Reducing Pregnancy Among Youth in Foster Care: A Two-Generation Strategy

Beyond the Bench Conference
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PANELISTS

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• Rebecca Gudeman, National Center for Youth Law
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AGENDA

• Understanding the Issue: Reviewing the Research
• Statewide Efforts:
  – Legal Framework
  – CA Foster Youth Pregnancy Prevention Institute
• Local Practice: Pregnancy Prevention Efforts in Orange County
UNDERSTANDING THE RESEARCH
Foster Youth Pregnancy Rates & Their Implications

Linked Records:
A few things we have learned about teens, births, and the child protection system...

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Thanks!

- This research was funded through a grant from the Conrad N. Hilton Foundation to the Children's Data Network. We are deeply appreciative of the Foundation's investment and support.
- The Children's Data Network is funded through grants from First 5 LA, the Conrad N. Hilton Foundation, and the Robert Wood Johnson Foundation.
- Thank you to our colleagues at the California Child Welfare Indicators Project (CCWIP) and the California Department of Social Services (CDSS) who prepared data underlying these linked analyses – and for infrastructure support from CDSS and the Stuart Foundation.
- Co-investigators: Julie Cedarbaum, Bryn King, and Barbara Needell
- Student partners: Jaclyn Cleveland, Andrea Lane, and Kasey Gilbert
Birth Records?

1. Universally collected (good for research & real-time applications)
2. Provides a population-base for prospective studies
3. Decent amount of information that can be harvested
4. Standardized fields with documentation (simple files)
5. Includes linkages to deaths for infants (birth cohort vs. birth master files)
6. Information for three individuals (child, mother, father)

Teen Births

California’s Most Vulnerable Parents: When Maltreated Children Have Children
Objective

Limited epidemiological data available from which we can ascertain teen parenting rates/dynamics among youth involved with child protective services in California.

These data are needed so that we can:
1. Document the public health burden of teen births for this population
2. Evaluate the efficacy of pregnancy prevention efforts for this population
3. Determine the nature of services that are needed for young mothers and children
4. Develop programs that are responsive to what may be unique family needs for youth who have been maltreated or are in foster care

Summary

POPULATION PROFILE
- 21,299 teens (born in CA) gave birth in 2009 in LA County
  - 12-15 yrs (5.3%); 16-17 yrs (29.6%); 18-19 yrs (65.1%)
  - Latina (79.9%); Black (12.9%); White (5.4%)
  - Prenatal Care initiated after 1st Trimester (10.0%)

HISTORY OF ALLEGED MALTREATMENT
- 9.7%

HISTORY OF SUBSTANTIATION
- 20.8%

HISTORY OF FOSTER CARE
- 44.9%
On a relative basis, birth rates among youth in foster care are higher than in the general population (~87%). Yet, on an absolute basis, only a small percentage give birth in any given year (<4%).

Highest birth rates (not necessarily causal...)
- In care less than 12 months
- Extreme placement instability (P+)
- Congregate care (with a shift over time to non-kin foster care)

Protective!
- 60+ months in care
- Guardian/Other placement
Among girls who were in foster care and gave birth – less than 50% were in placement when they became pregnant.
High Rates of Repeat Births

Second Teen Births by Age of First Birth

31.0%
41.2%

AB 12...age 21?

Statewide, 26,022 girls were in foster care at age 17 between 2003 and 2007.

11.4% had given birth
18.0% had given birth
28.1% had given birth

County Variation
Approximately two-thirds of all first births occurred after age 18, when youth would have historically aged out.

In any given year, the CW system will likely have more dependent adolescents and young adults who are parenting and self-sufficient.

Young and first-time mothers may be more amenable to engaging in parenting programs and better prepared for parenting capacity.
Children Reported by Age 5

Children Substantiated by Age 5

No Report of Maternal Victimization

Unsubstantiated Report of Maternal Victimization

Substantiated Report of Maternal Maltreatment Victimization

Cumulative Percentage / Rate per 100
1. Data from the present study indicate that more than 1 in 4 young women in the foster care system at age 17 is parenting during her teens (1 in 3 before age 21).
   a. The extension of foster care to non-minor dependents means that the nature of the state's parenting obligations will expand and will increasingly include the next generation of children.
   b. Opportunities to offer enhanced pregnancy prevention and parenting support?

2. High rates of first and repeat births
   b. Opportunities to offer long-acting contraceptives at initial medical appointments for youth entering foster care and/or after first birth? Exceptional evidence to support long-term birth control as an intervention for high-risk teens.

3. Maternal maltreatment may not only have consequences for the victim but also contributes to next-generation health outcomes and maltreatment risk.
   a. We already collect data that would identify teens who may need additional parenting support.
   b. Opportunities for more targeted/prioritized programs to break the cycle?

Things to consider…
Policy and programs

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Questions?

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AFFECTING CHANGE STATEWIDE

• Legal Framework
• California Foster Youth Pregnancy Prevention Institute

SB 528: Pregnant and Parenting Youth in Foster Care

Components:
1. Establishes foster youth's right to access sexual development and reproductive health information and services
2. Requires counties to collect data on parenting foster youth and DSS to make it publicly available
3. Authorizes child welfare agencies to have specialized planning conferences to update case plans when a foster youth is pregnant

WIC 369: Pregnant and Parenting Youth in Foster Care

- Establishes that social workers are authorized to provide foster youth access to age-appropriate, medically-accurate information relating to:
  - Sexual development and reproductive health
  - The prevention of unplanned pregnancy
  - The prevention and treatment of sexually transmitted infections (STI)
- Authorizes social workers to inform foster youth 12 and older about right to receive and assist with accessing these health services.
WIC 16501.1: Obligation to Inform

- At least every six months, child’s social worker must inform child of his or her rights, including:
  - Right to receive medical services
  - Right to have access to age-appropriate, medically accurate information about reproductive health care, the prevention of unplanned pregnancy, and the prevention and treatment of sexually transmitted infections at 12 years of age or older.

ACIN 14-38 provides implementing guidance

WIC 16002.5: Parenting Support

- To the greatest extent possible, minor parents...and their children shall be provided with access to existing services for which they may be eligible, that are specifically targeted at supporting, maintaining, and developing both the parent-child bond and the dependent parent’s ability to provide a permanent and safe home for the child.

- “Child welfare agencies may provide minor parents...with access to social workers or resource specialists who have received training on the needs of teenage parents and available resources...”

Other Laws and Rights

Examples:

- Confidentiality Protections
- Medi-Cal
- AB 329
- SB 695
Translating into Action?

Constantine, W., Sex Education and Reproductive Health Needs of Foster and Transitioning Youth in Three California Counties, PHI, 2009

Key finding regarding barriers to services:

- Child welfare and foster caregivers state there are unclear policies and role definitions, or no policies
- Concerns about liability
- Questions about their role vs. parent rights, desire for guidance

CALIFORNIA FOSTER YOUTH
PREGNANCY PREVENTION INSTITUTE

With support from the Conrad N. Hilton Foundation

Institute Partners:
1. John Burton Foundation
2. American Public Human Services Association
3. The National Campaign to Prevent Unplanned Teen Pregnancy

Goals:

Partner with six county teams consisting of 3-5 representatives from each county’s child welfare agency to incorporate pregnancy prevention strategies into foster youth services

- Agencies will become more effective at providing pregnancy and STI prevention services for foster youth
- Participants will be able to use the tools and methods gained through the Institute to assess agency issues and drive sustainable changes
- Develop a comprehensive county policy to address reproductive health and pregnancy prevention for foster youth
Institute Approach

Provide the tools and technical assistance to help counties select and implement an evidence-informed pregnancy prevention practice strategy and develop county Policies and Procedures.

Institute Activities

- Three, 2-full day in-person sessions
- Intersession work in between sessions to build work groups, select strategies, and begin P&P work
- Provide baseline data, process data, and ending data
- Attend train-the-trainer sessions for selected practice strategy
- Participate in ongoing check-in web seminars

4 Practice Strategies Offered

- Youth Focused: Making Proud Choices Adapted for Children and Youth in Out of Home Care Curriculum
- Social Worker/Caregiver Focused: Promoting Healthy Sexual Development and Pregnancy Prevention for Children and Youth in Foster Care Curriculum
- Pregnant and Parenting Teen Focused: Pregnant and Parenting Teen Conferences
- Pregnant and Parenting Teen Focused: Early Pregnancy Detection for Referral to Nurse Family Partnership
The Six Selected Counties

- **Butte**: Social Worker/Caregiver Curriculum
- **Napa**: Social Worker/Caregiver Curriculum
- **Orange**: Social Worker/Caregiver Curriculum + PPT
- **Los Angeles**: Promoting PPT Conferences
- **Santa Clara**: PPT Conferences
- **San Luis Obispo**: Social Worker/Caregiver Curriculum

Every county’s pregnancy prevention efforts went beyond simply curriculum implementation and P&P development.

AFFECTING LOCAL PRACTICE

Orange County’s Foster Youth Pregnancy Prevention Efforts

Awareness to Action
Where do we start?

- Policy & Procedure
- Resource Guide
- Training
- Data Collection

Social Workers

Youth/Young Adult

Community Partners

Improved Practice, Improved Outcomes

- Evidence-Based Curriculum
- Youth Engagement
- Policy
- Pregnant & Parenting Planning Conference

Who are the community partners?

- Judges
- Attorneys
- Parenting Educators
- CASA
- Behavioral Health Providers
- Private Medical Providers
- Schools
- Home Visitation Service Providers
- Foster Parents
- Universities & Researchers
- Public Health
- Probation
- Transitional Age Youth Service Providers
- Sexual & Reproductive Health Educators & Service Providers
- Child & Youth Advocates
- Intimate Partner Violence Prevention Service Providers

Who are we missing?

- Parents
- Maternal & Extended Family Members
- Other Caring Adults
Putting Policy into Practice

- CA Foster Youth Pregnancy Prevention Institute
- Orange County CA-FYPI Project Coordination Team
- Orange County CWS
- Local CWS Champions
- OC Steering Committee

Resources, Experts & Support

CWS Policy & Practice

Public-Private Collaboration


On 09-09-2015, we published our first policy on Reproductive Health & Parenting:

- Objectives: to reduce pregnancy, to reduce 5% of the youth pregnant & have STI, to reduce subsequent pregnancies
- Clarified role & responsibility of CWS social workers
- Clarified role & responsibility of CWS caregivers
- Clarified role & responsibility of CWS agency to know, to track & to act
- Clarified youth rights
- Clarified sexual development & reproductive health & sex to sexual well-being

Sexual & Reproductive Health are Part of Youth Well-Being

Well-Being Domains

- Cognitive & Social Emotional Competence
- Knowledge of Adolescent Development
- Social Connections
- Youth Resilience

Protective & Promotive Factors: Relationships, Knowledge & Motivation

Concrete Supports in Times of Need
Clarification of Roles, Responsibilities & Rights: Opportunities for Engagement

Social Worker:
- Advise youth of rights at entry & every 6 months
- Advise youth & parents of youth rights
- Complete ongoing assessment to include sexual development & reproductive health alongside other wellbeing domains such as medical, dental, educational, psychological, etc.
- Refer to & facilitate access to sexual development & reproductive health education, resources & services
- Other Programs & Planning Conference services: participation is voluntary & agenda driven by youth & parent as indicated.
- Dependency of dependent youth’s child is not automatic & alternatives should be supported

Youth:
- All youth ages 12 years & older have the right to access age-appropriate, medically accurate information about sexual development, reproductive health & prevention of pregnancy & STIs.
- Youth have the right to consent to pregnancy-related care, including abortion & right to privacy.
- Right to privacy does not preclude minor’s right to consent to release information to identified others such as for care coordination.
- Incorporated into Foster Youth’s bill of rights.

We’re not Finished: Opportunities to Strengthen

One more thing: What can you do?

Ensure that youth have the support of long-term relationships with caring, healthy adults.

Ensure that youth receive comprehensive sexual education.

Ensure that youth have access to reproductive health services and contraception.

Ensure that youth are supported in long-term plans to transition to adulthood & be involved in future plans beyond foster care.

Ensure that youth are able to make development of healthy relationships.

Thank you for taking one important step already – coming to this workshop to become better informed.
Definitions

SEXUAL HEALTH
A state of complete physical, emotional, mental and social well-being that is not merely the absence of disease or infirmity, but a state in which the physical, emotional and social resources and capabilities of an individual are fully developed so as to enjoy a harmonious and creative life. (World Health Organization, Draft Working Definitions, October 2002).

REPRODUCTIVE HEALTH
A state of complete physical, emotional, mental and social well-being that is not merely the absence of disease or infirmity, but a state in which the physical, emotional and social resources and capabilities of an individual are fully developed so as to enjoy a harmonious and creative life. (World Health Organization, Draft Working Definitions, October 2002).

State & Local Policy

State Level - Education: CA Assembly Bill 129 & Senate Bill 151
- AB 129: Mandates Comprehensive Sexual Health & HIV Prevention Education in Middle & High School:
  http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160AB129
- SB 151: Mandates High School Education on Affirmative Sexual Consent & Positive, Healthy Relationship Development:
  http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160SB151

Local Level - Orange County, CA
- RFP: http://www.oceanside.ucla.edu/newsite/News/2014/04/25/rfp-
  Planning Education & Training for CWS Staff & Caregivers
- Data Collection: Comprehensive Parenting & Parenting Planning Conferences
- Pregnancy & STI Prevention Education for Youth
- Parenting & Parenting Planning Conferences
- Medical Provider Reports with prompts to address reproductive health, HPV & OBGYN referrals
- Resource Center for Youth, Social Workers & Providers
- In-Home Visitation Services
Reproductive Health & Parenting Policy: Key Elements

Purpose
- To provide guidance for youth & young adults on pregnancy prevention, parenting, and related conversations.
- To address the needs of youth, regardless of age, through targeted training and resources.
- To promote healthy relationships and decision-making.

Legal Authority
- Federal guidelines.
- State laws & regulations.
- Local policies.

Social Worker Responsibilities
- Assess, identify, & prioritize needs.
- Plan, implement, & evaluate services.
- Facilitate meaningful conversations.

Preventative Intervention
- Engage in targeted outreach.
- Provide education & resources.
- Facilitate referrals for services.

Adolescent Rights
- To youth: rights to privacy, confidentiality, & confidential care services.
- To parents: accessibility to information & services.

Prenatal Care
- To youth: access to prenatal care.
- To parents: involvement & support.

Public Health Nurse Responsibilities
- Provide anticipatory guidance.
- Direct referrals for services.

Pregnancy Options
- Anticipatory guidance.
- Direct referrals for services.

Parental Rights
- To youth: access to information.
- To parents: involvement & support.

Youth Rights & Responsibilities
- To youth: access to information.
- To parents: involvement & support.

Sexual Development
- Anticipatory guidance.
- Direct referrals for services.

Valued Clarifications
- To youth: understanding of values.
- To parents: understanding of youth values.

Parental Impact
- To parents: understanding of values.
- To youth: understanding of parents.

Youth Rights & Responsibilities
- To youth: access to information.
- To parents: involvement & support.

Resources
- Direct referrals for services.
- Anticipatory guidance.

Training for CWS Staff & Caregivers: Essential Elements

Purpose
- Enhance knowledge.
- Foster a supportive environment.
- Promote healthy decision-making.

Value Clarifications
- To youth: understanding of values.
- To parents: understanding of youth values.

Sexual Development
- Anticipatory guidance.
- Direct referrals for services.

Youth Rights & Responsibilities
- To youth: access to information.
- To parents: involvement & support.
CWS Snapshot of Orange County, CA

Child/Youth Age Population in Orange County, CA

Contact

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Resources

- California Foster Youth Pregnancy Prevention Institute: www.fyppi.org
- Center for the Study of Social Policy: www.childtrends.org
- Child Trends: www.childtrends.org
- Convener of key references related to pregnancy prevention among youth in foster care in CA
- National Center for Youth Law: www.teenhealthlaw.org
- Jim Casey Youth Opportunities Initiative: www.jimcaseyyouth.org
- Orange County Women’s Health Project/Teen Reproductive Health Task Force: www.ocwomenshealth.org
- The National Campaign to Prevent Teen & Unplanned Pregnancy: www.thenationalcampaign.org
- Bedsider: www.bedsider.org and in Spanish at www.bedsider.org/es
- StayTeen: www.stayteen.org

QUESTIONS AND ANSWERS

THANK YOU