

# Disability and Childbirth

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## Disability and Childbirth among Women with a History of Childhood Maltreatment: A Review of Prevalence and Policy Implications

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### Abstract

- Study involved data from 3 large datasets to examine concurrence of disability and childbirth among young women under age 24 with a history of child welfare involvement.
- More than 1 in 3 mothers with child welfare exposure appears to have a linear relationship with prevalence of serious mental illness.
- Intensity of past child welfare exposure appears to have a linear relationship with prevalence of serious mental illness.
- Among young women with no diagnosed disabilities, the rate of teenage parenthood is almost double in the foster care group compared to those in the national sample.

- Our study's findings have significant implications for current and proposed policy, such as child welfare reform and the healthcare system's response to foster youth.

## The Issue

National levels of births to young mothers, ages 15-19 and 20-24, reached all-time lows in 2011.<sup>i</sup> Nonetheless, rates of early childbearing in the U.S. continue to be notably elevated compared to other industrialized countries, and are particularly high among disadvantaged groups.<sup>ii</sup> Early childbearing can have considerable negative consequences for parents and children and may be a factor contributing to intergenerational transmission of child maltreatment, involvement with the child welfare system, and other adverse outcomes throughout the life course.<sup>iii</sup>

As a group, foster youth are disproportionately likely to enter parenthood at an early age, both while they are in foster care and after exiting the child welfare system.<sup>iv</sup> The population of youth in foster care also present increased rates of certain types of health and disability conditions, particularly those related to emotional and behavioral health. This confluence of disability and child welfare involvement can result in exceptionally vulnerable youth becoming parents themselves who may be in particular need of supportive services.

Older foster youth with disabilities face numerous challenges in accessing health and other disability-related services.<sup>v</sup> Inadequate services and supports may leave transition-aged parents with disabilities less ready to participate in educational and workforce activities relative to their parenting peers without disabilities. Such limitations may also challenge these parents' ability to provide appropriate care for their children.<sup>vi</sup>

## The Study

Our research leverages survey and administrative data from three large datasets to examine concurrence of disability and childbirth among young women under age 24 with a childhood history of maltreatment and/or foster care placement. The [descriptive analysis of multiple datasets with variable measurement strategies](#) allows for a nuanced examination of this issue.

We use data from the (1) [National Youth in Transition Database](#) (2011-2013); (2) [National Longitudinal Survey of Adolescent to Adult Health](#) (1995 – 2008); and (3) an observational cohort from a large, Mid-Atlantic city generated from medical and vital records. We use this data to generate estimates of the prevalence of emotional and behavioral health conditions among young mothers with varying degrees of child welfare involvement as well as estimates of early childbearing among young women with these disability conditions.

## What We Found

More than 1 in 3 mothers with child welfare exposure experience mental or behavioral disability and this prevalence rate is consistent across self-report and diagnosis abstraction from medical claims (Figure 1). This prevalence rate is elevated relative to a comparison group of low-income young mothers without such history. Moreover, intensity of past child welfare exposure appears to have a linear relationship with prevalence of serious mental illness (Figure 2). We classify the intensity of child welfare exposure from lowest to highest beginning with no involvement, followed by substantiated instances of child maltreatment, then receiving in home services, and lastly, child welfare involvement that resulted in placement out of the home. Young mothers with no child welfare contact had the lowest rates of mental health conditions while those that had been removed from their homes as children due to child welfare involvement had the highest rates of several mental health conditions including depression, bipolar disorder, ADHD, and schizophrenia.

Figure 1.

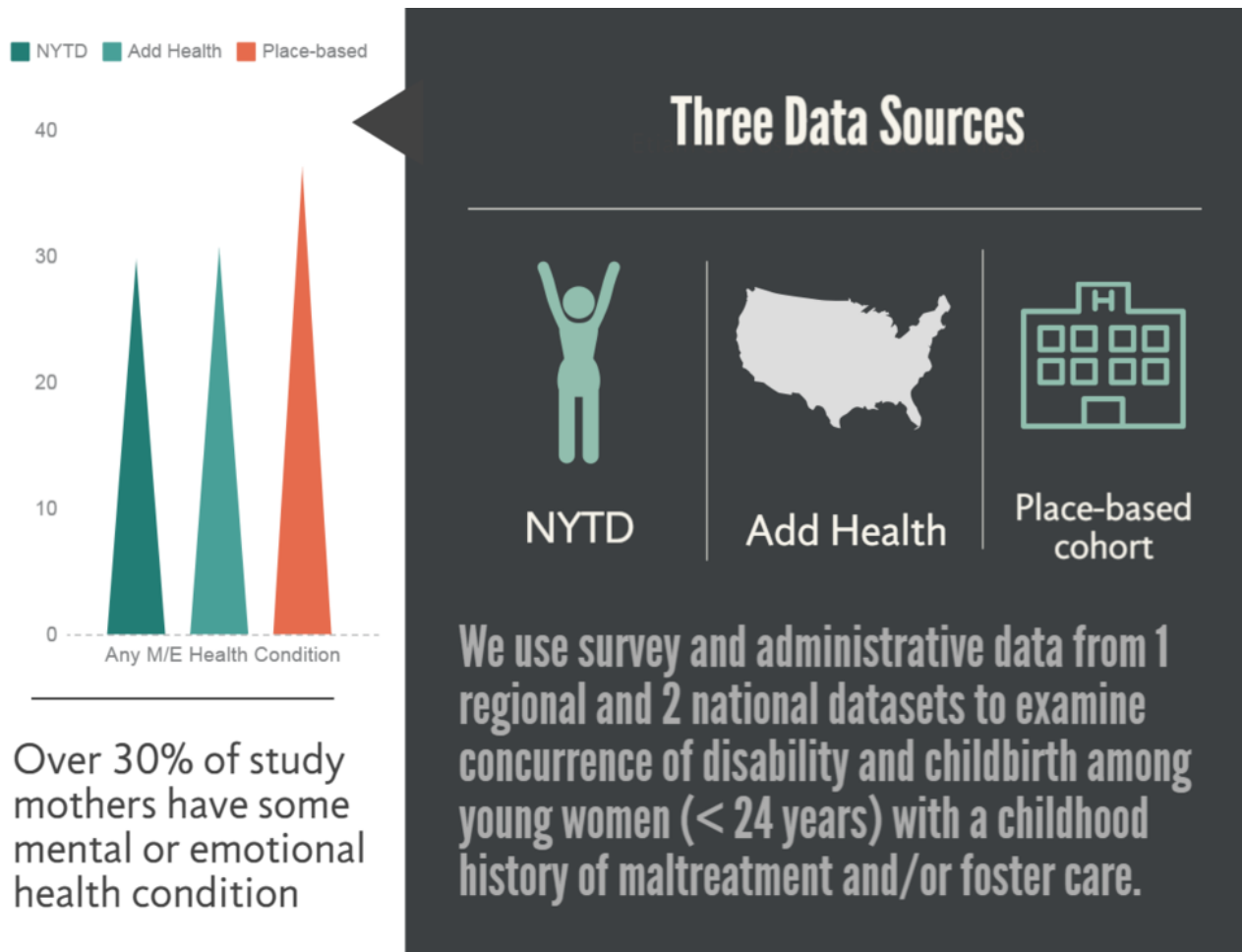
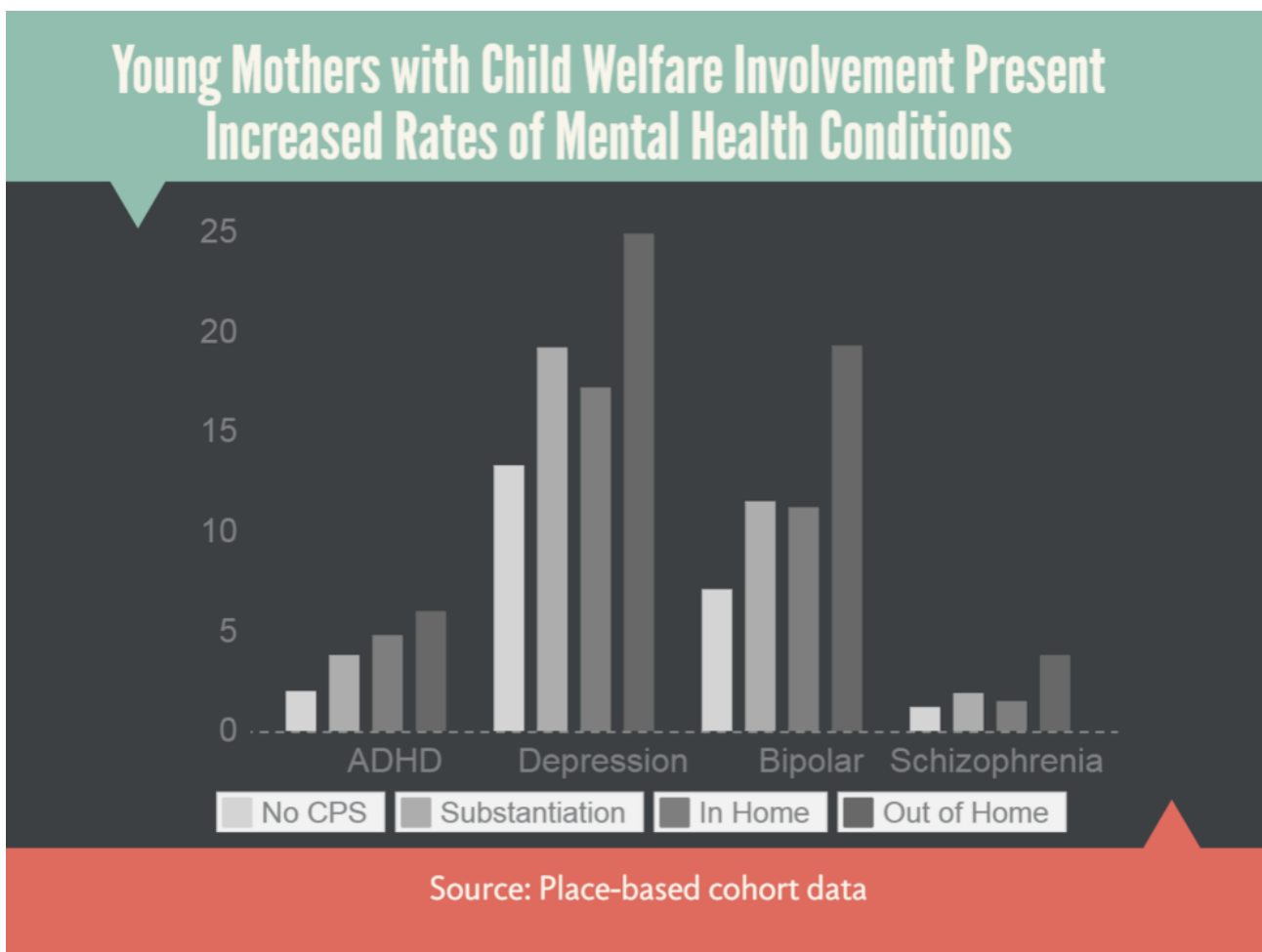


Figure 2.

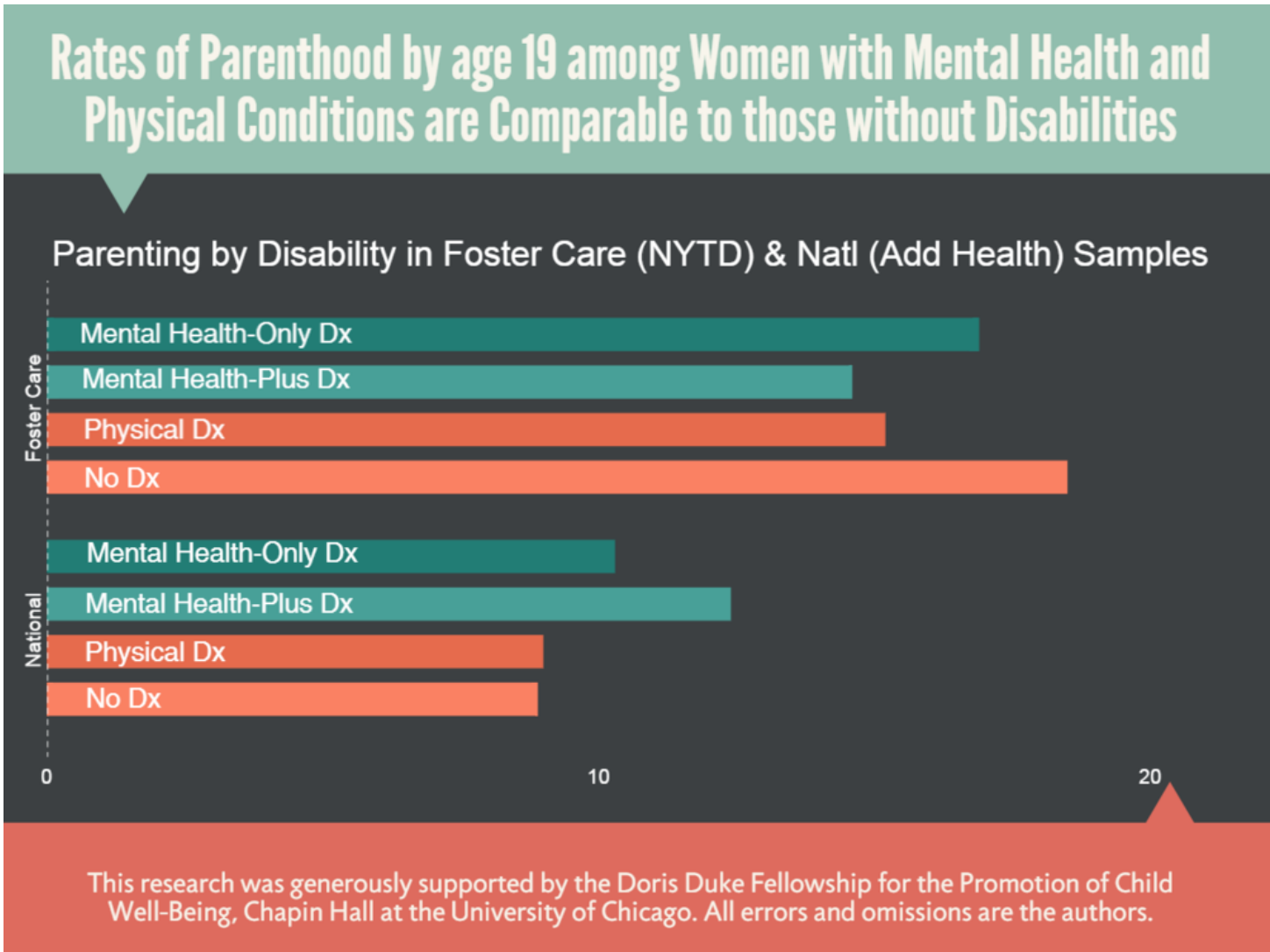


We compare rates of parenthood among young women by disability status in foster care (NYTD) to those in a national sample (Add Health) (Figure 3). Disability status is classified into four groups: (1) mental health-only Dx represents youth with the diagnosis of a mental health or emotional condition without any other disabilities; (2) mental health-plus Dx includes the diagnosis of a mental health or emotional condition and a physical impairment or condition; (3) physical Dx includes the diagnosis of a physical impairment or condition; and (4) No Dx represents youth with no diagnosed mental health or physical conditions.

We find approximately 15% of youth aging out of foster care with any diagnosed disability had entered parenthood by age 19, a rate almost comparable foster care peers without a disability. In the national sample, entry into parenthood is also similar across groupings by disability status. This finding is all the more concerning given the challenges faced by these

young parents with few additional supports. Also noteworthy, we observe that among young women with no diagnosed disabilities the rate of teenage parenthood is almost double in the foster care group compared to those in the national sample.

Figure 3.



## Implications

- Maternal mental illness has been associated with increased occurrence of maladaptive parenting behaviors, including infant hospitalization, corporal punishment, poor home safety, practices, and physical abuse.<sup>vii</sup>
- Mothers with mental illness with child welfare system exposure can benefit from key provisions in the Patient Protection and Affordable Care Act, including the extension of Medicaid to former foster youth through age 26, broadened access to mental and behavioral healthcare, and an emphasis on integrated healthcare service delivery.<sup>viii</sup> This provision and other similar policies will be important to supporting these young parents as they transition into adulthood.
- Evidence of the substantial burden of maternal mental illness may inform Title IV-E Federal Foster Care policies that address care coordination, parenting supports, and foster care transition planning.
- Families First Prevention Services Act of 2016 (H.R. 5456) introduced in June 2016 would provide an enhanced focus and funding options with Title IV-E for behavioral and substance use treatment and prevention services for caregivers.
- Unfortunately, this bill was not passed by the Senate; however, with state Title IV-E waivers set to expire in 2019, there is an opportunity for Congress to reintroduce this type of child welfare reform, a move that is strongly supported by this research.

## Sample Tweets

- 3 datasets examine disability and childbirth among young women w childhood #maltreatment or #fostercare @dorisdukefellows
- Youth leaving #fostercare more likely to experience early parenthood. Greater supports needed. @dorisdukefellows
- 1 in 3 mothers w childhood #maltreatment or #fostercare have behavioral disability. #Healthcare is critical. @dorisdukefellows
- #ACA extends access to critical health services for youth aging out of #fostercare. @dorisdukefellows

## Notes

This research was presented at the 24th annual colloquium of the [American Professional Society on the Abuse of Children](#) (APSAC) June 21-25, 2016 in New Orleans, LA. View the poster presentation [here](#).

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