Pregnant and parenting youth face sometimes overwhelming challenges to staying in school, particularly in mainstream public school. This fact sheet has been produced from data provided by youth who were currently or had ever been pregnant, and from those who were caring for their own child or children. These youth were all aged between 12 and 19 and were attending mainstream public school where they completed the 2013 BC Adolescent Health Survey.

Overall, 1% of male and female youth in BC reported they had ever been pregnant or caused a pregnancy. This was a decrease from 2% in 2008, and a return to the 2003 rate. An additional 1% of youth were unsure if they had been involved in a pregnancy or were currently pregnant.

Among youth who reported they had engaged in sexual intercourse, 1 in 20 (5%) had been involved in a pregnancy. This was a decrease from five and 10 years earlier (7% in 2008).

Youth who were more likely to have been involved in a pregnancy

Some youth were at greater risk of being involved in a pregnancy. These included:

- Youth who first had sex before their 14th birthday (15% vs. 3% who first had sex when they were 14 or older).
- Youth in rural areas (2% vs. 1% in urban areas).
- Youth who had been in government care (7% vs. 1% who had never been in care).
- Youth who had been physically abused (4% vs. 1% who had not been physically abused).
- Youth who had been sexually abused (7% vs. 1% who had not been sexually abused).

Among youth who had been in government care, females were more likely than males to have been involved in a pregnancy (8% vs. 5%). In contrast, among youth who had been sexually abused, it was males who were more likely to have been involved in a pregnancy (11% vs. 6% of females).

Youth who rated their mental health as good or excellent

Challenges experienced by pregnancy involved youth

Mental health

Youth who had never been involved in a pregnancy reported more positive mental health than those who had been. Also, youth who had been involved in a pregnancy were nearly three times more likely to have considered suicide (33% vs. 12%) and nearly five times more likely to have attempted suicide (28% vs. 6%) in the past year, compared to those who had never been involved in a pregnancy. They were also more than twice as likely to have self-harmed (36% vs. 15%).

Among youth who had been involved in a pregnancy, females were less likely than males to rate their overall health as good or excellent (64% vs. 78%) as well as their mental health (49% vs. 69%). They were also more likely to have considered suicide (46% vs. 21% of males), attempted suicide (38% vs. 18%), and self-harmed (49% vs. 21%) in the past year.
Risky sexual behaviour

Youth who had been involved in a pregnancy were more likely to have used alcohol or other drugs the last time they had sex (33% vs. 4% who had not been involved in a pregnancy), with males more likely to have done so than females (38% vs. 28% of females). They were also more likely to have had a sexually transmitted infection (20% vs. 1% who had never been involved in a pregnancy).

Among youth who had sex, those who had been involved in a pregnancy were less likely to have used a condom the last time they had intercourse (46% vs. 70% who had never been involved in a pregnancy), and were more likely to report that they had not used any method to prevent pregnancy (13% vs. <1%).

School attendance

Eighty-three percent of youth who had been involved in a pregnancy had missed at least one day of school in the past month (vs. 57% who had never been involved in a pregnancy), and 47% had missed 3 or more days (vs. 16%).

School plans

In comparison to their peers, students who had been involved in a pregnancy were less likely to be planning to continue their education beyond high school and 7% did not expect to graduate high school (vs. <1% of those who had never been involved in a pregnancy).

Youth who were parenting

Nineteen percent of youth who had been involved in a pregnancy were taking care of their own child or children on an average school day. The health profile of these youth was very similar to that of youth involved in a pregnancy although they faced some additional challenges including being more likely to go to bed hungry because of a lack of money for food, more likely to miss school because of their family responsibilities, more likely to have moved house, and less likely to be getting enough fruit and vegetables or exercise.

Supporting pregnant and parenting youth

Accessing services and supports

Youth who had been involved in a pregnancy or were parenting experienced challenges accessing care and support that they needed. For example, they were more
likely than their peers to have missed out on needed medical care in the past year.

Youth who had been involved in a pregnancy or were parenting reached out for help at greater rates than their peers who had not had these experiences. For example, they were more likely to have approached a friend’s parents for help (30% vs. 18% of those who had never been involved in a pregnancy), a school counsellor (39% vs. 26%), other school staff (24% vs. 16%), a youth worker (21% vs. 8%), a mental health counsellor (19% vs. 6%), a social worker (15% vs. 4%), a telephone helpline (13% vs. 4%), or a nurse (18% vs. 10%). They were less likely to have gone to a family member for help (60% vs. 70% of those who had never been pregnant).

Youth who were living with their own child or children who had approached someone for help in the past year most commonly found a friend (87%) or family member (85%) helpful.
Supportive adults outside family

In comparison to youth who had not been involved in a pregnancy or who were not parenting, those who had were less likely to be able to identify a supportive adult in their life. Among youth involved in a pregnancy, females were more likely than males to have an adult outside of their family they could talk to (52% vs. 27%).

Among youth who had been involved in a pregnancy or were parenting, those who had an adult outside their family they could talk to, or one in their neighborhood who cared about them, were more likely to have only positive future aspirations and to report good or excellent mental health, compared to those without such an adult in their life. They were also less likely to report extreme despair or to miss out on extracurricular activities because they were worried about being bullied.

Helpful relationships

Having a helpful person youth could turn to when they were having a problem was protective for pregnant and parenting youth. For example, those who found a family member helpful were less likely to have missed out on needed medical care than those who did not find their relative helpful (19% vs. 48%*). Similar patterns were seen for youth who found a doctor helpful (19%* missed out vs. 55%* who did not find their doctor helpful) and those who found a sports coach helpful (20% vs. 57%*).

As well, youth were less likely to have missed out on needed mental health services if they found helpful the support they received from a friend (24% vs. 50%* of those who did not find it helpful), a family member (19% vs. 42%*), or a doctor (20% vs. 53%*).
Support that youth involved in a pregnancy found helpful (among those who asked for help)

<table>
<thead>
<tr>
<th>Support</th>
<th>Helpful</th>
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<tbody>
<tr>
<td>Friend</td>
<td>91%</td>
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<tr>
<td>Friend’s parent</td>
<td>81%</td>
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<tr>
<td>Family member</td>
<td>80%</td>
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<tr>
<td>Sports coach</td>
<td>79%*</td>
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<tr>
<td>Teacher</td>
<td>78%</td>
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<tr>
<td>Nurse</td>
<td>76%*</td>
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<tr>
<td>School counsellor</td>
<td>73%</td>
</tr>
<tr>
<td>Doctor</td>
<td>71%</td>
</tr>
<tr>
<td>Youth worker</td>
<td>68%*</td>
</tr>
<tr>
<td>Other school staff</td>
<td>67%*</td>
</tr>
<tr>
<td>Mental health counsellor</td>
<td>60%*</td>
</tr>
<tr>
<td>Social worker</td>
<td>59%*</td>
</tr>
<tr>
<td>Telephone helpline</td>
<td>53%*</td>
</tr>
</tbody>
</table>

Note: The percentage should be interpreted with caution as it has a high standard error but is still within a releasable range.

Note: 21% of Aboriginal youth who had been involved in a pregnancy had asked an Aboriginal education worker for help in the past year, and 17% had asked an Aboriginal Elder for help. Almost all of these youth found this experience helpful.

Having helpful support from peers and adults in their lives was also associated with youth being more likely to rate their health as good or excellent, and being less likely to report extreme stress or despair (in comparison to youth without such helpful support).

Pregnant and parenting youth’s relationship with their teachers was particularly important. For example, those who felt that their teachers cared about them were more likely to report planning to continue their education after high school (77% vs. 50%* who did not think their teachers cared) and to rate their mental health as good or excellent (74% vs. 48%*), and were less likely to have missed out on needed medical care (21% vs. 40%*) or mental health services (18%* vs. 35%*).
Pregnant and parenting youth face many challenges including being less likely to have supportive adults in their lives. However, if they do have adults who will support them and be there for them they are more likely to report better health and positive future aspirations.

Summary

Notes

Where an asterisk (*) appears beside a percentage, the percentage should be interpreted with caution as it has a high standard error but was still within a releasable range.

Additional information about the BC Adolescent Health Survey is available at: http://www.mcs.bc.ca/ahs.