**

As noted in Section 5 a large proportion of the interview sample expressed an interest in pursuing post-16 education. The older mothers were asked retrospectively if they had had any specific plans for the first year post-16 and if they had followed those plans through, to enable comparison as shown in Table 3.29 below.

The table shows that there was no overall difference between the numbers of young mothers planning to go to and actually entering further education of some description (25). Where differences do exist, is within the plans and reality of each woman. Some women who planned to gain employment or continue on education instead chose to have a second child whilst others who had planned to focus on being a mother or getting a job actually opted for continuing in education.



**Table 3.29: Plans versus reality of post-16 activities**

|                             |                                    | Actual activity |                            |              |            |                         |                   |                                       |           |
|-----------------------------|------------------------------------|-----------------|----------------------------|--------------|------------|-------------------------|-------------------|---------------------------------------|-----------|
|                             |                                    | Specific job    | 6thform school/<br>college | 6th form SPU | FE college | Compensatory<br>year    | Yr out<br>then FE | F/T mum                               | Total     |
| <b>Planned<br/>activity</b> | <b>Specific job</b>                | -               | -                          | 2            | -          | -                       | -                 | 1 (1 had<br>2 <sup>nd</sup> child)    | 3         |
|                             | <b>6th form<br/>school/college</b> | -               | 2                          | -            | 1          | -                       | -                 | -                                     | 3         |
|                             | <b>6th form SPU</b>                | -               | -                          | 4            | 1          | -                       | -                 |                                       | 5         |
|                             | <b>FE college</b>                  | -               | 1                          | 1            | 4          | -                       | 2                 | 3 (2 had<br>2 <sup>nd</sup><br>child) | 11        |
|                             | <b>Compensatory<br/>year</b>       | -               | -                          | -            | -          | 4 (2 in SPU 2 in<br>FE) | -                 | 1                                     | 5         |
|                             | <b>Year out then<br/>FE</b>        | -               | -                          | -            | -          | -                       | 2                 | -                                     | 2         |
|                             | <b>Full time mum</b>               | -               | -                          | -            | 1          | -                       | -                 | -                                     | 1         |
| <b>Total</b>                |                                    | <b>0</b>        | <b>3</b>                   | <b>7</b>     | <b>7</b>   | <b>4</b>                | <b>4</b>          | <b>4</b>                              | <b>30</b> |

*The added value of specialist units for post-16s*

Not all specialist units can accommodate post-16 mothers. For those that do, not all were originally meant to. Over the last few years, however, this has changed for a number of reasons. First, many teachers within the specialist units could see the potential of keeping young mothers engaged post-16 who would otherwise leave education. Many of these mothers had missed substantial proportions of their pre-16 education and therefore had not been able to sit any or many of their GCSEs and so some units started to offer 'compensatory' years. This was eventually supported in DfES guidance on supporting teenage parents in 2001 (DfES 2001) and whilst this form of education is not without barriers (discussed later in this section), it has offered many young mothers who would have left education the chance to gain some of their GCSEs. As one young mother describes below:

*[Head-teacher of specialist unit] let me come back and do Year 11 again and arranged that. I'm doing year 12 here like as an extra compensation year. So I'm doing Maths, English, Science, health and social, RE, IT, Citizenship, Child development. And I'll sit them next June. **Helen, 16, Area A.***

Second, specialist unit teachers also noted that when many of their mothers went on to college, without continued support, they would often struggle with a new environment that did not always take into consideration the fact that they were mothers. Offering these mothers the chance to come back to the units where it was easier to cope was therefore seen as a better outcome than letting the mothers drop out entirely. As one mother describes below, having the chance to come back to a unit after a failed attempt at college allowed her the additional year she needed to make the transition into post-16 education:

*Basically, I went to college to do A levels and it meant I was on the go from 8 in the morning till 5 and then the homework, and at this college they expected you to do 4 A levels which was too much. It was just too much, I gave up after 1 week. I couldn't leave my baby for that long every day, I missed him and wanted to spend more time with him. So instead, I didn't give up entirely, I came back to [specialist unit] and I did my Maths GCSE again and also did GCSEs in sociology and human biology, I ended up with a C in Maths, a B in sociology and an A in Human Biology. I also sat my AS level in Art here and got a C overall. And then I*

*continued and then this year I've been doing the full A level in Art, looks like a D overall at [specialist unit] which is great because I get to keep contact with this place, and also I've been going to college and doing AS level Sociology (so far an A overall) and AS Level Biology (so far a D overall but I'll have to work hard to keep that)....* **Laura, 19, Area F.**

Third, when some mothers failed to get the grades that they had expected to get them in to college, allowing them to return to the unit to repeat some exams, was a solution for many who thought that they would have to give up. As one mother describes:

*I wanted to go to college for IT but I didn't get all the grades I wanted and then I couldn't get sorted out in time after the baby was born and it got really stressful so I was going to stay off and look after the baby but they said if I was going to do that why didn't I come back here, and do some more exams to boost my grades and qualifications and apply to college for next year, cause I could bring her with me here so it wouldn't cost for childcare.* **Jenny, 17, Area E.**

#### *Changed aspirations*

Early sections of this chapter explored the ways in which many mothers had changed perceptions about education and their life aspirations. A number of the post-16 mothers also talked about how their increased achievement during pregnancy had opened up new avenues for their future that they had never considered before. This therefore resulted in some noted changes from their post-16 plans to their reality as one mother discusses below:

*I am really enjoying it, because I never thought I would end up doing a course like this. Originally I was going to go to college and learn to work with children. But do you know why that was, I thought, I wasn't thick at school but I did a lot better than I was predicted to do when I got pregnant. People were really shocked and were ringing me up and saying congratulations and everyone was really shocked I did so well because most of the girls have dropped out, the ones who became pregnant. I wanted to work with children, but that was really because I didn't think I would get the grades, not that there's anything wrong with working with children but I didn't think I would get higher than 4 Bs. A lot of courses you need 4 Bs and you go to college and work with those 4 Bs but when I*

*got all of them (I got 1 A\*, 1 A, 4 Bs and 4 Cs) it gave me more choices, some courses needed 6 Cs and above and then it was like well I can do that now, so I went through the brochure, you know the little thing you get and looked at a whole load of different things and it opened it up much more for me. So I am really enjoying the Law course, it is very hard work it's 9-6 most days and then home work. **Elisa-Jade, 18, Area I.***

#### *Motherhood first*

Although one young woman planned to be a full-time mother, in reality five decided to be full-time mothers, which included three who went on to have their second child during that time. A number of mothers stated that they did want to go back to education later and have a good job but that they also wanted more children. They argued that it would be silly to disrupt your education twice by waiting three years and then having the second child, so they had decided to have their two children close together. This raises a point of concern with the new Care to Learn initiative, which will only provide funding for those starting their learning with Care to Learn funds under the age of 19. If a mother chose to have a second child before returning to education, she would most likely be too old to be eligible for Care to Learn (see end of this Section for further discussion on Care to Learn).

#### *Taking a Gap year*

Although only two mothers planned to take a 'gap' year before college, in reality this was the case for four. There were two main reasons for this. First, for those who had made the decision to take a year out as their initial plan, this was because they wanted some time with their child before they thought about college, as one young mother noted below:

*I've been taking time with my son before thinking about going on to college. I want that time with him. **Michelle, 17, Area A.***

Second, for those who had planned to continue with education after Year 11, either they got to the end of Year 11 and they were simply shattered and decided to take a break for a year before continuing, or they started college and then conceded that actually they did want some time to be a mum first. Often in these cases, reintegration officers (if able to work with post-16s<sup>29</sup>) would involve the

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<sup>29</sup> See commentary on Figure 3.11 for explanation of this point.

mothers in small courses and group activities, to keep the issue of education on the agenda, which was welcomed, as one mother noted below:

*I did some of the crèche course, but I didn't really want to go to college straight away I wanted to wait till next year but [reintegration officer] is finding lots of little courses that I can do in the mean time to keep us busy and in touch with it. And that's when I got in touch with the Monday group and it's great cause there are lots of other young mums there and the babies go in the crèche and you get time to talk and stuff. It's a very supportive group, everyone's going through the same. And well I'll start the crèche course again in April and they will count some of what I did this year so I don't have to repeat it. **Stacey, 17, Area D.***

### **3.53 Satisfaction with post-16 activities**

Overall 23 out of the 30 in this sample said that they were happy (20 very happy; 3 mostly happy) with what they had done with their lives since leaving compulsory education. A further 5 said they were happy, but now they wanted to do something different. All of the women who had been full time mothers now stated that they wanted to return to education, training, or employment. Only 2 of the mothers were not happy with the way things had turned out for them.

Of those who were not 'very' happy with what they had achieved: one said that they wanted to be doing different courses and more work; three wanted to enter employment (from education or fulltime motherhood) and finally one was restricted to part-time education and wanted to be full-time and two wanted to re-engage with education (not in education since school). These mothers said that their desire to re-engage or increase engagement was due to the fact that as their children got older and started school, this enabled them to have more free time without heavy childcare costs.

### **3.54 Support to achieve post-16 goals**

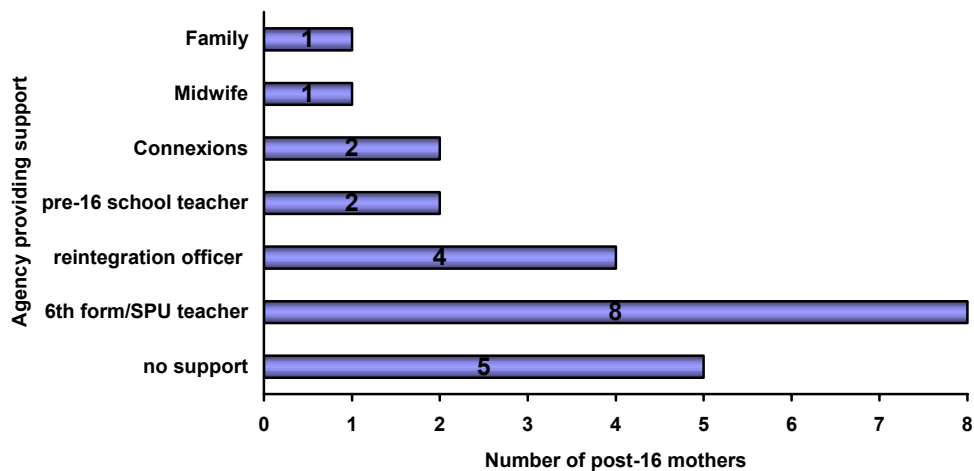
A key element in the achievement of their desired goals appears to have been for most, although not all, an issue of support. While a few mothers were capable and confident enough in themselves to get on and pursue their goals, others were not. One mother who had not had support described herself as lucky to have had a strong enough desire to succeed anyway. She highlighted that often young women would received a substantial amount of support whilst at school but that this support just suddenly stopped after leaving school. The valid point she is

making below is that many of the organisations set up to help school age mothers may actually do damage by raising someone’s hopes and expectations only to drop them when they reach school leaving age and they are no longer allowed to support them:

*Eh, nobody, [helped me] no, I had to do it all myself. That’s the thing about the [school-age support in this area], they help you a lot when you are at school, but then as soon as you leave school that’s it. They help you a lot to get these grades and then they leave you and it’s like well what do I do with these grades? And it’s stupid, I think that’s really silly, I don’t see why you cannot continue with them until you are 18 or something and then you are ready to go to college and then it’s up to you if you go to university or whatever. But then it was like I had my baby I was 16 and I was dropped. Luckily I’ve got a head on my shoulders and I knew what I was doing but some of the girls don’t, and it’s like, say if they don’t get any GCSEs and they’re just dropped, they might not know that you can go back and re-take them all. What I think they needed was the stimulation, someone going, go on you can do it, whereas some of them just think I am a failure, I’ve done rubbish I’ll just be a mum at home. And I think that is really silly. **Elisa-Jade, 18, Area I.***

Figure 3.10 below shows the support levels provided by different agencies to the post-16 sample.

**Figure 3.10: Post-16 support to continue in education, training or employment**



As can be seen from this Figure, 5 mothers had received no support at all. The most commonly provided support was either from a current 6<sup>th</sup> form teacher (predominantly in specialist units) or a Reintegration Officer. The problem of support ceasing at school leaving age was in part contingent on the terms of the Standards Fund Grant. Although this Grant has undoubtedly helped a great deal of pregnant young women and young mothers, it was only to be used to support school-age parents and pregnant young women of school age. In turn reintegration officers employed solely by the Standards Fund Grant were not allowed to work with those over compulsory school age<sup>30</sup>.

In Figure 3.10, however, the reintegration officer does feature as providing support for 4 of the mothers. This was for two reasons, first, some reintegration officers will have continued to work with these mothers even although they weren't meant to because the reintegration officer could see that if they didn't do it, no-one would. Second, some area teams managed to find other sources of finance to add to the Standards Fund Grant for the reintegration officer, therefore allowing this individual to work beyond the remit of the Grant. This was very successful where it did occur because not only were these mothers receiving support but also there was continuity in who was providing that support, which was highly rated by many mothers. As one mother notes below:

*I go to college in [Area] and I learn the things I need to catch up to get exams.*

**Interviewer:** *How did you find out about the college and get into it?*

*[Reintegration officer] took me to the college and there's a nursery, [reintegration officer] got me a place for Jack (son) so I can go and don't have to leave him with aunty if she's been working (Aunty works in the hospital and does night shifts sometimes). **Mavis, 16, Area B.***

Two of the mothers received support by going back to their old school and a favoured teacher and a two were supported by Connexions. The Connexions support was however confined mainly to one LEA, which had been a Connexions pilot area.

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<sup>30</sup> The introduction of the Vulnerable Children Grant now allows work with vulnerable children unable to attend school up to age 19.

In terms of the types of support<sup>31</sup> provided, nine mothers stated that the support they received was work related, i.e. help with college applications or continued educational provision (in specialist units) as one mother notes below:

*Now I'm in the middle of me health and social care GNVQ, citizenship GCSE and IT GNVQ.*

**Interviewer:** *Did anyone help you to do any of these things?*

*Yes. The teachers here [specialist unit].*

**Interviewer:** *How? What did they do?*

*They really encouraged me to stay on. It was the teachers who asked if I wanted to stay on and they spoke to us about what subjects I should take because I want to be a paediatric nurse so that's why I'm doing me health and social. Cause that counts as 5 GCSEs. **Melissa, 18, Area A.***

A further ten said that it was the emotional support they received that had helped them the most. Finally, five stated specifically having received practical motherhood related support (i.e. support with childcare or transport arrangements) as another young mother notes below:

*In year 12 I did a GNVQ in health and social care and I did GCSE Law. I got a B in me Law and I haven't had me mark yet for the Health and Social. And this year I am doing AS Law, AS Art and the GCSE in Citizenship.*

**Interviewer:** *Did anyone help you to do any of these things?*

*Yes. The teachers [specialist unit].*

**Interviewer:** *How?*

*They help you if you're stuck, they help you decide what's the best thing to do, and you have childcare here and transport to get here. **Erica, 18, Area A.***

### **3.55 Barriers to post-16 education**

As noted above, not all young mothers were happy with what they had done since leaving school and for some that was because they had faced barriers that could not be overcome to enable them to continue in education.

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<sup>31</sup> Four mothers mentioned two forms of support that they received.



When the mothers were asked specifically about any barriers they had faced, 18 of the 30 stated that they had not faced any. Perhaps not surprisingly, the majority of women who had stated having faced none were happy with what they had achieved since leaving school. For the remaining 12, the lack of support discussed above, a lack of childcare and a lack of transport (often funds provided would only allow for 2 or 3 days a week not fulltime) were the three key barriers that these mothers had faced.

#### *Childcare*

As expected childcare was an issue raised by a number of young women as having prevented them from achieving what they wanted after leaving school. For some the financial aspect of paying for childcare has been the biggest barrier<sup>32</sup>, as one mother discusses below:

**Interviewer:** *Are you involved in any education, training or employment at the current time?*

*Well I knew I wanted to go back to college and do my exams again but that won't be possible till he's in school so... Not at the moment. Cause I can't afford childcare or nothing for him and my family work so without that there was nothing I could do. So the one thing that has stopped me going for the last 3 years is childcare. **Louisa, 18, Area H.***

Another young mother was not able to access money for childcare until a certain age and therefore had to delay her plans and after taking up employment as the only financial option, a return to education in the longer-term may be forgotten:

*Well I wanted to go to college, and I'd still like to do an IT course at college... And you've got to stop here [generic student support unit] when you are 16 so I won't be able to come here next year.*

**Interviewer:** *Do you foresee any barriers to achieving those goals?*

*Yes, Childcare. Well I cannot access any money for childcare until I am 17 so I cannot do anything for another year after this one. I cannot do anything without childcare. So I'm a part-time shop assistant at the moment so I'll probably just do that full time. **Lucy, 15, Area C.***

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<sup>32</sup> This is something that hopefully *Care to Learn* will prevent from happening in the near future. Sixteen to 18 year old teenage parents could apply for financial assistance (up to £5000 per year per child) with childcare and transport costs from August 2003 and all under 19 teenage parents from August 2004.

Other problems with childcare were varied and yet amounted to the same outcome, which was an inability to continue in education when the mothers wanted to. For some women who had chosen to take time out to be a full-time mum before going back to education, childcare was perceived to be one of the biggest barriers, as this mother states below:

*I've been a full time mum and I'm thinking of going back to college, maybe Maths and English A levels. I'm good at maths but I prefer English. But childcare will be the issue for me about going to college. If I can get that then it should be ok.*

**Interviewer:** *What childcare would you ideally like?*

*I guess nursery or crèche, whatever is available. I just want to get me A levels and then get a decent job. Don't know what but something interesting. Louise, 17, Area J.*

Finally for some mothers who have university aspirations beyond their post-16 college education, childcare is again perceived to be the biggest cost barrier:

*I started college part time. Doing a media and business course. I'd like to go to uni later but that will be expensive so it might have to wait until she's in school and then I won't have childcare costs. Debbi, 16, Area D.*

With the introduction of *Care to Learn* many of the issues related to the cost of childcare should be overcome. However, few women (who had childcare problems) indicated that they had support or help in finding out what childcare they could access and therefore this will be key to the success of young women's ability to utilise available childcare. A high level of perception that childcare will not be easy to access or available may be enough to deter young women from asking for help in this area.

#### *Transport*

Although a potential barrier for mothers attending any post-16 educational location, problems with transport were particularly apparent for the specialist units. As noted in previous sections, many young women would have not been able to attend if they could not have used the minibus or taxis provided by a specialist unit. The LEA only provides this transport as long as a young woman is of compulsory school age, even if they are taking 'compensatory' compulsory level education. Therefore, situations would occur where a unit mini-bus, with

spare places in it, would have to drive past the house of a post-16 mother because legally they were not insured to pick up anyone beyond compulsory school age. One mother talked about how this was impacting upon her work:

*I like it but I can only come three days a week now because I can't get the minibus anymore because I am too old. I used to come five. I've fallen behind a bit because I can't come the five days. They are helping me to catch up but it would be easier to be able to just come five days. **Helen, 16, Area A.***

Transport was however an issue for other areas without units, particularly for those in more rural areas, where transport to colleges for example was not as frequent and therefore more often very busy. As one mother notes below:

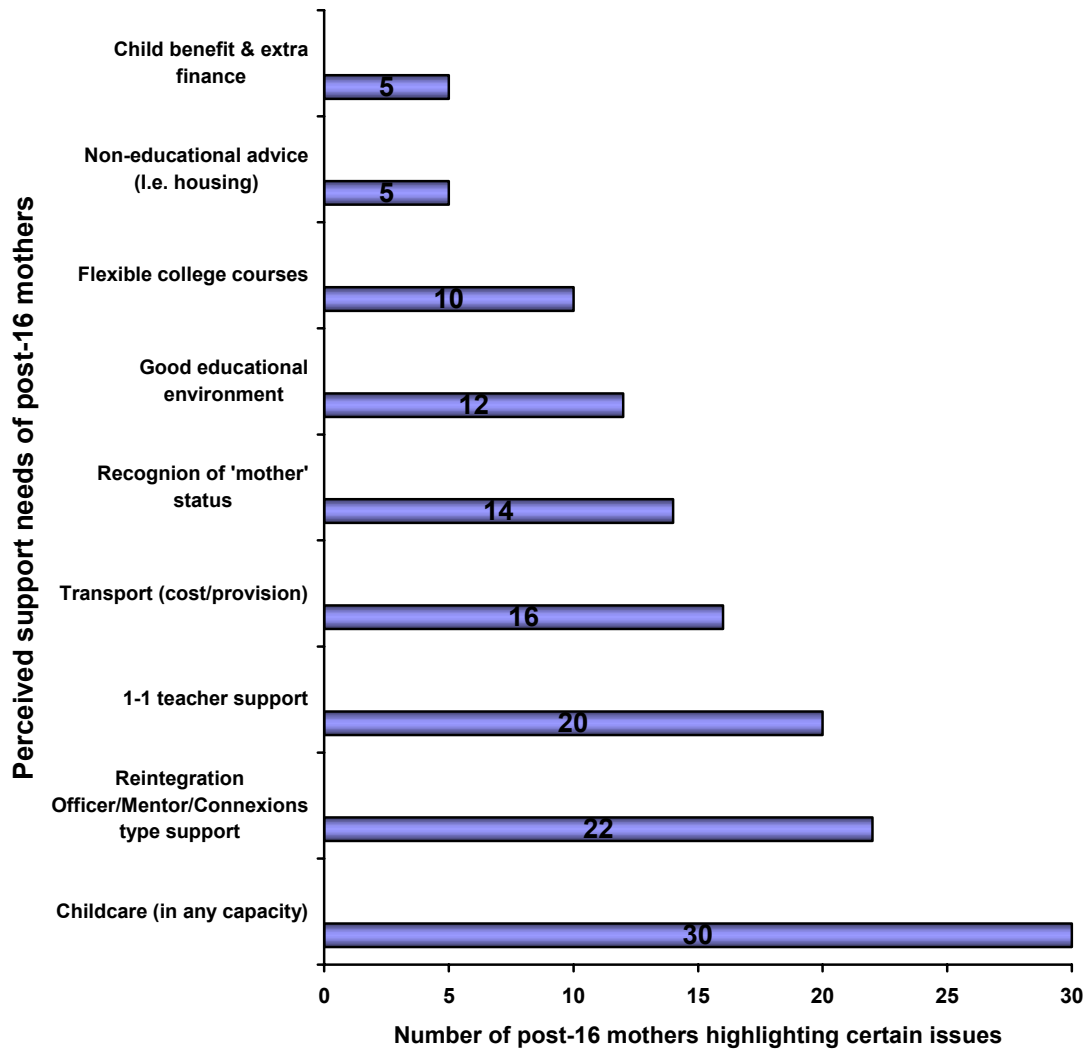
*[The problem] for college it's transport, from where I am now it's getting there, especially the college bus, because it's always packed out anyway. The last time I was standing up the whole way with two young children, it's really ridiculous how ignorant people can be sometimes, not offering to help. **Heather, 18, Area G.***

### **3.56 The needs of post-16 mothers**

All post-16 mothers were asked their opinions on what sorts of things would make it easier for young mothers to continue their education beyond the compulsory level. Figure 3.11 below highlights the proportions of young women who mentioned different needs.

Having explored some of the barriers actually faced, it is perhaps not surprising that childcare was mentioned as a potential need for future mothers by every post-16 mother in the sample. The Figure, however, does not specify what it was that mothers were saying about childcare, which is perhaps the most important point. This will therefore be returned to in section 3.57.

**Figure 3.11: What would help young mothers continue in post-16 education?**



First, it is important to explore some of the other issues raised by mothers. Many of the young mothers were able to say, *well I have this childcare or this helps me with transport to 6<sup>th</sup> form, or there is this service, which is great.* They recognised, however, that not all mothers would necessarily have those particular services, and so for those who had not faced barriers themselves, they were able to identify what would make life difficult for them if they had to do with out. For example, one mother attending a specialist unit did not think it was fair that if a young mother was keen enough to attend that she could not get transport because she was now post-16:

*Well a lot of the ones who come who are past school age aren't allowed on*

*transport and I think they should be, I think it's unfair because they are still willing to come and they are willing to work hard, but some of them just can't get here because they live so far away. Erica, 18, Area A.*

In relation to support, 22 stated that they thought mothers should have someone to talk to, someone who could provide advice and support in relation to their education. Some who had received support whilst of school-age noted how good it had been and what it was that had made it good, as one mother describes below:

*Also I think it helps if the people telling you what you could or should do have been there themselves... Sometimes you think well you don't even know. The mentor I really liked she was a teenage mum and she went to university and yes she might have had a 5 year break but it just shows that even if you do, you can go back. You're more likely to listen to her than somebody who you know, hasn't even got kids. Young mothers need to meet with people who have done it, because people can try and support them and say well you could do this or that but unless they actually see someone who's education done it or is doing it you're not going to believe them are you? Elisa-Jade, 18, Area I.*

The same mother also noted where advice and support can go wrong or is very unhelpful. This unfortunately was quite common for careers advisors and highlights the specific training needs of providing careers advice to mothers:

*Well I know you can have careers advisors, but I think they should be more clued up to people in my situation because there a lot of teenage pregnancies in [Area] so they should be more clued up. I mean I went to my careers advisor and he was male and he didn't have a clue, I asked him which colleges had crèches and he didn't have a clue. And one year later I went back and he said, so what have you been doing are you doing any courses and I just said, no, I've just had a baby and he said oh have you? And he should have known that because he'd been seeing me! And I was like, do you not read your notes??? You know he's like you've left school why aren't you at college and I'm like cause I've just had a baby, last week! And he didn't remember. Elisa-jade, 18, Area I.*

The issue of course and college flexibility was raised by 10 of post-16 mothers. In some cases the need was for colleges to realise that they were mothers (raised

by 14 women) and often had more than your average teenager has to think about in trying to get to college on time. For others it was a need for colleges to recognise that they couldn't necessarily do the length of days or as many courses as other people because of their need to also spend time with their child, or because of limited childcare hours, or limited transport. As two mothers note below:

*[We need] flexible colleges that understand you cannot necessarily do 4 A levels at once or leave your child from 8-5 every day* **Laura, 19, Area F.**

*Flexible timetables are good then you can work around your baby.* **Liz, 18, Area H.**

Non-educational advice, primarily housing or benefits advice, was mentioned by 5 of the sample. Many perceived or experienced these as potential 'barriers to education'. Some young women knew their entitlements but had experienced different advice from different agencies and therefore highlighted that other mothers might get confused. A small number of mothers stated how hard it had been to arrange housing.

*I thought I was going to college, cause I'd arranged it an' everything but because I was moving house at the time I lost my childcare place in the crèche at the college so I had to wait an extra year. ....*

*Well housing is a big issue, I've had absolutely no help at all. I don't know really, cause I've had to do it all off me own back really. If you had someone to help you do that. Someone to guide through it all.*

**Interview:** *Have you come across Sure Start Plus or Connexions?*

*Sure Start Plus, no, Connexions, I have now but I didn't even know that existed until someone happened to mention it. There should be better advertising of these services; you cannot use them if you don't know about them.* **Sarah, 17, Area I.**

Finally having extra financial help including child benefit was mentioned by four of the mothers. For the most part it was childcare or transport costs that were mentioned, but in some cases costs of equipment for actual courses as well. Some mothers were aware of the help that they could get if they wanted to go to college and thought all mothers should have that information:

*I think, well a women came here the other day and I thought she was quite good because she told us, if you are on benefits that they'll, if you've got to pay for your college course, they'll pay for it, they'll give you 100 per cent funding for childcare provided it's not really expensive and if you do something like hairdressing or a beauty course, they'll pay for the equipment. **Louise, 16, Area F.***

Others simply stated:

*Help with childcare costs and transport costs. **Laura, 19, Area F.***

### **3.57 Childcare Issues: beyond 'availability'**

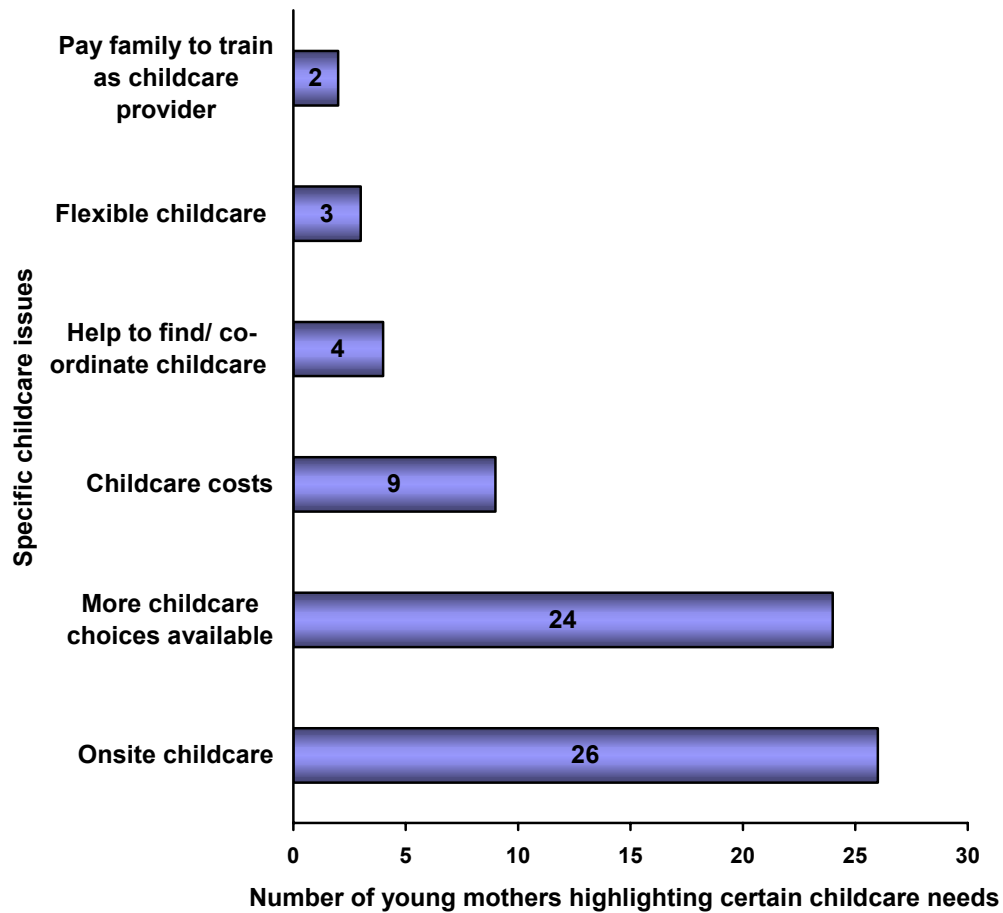
Figure 3.11 above highlighted that 100 per cent of the post-16 mothers stated that childcare was a potential barrier for all mothers. Assumptions have often been made that the main problem about the childcare needs of young mothers is being able to access childcare locally.

As was common amongst pregnant young women and mothers of school age, a desire to be educated with your child on-site was viewed as a very important provision by 26 of the post-school age mothers. This was for many of the same reasons as mentioned by school age mothers such as facilitation of breast-feeding and bonding time, however, it was also viewed by some of the post-16 mothers as a positive way to encourage young mothers to fully take on their parenting role and not let or be forced to give that role to someone else (especially family).

Twenty-four mothers simply thought there should be more childcare or more childcare choices available, but there were a great deal of other ways in which childcare had been or could be problematic for young mothers. This is important for policy makers to recognise, because fundamentally, if a mother is not happy with a certain form or location of childcare, she will not be inclined to use it and in turn be less inclined to continue in education. As one mother discusses below:

*Definitely childcare, there should be more childcare cause it's a bloody nightmare getting anything here. .... I had to go to [X] because that's the only place they had any place for him. Definitely I think loads of mums would go to college if they had childcare. **Zoë, 18, Area B.***

**Figure 3.12: Specific childcare issues of post-16 mothers**



Specifically, 26 felt that having childcare located onsite would benefit both mother and child, as this would enable the mothers to see their children during any breaks in their timetable. This was mainly highlighted by those who had or continued to enjoy the experience of onsite childcare, but also by those who currently use family, as one mother notes:

*Also I'm quite lucky with childcare but if I didn't I'd want something on site that I could use. **Amber, 18, Area G.***

A further nine specifically mentioned the cost or potential costs of childcare, as two mothers note below:

*Childcare probably but many colleges provide that now, but it's got to be affordable. **Louise-Marie, 19, Area H.***

*Well the one thing that has stopped me going for the last 3 years is childcare. I cannot afford to. So I cannot go to college. **Louisa, 18, Area***



## **H.**

Four of the mothers mentioned the difficulty of coordinating their childcare, not knowing what was available or not knowing how to find out about available childcare in their area as potential problems. For some, starting college was a hard enough experience in itself and therefore having someone to help with childcare information was valued, as one mother notes below:

*There should at least be a crèche in the college, but at the moment at the college I'm hoping to go to there's no room in the crèche, there's no room in any of the nurseries that work with the college. So you've got to go through social services, and then go through the government and then the government asks social services for a home person, child minder to help out. And I've got to sort all that out though, you've got to sort that out yourself and that's even worse. So maybe having someone to help you co-ordinate that. **Maria, 18, Area H.***

Another three mentioned the issue of flexibility. As was discussed above, many mothers wanted colleges to be flexible with their courses, equally many mothers thought it would be easier to attend college if their childcare could be more flexible. This was particularly noted for those undertaking more time-demanding courses as one mother discusses in depth below:

*I've found that [FE] college in general were absolutely brilliant to me, I mean I couldn't have asked for anything better. I went to a crèche worker and I said look I cannot get to college on time, and my crèche, I had to take my child out at lunch between 12 and 1 and my lunch break was between 1 and 2 and they said well can't you take an hour off? and I said I can't take an hour off, because then I'm going to have to do it at home, and I have enough home work to do and things like that. So just, for people to know to be more flexible with you. Be more flexible with hours, they have their rules you've got to pick your child up at this time or that time, they should be more flexible. I mean... because I did well and I'm doing a complex course it's like well you have to miss 2 hours of it to come and get him. And I said well I'm going to have to drop out then because I cannot do it.*

*And at one point, you know what, I just started crying and I felt like saying, do you know what, forget it. Luckily I didn't but do you know*

*it would be so easy to do, to say you know well I've done this well but then there is no support. But luckily the college arranged something else for me so that was good, they were good like that. **Elisa-Jade, 18, Area I.***

*I was talking to a friend who is a couple of years above me and she had a boy a few months after I had my baby and she's at [FE] college and she says that they have a service which picks your children up from nursery or school and takes them to the college for you, which I think is pretty brilliant that is, it saves you having to come out of classes. **Rachel, 18, Area C.***

Finally, two of the mothers discussed the possibility of being able to pay their family to train as their child minder. These young women were located in areas where this type of activity was more common. Had other mothers been aware of the possibility to do this, more may have commented, especially when one considers how many young mothers do rely on their family for childcare. The principles behind this scheme are two-fold, mothers who want their family rather than anyone else to care for their child are happy and the family member does not have to stop work (or moves out of unemployment) to provide the care.

As one mother notes below:

*I think there should be childcare for everyone, proper childcare, even if they could get family to be paid for it if they have to stop working to do that. **Melissa, 18, Area A.***

Problems have been noted with this scheme in practice, however, where the length of time it takes for someone to become qualified can be problematic when the need for childcare is imminent. In turn questions have therefore have been raised as to whether there is a fast-track scheme that can be implemented. Whether this is feasible or not, it does raise awareness of the fact that when a young woman becomes pregnant and has decided to continue her pregnancy, the issue of childcare needs to be raised quickly in order that any plans, such as this, can be put in motion.

## **Chapter 4: Survey of schools in 10 Local Education Authorities**

Dawson N. & Meadows S.

### **4. The Schools**

The head teachers of schools were surveyed in ten LEAs across England (see Chapter 2 for sampling details). Responses were received from 138 of 259 schools (51%). The respondent was the person with overall responsibility for pastoral care and for ensuring the education for pupils who may experience education otherwise, such as young mothers, most commonly the deputy head teacher. Fifty-nine percent of the schools had a 6<sup>th</sup> form and 41% were 11-16 schools.

Data on GCSE A\* - C results, Ethnicity, Unauthorised Absence, Religion and Special Educational Needs was drawn from OFSTED reports, the majority of which came from the years 2000 to 2003.

Demographic characteristics of the schools were cross-tabulated with the number of young mothers in Years 7 to 11 in the past five years. Schools with fewer pupils achieving 5 GCSE passes at grades A\* to C, with more pupils receiving free school meals, and with more children with special educational needs had a larger number of young mothers ( $p=.05$ ). The ethnic and religious backgrounds of pupils and the rate of unauthorised absence did not differ between schools with higher or lower numbers of school-age mothers.

#### **4.1 Number of Young Mothers**

Schools were asked to record the number of young women in Years 7 to 11 (i.e. of statutory school-age) and in the 6th form (i.e. post-statutory school age) who had become mothers in the last academic year, and how many in the last five years. The results from the schools' survey are presented in Table 4.1 below.

It became clear, however, that many schools were not in the habit of recording young women who become mothers while still at school. The overall baseline data (OBS) for each LEA, as reported in Chapter 3, goes some way to ameliorate this.

**Table 4.1: Young mothers in Years 7 to 11**

| <b>Number of young mothers</b> | <b>Last academic year<br/>Number of schools</b> | <b>During the last five years<br/>Number of schools</b> |
|--------------------------------|---|---|
| 0                              | 42  | 12  |
| 1                              | 51  | 21  |
| 2                              | 24  | 20  |
| 3                              | 6   | 18  |
| 4                              | 1   | 13  |
| 5                              | 2   | 14  |
| 6+                             | 3   | 19  |

Most schools stated that in the average year there was no more than one case of pregnancy continued to motherhood amongst Years 7 to 11 pupils. A few schools had large numbers of cases, with two schools noting very large numbers (15 and 20). Comments suggested that for some of the schools their experience of teenage pregnancy was more commonly concerned with the incidence of abortion.

Eighty-one of the schools responding to the survey had a sixth form. In the last academic year the number of young mothers in the 6th form ranged from zero to four (Table 4.2). Most schools had no young mothers in the 6th form during the past five years (39), but four had had five or six.

**Table 4.2: Number of schools with young mothers in the 6th form**

| <b>Number of young mothers</b> | <b>During Last academic year</b> | <b>During last five years</b> |
|--------------------------------|----------------------------------|-------------------------------|
| 0                              | 62                               | 39                            |
| 1                              | 13                               | 17                            |
| 2                              | 3                                | 6                             |
| 3                              | 0                                | 5                             |
| 4                              | 1                                | 0                             |
| 5                              | 0                                | 3                             |
| 6                              | 0                                | 1                             |

#### **4.2 Learning About A Young Woman's Pregnancy**

Schools were asked from whom they generally learned of a young woman's pregnancy. The most common source for a school to learn of a young woman's pregnancy is the young woman herself (Table 4.3) or her parents, which is what

the young women themselves said in the interviews. Schools also noted that they heard about pregnancies through school gossip.

**Table 4.3: Sources from whom a school would first learn of a young woman’s pregnancy**

| Who informs the school of a pregnancy? | Usually | Sometimes | Never |
|--|---------|-----------|-------|
| Directly from young woman              | 59%     | 40%       | 1%    |
| From her parents                       | 25%     | 65%       | 10%   |
| From school nurse                      | 7%      | 45%       | 48%   |
| From EWO                               | 1%      | 54%       | 45%   |
| From school gossip                     | 13%     | 67%       | 20%   |

#### **4.3 Education provision during pregnancy and post-birth**

Schools were asked what typically happened to the education of a pregnant young woman once she had decided to continue her pregnancy to birth. Table 4.4 below shows what schools reported was most likely to occur; what sometimes occurred and what never occurred.

**Table 4.4: Where pregnant young women and young mothers receive their education: according to secondary schools**

|  | Usually | Occasionally | Never |
|--|---------|--------------|-------|
| <b>Stays at school throughout pregnancy and motherhood</b>                               | 49%     | 33%          | 19%   |
| <b>Another education site during pregnancy and motherhood</b>                            | 21%     | 27%          | 52%   |
| <b>Moves to other educational site when pregnant and returns to school when a mother</b> | 18%     | 31%          | 51%   |
| <b>Home tuition during pregnancy and returns to school when a mother</b>                 | 17%     | 51%          | 33%   |
| <b>Drops out of school after birth</b>   | 12%     | 55%          | 33%   |
| <b>Home tuition during pregnancy and motherhood</b>                                      | 9%      | 49%          | 43%   |
| <b>Drops out of school prior to birth</b>  | 6%      | 63%          | 31%   |

Staying at school for education throughout pregnancy and return post-birth (if still in Year 11) was seen as the most common of the options. Attending other educational settings was the usual pattern for about one fifth of schools but ‘never’ happened for more than half. Full-time home tuition or drop out from

school were rarely the usual option but a majority of schools said these were occasionally the outcome.

As shown in Chapter 3, however, the interviews with young women suggest rather different outcomes from those outlined by schools. A majority of the interview sample said they chose to leave mainstream school and attend a different form of educational location during pregnancy and the majority remained in those locations post-birth.

Schools in the survey that had experienced more than two young mothers a year stated that the young women usually attended another educational site during pregnancy and motherhood and did not drop out of school.

*Links with [specialist unit] often means shared care/education until later months, if attendance prior to pregnancy not an issue.*

Home tuition was said to be more common for young mothers in schools that had fewer (two or one) mothers each year. More schools reported home tuition during pregnancy and a return to school than those that reported home tuition throughout, as another school notes below:

*All stayed at our school as long as was feasible for the pregnancy – then supported with home tuition (strong school links) – then returned for exams and left (all girls gave birth in year 11).*

*Receives home tuition during her pregnancy and returns to school once a mother. Occasionally. During maternity leave receives home tuition.*

Five schools reported that a young woman usually dropped out before the birth and nine reported drop out after the birth.

#### **4.4 Schools' response within the ten Local education authorities**

It is clear from Chapter 3 that there are distinct differences in the type of education available to and utilised by pregnant young women and young mothers in each of the ten LEAs. From this survey most schools in five LEAs stated that a pregnant young woman will usually stay at school during pregnancy and return post-birth. Nearly all schools in two LEAs said this only occasionally or never

happened. The majority of schools in the remaining three LEAs were divided almost equally between usually, occasionally and never.

Most schools in one LEA said that a young woman would attend another education site during her pregnancy and return to school when she was a mother; three said that this would occasionally be the case and schools in six LEAs stated that this would never be the case. In terms of attending another education site during pregnancy and motherhood, schools in one LEA stated that this always happened, another that it was usually the case, one stated it occasionally happened and most schools in seven LEAs said that it never happened.

In terms of home tuition during pregnancy and a return to school post-birth, schools in four LEAs stated that this occasionally happened, three said that it never happened and the remaining three were equally divided in their response to whether it usually, occasionally or never happened. With regard to home tuition throughout pregnancy and motherhood, schools in four LEAs stated that it occasionally happened; three said that it never happened and the rest were equally divided in their response.

In response to the questions about drop out of school prior to birth and after birth schools in a very few LEAs said this was usually the case. The majority stated that this was occasionally the case.

#### **4.5 A form of education for pregnant young women and young mothers**

Schools were asked what form of education they would encourage for pregnant young women and young mothers. One hundred and seventeen schools provided written answers to this question and their responses are reflected in the selection of quotations below:

*The normal curriculum with whatever flexibilities are necessary. Our priority is to continue to support the young mother in every way possible.*

*Remain in mainstream as far as possible/supported near birth with Education Out of School/gradual reintegration after birth. Tailored individual curriculum as appropriate to individual circumstances but stay as 'normal' as possible.*

*We are very happy for pregnant young women and young mothers to stay in school and complete their education with us. I have been happy for it to happen in other schools too. However in my experience, it has NEVER happened.*

#### **4.6 Involvement of Parents**

Schools were asked how they involved the parents of a pregnant young woman (see Table 4.5 below). Schools were very likely to try and involve parents in making educational choices for the young woman:

*We would encourage parents to stay in close contact with the school and make joint, informed choices.*

*We try to give the pupil the confidence to speak to their parents. If this doesn't work, we speak to their parents.*

A number of schools indicated that parents already knew about their daughter's pregnancy before the school had knowledge.

**Table 4.5: How parents are involved with schools about their daughter's pregnancy**

| <b>How parents are involved with schools about their daughter's pregnancy</b> | <b>Always</b> | <b>Sometimes</b> | <b>Never</b> |
|---|---------------|------------------|--------------|
| <b>Informed of the pregnancy</b>  | 65%           | 23%              | 12%          |
| <b>Involved in making educational choices for the young woman</b>             | 84%           | 14%              | 2%           |
| <b>Directed to social services</b>  | 26%           | 55%              | 19%          |

#### **4.7 Agencies for Pregnant Young Women and Young Mothers**

Schools were asked about the agencies with whom they would be in contact once discovering a young woman's pregnancy. Most schools contacted the Education welfare service (87%) or their Teenage Pregnancy Co-ordinator (55%). Substantial minorities of schools stated that they would contact Social Services (38%), Connexions (30%), a specialist unit for pregnant young women and young mothers (25%), and learning mentors (26%). Only 9% of schools stated that they would contact their reintegration officer which perhaps reflects the lack of use of this 'title' by many LEAs. (In contrast the majority of young women interviewed stated that they had been contacted by a reintegration officer).



two schools would contact Sure Start Plus, although five of the LEAs in this study had Sure Start Plus programmes<sup>33</sup>.

#### **4.8 The Father of the Baby at School**

Schools were asked what they would do if the father of the baby was also a pupil at their school (see Table 4.6 below). Only about a half of the sample replied to this question and many of the other schools stated that this had not been an experience that they had had:

*This has not happened at [ ]. Father always older/at another school.*

*The father has never been a student at my school. Usually they are older young men. I have not even had an ex-student as a father.*

It was clear that having a father at school was a very unusual experience for the sample (as was also the case amongst the young women interviewed in Chapter 3). When schools answered this question they replied in terms of what may happen if a young father was at their school, that is, it does not reflect direct experience. The majority of schools stated that they would ensure that the young man received support and that they would liaise with his parents. About a fifth of schools would liaise with social services. Very few schools said that they would ensure that he was not in the same class as the mother nor would they usually contact the police. Schools stated they would only contact the police if there were a serious child protection issue.

**Table 4.6: Action with father at school**

| <b>Action with father at school</b>                        | <b>Always</b> | <b>Sometimes</b> | <b>Never</b> |
|--|---------------|------------------|--------------|
| <b>Ensure young father receives support</b>                | 77%           | 22%              | 1%           |
| <b>Liaise with young father's parents</b>                  | 70%           | 27%              | 3%           |
| <b>Investigate state of relationship</b>                   | 46%           | 34%              | 20%          |
| <b>Liaise with social services</b>                         | 22%           | 67%              | 11%          |
| <b>Ensure young father not in the same class as mother</b> | 6%            | 47%              | 46%          |
| <b>Liaise with police</b>                                  | 6%            | 57%              | 38%          |

<sup>33</sup> This could reflect delays in setting up Sure Start Plus in some pilot areas to which the National Evaluation also drew attention.

#### **4.9 Age of Young Mother**

Schools were asked at what age they would inform the Social Services of a young woman's pregnancy and the majority of the schools specified under 16 years old as the various quotes below highlight:

*Usually discuss the situation with social services to make sure there are no other issues around the family etc of which the school is unaware.*

*Health\school nurse are obliged by Children's Act and Child Protection procedures to inform SSD.*

*Discussion with student and parents first – may lead to social services, to police involvement.*

#### **4.10 School Ethos**

Schools were asked how they thought having a pregnant young women or young mother in their school would affect the school ethos. Their answers rejected suggestions that the presence of pregnant young women and school aged mothers in school was undesirable (which was a common response by the young women interviewed as shown in Chapter 3).

**Table 4.7: How schools feel that teenage pregnancy and motherhood affects the school ethos**

|   |     |
|---|-----|
| <b>Shows the non-judgemental ethos of the school</b>      | 80% |
| <b>Indicates an inclusive context of the school</b>       | 78% |
| <b>May encourage other young women to become pregnant</b> | 12% |
| <b>Does not reflect well on PSHE</b>                      | 7%  |
| <b>Is disruptive for the class</b>                        | 4%  |
| <b>Is disruptive for the school</b>                       | 4%  |

It was also clear in some schools' written comments that having a young mother in school was not straightforward:

*Is often disruptive for student – wider 'welfare' needs cannot normally be met/education is disrupted.*

*6<sup>th</sup> form students are treated differently – always fully included, but childcare issues often affect continuation of studies*

*The two pupils who have been pregnant were disruptive before and during their pregnancy. The one who returned to school has continued to be disruptive...but not because she has a baby!*

A number of schools pointed to the effect on other pupils:

*May help other students to recognise the reality of parenthood and the impact of being pregnant\having a child on education and future plans (e.g. travel, hobbies, career)*

*Teenage girl could have chosen to abort. The decision to continue with pregnancy deserves all the support school can give – supports our Catholic ethos on sanctity of life.*

#### **4.11 Disadvantaged Young women**

Schools were asked if they thought in general it was necessary to encourage the education of disadvantaged young women, and if so, what provision was available. Most schools agreed that it was necessary to encourage the education of disadvantaged young women and provided learning mentors and work on educational aspirations, as can be seen in Table 4.8 below.

**Table 4.8: Education for disadvantaged young women**

|   |     |
|---|-----|
| <b>Learning mentors</b>                         | 83% |
| <b>Specific work on educational aspirations</b> | 75% |
| <b>Girls-only clubs</b>                         | 25% |
| <b>Peer education</b>                           | 19% |
| <b>Single sex classes</b>                       | 19% |

Some of the comments schools made regarding the education of disadvantaged young women are noted below:

*We try to encourage all disadvantaged students, female and male.*

*[Projects such as] Aim Higher. Grow-Your-Own-Workforce. This girls' school was deliberately sited to serve a very disadvantaged area of the city.*

*Single sex classes for some subjects. Has been trialled. Theatre group re Teenage Pregnancy. Surveys of achievements\needs re learning. Home Visits (Home School workers). Monitoring. Targeting. Our school has many different disadvantaged groups – we try to help each one.*

#### **4.12 Barriers to the Education of Young Mothers**

Schools were given a range of points shown in Table 4.9 below, and asked to say if they were a barrier to the education of school-aged and post-statutory mothers. Five aspects were raised as particularly important overall for both samples of women: affordability of childcare, lack of childcare, location of childcare, low self esteem, and young mother’s lack of interest in school and education.

**Table 4.9: Common important barriers to the education of young mothers**

| <b>Barriers to the education of young mothers</b>                 | <b>School-aged mothers</b> | <b>Post-statutory aged mothers</b> |
|---|----------------------------|------------------------------------|
| <b>Affordability of childcare</b>                                 | 64%                        | 68%                                |
| <b>Lack of childcare facilities</b>                               | 58%                        | 66%                                |
| <b>Low self-esteem</b>  | 54%                        | 48%                                |
| <b>Location of childcare</b>                                      | 49%                        | 62%                                |
| <b>Young mother’s lack of interest in education</b>               | 48%                        | 45%                                |
| <b>Family difficulties</b>  | 44%                        | 40%                                |
| <b>Poor living conditions</b>                                     | 35%                        | 36%                                |
| <b>Lack of parental support</b>                                   | 34%                        | 37%                                |
| <b>Poor education previous to pregnancy</b>                       | 27%                        | 23%                                |
| <b>Lack of choice of educational alternatives</b>                 | 21%                        | 24%                                |
| <b>Attitude of peers</b>  | 21%                        | 19%                                |
| <b>Attitude of community</b>                                      | 18%                        | 13%                                |
| <b>Lack of pro-active support &amp; encouragement from school</b> | 16%                        | 16%                                |
| <b>Poor support from school previous to pregnancy</b>             | 13%                        | 12%                                |
| <b>Poor relationship with father of the child</b>                 | 12%                        | 17%                                |
| <b>Attitude of teachers</b>                                       | 10%                        | 10%                                |
| <b>Father of the child at the same school</b>                     | 8%                         | 13%                                |

Schools noted how young women had viewed education before their pregnancy:

*Many of our pregnant students were already truants/poor attenders before the pregnancy arose.*

*Young mother's lack of interest [is associated with] low self esteem.*

Additionally, schools noted young women's desire to be involved in parenting their children:

*Girls want babies – someone to love and nurture. Reason for not being in school or working.*

*Unrealistic expectations of motherhood. Lack of aspiration within family, therefore encouragement to stay at home*

*Strong desire of the young mother to be with her child.*

Fewer schools considered school-based issues such as attitudes of teachers, poor support from school previous to pregnancy, poor education previous to pregnancy, lack of choice of educational alternatives or lack of pro-active support and encouragement from school to be barriers to a young mother's education. These were, however, commonly raised by the young women during their interviews (see Chapter 3).

#### **4.13 Attitudes about Young Mothers In School**

Schools were asked to indicate their agreement with statements about pregnant young women and mothers at school. Few thought that their presence in school harmed the school's image or exam results, disrupted the teaching process or encouraged teen pregnancy, indeed almost half thought it would discourage other pupils from becoming parents. Almost all schools thought that it indicated a caring attitude on the part of the school.

**Table 4.10: Attitudes towards pregnant young women and young mothers**

|  |     |
|--|-----|
| <b>Pregnant young women and teenage mothers in the classroom indicate a caring characteristic of the school</b>                      | 92% |
| <b>Pregnant young women and teenage mothers in the classroom have a strong effect on discouraging other pupils to become parents</b> | 49% |
| <b>Obviously pregnant young women in school attract negative attention from other pupils</b>   | 39% |
| <b>Pregnant young women and teenage mothers encourage others to want to be mums</b>  | 14% |
| <b>Pregnant young women and teenage mothers in the classroom provide a bad image for the school</b>                                  | 13% |
| <b>Pregnant young women and teenage mothers have a negative effect on exam results</b>   | 11% |
| <b>Pregnant young women and teenage mothers in the classroom are disruptive to the teaching process</b>                              | 8%  |

#### **4.14 Teenage Pregnancy, Sex Education And The Role Of Schools**

Schools were given six attitude statements (see Table 4.11 below) relating to sex education, young people’s experience of having a baby, and the role of schools in the personal development of young people.

**Table 4.11: Attitudes towards teenage pregnancy and sex education**

|  |     |
|--|-----|
| <b>Education about sex and relationships helps young people to be more responsible about sex</b>                                   | 97% |
| <b>Schools are one of the key areas in a young person’s life to enable her to make responsible decisions in her life</b>           | 96% |
| <b>Young people get a lot of mixed messages about sex these days</b>   | 95% |
| <b>There would be fewer pregnancies if more parents talked to their children about sex, relationships and contraception</b>        | 92% |
| <b>Having a baby under 18 is just about one of the worst things that could happen to a young person</b>                            | 41% |
| <b>The UK has the highest teenage pregnancy rate indicates that schools are failing young people in their personal development</b> | 23% |

#### **4.15 Additional Emerging Themes**

Four key themes emerged from additional comments; termination as a choice, sex education, alcohol and the culture of young motherhood. These themes are discussed in turn below.

#### **4.151 Termination as a Choice**

It was clear that for some of the schools their experience of teenage pregnancy was more normally concerned with the incidence of abortion:

*As you can see we have relatively few pregnancies (that we know of). Most girls tend to opt for termination. I fear that there are many more that we do not hear about.*

*There have been a relatively high number of terminations – the trauma attached can be underestimated.*

Some schools felt they needed more assistance in supporting these young women:

*We have had more teenage pregnancies that end in abortion rather than the young woman deciding to become a mother. I do feel that young women in these circumstances need a lot more support – this shouldn't be left to a school counsellor who may only work part-time. We have had to organise follow-up counselling for such a student – to help support her and her parents. Surely this isn't a school role – although we were happy to help.*

*I have had experience of students who have terminated pregnancies – support is often difficult and limited for these girls.*

This issue also came up in the interviews with young women, not just for young women who had had an abortion, but also in relation to support for those who have had a miscarriage, a still birth or have chosen to, been coerced, or been given no option but to give their baby up for adoption or foster care.

#### **4.152 Sex Education**

Schools had varying views regarding the efficacy of sex education in school. Some schools were clear that it was not their total responsibility to work with young people and their sexual development:

*I believe we need a totally new approach to Sex Ed but it is beyond the power of schools to change young people's behaviour\attitudes.*

*The teenage pregnancy rate is not only the school's responsibility. Some schools may be failing in their education but parents also must take responsibility for their child's sex and relationship education.*

*Teaching of Sexual Relationships Education is best provided through specialist teachers.*

Other schools identified the characteristics of their location as having an effect on producing credible sex education:

*As a multi-ethnic school there are areas of sex education which are highly sensitive, areas for which we get little support from the community e.g. access via the "C" card system through which pupils can gain free condoms.*

*Huge problems for us in a rural area. There are few facilities and extreme poverty in many cases. In the UK we tend to focus on urban areas and urban problems. There are just as many problems in a rural area and simply no support to alleviate the problems. If there is support there is no way of reaching that support. Transport costs money and poverty is a huge issue. ....The government puts most funds into providing facilities for urban areas. None to rural areas!!*

*The cost/lack of appropriate sex education/family planning services for young people in [local authority] - Schools need free access to health professionals. Students need tailor-made teenage health clinics.*

Other schools made more general points, relating to young men, society and young women's experiences of home life, such as these presented in the following quotes:

*The PSHE programme in schools contain patchy advice\guidance on sexual health issues. It is vitally important that boys and young men are targeted in PSHE and that they are given unequivocal messages about responsibility. I do believe that we need more male teachers playing a role in the delivery of sex and relationships education in school.*



*The more open we are as a society about sex the greater the chance of lowering teenage pregnancy. As a school we are hoping within the next 6 months to open a health clinic which will offer young people independent, unbiased advice on a range of issues, including contraception and pregnancy.*

*Most of the young women have a deep need to be loved, often compensating for family circumstances. Offered 'love', all carefully planned sex ed advice is forgotten! Broken homes, multiple partners with mother, drive students in the direction of pregnancy. Also a history of teenage pregnancy in the family appears to give girls a particular expectation, an inevitability, in their eyes!*

#### **4.153 Alcohol**

Some schools identified the consumption of alcohol as a contributory factor to unplanned sex:

*A significant number of girls undergo pregnancy tests following unprotected sex. Alcohol is frequently involved in those situations leading to suspected or actual pregnancy.*

*Often sex and relationships form the only part of a girl's social life in a rural area – there isn't much else for them to do! Except go to the village pub at a weekend and get drunk!! Then one thing leads to another ....*

#### **4.154 The Culture of Young Motherhood**

It was clear from some schools that they believed that communities which experienced a high level of deprivation affected the rate of teenage pregnancy and motherhood in some areas.

*Many (more accurately described as a higher proportion than in many areas) young women in this area either are not worried about teenage pregnancy or actively seek it. Opportunities and often aspirations are seriously restricted by the degree of local deprivation.*

*However as a community suffering high deprivation, there is a culture of having children young. Some young women may see this as a way into adult life with others giving them respect.*

*I work in an area where the culture in the community promotes pregnancy in young women as a mark of 'maturity'. Sometimes being a mother is one area where the youngsters have a sense of purpose and achievement which sadly is not there in the community generally. Although at school we cover the requirements of the National Curriculum and additional work is done at KS4 regarding sexual health, pregnancy, relationships and having a family, the gravity of motherhood does not phase the youngsters and some even state that this is a choice for them, not an 'unplanned accident'.*

## **Chapter 5: The Education of Young Mothers in England – The Professional Perspective**

Dawson N. & Meadows S.

### **5. Introduction**

The people with responsibility for the education of pregnant young women and/ or young mothers hold different posts in different organisations and have different titles in different areas. The research team judged that those having key statutory responsibilities (strategic and/or practical) in most LEAs for issues relating to the education of pregnant young women and/ or young mothers were Reintegration Officers (or equivalents), Teenage Pregnancy Co-ordinators, Sure Start (and Sure Start Plus) advisers, Heads of Specialist Units, Connexions Personal Advisers, Learning Mentors, Education Welfare Officers and Visiting Teacher Services (highlighted within Table 5.1 below).

'Professionals' with responsibility for the education of pregnant young women and/ or young mothers were recruited to the survey by sending postal questionnaires to workers suggested by local Teenage Pregnancy Coordinators and Re-integration Officers. The original survey catchments for professionals was quite wide-reaching in order to access any professional who might be working with or hold some responsibility for the education of young mothers. In all 326 questionnaires were sent out and 106 professionals from across the ten LEAs (33%) responded to the survey (See Table 5.1 below).

The number of questionnaires mailed varied from 17 in Area B to 42 in Area I and the response rate from 24 per cent in Area F to 42 per cent in Area A. Response rates were high for key professionals such as TP coordinators (8/10) and Reintegration Officers (7/7 areas), but low for some groups, notably Directors of Education (1/10); Workers involved in Young Mothers' groups (7/40) and school nurses (contacted only in Area F).

**Table 5.1: Professionals who responded to the survey**

|  |            |
|--|------------|
| <b>Reintegration officer (or equivalent)</b> | 9*         |
| <b>Teenage Pregnancy Co-ordinator</b>        | 8          |
| <b>Sure Start professional</b>               | 8          |
| EOTAS  | 7          |
| Head of and/or teachers in FE colleges       | 7          |
| Health Professionals                         | 7          |
| Workers involved in Young Mothers Groups     | 7          |
| <b>Head and/or teacher of SPU</b>            | 6          |
| <b>Connexions professional</b>               | 6          |
| Midwives                                     | 5          |
| <b>Learning mentor</b>                       | 5          |
| Youth Workers                                | 4          |
| <b>EWO</b>                                   | 4          |
| Workers involved in Education Action Zones   | 3          |
| <b>Visiting teacher service</b>              | 3          |
| Social Services                              | 2          |
| Housing workers                              | 2          |
| Educational Psychologists                    | 2          |
| School Nurses                                | 2          |
| Others**                                     | 9          |
| <b>Total</b>                                 | <b>106</b> |

\* In one area there was a team of five workers, three of whom responded to the survey. Therefore this figure represents a response from all seven areas which had one or more reintegration officers.

\*\*The 'other' category included a range of individual professionals, including a 'Healthy Schools' co-ordinator and one (Assistant) Director of Education, and miscellaneous staff, whose job description was not clearly defined.

### **5.1 The Numbers of Pregnant Young Women and Young Mothers**

Each professional was asked whether their organisation collected figures on school-aged mothers and older post-statutory aged mothers. Seventy-three per cent collected figures on school-aged mothers and 49 per cent on post-statutory mothers. They were subsequently asked how many pregnant young women and young mothers of school age they were aware of. Tables 5.2 and 5.3 below outlines their responses.

**Table 5.2: How many school-aged pregnant young women are you aware of?**

|                 |    |
|-----------------|----|
| <b>Under 10</b> | 29 |
| <b>10 – 20</b>  | 21 |
| <b>21 – 30</b>  | 14 |
| <b>31 – 40</b>  | 8  |
| <b>40 plus</b>  | 9  |

**Table 5.3: How many young mothers of school-age are you aware of?**

|                 |    |
|-----------------|----|
| <b>Under 10</b> | 31 |
| <b>10 – 20</b>  | 19 |
| <b>21 – 30</b>  | 12 |
| <b>31 – 40</b>  | 5  |
| <b>40 plus</b>  | 12 |

It was clear that 'key' professionals who were more involved with teenage pregnancy were aware of greater numbers than others. This included the Teenage Pregnancy Co-ordinator, Reintegration Officers, Connexions and learning mentors. It was also apparent that the LEAs varied in the level of teenage pregnancy and motherhood that they had.

### **5.2 Awareness of Support Services For Young Mothers**

The professionals were asked about their awareness of a range of support services locally. Table 5.4 below outlines their responses and shows that Connexions was the organisation that professionals were most aware of, followed by Sure Start Plus, New Deal for Lone Parents (NDLP), Health Action zones (HAZ), Supported Housing initiatives and Learning Mentors.

Most professionals were knowledgeable of SPUs, schools, the Teenage Pregnancy Co-ordinator, the Reintegration Officer (unlike some schools who did not recognise this agency), the Education Welfare Service, the Education Psychology Service, Social Services and Voluntary groups. About a quarter of the professionals were aware of religious organisations.

**Table 5.4: Awareness of government initiatives locally**

|  |     |
|--|-----|
| <b>Connexions</b>                      | 91% |
| <b>Sure Start Plus</b>                 | 70% |
| <b>Health Action Zone</b>              | 69% |
| <b>New deal for lone parents</b>       | 68% |
| <b>Supported Housing initiative</b>    | 63% |
| <b>Learning mentors</b>                | 61% |
| <b>Education Action Zone</b>           | 59% |
| <b>Education Maintenance Allowance</b> | 47% |
| <b>Excellence in Cities</b>            | 41% |
| <b>Supporting People initiative</b>    | 40% |
| <b>Investing in Children</b>           | 30% |

The professionals also mentioned other agencies in their community, which included wider participation workers at the local FE college, health visitors, midwives, sexual health outreach workers, Home Start and Sure Start programmes.

### **5.3 The Usefulness of Agencies for the Education of Young Mothers in Ten LEAs**

The professionals rated the usefulness of a variety of agencies to their work with pregnant young women and young mothers. The Teenage Pregnancy Co-ordinator (82 per cent), the Reintegration Officer (59 per cent) and voluntary groups (45 per cent) were the three most often cited as very useful. Some professionals found FE colleges, health visitors and Learning Mentors very useful in their work with young mothers. Although few agencies were regarded as not useful, the Social Services department was the one more often mentioned (11 per cent).

Over half of the professionals had not worked with the educational psychology service or with religious organisations. Two fifths stated that they had not worked with PRUs<sup>34</sup> and about a fifth had not worked with youth centres, reintegration officers, the education welfare service or community groups. Fewer had not worked with the other agencies. One professional writes:

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<sup>34</sup> It is unclear for this point whether professionals meant PRU or SPUs. See Methodology, Chapter 2, for discussion over the problems with this terminology.

*Locally, volunteer sector youth projects have been instrumental in facilitating and supporting positively evaluated peer education programmes involving young mums in school based PSHE programmes.*

In terms of how professionals regarded other nationally run services and pilot programmes, they were again asked to express their ratings of usefulness. Learning Mentors, Sure Start Plus and Connexions are the national agencies that are most often rated as useful. Over half of the professionals had not worked with the Education Maintenance Allowance, Education Action Zones, Excellence in Cities, Supporting People Initiative or Investing in children. Two fifths had not worked with New Deal for Lone Parents. About a third had not worked with Connexions, Learning Mentors or Health Action Zones, and about a fifth had not worked with Sure Start Plus<sup>35</sup>.

Interestingly, whilst many young women talked of the value of a learning mentor that they worked with, very few outside of the one LEA which had been a Connexions pilot area were even aware of Connexions existence. Similarly few young women outside of one LEA mentioned SureStart Plus either. However, due to the fact that Sure Start Plus is often called other names or represented by different agencies, young women may not even know that an agency that has supported them was Sure Start Plus.

#### **5.4 Government Aim**

The professionals were given the following statement and asked to comment on whether this would work and how it may affect their job:

*The government aims to "Achieve a reduction in the risk of long term social exclusion for teenage parents and their children. This will be measured using the increase in sustained participation by teenage parents in education, employment or training as a key indicator." (Social Exclusion Unit June 1999)*

Comments about this government aim centred on a set of related issues. The first was that young mothers' wish to parent their babies and the need of the babies for good care and satisfactory attachment relationships might be incompatible with a requirement that they engage in education or training. Many

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<sup>35</sup> This however is not too surprising as HAZs and SS+ are not universal and only in deprived/high conception rate areas.

of the professionals pointed to the lack of affordable and acceptable childcare for the children of young mothers. Another theme was social exclusion and inclusion. Some professionals highlighted that any social inclusion agenda for young mothers would have to include the provision of good childcare facilities, however, not all professionals saw social inclusion for teenage mothers and their children as best defined by further education/ training or obtaining employment.

*Any attempts to reduce social\educational exclusion for teenage parents and their children is a positive step forward. Whilst it is important to provide a wide range of educational and\or training opportunities for young people, it is equally important to support the young parents who wish to remain at home undertaking a caring role. In achieving a reduction in the risk of long-term exclusion for teenage parents and their children, it is crucial for smaller voluntary organisations to have the capability and funding required to plan, develop and implement resources to prevent the risk of exclusion.*

*My personal feeling is that we should be encouraging parents to make close, enduring and positive relationships with their children, not encouraging them to leave them with a childminder\nursery etc at the earliest opportunity and go to work.*

*It is clear for some professionals that there is a tension between becoming a mother and a worker/student.*

This is an interesting issue, however, when compared with the responses of the young women themselves. Whilst many professionals were concerned about what they thought young mothers wanted the reality from the young women interviewed was that most were very keen to be able and be supported to combine studying with motherhood (especially when located physically close to their childcare provision). Only one professional raised the issue of allowing young mothers to have choices:

*I believe the targets are achievable, but that they may not mirror the choices made by some young people to become parents. Entry to education, employment and training are dependent on both a wide range of options which reflect the choices young people want to make, and the availability of good quality, affordable childcare. It is dependent on the*



*willingness of providers to be flexible and supportive of the needs of young parents and on good transport between home and the places of both employment and childcare.*

### **5.5 Educational Choices**

The professionals were given a range of scenarios relating to young mothers and their child and asked to rate educational choices as good, acceptable or poor. The scenarios included the following:

- A: A young woman is 13 years old and 18 weeks pregnant.
- B: A young woman is 15 years old and has a baby of 2 months.
- C: A young woman is 17 years old and has a toddler aged 2 years. She has done some GCSEs and wants to continue with further study.
- D: A young woman is 17 years old and has a 3-year-old child. She has missed a considerable amount of schooling during her teenage years. She now wants to compensate for this missed school education.
- E: A young woman is 14 and has a little child aged 2 months. She has always liked school and wants to return. The father is 15 and still attends her school. They no longer have a relationship. Indeed this is causing major problems for the young woman.

It is clear that attending a full-time SPU is highly rated for pupils of statutory school age whereas a general PRU, home tuition and staying at home are low-rated. Full-time school, part-time school and part-time SPU may be acceptable. In the case of E, where there are issues about her former partner, it would be acceptable to educate her at another school but not acceptable either to educate her part-time at another school or to move the father to another school. The different views relating to these two young women could be related to the importance of mother and child being together for the development of attachment, with professionals judging that the three year old would be able to cope better with being away from mother than the younger child, or with their different experience of schooling prior to the pregnancy.

With regard to the post-statutory education of mothers, the professionals agreed that staying at home was a poor choice. FE college (with crèche) was rated well for the young woman with a baby, and FE college for the young woman with a three year old. Attendance at school was more positively regarded if the girl had already had some educational success than if she had not.

Professionals' comments highlighted the limitations of the question itself, in that there are a variety of factors to do with the young woman's individual situation that must be taken into consideration before a decision could be made about what education would be considered best, as one professional noted below:

*This is far too general – is she well supported at home? Is she looked after? Does she attend school? Are there behavioural issues? What is her background, attitude to education? Is she comfortable to remain at school? Does she intend to keep the baby? If not Home Tuition may be the best option.*

## **5.6 Educational Sites Available In Each LEA**

The professionals were asked to report the availability of a range of educational sites in their LEA for pregnant young women and young mothers (both of and above statutory school age).

### **5.61 Pregnant young women and young mothers of statutory school age**

Table 5.5 shows the percentages of professionals reporting the key educational sites available for pregnant young women and young mothers of school age.

**Table 5.5: Educational sites available for school-aged pregnant young women and young mothers**

|                                | <b>Pregnant young women of school age</b> | <b>Young mothers of school age</b> |
|--------------------------------|---|------------------------------------|
| <b>Full-time school</b>        | 92%                                       | 86%                                |
| <b>Part-time school</b>        | 76%                                       | 76%                                |
| <b>Full-time SPU</b>           | 44%                                       | 44%                                |
| <b>Part-time SPU</b>           | 43%                                       | 44%                                |
| <b>General PRU</b>             | 20%                                       | 19%                                |
| <b>FE college</b>              | 42%                                       | 44%                                |
| <b>FE college with crèche</b>  | 33%                                       | 36%                                |
| <b>Voluntary support group</b> | 40%                                       | 40%                                |
| <b>Home tuition</b>            | 49%                                       | 43%                                |

Most said that full and part-time school were available. The educational site least mentioned was the general PRU. The home tuition hours available for pregnant young women and young mothers across the ten LEAs were from 2 hours to 25 hours per week.

### 5.62 Pregnant young women and young mothers above statutory school age

Table 5.6 below shows that the main educational sites that professionals reported as available for the post-statutory young women in their LEA are: FE College, FE College with crèches and 6<sup>th</sup> form College.

**Table 5.6: Educational sites available for older pregnant young women and young mothers**

|                                | <b>Post-statutory pregnant young women</b> | <b>Post-statutory mothers</b> |
|--------------------------------|--|-------------------------------|
| <b>Full-time school</b>        | 51%  | 53%                           |
| <b>Part-time school</b>        | 43%  | 46%                           |
| <b>Full-time SPU</b>           | 27%  | 27%                           |
| <b>Part-time SPU</b>           | 20%  | 20%                           |
| <b>General PRU</b>             | 9%   | 10%                           |
| <b>FE college</b>              | 87%  | 90%                           |
| <b>FE college with crèche</b>  | 78%  | 75%                           |
| <b>Sixth form college</b>      | 66%  | 65%                           |
| <b>Voluntary support group</b> | 47%  | 51%                           |
| <b>Home tuition</b>            | 10%  | 11%                           |

### 5.7 Childcare for the Children of Young Mothers in Each LEA

The professionals were asked to report the main childcare arrangements for school-aged mothers and post-statutory aged mothers that were available in their LEA, including childcare for the baby in its first year and children over 1 year old. They were asked to state whether this was often, sometimes or never available.

Professionals believed that most of the childcare for children of young mothers of whatever age was based with the family, either a grandparent or another relative. The most cited other childcare venue for school-aged mothers was the SPU crèche/ nursery. The most cited for the post-statutory mother was the FE college crèche. 40 per cent of professionals stated that there was no childcare for school-aged mothers and 28 per cent said there was no childcare for the post-statutory mother.

Onsite provision and family were also noted as the most commonly used childcare arrangements by the young women interviewed, although the proportions were reversed with slightly more opting for onsite specialist unit childcare. Use of the

family, friend and baby father (combined) represented only 33 per cent of the interview sample and 40 per cent of the overall baseline sample.

**Table 5.7: Most often cited childcare for the child of a young mother**

| <b>Childcare for the child of a young mother</b> | <b>School-aged mothers</b> | <b>Post-statutory mothers</b> |
|--|----------------------------|-------------------------------|
| <b>Grandparents</b>                              | 45%                        | 37%                           |
| <b>Other relative</b>                            | 38%                        | 31%                           |
| <b>SPU crèche/ nursery</b>                       | 40%                        | 24%                           |
| <b>FE college crèche</b>                         | 26%                        | 29%                           |
| <b>Voluntary organisation crèche</b>             | 23%                        | 24%                           |
| <b>Childminder</b>                               | 22%                        | 14%                           |
| <b>Social services nursery</b>                   | 21%                        | 18%                           |
| <b>Private nursery</b>                           | 20%                        | 14%                           |
| <b>Social services crèche</b>                    | 9%                         | 3%                            |
| <b>Father of the child</b>                       | 7%                         | 6%                            |
| <b>School crèche</b>                             | 2%                         | 3%                            |
| <b>Other</b>                                     | 10%                        | 13%                           |
| <b>None</b>                                      | 40%                        | 28%                           |

## **5.8 Childcare for Babies by LEA**

Satisfactory provision for the care of the babies of young mothers is important both for the healthy development of the baby and for the young woman (Meadows 2005). Babies need the opportunity to form attachments with stable carers and to engage in cognition-relevant activities such as games, songs and conversational interchange as well as good physical care. Young mothers need to know that their baby is in good hands and also, given that their own upbringing has often been problematic, to see models of good parenting: . Providing care, which meets appropriate standards for both mother and baby throughout the period when the young woman is re-engaging with education or employment, is a challenging task.

### **5.81 The babies of school-aged mothers**

The use of social services crèche and nursery, and private nurseries, were believed to be minimal although half of the professionals in one LEA report their use. The SPU crèche/ nursery was particularly prevalent in four LEAs where well-established specialist unit/s can be found. The FE college crèche was mainly reported in one specific LEA and in two LEAs, particular use was made of the crèche in a voluntary organisation. All LEAs cited grandparents as a source of

childcare, and many cited another relative. Few mentioned the father of the child or another person who was unrelated as providing childcare. Not many LEAs referred to childminders apart from one where all the professionals named childminders. Less than half of the professionals said that there was no childcare. However, all the professionals in one LEA said that there was no childcare.

### **5.82 The babies of post-statutory aged mothers**

Only a small number of LEAs described social services crèche or nursery as being available but half the professionals in one LEA cited social services provision as being available for post-statutory mothers. Few cited private nurseries although half the professionals in two LEAs included them. One LEA was the key LEA to cite the SPU as a place for the baby's care although at least one other LEA with a full-time SRU had begun to take account of post-statutory mothers and in turn continue to provide onsite childcare. The FE college crèche was more often cited by two LEAs.

Similarly as for the school-age mothers, most LEAs included grandparents and other relatives as a source of childcare. Few mentioned the father of the child or other person as providing childcare although half of the professionals in one LEA included another person providing childcare. Childminders were generally not mentioned frequently although two thirds of professionals in one LEA and half of the professionals in another LEA cited them as providing childcare. Two LEAs indicated that there was no available childcare.

### **5.9 Barriers to Education for Young Mothers**

Table 5.8 below highlights the barriers that professionals thought that young mothers most often experienced. It can be seen that the key barrier reported for both school-aged mothers and post-statutory mothers was low self-esteem (76 per cent school-aged mothers, 80 per cent post-statutory mothers). This was followed by childcare consequences:

- Lack of childcare facilities (67 per cent school-aged mothers, 79 per cent post-statutory mothers),
- Location of childcare (66 per cent school-aged mothers, 72 per cent post-statutory mothers),
- Affordability of childcare (66 per cent school-aged mothers, 80 per cent post-statutory mothers).

Poor education experienced by school-aged mothers was also identified as a barrier. The barrier least cited by the professionals for each group of young mothers was 'father at the same institution'.

**Table 5.8: Barriers to education for young mothers**

| <b>Barriers to education for young mothers</b>                  | <b>School-aged mothers</b> | <b>Post-statutory mothers</b> |
|---|----------------------------|-------------------------------|
| <b>Low self-esteem</b>  | 76%                        | 80%                           |
| <b>Lack of childcare facilities</b>                             | 67%                        | 79%                           |
| <b>Location of childcare</b>                                    | 66%                        | 72%                           |
| <b>Affordability of childcare</b>                               | 66%                        | 80%                           |
| <b>Poor education previous to pregnancy</b>                     | 64%                        | 60%                           |
| <b>Poor living conditions</b>                                   | 52%                        | 62%                           |
| <b>Lack of choice of educational alternatives</b>               | 51%                        | 61%                           |
| <b>Poor support from school previous to pregnancy</b>           | 48%                        | 40%                           |
| <b>Young mother's lack of interest in education</b>             | 48%                        | 57%                           |
| <b>Lack of pro-active support and encouragement from school</b> | 45%                        | 37%                           |
| <b>Family difficulties</b>                                      | 44%                        | 45%                           |
| <b>Lack of parental support</b>                                 | 36%                        | 48%                           |
| <b>Attitude of teachers</b>                                     | 33%                        | 27%                           |
| <b>Poor relationship with father of the child</b>               | 27%                        | 27%                           |
| <b>Attitude of peers</b>  | 25%                        | 30%                           |
| <b>Attitude of community</b>                                    | 23%                        | 20%                           |
| <b>Father of the child at the same school</b>                   | 14%                        | 10%                           |

## **Chapter 6: Key Research Findings and Policy Implications**

Hosie A. Speak S. & Meadows S.

### **6. Introduction**

This study aimed to explore in depth five key objectives relating to the education of pregnant young women and young mothers of statutory school age. Within each objective a number of key questions were identified (see Chapter 2). The first part of this chapter, therefore, focuses on synthesising the key findings through the structure of these key objectives and specific questions, drawing from the main findings of the study presented in Chapters 3-5. There is little attempt to quantify these answers in this section. Rather, this section should be seen as a general commentary on the qualitative data collected from the young women (Chapter 3); the baseline quantitative data about young women in the ten LEAs (Chapter 3); and the quantitative data collected from the surveys of schools and professions (Chapters 4-5).

The remainder of the chapter then focuses on exploring the policy implications of these findings and proposes specific areas that different agencies (national and local) should take on board when developing policy in this field. Where appropriate, indications of further research needs are also highlighted.

### **6.1 Objective 1: To understand the previous educational experience of young mothers**

#### **6.1.1 What is their 'lived experience' of education prior to pregnancy?**

Most young women in the interview sample enjoyed primary school, which is reflected in the very high levels of good or excellent attendance (81/93 women) at this stage. Almost all the young women stated recalling something that they had enjoyed about secondary level education prior to pregnancy: learning in general, specific subjects (a wide range), specific teachers, being with friends, or the freedom that going to school allowed them from their home life. For almost half, it was a specific subject. For just over half, however, it was not school that they liked, but rather school was bearable because they got to spend time with their friends.

The issues that marred enjoyment of primary school included bullying, sometimes from other pupils and sometimes by teachers. Difficulties with work levels and

dislike of specific subjects and teachers were the most prominent problems for those at middle school. Although some disaffection was apparent at primary and middle schools, it was not until secondary school that any chronic disaffection began to set in. For a few young women, the whole secondary level experience described as negative and un-engaging from the start. When disaffection did occur, the result was often poor attendance, with the 81/93 having good-excellent primary attendance dropping to 43/93 at secondary.

Reasons for disaffection and disengagement at secondary level were varied and often focused on difficulties with one specific subject, a teacher or pupil. Teachers' attitudes were very influential on young women's experience of school. In particular they did not enjoy being shouted at, being humiliated, or being 'spoken to like children', which was described as common by the young women. Favourite teachers were those who they felt treated them like individuals and adults, were particularly supportive, or made work fun. Sometimes specific classes were the reason the young women disliked school so much. School rules featured as a strong dislike for ten women. For some it was a dislike of being told what to do, for others they got annoyed by what they perceived to be 'stupid' or unimportant rules that teachers went out of their way to enforce.

Bullying was often given as a reason for disliking secondary school. For the most part these young women did not feel like the schools were doing anything to help and that it was easier for the school to move them than deal with the problem. In some cases, the bullying was so severe, some suffered physical violence. Some stated that bullying was the reason for at least one school move. As with primary school, the bullying was not always confined to the pupils. Several young women stated that it was teachers they felt bullied by. Some young women noted that the teacher they most valued was the one who was willing to take the time to explain things rather than ignore the difficulties a pupil was having. Some young women had felt the work levels and content to be difficult and they did not feel that they had received any additional help if they were struggling: conversely, others felt their work to be boring and repetitious.

There was evidence of special needs, such as dyslexia, going unrecognised. Apart from hindering learning, this often also caused stress and conflict between teachers and pupils. Where special needs were recognised young mothers claimed that some teachers handled it badly, marking the young woman out for 'special classes' or generally humiliating her. At least one young woman



commented on liking a specific teacher who had recognised her greater ability to verbalise her knowledge, rather than handing in written homework. In other instances, similar flexibility and sensitivity of a particular teacher was mentioned as improving the experience of school. Falling behind with work for a variety of reasons, or not being particularly bright at a subject, often triggered a harsh reaction, humiliation by teachers, or teachers would ignore the young woman. This, in turn, often led to the young woman truanting from that class and thus falling further behind.

There were also some young women who commented, however, that they had simply 'fallen in with the wrong crowd'. In some cases there was considerable peer pressure to truant to fit in with a group of friends, or young women would truant to avoid being bullied.

## **6.2 Objective 2: Highlight how education might be improved to prevent disengagement either prior to pregnancy or because of it**

### **6.21 What are the key reasons for young women becoming disengaged or poor attendees prior to pregnancy?**

Schools recognised that many young women who became pregnant or mothers while of school age had a history of disaffection from school. However, when schools were asked about what they saw as potential barriers to the education of young mothers (see Chapter 4), very few considered that issues that related to the schools such as: poor support from school previous to pregnancy, poor education previous to pregnancy, or attitudes of teachers, were barriers for young mothers. Yet these were issues commonly raised by the young women during their interviews, as barriers to their education (see Chapter 3).

As described above, many young women reported that they became disengaged from school through falling behind with their work and not being given sufficient personal attention to help them catch up. A sense of failure, fear of discipline, humiliation, or peer pressure, led to truanting. Other young women simply found lessons boring and irrelevant. Some young women felt that teachers did not have the time to support them, often feeling that the teachers helped the brightest young people first always leaving those who were not as able until last.

It was clear that, in many cases, the origins of a young woman's disengagement were felt to lie in the attitudes and teaching styles of specific teachers. Shouting,

discipline and humiliation did not 'control' a young woman's poor behaviour but simply caused resentment. Teachers who engaged with the young women in a friendly and helpful manner were appreciated and were often those a young woman would confide in during times of difficulty.

### **6.22 How does the handling of pregnancy by the school or others, impact on a young woman's willingness to remain in education?**

All the accounts of their experience given by the young women in the interview sample were against the idea that pregnant young women are unwilling to remain in education. On the contrary, pregnant young women were generally more willing to engage with education than they had been prior to pregnancy, for a range of reasons, which will be discussed later. However, the type and level of education and its location which the young woman feels appropriate may change.

On the whole schools in the survey described themselves in positive terms, in that having a pregnant young woman or young mother in their school would show that they were both inclusive and non-judgemental. Few schools stated that a young woman's pregnancy might encourage other young women to become pregnant and almost none said that teenage pregnancy was disruptive for classes and disruptive for the school.

It was, however, apparent from the interviews with young women that in their eyes many mainstream schools were still unwilling to retain pregnant young women. Of the young women interviewed, only half stated that their school had responded positively to the news of their pregnancy. The remainder said that they had received either a very or mostly negative reaction from their school. Amongst those who received a negative reaction were some concerning cases of young women being encouraged, or directly asked, to leave, or told that they could not return if they were already excluded, or simply not informed that they had the option to stay at school.

In some LEAs, reintegration officers have been effective in changing the ethos in schools towards supporting pregnant young women to remain in mainstream. In other areas, however, especially those with a specialist unit, schools tended to encourage pregnant young women to leave. In other LEAs where no specialist unit existed, the introduction of the Standards Fund Grant and other monies orientated towards the education of pregnant young women and mothers of school age has meant the development of new initiatives, including the

combination of mainstream school with amongst others, FE college, learning centres, and laptop learning.

Heads of school should have a clear understanding of who is responsible for the education of pregnant young women and young mothers and the chain of communication regarding individual young women must be effective. The fact that an LEA has a specialist unit, as is the case in four of the study areas, or 'Education other' that is pregnancy specific, does not mean that a young woman will automatically choose this. Likewise, the fact that there is no specialist unit or other pregnancy specific educational location does not mean that a pregnant young woman will necessarily stay in mainstream school. The young women valued discussion of options and a genuine choice between alternative educational locations and content of learning.

### **6.23 How can mainstream education be improved to support young mothers and pregnant young women?**

In schools where an effort was made to be supportive, both emotionally and in practical terms, and where a choice was offered over how education throughout pregnancy could be handled, young women were much more willing to remain in mainstream. In schools where the reaction had been poor, no options were offered and little support or assistance was offered, most young women chose to move to alternatives, even if they had been relatively settled at mainstream school prior to pregnancy.

According to the young women the most valuable ways in which a school could encourage a pregnant young woman to remain were by: openly discussing her fears and needs; being generally supportive and encouraging, rather than judgemental; and allowing her choice in how her education is handled. Each case is different and what might most encourage one woman may not be suitable for another. Reintegration officers frequently commented that they support choice and flexibility in the way a pregnant young woman is educated.

Not all LEAs benefit from specialist unit or 'Education other' that is pregnancy specific, and choice is limited in some locations, to mainstream school, home tuition or education other (generic<sup>36</sup>). Nevertheless, elements of specialist

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<sup>36</sup> Education other (generic) refers to provisions such as general PRUs, student support units and so on. These provisions are for all young people out of education e.g. school refusers and excluded pupils. The majority of young women interviewed who attended these provisions, however, were already attending prior to pregnancy.

provision, which is clearly very supportive and beneficial to those who attend it, can and should be adapted for mainstream schools.

#### *Health and safety*

Pregnant young women and young mothers have a range of practical needs which are different from those of other young women and which must be prioritised if they are to remain in and benefit from education. For pregnant young woman health and safety considerations are paramount. However, a number of simple concessions can be made, such as allowing a young woman to arrive late or leave early to avoid busy corridors, which would limit any difficulties. Clear health and safety policies should be developed and implemented.

#### *Workloads and timetables*

In purely practical terms offering (but not enforcing) a reduced and flexible timetable, and allowing the woman to drop subjects with which she was struggling proved particularly helpful, as did providing support with work, perhaps through a learning mentor. Many young women had already dropped behind with their schoolwork before the pregnancy. Rather than being seen as necessarily detrimental to study, pregnancy should be looked at as an opportunity to reassess a young woman's progress and potential and identify those factors that might be hampering her learning. Schools can use pregnancy as an opportunity to give a young woman the additional support she needs to catch up. In many cases, this additional attention is all that is needed to re-establish a young woman's interest and willingness to learn.

#### *Transport*

Many young pregnant women find getting to school by public or school bus difficult, particularly towards the end of pregnancy. One of the most valuable aspects of specialist units was the provision of transport, often in the form of taxis. In some LEAs, however, transport would only be provided if a young woman lived a certain distance from her educational location (often two miles). It must be recognised that for heavily pregnant young women, even one mile could be too far to travel on foot or on a public bus. Travelling by taxi or private transport not only makes getting to school easier in practical terms, it makes refusing to go on a young woman's 'off days', when she is unwilling, more difficult.

### *Bullying*

Bullying is a major reported factor in a young woman's disengagement both prior to pregnancy and during it, and it must be addressed if she is to be re-engaged during pregnancy and post-birth.

In some cases young men were the culprits, although other young women can be equally cruel. Most young women stated that the fathers of their babies were generally not in the same school and did not cause a problem when they were. The schools also said that the vast majority of fathers were not in the school system. However, in the few cases where the father was in the same school and did cause problems for the young pregnant women, the situation was very badly handled by the school and the pregnant young woman's position was untenable.

### *Teachers' attitudes*

Within alternative provisions, one of the most commented on aspects that young women liked was the way in which teachers treated them. A number of young women also noted that it would be easier in school if teachers had a better understanding of what they were going through. Many young women felt morally judged by teachers because of their pregnancy, or insufficiently supported by teachers who did not adjust their expectations to the young woman's position. Schools' wish to be non-judgemental was not always well reflected by teachers' behaviour.

## **6.24 How have government initiatives (e.g. Connexions, Sure Start Plus, Re-Integration Officers) improved young mothers' access to education?**

The survey of schools and professionals highlighted that Learning mentors, Sure Start Plus and Connexions were the agencies or pilot projects that were most often rated as useful. Interestingly, whilst many young women talked of the value of a learning mentor that they worked with, very few outside of the one LEA which had been a Connexions pilot area were even aware of Connexions existence. Few young women that were within a Sure Start Plus area mentioned this service either. However, it must be taken into consideration that Sure Start Plus was only officially named that in one of the LEAs. Other LEAs had chosen to rename the service to save confusion with Sure Start. In addition, some young women in Area A for example, talked about their supportive teenage pregnancy midwife who was half funded by Sure Start Plus.

In relation to the young women's experience of support from different agencies, after their school became aware that they were pregnant, one would hope that any initiatives set up to work with pregnant young women would be represented. Whilst it is encouraging to note the level of reintegration officer contact (in the seven LEAs that had one or more), levels of initial contact by Connexions, and Sure Start Plus are disappointing, although as explained before, it is probable that more young women are in touch with these services without realising it. Moreover, Connexions was in its early stages in a number of locations and it is likely that the situation will have improved since this study.

Without doubt, reintegration officers have had a considerable effect on improving access to education for young mothers. It is noticeable that, in areas where reintegration officers (especially if there is a team rather than one individual) have been able to work with schools to improve their understanding of pregnant young women and young mother's needs and abilities, there is a considerably greater chance of a positive response from the schools and of the young woman remaining in mainstream education, or reintegrating post-birth if she moves during pregnancy. In one area with a well-established specialist unit, to which pregnant young women were invariably sent in the past, the reintegration officer has worked predominantly in schools. As a result it is now quite common for a young woman to remain in mainstream if she was not previously disengaged.

Most of the LEAs in the sample did not have other agencies or programmes, such as Sure Start Plus or Connexions, up and running. Where there was effective work occurring, however, it was apparent in the interviews with young women. For example, one LEA had been a Connexions pilot area and most young women did mention at least an awareness of this agency in that LEA. Connexions was only mentioned by a couple of other interviewees in the study.

In another LEA, the reintegration officer was also the home tutor. In order to support and maximise her efforts, she had, early into her post, made contact with Sure Start Plus and all of the young women interviewed in this area mentioned having had contact with the Sure Start Plus officer, especially if they were not engaged with mainstream or were leaving pre-16 education.

**6.3 Objective 3: Identify and compare the experience of remaining in, or returning to, mainstream education, against the experience of specialist units and non-specialist PRUs, further education colleges or accessing home tuition**

**6.31 What makes different forms of provision more or less suitable for different young women, and, in LEAs with a choice of provision, what are the factors influencing a young mother's choice?**

The suitability of different forms of provision for different young women is influenced by a range of factors including the young woman's health, previous educational experiences, her relationship with peers and the school's ability and willingness to accommodate her changing needs. Above all, the most important issue for the young women was the availability of a range of provision offering a real choice to the young woman. Having influence over timetabling, rest-breaks, extra work support and so on, was also important, especially where the only alternative to mainstream (for more than the maternity absence period) was home tuition and therefore young women were limited in terms of choice of location.

For some young women and schools, pregnancy is a minor set back in an otherwise good school career. For others, it is yet another negative influence on the pupil/school relationship. Where the latter was the case, a move to an alternative form of education was generally beneficial. However, where the school took the pregnancy as an opportunity to repair the relationship, and to discuss, often long standing problems, the pregnancy could provide a turning point for the pupil/school relationship and staying in mainstream was more appropriate. Unfortunately, there were only a few examples of this happening.

There was very clear evidence that those young women who had been poor attendees or excluded prior to pregnancy benefited hugely from attending specialist units and education other provisions. Their attendance improved dramatically and many achieved levels of attainment, which would have been unthinkable within mainstream school.

Where a choice of provision is available, the reaction and attitude of the school and peers is a major determinant in the choices a young woman makes. Despite the considerable work done by reintegration officers to improve the ethos in schools, in some LEAs too many schools have negative and unsupportive

attitudes when a young woman discloses her pregnancy. Young women reported that in a considerable number of cases, this manifested itself as actively encouraging the young woman to leave or even telling her to do so. Whilst some schools offered to arrange alternative education for the young women, this does not take away from the fact that schools should not exclude on the basis of pregnancy.

Further still, the majority of schools in Chapter 4 did not actively accept that their attitudes might impact upon a pregnant young woman's desire to remain in mainstream or move to an alternative location during pregnancy. On the contrary, very few schools suggested that their attitudes, or how they handled the news of the pregnancy, might potentially act as a barrier to her education. Schools' attitudes appear themselves to be conditioned largely by young women's previous attendance and relationship with the school. Where the young woman was previously a good attendee and had a good relationship with teachers, she is less likely to be encouraged to leave.

Many young women chose to move to an alternative educational location, especially specialist units where these were available, because they perceived it would be an easier environment in which to manage pregnancy and school work, or because they were poor attendees at their school prior to the pregnancy. Specialist units can accommodate the health and safety needs of young pregnant woman as well as provide more customised educational support in smaller classes, even one to one tuition if necessary.

On the whole, post-birth location was determined by the availability of different locations after the birth. The majority of young women who had moved during their pregnancy to a specialist unit remained there post-birth. In one LEA, however, the units were intended only as a maternity provision with a view to reintegration back into mainstream school when the baby was three months old. Where this reintegration was unsuccessful, however, the reintegration officer would usually arrange for that young woman to return to the unit rather than risk total disengagement post-birth. This was, however, only possible if there was space within the units.

The majority of young women who attended specialist units, education other (generic) and long-term home tuition generally returned to those locations post-birth. Those using specialist units as a maternity provision and those attending



education other (pregnancy specific) more commonly returned to mainstream school.

Many young women chose to go back to their during-pregnancy location if post-birth places were available in it (this includes those who had remained in mainstream). There were various reasons including:

- positive teachers' attitudes,
- enjoyment of location (and education in that location) during pregnancy,
- work support during pregnancy,
- positive environment,
- practical (motherhood) support
- childcare, especially where onsite location available.
- support of friends,
  - in school – sense of normality from having the same friends.
  - in alternatives – being with others 'in the same boat'.

For those attending specialist units the most influential factors impacting on post-birth return were the onsite childcare facilities; work, practical and emotional support; and the fact that these locations were often set up to deal with post-birth issues (such as ill-health of mother/ or baby). These factors were also influential in the timing of post-birth return.

Mothers returning to school or education other (generic) generally had to wait until they had had a 6-week post-natal check before they could return. As many childcare providers (such as nurseries and crèches) would not take babies under a certain age (usually one year to 18 months), this meant that if family could not help or the childcare provision did not take very young babies. Therefore, mothers would often be delayed further in their return to education. Mothers attending specialist units were often able to return much quicker (on average after 3 weeks in comparison to 6.5 weeks in mainstream) because childcare was onsite<sup>37</sup> and because the units were set up to deal with post-birth health issues.

All of the young women who were interviewed were asked 'What help do you think young mothers should get to return to school/ education pre-16? What

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<sup>37</sup> Although none of the interview sample returned to education other (pregnancy specific) post-birth 50% of the overall baseline sample did. It is likely that return patterns for this location would be similar to that of specialist units because of onsite childcare.

would make it easier?’ Childcare was highlighted by the entire interview sample. Other key issues included issues such as transport, supportive teachers and flexible timetables. For those who had experienced reintegration officer support, this was also highly valued as something other pregnant young women and young mothers should have access to.

A very high proportion of the young women indicated that access to a specialist unit would help re-engagement. What is particularly significant about this point is that this it often came unprompted from young women who had never experienced this type of provision and from those who had had good experiences of mainstream.

### **6.32 Which forms of provision are likely to maximise a young mother’s academic, vocational and developmental potential?**

Half of the interview sample had been poor attendees prior to pregnancy. As such they were often behind with their schoolwork and struggling to achieve required levels of attainment, either at GCSE or Key Stages. However, there was a prominent rise in attendance during pregnancy amongst those who attended a specialist unit, long-term home tuition or education other (pregnancy specific and generic) for part of their pregnancy in comparison to those who remained within mainstream. Those who continued at school with home tuition for maternity had had the better attendance before pregnancy but showed little improvement.

Success in mainstream is very much determined by prior good attendance and high achievements at school. Those who were previously not doing well in mainstream, or were disengaged, are particularly likely to benefit from alternative education provision. In such provision, they achieve significantly higher attendance and attainment than they would have in mainstream.

As noted within other objectives, the ‘form of provision’ itself can be crucially important for some young women, in that ‘it is not school’. For many others, there are elements that some young women have enjoyed about alternatives that had they been present in mainstream, may have allowed for a positive impact on a young mother’s academic, vocational and developmental potential.

Many noted that what they liked best about the alternatives was that: they felt respected and were treated like adults; they were allowed to be educated at the same time as enjoying being mothers and in many cases be educated alongside

their babies; they were able to undertake more flexible timetables; there was more one-on-one level teaching and they had the ability to play an active role in decisions about their education. What was most important for these young women, therefore, was not that they were in alternative education per se, rather, it was to do with the way in which they were treated at the alternatives making them want to engage with education. These are issues that can and must be addressed if more young women are to want to remain in or return to mainstream school education.

A key point to recognise, however, is that at present there are disproportionately higher proportions of young women with significantly worse pre-pregnancy attendance levels in the alternatives than in mainstream. In the interviews, young women with significantly poorer attendance records and levels of aspiration pre-birth were, on the whole, presenting themselves as competent mothers who understood the purpose of education and wanted to succeed for the sake of their child. Without the opportunity of attending these non-school environments, they may have simply left school with neither the desire for education nor belief in their own abilities.

Becoming mothers, combined with a new experience of education had changed their aspirations. Only in areas without specialist units did any young mothers or pregnant young women report that they were not attending any education at all. As the prior attendance of those attending specialist units was considerably worse than in comparison to mainstream school, it seems that specialist units are providing an educational location for some of the most disaffected young women who without the units would stay out of education. This raises an interesting issue in relation to 'inclusive' education, as a number of LEAs that have closed their specialist provisions over the years have cited a desire for inclusive education as the reason for closing the units. Those LEAs perceived units as being non-inclusive separatist provisions.

What our findings suggest, however, is that where there are no specialist units, the most disaffected of young women are remaining without any educational provisions and are therefore not 'included'. The introduction of more provisions that are education otherwise and pregnancy/motherhood specific may in time capture those young women. It is important for LEAs in the meantime to realise that an 'inclusive' policy which prioritises mainstream provision does not necessarily mean that all pregnant young women or young mothers are

'included'. There are more often than not good reasons (such as chronic bullying), as to why these young women were not attending school prior to pregnancy, and that does not change simply because they have become pregnant or mothers. LEAs should be encouraged to re-consider the case for specialist units and transfer the lessons from them to mainstream wherever possible.

### **6.33 What effect does the form of provision have on broader outcomes for young women in terms of mental, physical and social well-being, the development of parenting skills and self esteem?**

A pregnant young woman or young mother of school age must cope with the normal stresses of adolescence, possibly including the stress of taking GCSEs/ GNVQs, and also cope with becoming a mother, often with little family support. Whilst mainstream schools can, with the right approach, provide academic support, they are less able to support a mother's changed personal development needs.

These needs include the need to become a good parent. Whilst some mainstream schools could contribute to this if they deliver GNVQ childcare as part of the curriculum, it is often taught in an academic and staged way and is unlikely to provide a pregnant young woman with the practical support and advice she needs about birth and the care of a new baby. Given the low number of pregnancies in a school at any given time, it is hard to see how this could be fitted into mainstream in any meaningful way. On the other hand, pregnancy specific provisions do provide practical education in childcare as a matter of course, and on a daily basis.

Specialist units, home tuition and some locations in education other (pregnancy specific), are also more appropriate locations for a mother to breastfeed her baby. Whilst schools could provide private rooms for this purpose, these would be pointless without onsite childcare. Enabling the young mother to breastfeed her child regularly is in line with the Government's own policy of promoting breastfeeding, which makes a commitment to reduce health inequalities and increase breastfeeding particularly amongst disadvantaged groups (such as young parents). The target has been set to increase breastfeeding initiation rates by 2 per cent every year for three years<sup>38</sup>.

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<sup>38</sup> 22/01/03, SMCN/03/05, Scientific Advisory Committee on Nutrition, Subgroup on Maternal and Child Nutrition (SMCN). Paper for information: DH Update on Activities related to Maternal and Child Nutrition.

Regardless of their age or situation, it is natural for new mothers to prioritise their role as mothers over their other roles and obligations. Bonding with a new baby and worrying about both the baby and one's own abilities as a mother is perfectly natural. Unlike specialist provisions, mainstream schools are not the most appropriate environments to ease a new mother through this phase. Whilst those with supportive and understanding families may not need the additional reassurance of others in the same situation, many young women do.

Many of the professionals in our survey were aware of the importance of attachment and some suggested that an immediate return to education may not be a good thing. The professionals did not seem aware, however, that the benefits of a specialist unit include enabling a quick return to education post birth whilst being able to develop the bond between mother and child. Many of the young women interviewed stated that they wanted to be mothers and students and didn't see why they couldn't do both.

Although home tuition is more appropriate than mainstream for some young women in LEAs where there is no specialist unit, it can be isolating and seldom provides the parenting skills many young women need. However, in one LEA in this study, the reintegration officer was also the home tutor which helped to overcome these issues. Therefore, there is perhaps scope for other areas limited to home tuition to have tutors who have the training to provide support as well as education for the young mother. Forms of group home tuition were being developed in some places which could also help to overcome this<sup>39</sup>.

Many young mothers are acutely aware of the stigma attached to their situation. However supportive mainstream education is, it is still very difficult for some young women, particularly those with low self-esteem or confidence, to overcome a sense of guilt and perception of failure. One of the most valuable benefits to many mothers passing through specialist provisions was being made to recognise their own achievements and long term potential, rather than having negative stereotypes reinforced.

Despite the increased vocational qualifications now available in schools, they remain largely focused on academic achievement, particularly if they have a 6<sup>th</sup>

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<sup>39</sup> This form of home tuition was in its infancy, but involved grouping young women together in one location when they lived in close proximity.

form. This alone can be demoralising for those mothers or pregnant women who are not academically oriented. However, a broader range of opportunities, subjects and futures can be accessed through specialist provisions. Young women who are behind with Key Stage work, possibly because they have been poor attendees, are not made to feel like failures. In particular, this is because staff have time to work individually with young women to identify the most appropriate route for them. Moreover, the fact that many mothers keep in touch with specialist provisions long after they have left, settled into motherhood, been to college and, in many cases, taken jobs, means that younger mothers are constantly presented with positive role models at the specialist provisions.

### **6.34 How is the effectiveness of different forms of provision influenced by local contexts, such as additional forms of support or levels of teenage pregnancy?**

#### *Institutional context*

Perhaps one of the starkest contrasts between the different LEAs surveyed was in their institutional contexts. Some had acknowledged the issue of teenage pregnancy, and appointed a range of staff to develop, deliver and co-ordinate services. Others had done only the minimum required by the Government.

In some LEAs there was a key single person, such as a Reintegration Officer, or a key group of people, who had a clear remit, a strategic overview of teenage pregnancy and the authority to effect change where it was needed. In these authorities provision was more likely to be effective, regardless of its form. The overall ethos of the LEA was also clearly evident in the way in which some had acknowledged and addressed young women's needs, whilst others were resistant to change, even denying the issue existed in their LEA.

For example, two of the LEAs had very similar socio-economic, cultural and geographical contexts. One had a reintegration officer, supported and encouraged by the LEA and the Teenage Pregnancy Coordinator and their team, who had developed (and continues to develop) a range of flexible and innovative provision and mothers were able to access appropriate education and childcare at various points of pregnancy and motherhood. The other LEA did not have a reintegration officer, or any appointed person whose remit it was to support and develop education for pregnant young women or young mothers of school age. Whilst there was a Teenage Pregnancy Coordinator, their broader remit, and a

lack of support from senior people within the LEA, meant that not only was provision not developing in line with young women's' needs but existing facilities, such as childcare, were not being accessed by mothers. According to a key professional this LEA was in denial of the issues and insisted on a policy emphasising abstinence, rather than responding to the changing needs of its pupils. The pregnant young women and mothers in its schools were some of the least well integrated and poorly served in the sample.

#### *Existing provision*

Provision is developed and enhanced within the context of what already exists. However, the effectiveness of existing provision changes over time. In LEAs where there were well-established specialist units pregnant young women were routinely referred to them. Whilst these units undoubtedly provide the most effective form of education for most of the young women who attended them, their routine use did less to help those young women who were otherwise doing very well at school, and would have been high achievers had they not become pregnant. In LEAs where the reintegration officer's remit was to work (at least in part) to change the ethos in schools, there is now a greater chance of young women remaining there and receiving the appropriate care and education, if that was best for them. However, in LEAs where the reintegration officer's remit is just to focus on the unit or other non-mainstream education, schools are slower to change their ethos and thus, the effectiveness of mainstream for the most able is not improved.

There are arguments for inclusive forms of education and emphasis on the importance of mainstream school as a means of avoiding exclusion. However, it is vital that policy recognises that, for some young women, mainstream education is itself exclusionary. The improvements in attendance and attainment of those who went to alternatives, especially specialist units, for part of their pregnancies was so extreme that those units must be recognised as supporting the Government's drive for inclusion in education.

Pregnant young women and young mothers often had problems in travelling to their educational provision. Providing transport is specifically important to rural locations, where mothers may have to travel many miles to reach their education. In such locations specialist units, being location specific, may be inappropriate. However, this does not mean that LEAs should abandon other forms of education other specific to young mothers. It may be that lap top based distance learning is

more appropriate, supported by good quality home tuition. It should also be noted that travelling in urban locations could be problematic when it involved use of more than one type of public transport, or when young mothers had to make a journey to the childcare they were using as well as travelling to their own education.

Childcare is vital for reintegrating young mothers into education. On-site childcare is preferred by mothers and encourages them to attend education, but is not generally available within mainstream schools. LEAs should be mindful of the availability and affordability of childcare within their area. Where it is poor they cannot expect young mothers to re-engage with mainstream education in such a way that it can be effective. In such locations, tuition which allows the young woman to care for her baby without the need of childcare is likely to be more effective in engaging young women. Where childcare is available within mainstream settings such as FE colleges, it is important that LEAs and schools recognise that young mothers cannot necessarily afford to pay for full-price places, and unless offered reduced cost or free places, the young women may be excluded from continued education in school. This, however, should no longer be an issue due to Care to Learn.

#### **6.4 Objective 4: To identify how childcare considerations impact upon continuation or re-engagement in education**

##### **6.41 How central is the availability of childcare to a young mother's ability to return to education pre and post 16?**

Childcare is absolutely essential if young mothers are to return to school post birth. It should not be assumed that a young mother's own parents are either willing or able to provide childcare, or that they are necessarily the most appropriate carers. It must be remembered that because of the young age of the mothers, their own parents are often still relatively young themselves and may still be working full time or have long-term illness and thus unable to provide much practical childcare. The majority of mothers interviewed did not use family or friends for their childcare but had to find alternative provision. For policy purposes, it should be assumed that childcare is as important to a mother returning to school as it is to a mother returning to work, if not more so.



#### **6.42 What forms of childcare do young mothers prefer, and how crucial is the availability of their preferred type to their willingness to return to, and settle in, education?**

Young mothers are as concerned for the physical safety and emotional security of their babies as any other mother, and suffer the same guilt and distress at having to leave them. Satisfaction with the type and quality of childcare is enormously important in a young woman's willingness to return to school. In particular, mothers felt the need to have their babies near them, so they could see them between lessons and be with them at lunch and break times. This was especially the case if they were breast-feeding. In this respect, the preferred form of childcare was on-site provision.

For young mothers to return to education they must be happy with where their child is. Most young women said that they were satisfied with their childcare arrangements, and attendance levels of the young mothers did not differ by childcare location. A high proportion said they would either not be able to attend school, or would not want to, if their preferred childcare were not available. Levels of commitment to on-site provision were particularly high. The majority of mothers interviewed were adamant that they would not choose to have their child cared for by a childminder. This often involved resenting an individual outside their family developing a one-to-one relationship with their child when they could not because they had to go to school. It should be noted, however, that in Fife in Scotland (Raymond 2003) there is a process of normalisation of childminders whereby: the childminders are trained to work with and support the young mothers as well as look after the child<sup>40</sup>. The mothers get to interview the childminders and make an informed choice over who will look after their child; and the mother has the opportunity to build a relationship with the childminder during her pregnancy. This has led to a situation where childminders are the most commonly used form of childcare.

A final area of interest in relation to childcare choices is in terms of added value for the child. The Teenage Pregnancy Strategy is not just about preventing teenage pregnancy and preventing the long-term social exclusion of the parents, it is also about preventing the long-term social exclusion of the child. As was highlighted in the literature review, a great deal of research has shown that the

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<sup>40</sup> The DfES produced a Code of Practice for childcare providers working with young parents in 2004 to address this kind of issue and to enable childminders to be more confident about signposting young mothers to sources of advice.

children of teenage mothers do not generally do as well in a range of areas, including their schooling, as those of older mothers. Concern has been raised over the 'lost boys' of teenage mothers and inter-generational teenage pregnancy where history and the cycle of deprivation are seen to repeat themselves. Within the survey of professionals, many noted that they felt that young mothers did not have enough time to bond with their child because of the requirement to re-engage with school.

Whilst research has been conducted in the past about the benefits of different types of childcare, as yet none has explored the potential added benefits of on-site childcare for the child, in the short or longer-term. This form of childcare means that in addition to the socialisation benefits that children gain from a nursery/ crèche experience, a new generation of children of teenage mothers are spending their formative years in an environment where they are not only with their mothers, but they are also witnessing their mothers having an enjoyable educational experience. The impact that this could have on their relationship with their mothers (and their future behaviour) and on their interest in and enjoyment of education in the future is of great interest and is an important area for future research. In this research we can only comment on observed behaviour and commentary from professionals, but it raises an important issue for future research.

#### **6.43 What are the limitations of childcare being experienced by young mothers and those working with them?**

For some young mothers, affordability and availability of childcare remains an issue. This is particularly the case for those LEAs that were never in receipt of the Standards Fund Grant: teenage pregnancy and therefore did not necessarily have additional finance to help pay for childcare, as was the case for two of the LEAs in this research. In one of those LEAs this meant that even although there was onsite childcare available in many of the LEAs schools it was too expensive for the mothers.

However, the problem of childcare costs has been alleviated to some degree since the introduction of the Standards Fund Grant: Teenage pregnancy (continued through the Vulnerable Children Grant) and from 1<sup>st</sup> August 2004, *Care to Learn* for pre-16s. However, whilst this helps with affordability, availability remains an issue in some locations. In one location, for example, there were no childminder places available close to the PRU, which many mothers attended.

Those mothers who had to rely on private nurseries and childminders often had to manage complicated and protracted journeys to get their children to the childcare before getting themselves to education. This incurs additional expense and time, as well as making returning to education more stressful. Care to Learn has always provided money for additional transport costs to and from the childcare provider, but not to and from education; this did not change when Care to Learn applied to under 16 parents in August 2004. Young women are also very concerned about the quality of care, and lack confidence in childminders in particular. Because they are familiar with the childcare workers in specialist on-site provision, they have great confidence in them and also learn improved childcare skills from them.

Both teachers and a range of professionals across the ten LEAs in our survey perceived that childcare was one of the biggest potential barriers to a young mother's education (both of statutory and post-statutory ages). This included affordability of, lack of and location of childcare. Of great concern was that 40 per cent of professionals stated that there was no childcare for school-aged mothers in their LEA. This is concerning because support from reintegration officers to co-ordinate it and finance from the Standards Fund Grant to pay for it has meant that the cost of and availability of childcare has greatly improved for young mothers in recent years, at least in Standards Fund LEAs. Whilst there may in some areas be a shortfall in suitable childcare facilities, the fact that such a high proportion of professionals believed that there was no childcare available for young mothers highlights a lack of up-to-date local information amongst agencies that are meant to be up-to-date with regards to information appropriate to the needs of young mothers.

## **6.5 Objective 5: Highlight how education can best encourage young mothers to continue into post-16 education and training**

### **6.51 What types of educational provision are most likely to encourage a young mother to continue with education and training post-16?**

Those young women in mainstream who continue through GCSEs and into post-16 training and education are those who would have done so regardless of their pregnancy. For the majority, however, who were disaffected and poor attendees in mainstream schools, specialist provision for pregnant young woman and young mothers did, without doubt, encourage continued education post 16. However,

this needs unpicking to identify what elements of this form of provision are particularly encouraging.

Within specialist provision young women receive more personalised attention. Smaller classes and better teacher / pupil relationships mean that teachers can find the time to implement the form of post 16 education and training that is most appropriate for each young mother.

Enabling mothers or pregnant young women to experience college pre-16 is also extremely valuable in encouraging them to consider further training and education post-16. Again, this seemed more likely for those using specialist provisions (especially those based within FE colleges).

It is perhaps the attitude of both staff and pupils/young people within specialist provisions, however, which is one of encouragement rather than judgement, which most stimulates young women to post-16 education. Within mainstream, there was some evidence of pessimism about the achievement of disaffected young women and only the very brightest and most able young women would be considered capable of 'making anything of herself' once she became pregnant. Within specialist provisions, however, the potential of all young women is emphasised from the outset. This is reinforced by the fact that the younger mothers are surrounded by excellent role models of post-statutory mothers who are attending college and specialised units.

#### **6.52 What forms of post-16 provision are most attractive to a young mother?**

Whilst recognising and supporting those who are academically able and who might wish to take 'A' levels, specialist provision also offers a post-16 environment filled with opportunities which less academically able young women can take up without feeling like failures. Some specialist units allow up to two post-16 'compensatory years', which help a young woman reach a standard of education to allow her to enter college. This would not be possible in mainstream, without suffering the embarrassment of re-sitting GCSE years with younger pupils.

#### **6.6 Policy and research recommendations**

The policy recommendations presented here in no way detract from the very good work of the majority of teachers and schools. Rather, they reflect potential

changes to the structure of education and the constraints under which many teachers are working.

Those young women who were excellent attenders and high achievers prior to becoming pregnant are likely to remain so. They are more likely to be met by a supportive attitude by the school on disclosing their pregnancy and to remain in mainstream school throughout their pregnancy, returning after the birth. For these young women, mainstream education could be improved in terms of health and safety policies and some flexibility of timetables. They may still need childcare and transport, as will be discussed later, but in general becoming a mother will have little effect on their schooling or longer-term plans.

However, the majority of the young women who become pregnant at school do not fit this description. They are disenfranchised with or disengaged from school to some degree and many have poor relationships with teachers, prior to pregnancy, rather than because of it. Their reasons for this are largely difficulties with specific subjects, pupils or teachers. Many are falling behind with their work because of truanting.

Truanting, and more importantly the reasons for it, are not addressed adequately or appropriately by schools. Teachers are not always able to offer support and time to identify the real issues disturbing young women and help them regain confidence in school and catch up with missed work.

Whilst bullying by other pupils is a problem for some, in many cases, teachers themselves fail to recognise the impact of their own teaching styles and the degree to which some young women, especially those with low self esteem, can be upset by a few ill chosen words, perhaps said in jest. Likewise, what to many teachers may be perfectly justifiable verbal discipline can be perceived by some girls as a personal attack or bullying.

In some cases special needs, such as dyslexia are being missed. Future research is needed on what elements of teaching style are positive and negative in terms of pupil disaffection.

It is important that LEAs and school recognise that negative educational experience prior to pregnancy must be viewed and explored as a non-direct contributory factor in teenage pregnancy.

Nevertheless, once pregnant, most young women clearly acknowledge the importance of education. They are often keen to disprove the perceptions of them as failures and to improve themselves and their prospects for the sake of their children. Thus, with the right support, pregnancy can provide an excellent opportunity to re-engage young women. Schools could, therefore, usefully recognise that pregnancy presents a golden opportunity to re-engage young women who have become disaffected, rather than seeing them as a 'lost cause' as some teachers did in their responses to the survey.

However, many mainstream schools are lacking in their understanding of a pregnant young woman's difficulties and needs. It was common for mainstream schools to be reported as having been negative and unsupportive towards a young woman when she disclosed her pregnancy. Some schools even directly told the young women to leave. There is evidence that this situation is improving in LEAs with reintegration officers, particularly where they operate within an institutional context, which allows innovation and flexibility, and is generally supportive of pregnant young women in schools. This was not the case in some LEAs.

Some of the key issues highlighted in this report where some schools could help support pregnant young women include: health and safety issues, timetabling, transport and bullying (discussed in more detail below).

Government programmes and pilots such as Sure Start Plus and Connexions exist in part to ensure that pregnant young women receive non-academic support throughout their pregnancy. Closer contact between such programmes and pilots and schools is important to enable mainstream schools to better support pregnant young women and young mothers, but also to provide support to teachers within schools in handling sometimes difficult situations.

LEAs must work more collaboratively with a range of Government initiatives. Local Authorities should ensure networking between agencies, schools and LEAs. Reintegration officers have been successful because they have been given designated responsibility for pregnant young women and young mothers of school age and it is essential to ensure that the Vulnerable Children Grant is used to appoint them in areas not previously covered by the Standards Fund Grant: Teenage pregnancy. It is also crucial that reintegration officers or their

equivalent are maintained by LEAs where they currently exist. Where specialist provision exists, reintegration officers should also be encouraged to work with mainstream schools to develop appropriate training, policies and facilities for pregnant young women and to improve schools' ethos (see DfES briefing paper: Hosie 2003).

In LEAs with well-established specialist units for pregnant young women and young mothers (SPUs) it was common for young women to attend these. The support and ethos within these units is such that often the most disenfranchised young women with the poorest pre-pregnancy attendance engage with education and progress well. Often they achieve levels of attainment, which would not have seemed possible whilst they were in mainstream pre-pregnancy. In LEAs without units where alternatives to mainstream are being developed, that are sensitive to the needs of pregnant young women and young mothers, similar improvements in engagement have been found.

For those young women who were disaffected pre-pregnancy, mainstream education would not necessarily be suitable during pregnancy and post birth. Trying to make them return to school would only serve to reinforce their negative attitudes to education. Where specialist units are not available, other forms of non-mainstream, non-school based education are preferred, such as home tuition or college. Therefore, future developments of alternatives to mainstream should be considered within LEAs without such provisions. These provisions should be seen as a method of inclusion, rather than exclusion. LEAs should be encouraged to visit specialist units and other pregnancy specific alternative education (available and established in other LEAs) and transfer the lessons from them to their own LEA wherever possible.

Further in relation to alternative provisions, there is an urgent need for more research into specialist units and other pregnancy specific alternatives to mainstream, to explore differences between them and identify what are the key factors in their success and whether these could be replicated in other settings. The Ofsted reports could provide a useful starting point in identifying a suitable sample.

As long as they know their babies are well cared for most young mothers want to return to education relatively soon after the birth. However, they feel strongly that the precise timing of the return should be decided by the mother. They are

considerably more likely to be happy to return quickly to educational provision if there is onsite childcare, so that they can have their babies with or very close to them. Nevertheless, for a number of mothers, returning is difficult because of lack of suitable childcare or because of their poor state of health or that of the baby.

### **6.61 Transferable Lessons from Alternative Provisions**

Not all LEAs have specialist units and, indeed, they would not be appropriate in some areas. For example, in large rural localities, the cost and time involved in transporting young women to and from a single specialist unit would be prohibitive because of distances and time it would take in the school day. However, there are elements of their approach and facilities, which could be transferred to mainstream schools and would greatly help pregnant young women and young mothers (re)-engage.

#### *Attitudes and ethos*

The less authoritarian, more open and generally less judgemental attitudes of teachers in specialist units is a major reason young women prefer them to school. Within the specialist units the environment is positive, supportive and encouraging. Young women are not made to feel ashamed or as if they have failed, either because they are pregnant or because, in some cases, they are not at the academic level of their peers.

Reintegration officers have made real progress within schools in some LEAs. However, some LEAs remain unsupportive of their work, denying the levels of teenage pregnancy in their LEA and failing to develop services and facilities for pregnant young women and young mothers. This needs to be addressed at the highest level within the LEA.

Teachers should be trained to support and encourage, rather than discourage pregnant young women and young mothers. Pupils should be made aware of who the key teacher is in connection with teenage pregnancy in their school and they should have confidence in that person. It is important that teachers are provided with better training in recognising and addressing bullying, amongst pupils and staff.



### *Workloads and support*

Many but not all pregnant young women are already falling behind with their schoolwork prior to pregnancy, often because of poor attendance. It is unrealistic for some of them to continue with a full timetable, especially where particular subjects are causing them difficulties or distress. Reviewing timetables and allowing some subjects to be dropped if they wish to, is valuable support. In addition, support to catch up with remaining subjects is greatly beneficial to young pregnant women. Learning mentors proved valuable in this respect. It is also important for schools to recognise the need for flexibility and reduced timetables if a young woman is to remain engaged in education.

### *Health and safety*

A pregnant young woman's health and safety was often cited as the reason a school asked or encouraged her to leave. It is important for schools to develop and communicate clear health and safety policies for pregnant young women and ensure that all staff are familiar with them. Schools should be encouraged to undertake risk assessments for pregnant pupils, as they should for pregnant members of staff.

Such policies should include provision of places to rest, relaxation of rules on food and drinking water in class and on uniforms. Young women should be able to arrive and leave classes, and the school building, at different times from the mass of the school population, so as to avoid crowds. There should be ample time off for medical needs, including for morning sickness and visits to clinics. Young women should not be penalised for missing classes for these reasons but should be offered extra help with missed work.

### *Transport*

Transport is a major problem for both pregnant young women and young mothers. It is often not appropriate for young women to travel on school buses towards the end of their pregnancies. Other forms of transport may be both more practical and more encouraging for some young women. LEAs should provide transport in some form for all pregnant young women, particularly in the latter stages of pregnancy. For those with babies, transport is vital if they are to take their child to off-site childcare before going to school each day. Again, school buses may be inappropriate and public transport costly and difficult.

### *Childcare*

Lack of affordable, appropriate childcare can be a major barrier to re-engaging young mothers in education post-birth. It should not be assumed that a young mother's family can or will provide care. Moreover, like any new mother, young school-age mothers need to bond with their babies and are distressed at having to leave them, particularly with strangers such as childminders. For this reason, on-site childcare (at specialist units, FE colleges and mainstream school where available) is often preferred and is likely to give a young woman peace of mind to focus on her studies.

On-site childcare not only gives the mother peace of mind but it also allows her to breast-feed. Situated within an educational establishment, it also provides an excellent early learning environment for the children of young mothers.

Whilst specialist units do provide on-site childcare, few schools or colleges had such facilities for young mothers (particularly for young babies). On some occasions where on-site facilities did exist for school staff, they were not being made available for the children of pupils. Where no on-site provision can be found, LEAs should not assume that there is alternative childcare available (especially for younger babies) and should work with Local Authorities to ensure it is developed in appropriate locations.

Young mothers must be happy with where their child is or they will not return to education or their mind will not be on education when attending. Development of any childcare policy or initiatives must consider the need for 'normalisation'<sup>41</sup> to aid with childcare provision acceptance by young mothers.

### *Raising aspirations*

Many young mothers have low aspirations prior to becoming pregnant. Whilst they recognise the importance of education once pregnant, many still have little confidence in their own abilities. This is not helped in a mainstream environment, where the emphasis is often on specific academic achievement, such as GCSEs, in a given timeframe i.e. in Years 10 and 11.

Recognising the need to encourage, rather than discourage young women, specialist units and other forms of education other than mainstream offer

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<sup>41</sup> As has been achieved in the case of Fife's Young Mothers – see Section 3.44.

considerable encouragement and support with non-academic subjects, if that is needed. Many specialist units also offer post-16 mothers up to two 'compensatory years', during which they can catch up on missed schooling, bring their basic education up to an appropriate level and apply for college, other training courses or jobs. Mainstream schools are not generally set up to offer this level of support. Within mainstream a mother would have to suffer the embarrassment of re-sitting years in order to retake GCSEs or improve basic education.

#### *Personal development and parenting skills*

Not all pregnant young women receive support at home. Many have personal developmental needs, concerns about pregnancy and birth and ultimately need to learn basic childcare. Whilst all these issues are incorporated into the work of specialist units and other educational alternatives developed to accommodate the needs of pregnant young women and young mothers, they are not so easily addressed in mainstream school. Where a young woman remains in mainstream, the school should ensure that she is being supported in a range of personal and parenting development needs by relevant agencies.

#### *Longer term plans*

With the right support, pregnancy encourages rather than discourages most young women to consider longer term plans for education, training and employment. Locating specialist provision for young mothers in or near FE colleges or engaging the mothers in college courses for some part of their statutory-level education helps them to see opportunities they might otherwise not be aware of. They also recognise the difference between the college and school educational approaches and environments.

Nevertheless, however willing a young mother is to attend college post-16, childcare and transport remain major barriers. *Care to learn* is in place to help to overcome some of these difficulties and early indications show that this is an invaluable resource for young parents. There was, however, one criticism raised by some young women in this study and that is the cut off age for support. To be entitled to *Care to learn*: a mother must be under 19 at the start of their course in order to qualify. This, therefore, does not cater for those mothers who wish to wait until their child is a few years old, or have another child, before returning to education.

## **6.7 Conclusion**

This study has explored the educational experiences of pregnant young women and young mothers of statutory school age from their own viewpoint and that of teachers and other professionals. It has highlighted the range of issues, including, peer relationships, teaching styles, school location and family background, which impact on young women's engagement with and perceptions of education, before, during and after pregnancy. Of primary importance to educationalists is the effect of teaching styles, locations and different forms of provision and the way in which schools handle often fragile pupil/teacher or peer relationships.

An overall conclusion, if one can be drawn from such a complex study, is that those young women who were well engaged, enjoying education and succeeding prior to conception are likely to remain so with some small amount of support and some practical adjustments for their safety and comfort. However, those who were not well engaged, enjoying or succeeding at education prior to conception – the majority – need considerable support in a range of settings, offering them choices. Whilst mainstream may be appropriate for some, it is not for many.

Whilst the study was centrally about the education of pregnant young women or young mothers of statutory school age, good practice can be drawn from it for the education of all young women and girls.

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## **Appendix 1: Further data on the ten LEAs involved**

### **Tables:**

- A1 Deprivation Rates (2000); Changes in under 18 and under 16. Conception Rates (1998-2001); and TPU targets for under 18 rates in 2004.
- A2 Number and rates of under 18 conceptions (1998-2001) in the 10 areas; percentage of conceptions leading to abortion 1998 and 2001.
- A3 Number and rates of under 16 conceptions (1998-2001) in the 10 areas.
- A4 Standards Fund Grant; Teenage Pregnancy allocations (2001-3): other government initiatives in the 10 areas.
- A5 Other relevant information on the 10 Research Areas: Rural-urban; Ethnicity; Deprivation rank; Education indices.

### **Sources of data used in tables:**

- A1: Deprivation Rates: Rank of average ward scores; average ward scores; Rank of average ward ranks: *Indices of Deprivation 2000: District Level Presentations*, DETR, 2001.  
Under 18 & Under 16 conceptions and targets: *Conception Statistics for Local Authorities; Teenage Pregnancy Strategy Targets*; TPU 2004: <http://www.info.doh.gov.uk/tpu/tpu.nsf>
- A2: Under 18 Conceptions in England: *Conception Statistics for Local Authorities* TPU 2004: <http://www.info.doh.gov.uk/tpu/tpu.nsf>
- A3: Under 16 conceptions in England: *Conception Statistics for Local Authorities* TPU 2004: <http://www.info.doh.gov.uk/tpu/tpu.nsf>
- A4: Standards Fund Grant 203: DfES 2002-3  
<http://www.dfee.gov.uk/standards fund/allocations1.cfm>  
Sure Start Plus: *Sure Start Plus Unit*, DfES 2001.  
Education Initiatives: *LEA and School Information Service (LEASIS)*, DfES March 2001
- A5: Rural/Urban Mix: Denham C & White I "Differences in urban and rural Britain" *Population Trends* 91, Spring 1998: pp 23-34.  
Ethnicity: 1991 Census.  
Deprivation Ranks: *Indices of Deprivation 2000: District Level Presentations*, DETR, 2001.  
Educational Achievement: *LEA and School Information Service (LEASIS)*.

**Table A1: Deprivation Rates (2000); Changes in Conception Rates 1998-2001; Targets for 2004**

| LEA            | Deprivation         |                     |                    | Under 18    |             |              |                 | Under 16   |            |              |
|----------------|---------------------|---------------------|--------------------|-------------|-------------|--------------|-----------------|------------|------------|--------------|
|                | Rank of Ward scores | Average ward scores | Rank of Ward Ranks | 1998        | 2001        | Change       | Target (-15.0%) | 1998       | 2001       | Change       |
| <b>A</b>       | 26                  | 40.44               | 59                 | 59.3        | 59.3        | <b>+ 9.0</b> | 46.2            | 10.7       | 11.1       | <b>+ 3.7</b> |
| <b>B</b>       | 5                   | 56.18               | 3                  | 56.2        | 57.2        | <b>+ 1.8</b> | 47.8            | 9.9        | 12.7       | <b>+28.3</b> |
| <b>C</b>       | 43-281              | 23.42               | 52-279             | 37.1        | 36.9        | - 0.5        | 31.5            | 5.9        | 7.5        | <b>+27.1</b> |
| <b>D</b>       | 27-211              | 34.02               | 17-199             | 42.3        | 36.3        | -14.2        | 36.0            | 7.7        | 5.5        | -28.6        |
| <b>E</b>       | 17                  | 63.8                | 11                 | 71.8        | 63.8        | -11.4        | 61.0            | 13.0       | 13.5       | <b>+ 3.8</b> |
| <b>F</b>       | 94                  | 28.47               | 116                | 51.0        | 52.3        | <b>+0.2</b>  | 44.2            | 10.7       | 11.4       | <b>+ 0.7</b> |
| <b>G</b>       | 49-179              | 28.84               | 25-157             | 40.4        | 34.1        | -15.6        | 34.3            | 7.7        | 6.9        | -10.4        |
| <b>H</b>       | 7-169               | 34.48               | 4-173              | 56.8        | 44.5        | - 21.6       | 51.1            | 12.0       | 8.3        | -30.8        |
| <b>I</b>       | 114                 | 25.78               | 146                | 49.5        | 46.7        | - 5.7        | 42.1            | 9.3        | 8.8        | - 5.4        |
| <b>J</b>       | 3                   | 58.05               | 5                  | 57.2        | 44.8        | -21.7        | 48.6            | 8.2        | 6.4        | -22.0        |
| <b>ENGLAND</b> | <b>1-345</b>        |                     | <b>1-345</b>       | <b>47.0</b> | <b>42.3</b> | <b>-10.0</b> | <b>40.0</b>     | <b>8.9</b> | <b>7.9</b> | <b>-11.2</b> |

**Table A2: Number and Rates of Under 18 conceptions; 1998-2001; Percentage ending in abortion 1998 & 2001**

| LEA      | Number |      |      |      | Rate per 1,000 aged 15-17 |      |      |      | Abortion Ratio |          |
|----------|--------|------|------|------|---------------------------|------|------|------|----------------|----------|
|          | 1998   | 1999 | 2000 | 2001 | 1998                      | 1999 | 2000 | 2001 | 1998 (%)       | 2001 (%) |
| <b>A</b> | 258    | 287  | 268  | 267  | 59.3                      | 61.6 | 58.7 | 59.3 | 36.8           | 43.8     |
| <b>B</b> | 296    | 293  | 312  | 334  | 56.2                      | 54.1 | 55.6 | 57.2 | 42.2           | 51.2     |
| <b>C</b> | 491    | 525  | 496  | 509  | 37.1                      | 40.1 | 37.1 | 36.9 | 35.8           | 45.0     |
| <b>D</b> | 239    | 246  | 238  | 215  | 42.3                      | 43.9 | 40.9 | 36.3 | 36.0           | 49.0     |
| <b>E</b> | 379    | 355  | 346  | 359  | 71.8                      | 67.5 | 63.3 | 63.8 | 39.1           | 39.6     |
| <b>F</b> | 339    | 355  | 349  | 354  | 52.0                      | 54.5 | 52.8 | 52.3 | 46.0           | 41.2     |
| <b>G</b> | 341    | 333  | 309  | 304  | 40.4                      | 39.3 | 35.4 | 34.1 | 39.0           | 45.0     |
| <b>H</b> | 499    | 469  | 435  | 398  | 56.8                      | 53.5 | 49.0 | 44.5 | 31.5           | 32.0     |
| <b>I</b> | 641    | 625  | 631  | 603  | 49.5                      | 48.5 | 49.1 | 46.7 | 37.0           | 40.5     |
| <b>J</b> | 492    | 473  | 443  | 411  | 57.2                      | 54.3 | 49.3 | 44.8 | 43.3           | 45.7     |

**Table A3: Number and Rates of Under 16 conceptions; 1998-2001**

| LEA            | Number      |             |             |             | Rate per 1,000 aged 13-15 |            |            |            |
|----------------|-------------|-------------|-------------|-------------|---------------------------|------------|------------|------------|
|                | 1998        | 1999        | 2000        | 2001        | 1998                      | 1999       | 2000       | 2001       |
| <b>A</b>       | 50          | 44          | 58          | 52          | 10.7                      | 9.6        | 12.6       | 11.1       |
| <b>B</b>       | 54          | 61          | 69          | 71          | 9.9                       | 10.7       | 12.2       | 12.7       |
| <b>C</b>       | 78          | 98          | 87          | 107         | 5.9                       | 7.2        | 6.2        | 7.5        |
| <b>D</b>       | 45          | 43          | 51          | 32          | 7.7                       | 7.2        | 8.5        | 5.5        |
| <b>E</b>       | 72          | 82          | 71          | 78          | 13.0                      | 14.5       | 12.3       | 13.5       |
| <b>F</b>       | 71          | 90          | 63          | 77          | 10.7                      | 13.1       | 9.1        | 11.4       |
| <b>G</b>       | 67          | 56          | 67          | 63          | 7.7                       | 6.3        | 7.5        | 6.9        |
| <b>H</b>       | 108         | 87          | 83          | 77          | 12.0                      | 9.6        | 9.1        | 8.3        |
| <b>I</b>       | 120         | 134         | 107         | 121         | 9.3                       | 10.4       | 8.0        | 8.8        |
| <b>J</b>       | 74          | 81          | 80          | 59          | 8.2                       | 8.8        | 8.6        | 6.4        |
| <b>ENGLAND</b> | <b>7855</b> | <b>7408</b> | <b>7620</b> | <b>7396</b> | <b>8.9</b>                | <b>8.2</b> | <b>8.3</b> | <b>7.9</b> |

**Table A4: Standards Fund Grant Allocations 2001-3; Other Government Initiatives in Research Areas**

| <b>LEA</b> | <b>Standards Fund Grant Teen Pregnancy 2001-2002<sup>1</sup></b> | <b>Standards Fund Grant Teen Pregnancy 2002-2003<sup>2</sup></b> | <b>Sure Start Plus</b> | <b>Connexions</b> | <b>Education Action Zone</b> | <b>Health Action Zone</b> | <b>Excellence In Cities</b> | <b>EMA pilot</b> |
|------------|--|--|------------------------|-------------------|------------------------------|---------------------------|-----------------------------|------------------|
| <b>A</b>   | B (£100-149,000)   | A (£40-79,000)   | Yes                    | Yes               | Yes (1998)                   | Yes                       | Yes (2000)                  | No               |
| <b>B</b>   | B (£100-149,000)   | A (£40-79,000)   | Yes                    | Yes               | Yes (1998)                   | Yes                       | Yes (1999)                  | Yes              |
| <b>C</b>   | N/A  | N/A  | No                     | Yes (2003)        | Yes (1999)                   | No                        | No                          | No               |
| <b>D</b>   | A (£40-99,000)   | A (£40-79,000)   | No                     | Yes (2003)        | Yes (2000)                   | Yes                       | No                          | Yes              |
| <b>E</b>   | B (£100-149,000)   | A (£40-79,000)   | Yes                    | Yes               | Yes (1999)                   | Yes                       | No                          | Yes              |
| <b>F</b>   | N/A  | A (£40-79,000)   | No                     | Yes               | Yes (2000)                   | No                        | Yes (2000)                  | No               |
| <b>G</b>   | N/A  | N/A  | No                     | Yes (Pilot)       | Yes (2000)                   | No                        | No                          | Yes              |
| <b>H</b>   | A (£40-99,000)   | B (£80-120,000)  | No                     | Yes               | Yes (2000)                   | No                        | No                          | No               |
| <b>I</b>   | C (£150-300,000)   | B (£80-120,000)  | Yes                    | Yes               | No                           | Yes                       | Yes (1999)                  | Yes              |
| <b>J</b>   | C (£150-300,000)   | B (£80-120,000)  | Yes (Pilot)            | Yes               | Yes (2000)                   | Yes                       | Yes (2000)                  | Yes              |

1. Grants have been grouped in 3 bands to preserve anonymity A (£40,000-99,000) B (£100,000 - £149,000) C (£150,000 -300,000)

2. Grants have been grouped in 2 bands to preserve anonymity A (£40,000-79,000) B (£80,000 - £120,000)

**Table A5 Social, Demographic & Educational Indices in the Ten areas**

| LEA            | Rural/Urban context <sup>42</sup> | Ethnicity (% non-white)            | Ethnic Mix <sup>43</sup>                    | Deprivation Index: ward scores <sup>44</sup> | Key Stage 2 (% Level 4 - English/Maths) | GCSEs % gaining 5 grade A-C |
|----------------|-----------------------------------|------------------------------------|---|--|---|-----------------------------|
| <b>A</b>       | Urban                             | 4.8%                               | Indian – 62%<br>Chinese – 11%               | 40.44  | 68 / 65                                 | 35.0                        |
| <b>B</b>       | Inner City urban                  | 42.3%                              | Black – 34%<br>Indian – 54%                 | 56.18  | 64 / 63                                 | 36.3                        |
| <b>C</b>       | Rural (29.7%)                     | 0.88%                              | Black – 27%<br>Chinese – 14%                | 23.42  | 74 / 70                                 | 48.2                        |
| <b>D</b>       | Rural (20.8%)                     | 0.51%                              | Indian – 43%                                | 34.02  | 76 / 71                                 | 49.6                        |
| <b>E</b>       | Urban                             | 17% (sub-area1)<br>12% (sub-area2) | Indian – 72%                                | 63.8   | 65 / 60                                 | 31.7                        |
| <b>F</b>       | Urban                             | 4.86%                              | Black – 46%<br>Indian – 32%                 | 28.47  | 66 / 63                                 | 31.2                        |
| <b>G</b>       | Rural (36.1%)                     | 0.54%                              | Black – 33%<br>Chinese – 16%                | 28.84  | 76 / 72                                 | 52.6                        |
| <b>H</b>       | Rural (13.8%)                     | 0.74%                              | Indian <sup>1</sup> – 37%                   | 34.48  | 74 / 75                                 | 40.3                        |
| <b>I</b>       | Urban                             | 8.58%                              | Indian – 53%                                | 25.78  | 76 / 73                                 | 40.4                        |
| <b>J</b>       | Urban                             | 3.64%                              | Black – 42%<br>Chinese – 19%                | 58.05  | 70 / 66                                 | 35.3                        |
| <b>England</b> | 10% Rural                         | 5.49% (GB)                         | Indian – 50%<br>Black – 30%<br>Chinese – 5% |  | 75 / 72                                 |                             |

<sup>42</sup> In county LEAs bracketed figures show range for districts

<sup>43</sup> "Indian" includes India, Pakistan and Bangladesh

<sup>44</sup> Index of Multiple Deprivation 2000 - Average of Ward Scores. For county areas this is the mean value of the quoted averages for each district.

## **Appendix 2: Confidentiality and project information told to young women prior to interviewed**

Thank you for agreeing to help us. Before I tell you about the study and what I want to ask you I want you to know that anything that you tell me will be in confidence which means that I won't go away and tell anyone else what we talked about. There may be issues that you raise however and things you want to tell me and need help with, that I cannot help you with. So before we start I want to give you this list of numbers, so that if there is anything we raise today that you want to talk to someone about later, you can do so.

I work for Newcastle University. We've been asked to find out about the experiences of young mothers and education, to see if there are ways that the government can help to better support pregnant young women and mothers whilst they are at school and after they have reached 16. To do this we need to ask people such as yourself about your experiences of education both before you became pregnant, when you were pregnant and when you became a mother (**if a mother**). We want to find out things like what help you got when you found out you were pregnant, what you liked and didn't like about school, as well as some questions about your life in general, your family, your pregnancy, motherhood and your plans for the future.

I'd like to ask you some questions but if you don't want to answer any of them, that's perfectly all right - we can skip over anything you'd rather not talk about. And if you want to stop at any time just say so. You don't need to explain why. Also, if there is any question that doesn't make sense then please say.

When our team has finished we'll write a report on what we've found. We'll say what people such as yourself have told us but we won't put anyone's name in it. To make sure that no-one knows what you tell me, I would like you to think of a different name that I can call you and then anything we would like to tell the government in our report will never refer to you personally.

When I've finished I'll leave you some information about how to get in touch with me in case you think of anything else you want me to add.

I'd like to use a tape recorder because that means that I don't miss anything you say. Is that all right with you?

Do you have anything you'd like to ask me before we start?



### **Appendix 3**

**Section A to F were asked of all three groups.**

**Then questions were tailored to the life stage of each group**

#### **Section A**

Demographics

Young women and her family  
Baby's father

#### **Section B**

Living arrangements pre/during/post pregnancy

Educational experience of family

Encouragement to be in education from family/others

#### **Section C**

Feelings about the pregnancy

The process of finding out

Contraception – knowledge, history and use

Family/ baby father/ other's reactions

Support offered

Fears and hopes

#### **Section D**

Schooling pre pregnancy

Primary attended

Middle attended (where appropriate)

Secondary school

Attendance?

If less than good – action on it?

Any trouble at school?

What was enjoyed and not enjoyed?

Relationships with peers/friends

Relationships with teachers

Favourite teacher/ reasons?

#### **Section E**

Schooling at point of pregnancy

Attendance at time when pregnancy discovered

How soon was school told/ by whom/ who was told

School reactions and support/options offered

Contact from outside support agencies?

Baby father issues

Parent's feelings on how pregnancy would impact on education

#### **Section F**

Education during pregnancy

Location during pregnancy

Experience of location/support

Happiness with location/support

Support from school/others during pregnancy

Transport

Time in education

Work load (catch-up support)

Feelings on teachers/pupils

Consulted about education?

Feelings on arrangements

Maternity absence period and planning

Re-integration plans (and timing)  
Subjects being studied/ reasons for choices  
Positive/negative experiences of education during pregnancy

**For pregnant sample**

Plans post birth  
Plans post-16  
Childcare plans/ reasons for choice/ options if 1<sup>st</sup> choice not available  
Support in obtaining childcare

**For all mothers**

Education post – birth  
Support to return?  
What was undertaken – changes from pre-pregnancy?  
Location post-birth (changes? Reasons)  
Experience of location/support  
Happiness with location/support  
Support from school/others post-birth  
Transport  
Time in education  
Work load (catch-up support)  
Feelings on teachers/pupils  
Consulted about education?  
Feelings on arrangements  
Childcare arrangements  
Support to obtain  
Reasons for choice  
What would have been choice if 1<sup>st</sup> choice not available?  
Feelings on arrangements  
Any difficulties in combining motherhood and education?  
Any perceived difficulties that turned out different?  
Positive/negative experiences of education post-birth

**For school-aged mothers**

Plans post statutory age  
Plans post-16/ goals post-16 and longer term  
Childcare plans post-16  
Perceived difficulties in achieving post-16 goals  
Support in obtaining childcare

**For post-school aged mothers**

What were their plans for post-birth/16  
Any difficulties achieving those goals/plans?  
Support from anyone to help achieve goals?  
Childcare used post-16 (reasons for choices)  
What are current activities?  
What are future plans?  
Perceived barriers?

**Final section of questions for all**

Feelings about the importance of school / have feelings about education changed as a result of pregnancy  
How would they encourage their own children to get an education?  
What does social exclusion mean to young mothers?  
Feelings on government strategy to encourage education, training and employment

What options should be available to encourage re-integration?  
What would make it easier for young mums to return to education?  
What support should be available to help mums to continue post-16  
Positive/negative outcomes of becoming pregnant/parent when they did?  
What would they be doing now if they had not become pregnant/parent when they did?

## **Appendix 4**

The list below contains the headings of the information collected in the baseline database.

**Code number**  
**Age At conception**  
**School Year at conception**  
**Accommodation**  
**Ethnicity**  
**First Language**  
**School at conception**  
**Type of school**  
**Provision during maternity leave of absence**  
**Reintegrated to**  
**Studying for**  
**Reason out of education**  
**Attendance overall pre-pregnancy**  
**Attendance overall during pregnancy**  
**Attendance overall post-birth**  
**Pregnancy plan (abortion/birth/adoption etc)**  
**Outcome**  
**Still in relationship with father?**  
**Father info (e.g. age at conception; in education/work; supportive?)**  
**What Childcare**  
**Which subjects (tick as appropriate)**  
**GCSE Year**  
**GCSE Eng Lang**  
**GCSE Eng Lit**  
**GCSE Maths**  
**GCSE Science**  
**GCSE IT**  
**GCSE History**  
**GCSE French**  
**GCSE Spanish**  
**GCSE German**  
**GCSE Music**  
**GCSE Drama**  
**GCSE Geog**  
**GCSE Art**  
**GCSE CDT**  
**GCSE R.E.**  
**GCSE Other**  
**GNVQ IT**  
**GNVQ Business**  
**GNVQ Other**  
**Cert of Achievement**  
**Total [GCSE] Points scored**  
**Post 16 Education plans**  
**Extra notes/comments**

## **Appendix 5: Survey of special schools in 10 English Local Education Authorities**

### **Introduction**

Sixty-six special schools in the ten LEAs were surveyed for this study. 23 replied providing a response rate of 35%. Few of the special schools that responded had had pregnancies continuing to motherhood among their pupils; 17 of 23 had had none in the last five years. The schools' views on how they would have dealt with informing parents and services if need had arisen were similar to those reported by mainstream schools, as were their views on how the presence of pregnant girls or young mothers affected the school.

The majority of schools thought it was necessary to encourage the education of disadvantaged young women (21 of the schools out of 23). Half the special schools had learning mentors and worked specifically on educational aspirations, and a few schools had girls-only clubs, peer education and single sex classes. As with the mainstream schools, the key points used to improve this were learning mentors and work on educational aspirations. Some of the schools made the following points:

*In a small special school like [ - ] we rarely have above 20% of the gender balance. As a consequence girls are given every opportunity to access the curriculum on equal terms and supported disproportionately given their low numbers.*

*Because we are a special school the whole ethos of the school is towards the education of the disadvantaged*

*At[ - ]all pupils are disadvantaged because of their learning disabilities. The school provides equal support to both gender groups and where appropriate girls only social skills work and work on raising self-esteem.*

### **Barriers to the Education of Young Mothers**

When asked about the importance of possible barriers to a young mother's education, special school respondents gave similar answers to mainstream ones.

**Table A1: Barriers to the education of young mothers: special schools**

| <b>Barriers to the education of young mothers</b>               | <b>School-aged mothers</b> | <b>Post-statutory mothers</b> |
|---|----------------------------|-------------------------------|
| <b>Low self esteem</b>  | 78%                        | 87%                           |
| <b>Poor living conditions</b>                                   | 77%                        | 71%                           |
| <b>Young mother's lack of interest in school</b>                | 72%                        | 69%                           |
| <b>Lack of childcare facilities</b>                             | 68%                        | 73%                           |
| <b>Lack of parental support</b>                                 | 68%                        | 53%                           |
| <b>Family difficulties</b>                                      | 61%                        | 56%                           |
| <b>Location of childcare</b>                                    | 59%                        | 73%                           |
| <b>Affordability of childcare</b>                               | 58%                        | 73%                           |
| <b>Poor education previous to pregnancy</b>                     | 44%                        | 44%                           |
| <b>Lack of choice of educational alternatives</b>               | 39%                        | 40%                           |
| <b>Poor relationship with father of the child</b>               | 35%                        | 47%                           |
| <b>Father of child at the same school</b>                       | 35%                        | 27%                           |
| <b>Attitude of peers</b>  | 33%                        | 33%                           |
| <b>Lack of pro-active support and encouragement from school</b> | 29%                        | 20%                           |
| <b>Attitude of teachers</b>                                     | 28%                        | 21%                           |
| <b>Poor support from school previous to pregnancy</b>           | 24%                        | 7%                            |
| <b>Attitude of community</b>                                    | 19%                        | 33%                           |

It was clear that teenage pregnancy and motherhood was a very unusual experience for the special schools in the sample.

## **Appendix 6: Aspects of ethnicity and religion**

Originally this research had also sought to explore the influence of ethnicity, socio-economic background, family composition and religion on engagement with education. However, after data collection it was recognised that there was insufficient data collected in order to satisfactorily do justice to these specific areas. Some issues of importance were however raised in relation to ethnicity and religion. These are discussed below.

### **How does ethnicity affect how the young mother and others view her educational potential?**

#### **Asylum and immigration**

One of the LEAs in the study had a relatively high rate of asylum seekers. Of the ten young women interviewed, two were seeking asylum. Another was in England staying long term with relatives, having been sent unaccompanied, and pregnant, at the age of 14 from Ghana. All these young women presented particular issues in relation to education. For example, two of the young women were not at a comparable stage of education to their English counterparts when they arrived in the country. Thus, the LEA was having difficulty finding appropriate places for them.

The difficulties young asylum seekers face in integrating into mainstream school is made considerably worse if they are also pregnant. Some, like the young woman from Ghana, also have little in the way of family to support them through pregnancy and birth at this difficult time. For these young women, with multiple difficulties, the support of the reintegration officer was absolutely vital. Below highlights the story of one young woman to illustrate these complexities:

#### **Mary's story**

Mary's own mother was in detention, awaiting the results of an appeal against deportation. The young woman and her younger sister were living with the mother's boyfriend. During this time the young woman became pregnant for the second time, the first having ended in termination. However, she did not realise until two days before she gave birth. At the age of 15 she was having to deal alone with getting her younger sister to school, before taking herself to hospital to have the baby. Following the birth she agreed to have the baby adopted. At the point of interview, less

than a week post-birth, she was confused and in denial, believing the baby had already been legally adopted, which was clearly not the case. The reintegration officer was trying to clarify what had happened, liaise with social services, the young woman's own mother, who had suffered a breakdown whilst in custody, the family's lawyer, the young woman's mother's boyfriend and the baby's father. She was the only one with any overview of the situation and the only one able to communicate effectively with the young woman, who was refusing ever to return to school.

Any further research into the needs of younger and unaccompanied asylum seekers should pay attention to the experience of the small minority who become pregnant.

### **Does religion present specific problems in relation to re-integration into education?**

As 79 of the 93 interviewees were white and the majority of the whole sample reported 'no religion', there was insufficient data to make a robust analysis of the effects of religion. However, there are indications of issues to be considered. For example, whilst some catholic schools were supportive on the grounds that the young woman had not chosen to terminate the pregnancy, others were negative and encouraged, or directly told, the young woman to leave, as they thought pregnancy inconsistent with the schools religious ethos. The two quotes below show this contrast well, the first from a school, and the second from a young mother:

*Teenage girl could have chosen to abort. The decision to continue with pregnancy deserves all the support school can give – supports our catholic ethos on sanctity of life.*

*She (ewo) told the school and they said i couldn't go back because it was a catholic school and so i had to have a home tutor. It was all pretty negative. Cause we rang her (ewo) back up and asked what was happening and she said well it's not good news I'm afraid, they said they won't have Lucy back because of it being a catholic school an' that. She was a bit annoyed about it because i needed support... the school didn't suggest anything else they said i could not go back there because it was a catholic school and i was pregnant. The school didn't give me any choices; they never even spoke to me about it all. **Lucy, 15, Area F.***



Asian young women are faced with all the problems of being pregnant whilst at school but also deal with cultural stigma attached to their situation. Reintegration officers have commented on the 'disappearance' of Asian, particularly Muslim young women from school, who re-emerge later having been to their country of origin either to give birth or to be married. Many of course, do not return. Speaking of one Asian mother, a reintegration officer commented that she suspected the young woman had been married to the father of her child for the community to be as accepting as they were.

However, for some Asian young women, school provides such a strong sense of identity that they are determined to continue if they get pregnant, as the quote below indicates:

*I think it was easier for me at school because i could mix with other kids and get out of my home and my culture. at school i had white friends and Bangladeshi friends too and i could sort of cross over, at home it's quite strict, not strict, but you have to be very respectful all the time and remember your culture and I've grown up here so i want both sides, i could get that at school. **Jenny, 17, Area E.***