



STATEMENT OF PRINCIPLE

FPNSW believes that teenagers must have access to confidential, non-judgemental sexual and reproductive health services to avoid unplanned pregnancy and safeguard their health and well being. This includes the right to a planned pregnancy or to terminate an unplanned pregnancy.

DATA

There has been a significant reduction in teenagers giving birth in NSW in the last decade. The percentage of mothers who gave birth as a teenager in 2006 was 3.8, a small reduction from 4.3% in 2002. In 1997 6.6% of mothers giving birth were teenagers.

While the rate of teenaged pregnancies in Aboriginal women is higher, it is also trending downwards. The overall proportion of births to Aboriginal teenage mothers declined from 22.3 per cent in 2002 to 20.5 per cent in 2006.

The average age of an Australian woman giving birth is 29.8

(Centre for Epidemiology and Research 2006).

TEENAGED PREGNANCY: THE ISSUES

Teenagers face barriers to reproductive and sexual health services including access to contraception. Cost, distance, issues with Medicare cards and concerns about confidentiality can stop young people using the services they need and these barriers can be compounded in disadvantaged teenagers and those living outside cities. Teenagers who plan pregnancy may experience similar barriers in accessing maternal support services.

Teenage parents are at increased risk of socio-economic disadvantage and may lack practical and emotional support, financial assistance, information and stable housing. These factors can all have a negative impact on their health and the health of their babies.

FPNSW advocates for evidence-based programs to support teenage parents and minimise adverse environmental effects on young families.

The Rights perspective

As a member of the International Planned Parenthood Federation, FPNSW recognises and believes that the right to decide whether or when to have children is implied by the right that all persons have to decide freely and responsibly the number and spacing of their children and to have access to the information, education and means to enable them to exercise this right, and further recognizes that special protection should be accorded to women during a reasonable period before and after childbirth, and, therefore, commits itself to the following:

- All women have the right to information, education and services necessary for the protection of reproductive health, safe motherhood and safe abortion and which are accessible, affordable, acceptable and convenient to all users.
- All persons have the right of access to the widest possible range of safe, effective and acceptable methods of fertility regulation.
- All persons have the right to be free to choose and to use a method of protection against unplanned pregnancy which is safe and acceptable to them.

It is important that young women truly do have a choice. This means that regardless of ethnicity, cultural background, place of residence or financial circumstances, young women can either: have and rear their babies with adequate social and financial support, have and adopt out their babies, or access to safe legal terminations.





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Critique of disparaging discourses around teenaged motherhood

Teenage motherhood is a complex issue reflecting individual, familial and structural forces (Breheny and Stephen 2010). Care needs to be taken when discussing the effects of teenage motherhood for individuals and families to avoid adopting stigmatising, discriminatory language and attitudes.

Aboriginal women are more likely to become young mothers than non-Indigenous young women, and this may reflect different cultural values. While there are identified health, economic and social problems that can attend early motherhood it is important to address these as factors that limit the life choices of young women, rather than focusing on the choice to become a young mother as being problematic in itself. Operating within a reproductive rights framework means respecting the way that women exercise their rights and advocating for adequate social structures to support the families that people choose to have.

REFERENCES

- Breheny, Mary and Stephens, Christine (2010). 'Youth or disadvantage? The construction of teenage mothers in medical journals', *Culture, Health & Sexuality*, 12: 3, 307 — 322, First published on: 11 February 2010 (iFirst) DOI: 10.1080/13691050903513234 URL: <http://dx.doi.org/10.1080/13691050903513234>
- Centre for Epidemiology and Research. NSW Department of Health. New South Wales Mothers and Babies 2006. *NSW Public Health Bull* 2007; 18(S-1). www.health.nsw.gov.au/pubs/2009/pdf/mothers_babies.pdf
- Lewis, Lucy, Hickey, Martha, Doherty, Dorota and Skinner, S Rachel (2009). How do pregnancy outcomes differ in teenage mothers? A Western Australian study. *MJA*. 190:10, 537-541.
- Smith, Gordon and Pell, Jill (2001). Teenage pregnancy and risk of adverse perinatal outcomes associated with first and second births: population based retrospective cohort study. *British Medical Journal*, 323:476.