

East Dunbartonshire

GUIDANCE

GUIDANCE FOR SCHOOLS TO SUPPORT YOUNG PREGNANT WOMEN AND YOUNG PARENTS TO REMAIN IN EDUCATION

2018-2021



Approved By:	Date:
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1. INTRODUCTION

Achieving Equity and Excellence for all learners in East Dunbartonshire Council is our central aim. This includes those young people who have come to parenthood at an early age. Pregnancy in young people requires focused intervention because of its strong associations with a range of social, health and economic inequalities and exclusion. Poorer outcomes are not only associated with the young women and men who become parents but also with the outcomes and life chances of their children. Many of these poorer outcomes are not inevitable but are the result of a number of structural and attitudinal barriers that young parents encounter. How services are constructed and delivered can have a significant impact on helping young parents and their families positively adapt to their new circumstances. By working together services can provide support to young people around health, social care and housing, and enable young people to stay connected within education, which can achieve improved outcomes for our young people.

In 2016, the Scottish Government published the Pregnancy and Parenthood in Young People (PPYP) Strategy 2016-2026, underpinned by the United Nations Convention on the Rights of the Child (UNCRC) and Scottish Government's Getting it right for every child (GIRFEC) approach. This is the first Scottish strategy focusing specifically on this topic. All Community Planning Partnerships in Scotland were tasked to provide leadership and coordinate a local PPYP action plan based on the national outcomes. To meet the outcome "young parents are supported to stay in education, training or employment" Local Authorities in partnership with other community planning partners were tasked with ensuring plans are in place to enable young pregnant women and young parents to continue in appropriate education setting.

The teenage pregnancy rate (all conceptions i.e. live births and abortions) in East Dunbartonshire, as across Greater Glasgow & Clyde and Scotland, has been decreasing in recent years. In 2016 East Dunbartonshire had one of the lowest teenage pregnancy rates across Scotland at 15.8 per 1,000 women under 20^a. Yet whilst teenage pregnancy rates are reducing, an inequality gap can be seen where young women from the most deprived areas of Scotland are almost 5 times more likely to experience a pregnancy than those from the least deprived areas. This is clearly evident in East Dunbartonshire where the rates in the more deprived areas (Auchinairn, Harestanes, Hillhead and Lennoxton) are higher than the overall East Dunbartonshire rate and, in some cases, the Scottish rate^b.

^a ISD Scotland, *Teenage Pregnancy Data*, July 2018: <http://www.isdscotland.org/Health-Topics/Maternity-and-Births/Teenage-Pregnancy/>

^b East Dunbartonshire Children's Needs Assessment 2018

2. RATIONALE

Education has a crucial contribution to make towards improving the life chances of young women who become pregnant when of school age, including those who wish to remain in education after the statutory leaving age. Not only can schools enable young women to become successful learners, they can also provide a supportive and nurturing environment in which young women can grow in confidence and adapt to their new, dual role of being both young mothers and students. Young women who are welcomed back into education will then hopefully develop educational aspirations for their own children.

This guidance aims to assist schools to recognise and meet the needs of school age pregnant women and young mothers, enabling them to maintain their education, reach their full potential and remain as fully integrated in the school community as possible.

This guidance has been developed through consultation with local education colleagues and through the work of Glasgow City Council's Meeting the needs of Young Parents Guidance Notes^c

3. ETHOS, RELATIONSHIPS AND NURTURING PRINCIPLES

The specifics of the support required will naturally vary depending on each young person, and will be positioned in the context of the existing school values and ethos. This will be centred around the GIRFEC approach and in conjunction with the East Dunbartonshire Council *Attainment, Achievement & Equity for All: Framework to ensure Wellbeing*.

At its most basic level, staff ensure children are **safe, healthy, achieving, nurtured, active, respected, responsible and included**. They do this by developing positive and supportive relationships that are founded on a climate of mutual respect within a strong sense of community, shared values and high expectations.

Nurturing Principles are known to impact positively on wellbeing and attainment in schools and all East Dunbartonshire schools provide a safe and nurturing learning environment for learners. Nurturing Principles are at the core of each school's Wellbeing Policy, and whilst consideration should be given to each of the six

^cGlasgow City Council's Meeting the needs of Young Parents Guidance Notes - <http://www.glasgow.gov.uk/CHttpHandler.ashx?id=12195>

principles^d, when supporting a young parent to stay at school, the principle '*nurture is important for the development of wellbeing*' is core.

3.1 The Wellbeing Pathway

When a staff member identifies or receives information that may indicate a possible barrier to a pupil's wellbeing, the needs of the pupil are considered within the Wellbeing Pathway, also known as National Practice Model (see Figure 1 below).

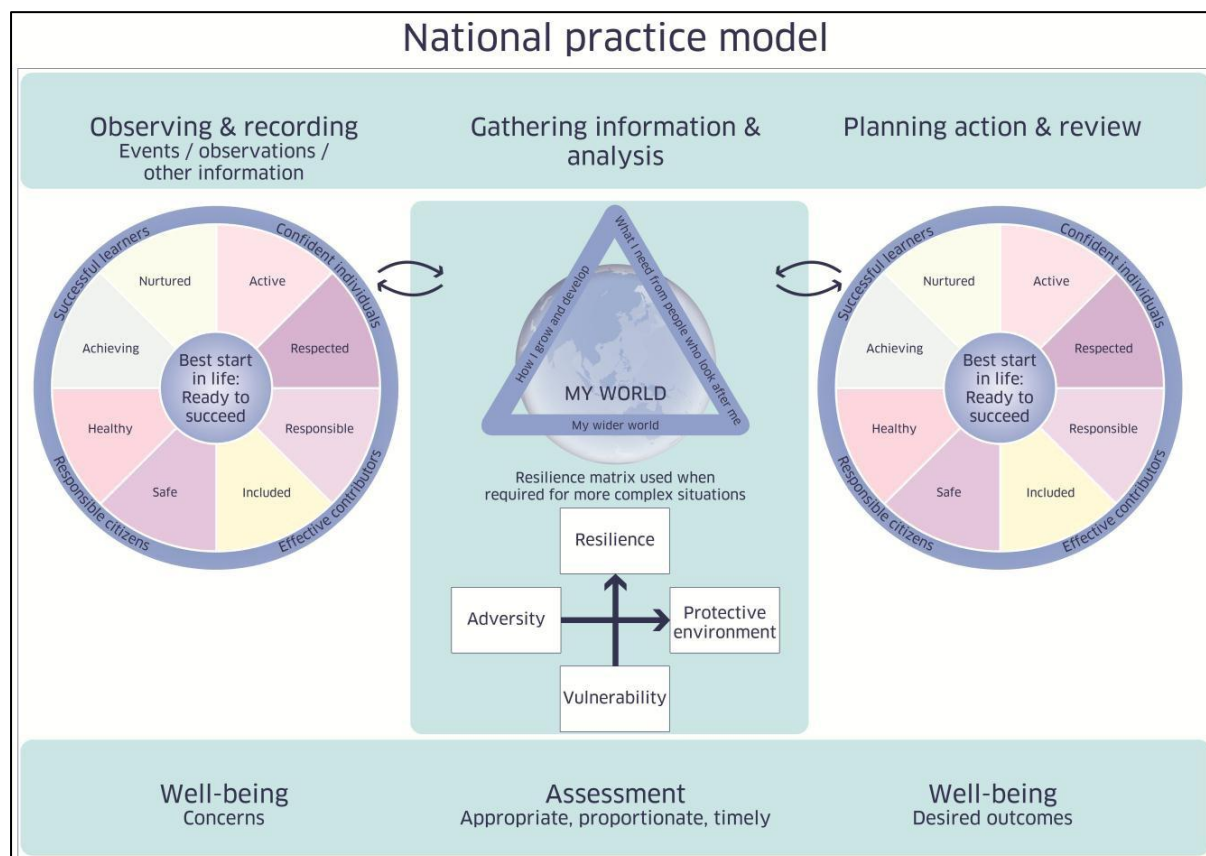
The staff member identifies the next step in the Wellbeing Pathway by reviewing the information contained within the Wellbeing Assessment and coordinating the Wellbeing Plan on SEEMIS. The staff member also:

- Ensures that the 5 Key GIRFEC questions are answered
 - What is getting in the way of this child or young person's well-being?
 - Do I have all the information I need to help this child or young person?
 - What can I do now to help this child or young person?
 - What can my agency do to help this child or young person?
 - What additional help, if any, may be needed from others?
- Arranges Team Around the Child meeting dates
- Considers whether support needs are single or multi-agency
- Considers whether a multi-agency chronology is needed
- Considers whether there is a need for a Lead Professional
- Considers whether there is a need for a Child's Plan
- Considers and accesses Requests for Assistance if there is a Child Protection concern. (Please note: pregnancy is not automatically a Child Protection concern. Refer to the Child Protection section below)

Throughout this process no information can be disclosed to the parent/carer or any external agencies without the consent and permission of the young person unless there is a Child Protection concern.

^d The Nurturing Principles are: children's learning is understood developmentally, the classroom/playroom offers a safe base, nurture is important for the development of wellbeing, language is a vital means of communication, all behaviour is communication and transitions are important in children's lives.

Figure 1. The Wellbeing Pathway



4. PRACTICE

4.1 Initial Responses to suspected or disclosed Pregnancy

A member of staff may be alerted to suspected pregnancy by another staff member, or may be approached directly by the young person, or by a friend or a member of the young person's family.

Meet with the young person and give them an opportunity to talk in a supportive environment. The nature of this discussion will obviously depend on if the young person discloses the pregnancy. If the discussion is the result of a suspected pregnancy, this may be a general discussion of wellbeing to encourage the young person to talk openly and honestly. However, if the pregnancy (or pregnancy suspicion) has already been disclosed by the young person, the discussion may be a more focused appraisal of the young person's situation and next steps.

If there is no confirmation from the young person, but the staff member's concerns in relation to the situation continue, it may be appropriate, depending on the individual young person, to be more direct about information you have been given or to

arrange to speak with the young person again, providing them with some time to reflect.

The overwhelming majority of young women who become pregnant when of school age did not plan to do so. It can therefore take time for her, her family and the baby's father to come to terms with such life-changing news. For many, letting the school know about the pregnancy is an important first hurdle to be negotiated. How the issue is handled by the school can therefore affect both the young woman and the family's immediate and long-term responses to education and wider offers of assistance.

It is very important for the young woman and her family, where appropriate, that the response from the school is non-judgemental and offers reassurance that supports will be available to meet her educational needs regardless of the decision she makes regarding her pregnancy.

A young woman will make a conscious choice about when and who to tell. It is important therefore for her to know that her information will be managed appropriately and with sensitivity. In general, if a young person or her parent/carer do not inform the Head Teacher directly, she should be made aware that the Head Teacher and the relevant Pastoral Care staff have to be informed. Which other school staff are informed should be negotiated with the young woman. If the young woman has not told her parent/carer of the pregnancy it is good practice to encourage her to do so. However, it is not the duty of the school to inform parents of the pregnancy.

4.2 Signposting to appropriate services

If the young woman has not yet confirmed the pregnancy she should be encouraged and supported to undergo a pregnancy test. Options for this include:

- **Young People@Sandyford (for those 17 years old and under)**
 - Young woman should be signposted here where they can have a free pregnancy test and a conversation with a specialist sexual health nurse
 - <http://youngpeoples.sandyford.org/>
 - Young people do not need to make an appointment as they are all drop in clinics (closest drop in clinic can be found on the website)

- **Sandyford Sexual Health Service (for 18 years old and above)**
 - <http://www.sandyford.org>
 - Call 0141 211 8130 for an appointment

- **Home pregnancy tests**
 - Pregnancy tests can be bought from many supermarkets and pharmacies
 - The young woman should be encouraged to follow the instructions in the test, and if required a staff member may need to explain how to do the test
 - A pregnancy test can be done from the first day of a missed period or at least three weeks after having unprotected sex
 - A positive result is almost certainly correct
 - A negative result is less reliable so young woman should be encouraged to try testing again in a few days if their period has not yet arrived or advised to attend one of the other options below

- **Her own General Practitioner (GP)**

If the pregnancy has been confirmed the young woman should be supported to access the appropriate services to ensure her health needs are met and that she has adequate understanding to enable her to make informed decisions about her pregnancy and health care. The following are services the young woman can be signposted to depending on her individual needs and wishes:

- **Young People@Sandyford (for those 17 years old and under)**
 - Young woman can be signposted here where they can have a conversation with a specialist sexual health nurse
 - <http://youngpeoples.sandyford.org/>
 - Young people do not need to make an appointment as they are all drop in clinics (closest drop in clinic can be found on the website)

- **NHS Greater Glasgow & Clyde Pregnancy Central Booking Line**
 - The booking line will arrange the first midwife appointment. It is important to make an appointment with a midwife as soon as possible
 - 0141 232 4005

- **Sandyford Termination of Pregnancy and Referral (TOPAR) Service**
 - The TOPAR service is for women who are pregnant and want to discuss their pregnancy options which might include consideration of a termination.
 - The service offers advice and information, and can help in organising appropriate care.
 - <http://www.sandyford.org/emergencies/abortion-services/>
 - 0141 211 8620
 - People can self refer to the TOPAR service via telephone or can be referred by their GP.

- **Her own GP**

For a further list of services please refer to **Appendix 1**.

4.3 Child Protection

If the young woman is under the age of 16 or is a vulnerable young woman aged 16 to 21 years (e.g. those who are, or have been, subject to statutory measures of supervision) please refer to the criteria in the **East Dunbartonshire Sexual Health Protocol for Sexually Active Young People**. If it is assessed that the pregnancy is the result of mutually-agreed teenage sexual behaviour in which there are no concerns of abuse or exploitation, the matter should **NOT** be considered a child protection matter: the emphasis should be on ensuring that the young woman's health, educational, social and emotional needs are appropriately assessed.

4.4 Looked after children

Children who are subject to statutory measures of supervision, whether they are looked after at home or away from home will have a Child's Plan. Any necessary amendments to the Child's Plan should be reflective of changes in the young women's circumstances. This should include the pregnancy where appropriate; however, it is important to be mindful of the young women's right to privacy and confidentiality. If professionals and/or family members participate in the forum where the Child's Plan is reviewed, and the young woman does not wish her pregnancy to be disclosed to such individuals, this should be respected. The caveat to this may be where Child Protection concerns exist.

More information can be found in the **East Dunbartonshire Sexual Health Policy for Children and Young People who are looked after**.

4.5 Educational Planning During Pregnancy

It is important to highlight to the young woman, and her family where appropriate, that educational attainment is still possible and desirable and that the school will consider options as to how best to manage the young women's needs, both before and after the baby is born, taking in to account her individual circumstances. The key to supporting young women is regular communication, both formally and informally. A link person should be identified within the school for this purpose. Ideally, this would be a person the young woman has a good relationship with and who has responsibility for pupil support. The link person should meet with the young woman, and family where appropriate, to discuss her educational progress and any other issues they may need support with. From research in Glasgow City Council

these meetings serve to encourage attendance, help to motivate the young women and allow the school to respond to needs that will invariably change during the pregnancy and in the post-birth period.

Alongside her educational needs, young women may experience a range of social and emotional issues that may affect their ability to continue to engage with learning. These issues could include perceived bullying by other students, experiencing discrimination, having mixed feelings about the pregnancy, mood swings or depression, conflict with the father of the baby (particularly if he is in the same school), disruption at home, financial or housing worries. It is not the school's responsibility to respond to some of these issues but acknowledging that they exist and signposting to appropriate services can be invaluable to the young woman and her family.

4.6 Initial Planning Meeting

The purpose of the initial planning meeting is to give the young woman an opportunity to be involved in decisions around her future, allow her and her family to discuss their concerns and for them to be reassured by school staff that all efforts will be made to best accommodate her needs. Research indicates that emotional support and re-assurance are of equal importance to practical help.

There should be no requirement to make any decision regarding the young person's future in terms of leaving school or returning to school at this time. However various options may be presented and discussed, with the preferred first instance being assisting the young woman to either continue or re-engage with learning at their own school (as this is where their educational needs and friendship networks have been established).

It is important that this is a positive meeting where it is explained that it is perfectly feasible for pregnant young women and young mothers to attend school and successfully achieve their educational potential. The emphasis should be on the young woman maintaining, as much as possible, full attendance and continuation of all of her subjects. It is recognised that this may not always be achievable and discussion regarding alternatives can take place if this becomes necessary. It is important to that the focus is on continued engagement in education.

Points which could be discussed at the meeting include:

- The young woman's current academic potential and work required to maintain or improve on this.
- The expected delivery date of the baby and how this may affect her studies e.g. preliminary examinations, final examinations, portfolio deadlines, work experience etc.

- Which school staff will provide day-to-day support and be the main contact person for the family. To date, this has tended to be the young woman's pastoral care teacher.
- Immediate requirements in school, including who needs to know, what practical supports are required etc.
- How time off during the pregnancy will be managed, for example to attend midwife appointments and antenatal classes or if there are pregnancy complications.
- How time off after the baby has been born will be managed
- How to maintain studies during time off e.g. home tuition, work being sent home etc.
- How other professionals can contribute to the support package.
- Childcare considerations for returning to school and assistance that can be offered^e.

Practical supports that have made a real difference to the school experience of young women during pregnancy include:

- A toilet pass.
- An 'early class release' pass, to avoid busy corridors, or the rush for the school bus.
- Transport to examinations.
- Additional support to allow the young woman to catch up on any work missed due to absences.
- Supplying school work for the holidays to enable the young woman to 'get ahead' of her class in preparation for time off.
- Arranging online work for easier access.
- Referring a young woman for counselling.
- Booking a careers interview to help a young woman plan ahead.
- Being flexible with uniform requirements as pregnancy progresses.

The most important support is a positive, welcoming and non-judgemental approach by all staff in school.

4.7 Reviews/Pre-Birth Planning Meeting

It is good practice to review progress to ensure that arrangements are in place to cover any work that needs to be completed during the period of absence and to discuss arrangements for after the baby is born. This is also a useful meeting for learning whether the measures that were put into place during pregnancy were helpful or not.

^e Please refer to the East Dunbartonshire Council Early Years Admissions Policy (currently under review to be finalised early 2019)

The development of a plan around the birth period needs to take a balanced and sensitive approach, particularly taking into account the emotional and physical demands that will be placed on a new mother. Research and experience from Glasgow City Council indicates that if this process is handled sensitively, actually having a plan (even if it needs to be adapted) helps to encourage and motivate young women to return to school and provides reassurance that they will be welcomed back to school and that motherhood is not a barrier to learning. Also, having a structure in place can enable young women to feel a measure of stability during a time that can be unsettling.

At the time of the due date/birth the health and wellbeing of mother and baby should be prioritised.

4.8 Pregnancy Loss

The loss of a pregnancy, even one that was not planned, is a very emotional time for any mother. Should a young women experience pregnancy loss, this must be responded to with all the sensitivity and support we would expect for any woman.

The member of staff identified as the link contact person should contact the young woman, or parent/carer if appropriate, to provide reassurance that, when she is ready, a meeting can be arranged to discuss the young women's needs in respect to her return to school. If available, the offer of counselling services could be offered at this point or in the future.

Planning for return to school should be at the young women's pace and short term alternatives, such as those suggested above in respect of the post-natal period, should be considered.

4.9 Educational Planning Post-Birth

After appropriate time taken for maternity leave, options regarding returning to school can be confirmed and decided in order to best support the young mother.

Just prior to the young mother's provisional date for returning to school, a further review meeting should be held to discuss plans for the young mother's return. Circumstances may have changed considerably since the last meeting and plans will need to be adapted accordingly. Factors that may influence what educational programmes the young mother is able to undertake will include:

- The young mother's energy levels
- If the baby is ill
- If the young mother is ill, including post-natal depression

- The level of support that is available to the young mother
- If the young mother feels ready to leave her baby in the care of others.
- The availability of suitable childcare including within the school setting
- If the young mother is breastfeeding

As was the case during pregnancy, schools should be as flexible as possible during this return-to-school phase. Demonstrating a willingness to listen to a young mother's needs can greatly encourage her to remain connected to her social contacts and to learning. Options that could be utilised by schools in this period include:

- Supplying the young mother with additional work for independent study at home.
- Agreeing a part-time timetable.
- Looking at a short-term phased-return to school.
- Ensuring that the young mother is signposted to other appropriate services.
- Authorising time off to attend medical appointments or if the baby is unwell.
- Allowing a young mother to arrive later and register at the office if she is taking her baby to nursery.
- Allowing a young mother time away from classes to express milk and/or breastfeed
- Making arrangements for a private and clean room for expressing and storing breast milk safely if required.
- Being flexible with uniform requirements
- Providing a transport pass to enable a young mother to attend school and visit her baby in hospital.
- Repeat a school year if necessary

4.10 Transgender parents

The terms "transgender" and "trans" are umbrella terms for those whose gender identity or expression differs in some way from the sex assigned to them at birth. The term "gender reassignment" is from the [Equality Act 2010](#) and is the protected characteristic which relates to transgender identities. People with this protected characteristic have additional legal protection.

Young trans boys/men (people assigned female at birth but who are boys/men) and non-binary people (people who do not identify exclusively as a boy or as a girl) may also become pregnant. As with other young people, of school age, who become pregnant the pregnancy may not have been planned. Pregnancy may therefore be a confusing and anxious time for the young person.

When supporting a young person during their pregnancy or after having their baby the staff member must respect the young person's gender identity. If the staff member does not know they should check with the young person what name,

pronoun and terms (e.g. pregnant person) they should use and when. This should be done in private. Apart from this, the staff member should follow the process outlined in this guidance for supporting any young person who is pregnant or has had a baby.

For further information staff can refer to LGBT Youth Scotland's Guidance for Schools in Scotland on ["Supporting Transgender Young People"](#).

4.11 The Needs of Young Fathers

Whilst this guidance has overwhelmingly focused on the needs of young women who become pregnant when of school age, it is also recognised that schools can offer similar types of support to young men who come to fatherhood at an early age.

Again, acknowledging that, for the vast majority of young men, the pregnancy was not planned; they too will have a range of responses and mixed emotions about their potential new role and responsibilities. These may be more emphasised depending the nature of their on-going relationship with the young woman and if they attend the same school. Authorising agreed absences to allow the young man to attend medical appointments and to be present at the birth are examples of how schools can provide support.

APPENDIX 1. USEFUL SERVICES, RESOURCES AND CONTACTS

Sandyford: NHS Greater Glasgow & Clyde Sexual Health Services

All of the services below are available to women, men and young people, of all sexual orientations, for example heterosexual or gay. They offer information, advice and services relating to a number of sexual, reproductive and emotional issues:

- Pregnancy
- Testing and treatment of sexually transmitted infections
- HIV Testing
- Counselling
- Hepatitis testing and vaccination
- Free condoms
- Contraception (birth control) including emergency contraception and male sterilisation (vasectomy)
- Women's health problems including gynaecology and menopause
- Termination of pregnancy (abortion)
- Rape and Sexual Assault Support
- Gender Identity Service
- Clinic for people who sell or exchange sex

www.sandyford.org

0141 211 8130 (to make an appointment)

Young People @ Sandyford

Dedicated sexual health service for young people aged 17 and under. You do not need to make an appointment as all the clinics are drop-ins.

<https://youngpeoples.sandyford.org/>

Free Condom Service

Free condoms are available to anyone who wants them in venues across East Dunbartonshire and Greater Glasgow and Clyde.

<http://www.freecondomsglasgowandclyde.org/>

Sandyford Termination of Pregnancy and Referral (TOPAR) Services

<https://www.sandyford.org/emergencies/abortion-services/>

0141 211 8620

NHS Greater Glasgow & Clyde Pregnancy Central Booking Line

You should make an appointment with a midwife as soon as possible.

0141 232 4005

East Dunbartonshire Social Work Services

<https://www.eastdunbarton.gov.uk/health-and-social-care/services-children-families>

0141 777 3000

LGBT Youth Scotland

Information, advice and support for young people including youth groups.

www.lgbtyouth.org.uk

0141 552 7425 (Glasgow telephone number)

LGBT Helpline Scotland

Information and support by LGBT Health & Wellbeing.

<https://www.lgbthealth.org.uk/helpline/> (online webchat available Tuesdays 3-9pm)

0300 123 2523 (available Tuesdays and Wednesdays 12-9pm)

helpline@lgbthealth.org.uk (email anytime and they will get back to you during office hours)

Childline

www.childline.org.uk

0800 1111

Talking Together Book Collection

This special book collection is available in all East Dunbartonshire Libraries and is aimed at parents and carers to support them to confidently 'chat' with their child about growing up, relationships and sexual health. The books have a colour coding system to assist parents and carers to select the most suitable material for the developmental stage of their child. These books are neither intended nor promoted at children to read on their own, but rather are for parents and carers to use alongside their child.

<https://www.edlc.co.uk/libraries>

Family Nurse Partnership (FNP)

FNP is a preventive, intensive home visiting programme offered to first time young mothers (aged 19 and under) and their families. Young women are offered the programme in early pregnancy (before 28 weeks gestation) by their midwife and are visited by a specially trained Family Nurse until the baby is two years old. The programme is voluntary and is designed to tap into the client's intrinsic motivation for change.