



Summary of Proceedings

Public Hearing

Held on Wednesday, April 17, 2019

[10:33 a.m. to 12:38 p.m.]

1st Public hearing re: An inquiry into the prevalence of teenage pregnancy and the state's capacity to minimise the occurrence of teenage pregnancy and provide services and assistance to teenage parents.

Venue: J. Hamilton Meeting Room, Mezzanine Floor, Office of the Parliament, Tower D, the Port of Spain International Waterfront Centre, 1A Wrightson Road, Port of Spain.

Committee members

The following committee members were present:

1. Mr. Paul Richards – Chairman
2. Mr. Esmond Forde, MP – Vice-Chairman
3. Mrs. Glenda Jennings-Smith, MP
4. Brig. Gen. (Ret.) Ancil Antoine, MP
5. Mrs. Christine Newallo-Hosein, MP

Joint Select Committee on Social Services and Public Administration
(Including Education, Health, Gender, Tourism, Public Administration, Labour, Culture,
Community Development, and other Social Services)

Witnesses who appeared

The following officials were present:

Ministry of Health (MoH)

1. Ms. Charmaine Jennings - Deputy Permanent Secretary Ag.
2. Dr. Maryam Abdool-Richards - Principal Medical Officer (Institutions)
3. Dr. Adesh Sirjusingh - Director, Women's Health
4. Mr. Lawrence Jaisingh - Director, Health Policy, Research and Planning

Ministry of Social Development and Family Services (MSDFS)

1. Mrs. Jacinta Bailey-Sobers - Permanent Secretary
2. Ms. Vidya Ramgattie - Regional Coordinator, National Family Services Division
3. Mrs. Brenda Mc Cree-Hunte - Coordinator, Retiree Adolescent Partnership Programme

Ministry of Education (MoE)

1. Mrs. Lenor Baptiste-Simmons – Permanent Secretary Ag.
2. Mr. Harrilal Seecharan – Chief Education Officer
3. Professor Dennis Conrad - Manager, Student Support Services Division
4. Ms. Darlene Smith - Guidance Officer II, Student Support Services Division
5. Mrs. Natalie Robinson-Arnold - School Social Work Specialist, Student Support Services Division

Office of the Prime Minister – Gender and Child Affairs (OPM)

1. Ms. Jacqueline Johnson - Permanent Secretary
2. Mr. Bertrand Moses - Coordinator, Child Affairs

Joint Select Committee on Social Services and Public Administration
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Children's Authority of Trinidad and Tobago (CATT)

1. Ms. Safiya Noel - Director, Children's Authority
2. Mrs. Rhonda Gregoire-Roopchan - Registry and Investigation Manager, Children's Authority

Key Issues Discussed

The following are the key subject areas/issues discussed during the hearing:

Issues discussed with the Ministry of Health (MoH)

- i. There was a 32% decrease in teenage pregnancies among girls aged 13-16, and an unspecified increase among the 17-19 age group between 2014 and 2018. However, there were no significant changes in overall rate of teenage pregnancy over the time period.
- ii. The recently implemented Perinatal Information System recorded 9,058 total births in Trinidad and Tobago between 2017 and 2019.
- iii. Approximately 9% of the births within the last two years were to females aged 19 or younger. 3% of births were to girls younger than 18 years.
- iv. The aforementioned statistics may include births to girls who were legally married, given that child marriage was only criminalized in 2017.
- v. Important social factors contributing to teenage pregnancies include poverty, culture, education and geographic factors.
- vi. Health complications experienced by teenage mothers include premature births and high blood pressure.
- vii. Some teenage mothers are discouraged from seeking health services since medical personnel are mandated by law to report teenage pregnancies to the Trinidad and Tobago Police Service (TTPS).
- viii. Some parents do not give consent for their pregnant teenage daughters to access services at public health facilities.
- ix. Other issues encountered at health facilities include the girls' non-compliance with medical treatment and difficulties in following-up with the teenage mothers.

Joint Select Committee on Social Services and Public Administration

(Including Education, Health, Gender, Tourism, Public Administration, Labour, Culture, Community Development, and other Social Services)

- x. Teenage mothers are referred to internal Medical Social Work departments at Regional Health Authorities (RHAs) for psychological services.
- xi. Several initiatives were introduced since 2017 to improve women's health, including the creation of the Director of Women's Health position, increased data collection, and distribution of contraception to mothers after they give birth in hospitals.
- xii. A new policy on sexual and reproductive health is expected to be implemented at the end of 2019.

Issues discussed with the Ministry of Social Development and Family Services (MSDFS)

- i. Statistics from the Global School-based Health Survey (GSHS) and University of the West Indies (UWI) indicate a significant rate of unprotected sex and pregnancy among adolescents and young women, respectively.
- ii. The statistics on teenage pregnancy presented by the MoH and OPM may be underestimated given that they may omit data from the private health sector and aborted pregnancies.
- iii. In June 2018, the Ministry launched a National Campaign on Values, Attitudes and Behaviours to address parenting and child issues.
- iv. The National Family Services Division (NFSD) offers community-based, general parenting workshops and family interventions. Workshops are not specific to treating with teenage pregnancy.
- v. There is no specific framework used to evaluate the success of the parenting workshops. However, a report is prepared at the completion of the workshops to document the activities conducted.
- vi. Following the end of the workshops, the Ministry supports the development of community-based parenting groups to assist participants in retaining the skills and knowledge gained.
- vii. Efforts are being made to increase the staff complement responsible for monitoring and evaluating programmes provided by the Ministry.
- viii. The Ministry later indicated that the Monitoring and Evaluation Unit is adequately staffed with 5 officers. An additional officer is expected to join the unit soon. However, the total complement should be 10 persons.

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(Including Education, Health, Gender, Tourism, Public Administration, Labour, Culture, Community Development, and other Social Services)

- ix. The NFSD performs case management of adolescent pregnancy cases, which includes individual and family assessments, counselling and referrals to other government agencies such as MoH.
- x. Adolescents do not require parental consent to attend individual counselling sessions at the NFSD but initial group sessions usually have a parental presence.
- xi. The Ministry does not currently offer specific grants for teenage parents. However, the Draft National Parenting Policy proposes financial assistance for teenage parents.
- xii. To date, no evaluation has been conducted to estimate the costs of the programmes proposed by the Draft National Parenting Policy.
- xiii. Teenage parents with qualifying households can access public assistance grants.
- xiv. The Ministry can assist the OPM in coordinating teenage pregnancy interventions through its responsibility for national research in the social sector.
- xv. Data on maternal and child health will be sourced from the Multiple Indicator Cluster Survey, which is currently ongoing (by the Central Statistical Office).
- xvi. The Draft National Parenting Policy is currently being reviewed and a second round of consultations will be held over the following 2-3 months.

Issues discussed with the Ministry of Education (MoE)

- i. Given that the compulsory age for educational enrolment ends at age 16, the Ministry lacks data on the number of teenage girls who become pregnant after dropping out of school at/after age 16.
- ii. The Parenting-in-Education (PIE) programme and Health and Family Life Education (HFLE) curriculum include sex education content.
- iii. Although HFLE is provided in all primary and secondary schools, its full implementation is hindered due to the absence of specific HFLE teaching positions.
- iv. Training in the HFLE was provided to approximately 35-40 teachers in 2014/2015.
- v. Denominational schools are permitted to adapt the HFLE curriculum according to their religious philosophy.

Joint Select Committee on Social Services and Public Administration
(Including Education, Health, Gender, Tourism, Public Administration, Labour, Culture,
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- vi. The Ministry has identified schools with higher rates of teenage pregnancy and assigned additional Social Workers, Guidance Counsellors and other resources to these schools (e.g. in Morvant-Laventille).
- vii. There are currently 257 Guidance Officers and Counsellors, and 160 Social Workers in the Student Support Services Division (SSSD). Recruitment efforts are ongoing and aim to increase the number of Social Workers to 373.
- viii. In 2018, there were 7 male students in secondary schools who became teenage fathers.
- ix. Officers from the SSSD provide support to teenage fathers to discourage them from dropping out of school to provide for their child.
- x. Sex education sessions are regularly conducted by Social Workers and Guidance Officers to male students during each school term.
- xi. Pregnant teenagers are given several options to continue their education:
 - i. Reintegration into the school they attended prior to the pregnancy;
 - ii. Transfer to a different school or SERVOL; and
 - iii. Pursuing a combination of technical/vocational and/or academic subjects.
- xii. There is need for increased inter-ministerial collaboration to provide services to teenage mothers¹, and to track students who become pregnant after leaving school at age 16.
- xiii. The Ministry's policy on teenage pregnancy permits pregnant students to attend school until the end of their pregnancy, and they are allowed to re-enter school after giving birth.
- xiv. The higher rates of teenage pregnancy in government schools is linked to several socioeconomic factors related to the communities of the students.

¹ This statement was expressed by all stakeholders.

Joint Select Committee on Social Services and Public Administration
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Issues discussed with the Office of the Prime Minister – Gender and Child Affairs

- i. The Choices Programme was initially administered by the Child Welfare League from 1994. The Adolescent Mothers' Programme was developed in 2001 based on this programme, and came under the purview of the OPM in 2015.
- ii. A review of the AMP revealed that it failed to meet its objectives. Consequently, the programme's funding was suspended.
- iii. A new model for the AMP was developed, in collaboration with the MSDFS and CATT, and will be presented to Cabinet for approval. Its estimated initial cost is approximately \$10 million.
- iv. It is expected that 10 centres for the AMP will be established throughout Trinidad and Tobago.
- v. At present, there is no formal coordination in the provision of teenage pregnancy services among Ministries. However, the OPM is responsible for leading coordination efforts through the National Child Policy which treats with teenage pregnancy.
- vi. There is a need for coordination among approximately 28 agencies throughout the country that provide services to children.
- vii. The National Child Policy has been circulated for public comment and a model will be submitted to Cabinet for approval.
- viii. The OPM's model for addressing teenage pregnancy includes preventative efforts and interventions for teenage mothers and the fathers of the babies.
- ix. The OPM and MSDFS will meet to discuss, among other issues, strategies to combat teenage pregnancy.
- x. A National Children's Registry will be established to identify children in need of care and protection.

Issues discussed with the Children's Authority of Trinidad and Tobago (CATT)

- i. The Authority seeks to provide interventions tailored to the unique circumstances of each teenage mother.
- ii. The Authority may undertake the following interventions: creating a safety plan for teenage mothers and their families, providing medical services, providing

Joint Select Committee on Social Services and Public Administration
(Including Education, Health, Gender, Tourism, Public Administration, Labour, Culture,
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psychoeducation on sexuality, relocating the teenage mother to another residence, and supporting teenage mothers' continued education.

- iii. The Authority forwards information to the Child Protection Unit (CPU) of the TTPS about cases of teenage pregnancy in which it is suspected that an adult male is involved.
- iv. No official investigations have been conducted to ascertain the socio-demographic factors of fathers of babies born to teenage mothers.
- v. Teenage mothers tend to be reluctant to divulge the identities of the father of their babies to protect them from criminal prosecution. This lack of information hinders interventions.
- vi. Existing information on fathers of babies born to teenage mothers suggest that they are young men residing in the same community as the mothers.
- vii. The Authority conducts community outreach to sensitize the public on the characteristics of child abuse.

View the Hearing

The hearing can be viewed on our YouTube channel via the following link:

<https://www.youtube.com/watch?v=THUdpDvWqaw>

Contact the Committee's Secretary

jscspa@tpparliament.org or 624-7275 Ext. 2283

Committees Unit

April 25, 2019