Inquiry into teenage pregnancy

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1. I am a medical practitioner with, *inter alia*, specialist qualifications in Public Health.

2. I was the Director of Public Health with responsibility for the Tayside Health Board area, including the City of Dundee, between 1994 and 1998.

3. During my time in Dundee (i.e. more than 15 years ago), the issue of high rates of teenage pregnancy in that city was recognised and widely known. Indeed the Dundee rate of teenage pregnancy was the highest in Scotland. It is still the highest in Scotland.

4. It was clear in 1998 that the high Dundee rate of teenage pregnancy, which even then had existed for number of years, was resistant to approaches of first, health education and second, making contraception more readily available.

5. Concurrently there was evidence to suggest that the nature of the family was changing in Dundee: this evidence included the fact that household size in Dundee had reduced by 10 per cent in the 10 years between the 1981 and 1991 censuses. Additionally, the proportion of births of children to unmarried parents in Dundee began to exceed more than half of all births.

6. All of this suggested the need for a close examination of family life in Dundee to examine the underlying social and family dynamics which impact on teenage pregnancy.

7. Accordingly, I commissioned a colleague from academia, Dr Desmond Ryan (D. Phil, MA (Oxon) to undertake an in depth analysis of the issue. Dr Ryan was the Principal Investigator and held the position of Director of Healthcare Education Research at the school of Nursing and Midwifery at Dundee University. Dr Ryan's research colleague was Mrs (now Dr.) Joyce Wilkinson. Dr. Wilkinson secured interviews for the grounded theory research process, collaborated in the theory research process as it evolved and participated in several post-grant presentations.

8. The work took around 1 year to complete and cost at least 8000 pounds of NHS / public money was spent on the project. Notwithstanding this expenditure, Dr Ryan wrote the report *pro bono publico* in his new position as Associate, Department of Nursing Studies, Edinburgh University.
9. The final report to the Tayside Health Board was titled: ‘Distributed Parenting’ – a clinical entity associated with de-industrialisation? I am not aware of the Tayside Health Board or its successor organisations ever having given this report appropriate consideration. For the intervening 14 years the issue has continued unabated, and unresponsive to interventions.

10. Notwithstanding this lack of interest, a number of meetings took place in 1999 to discuss the report’s findings. Organisations that demonstrated interest in the project, by hosting meetings, included the Medical Women’s Federation, the North of Scotland Institute for Medical Education and the Social Work Department of Dundee University. In 2000 Dr Ryan and his colleagues were invited by the Royal Institute of Public Health and Hygiene to be principal speakers at a symposium in London.

11. The extensive project report undertaken by Dr Ryan is now freely available at
https://docs.google.com/document/pub?id=174XvyklsJiddF4QS_ASjiupeHiacfY3i_iYCdt2A3w

In concluding, I invite the Parliament to give this work due, but belated, consideration. The main point to note is that teenage pregnancy is not an issue that can be looked at in isolation. It is a characteristic of de-industrialised Scottish society in the late 20th / early 21st century. I suggest that there is an opportunity for the parliament to make, for the first time, a deep impression on the issue teenage pregnancy. I believe that, of the institutions of Scottish society, only the parliament has the necessary breadth of responsibilities, and wide ranging powers to make the necessary interventions in society. Regrettably the approaches of health education and medical services in dealing with teenage pregnancy have been shown to be severely limited. Similarly, my experience suggests that the National Health Service cannot be expected to contribute anything other than a very limited role in moving the position forward.

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