Working With Pregnant & Parenting Teens - Overview

Every year, there are approximately 750,000 teen pregnancies and 400,000 teen births in the United States. Nearly 3 in 10 girls get pregnant at least once before age 20; higher rates are reported among youth of color. Subsequent births among teens aged 15-19 represent 18.7% of teen births. This rate is down from 19% in 2008, 19.3% in 2007, and 19.6% in 2006.¹

This Tip Sheet provides information to grantees serving pregnant or parenting teens to better support these youth.

Unique Needs of Pregnant & Parenting Teens

By and large, teen parents want to do what is right for their children. Because they are teens, parents, and often low-income, they need strong support networks and a comprehensive array of resources to help them parent effectively while working toward becoming self-sufficient adults. Unfortunately, the specialized service needs of pregnant and parenting teens are often overlooked in family and youth policies and practices.

A recent study found that slightly more than one-half of young mothers received a high school diploma by the age of 22, compared with 89% of women who had not had a child during their teen years. In a nationwide survey of dropout youth, close to one-half of all female dropouts and one-third of male dropouts said that becoming a parent played a role in their decisions to leave school.² These young women are also more likely to have mental health problems, such as depression and anxiety.³ Pregnant teens are less likely to receive adequate prenatal care; they are more likely to smoke during pregnancy, be unmarried, have inadequate nutrition, and give birth to low birth weight and pre-term infants. Thus, the consequences of teen pregnancy are not isolated to mothers; their children are also greatly affected.⁴ This is why supports and services for pregnant and parenting teens are so crucial.

Goals and Outcomes for Working with Pregnant and Parenting Teens

When working in the primary prevention field, the program goal is usually straightforward — to reduce teen pregnancy, sexually transmitted infections (STI), and/or HIV among program participants. However, when working with pregnant and parenting teen mothers and fathers, preventing (or delaying) subsequent pregnancies and reducing STIs/HIV is usually one of many goals, as pregnant and parenting teens typically have multiple, unique needs. Based on research from the Center for Assessment and Policy Development⁵, a comprehensive program for pregnant and parenting teens should work toward achieving the following outcomes in order to address their unique needs:

• **Self-Sufficiency Outcomes for Pregnant and Parenting Teens**
  o Increase high school graduation/GED completion.
  o Increase completion of post-secondary education, vocational training, and/or employment at a livable wage.
  o Increase self-reliance and transition to independent living.
  o Reduce/delay subsequent pregnancies.
  o Reduce STIs/HIV.

• **Developmental Outcomes for Children of Teen Mothers and Teen Fathers**
  o Increase healthy births by providing adequate prenatal care and strong support networks during pregnancy.
  o Increase age-appropriate physical, emotional, cognitive, and social development (and readiness for school success).
  o Increase appropriate discipline, nurturing behavior, and children who are well cared for.

• **Relationship Outcomes for Pregnant and Parenting Teens**
  o Increase healthy relationships between partner(s), peers, and family.

Clearly, this list of outcomes extends far beyond the prevention of pregnancy, STIs, and HIV/AIDS; pregnant and parenting teen programs typically have a broader focus than primary prevention programs.

In response to a need voiced by professionals working with pregnant and parenting teens, Healthy Teen Network (HTN) designed a Behavior-Determinant-Intervention (BDI) Logic Model for Working with Young Families (or, pregnant and parenting teens) in collaboration with various professionals in the field. This Logic Model demonstrates how a program, or a complementary network of programs and services, might address pregnancy and parenting teen program goals. Program developers use logic models to strategically and scientifically identify the causal pathways between goals and interventions. Logic models also point to the outcome and process indicators to be measured and evaluated. Thus, logic models are part of an evidence-based approach to providing programs and services. For further information and to access the HTN BDI logic model, go to [www.healthyteennetwork.org](http://www.healthyteennetwork.org).

**Supports and Resources for Pregnant & Parenting Teens**

Supports and resources for pregnant and parenting teens provide a skills-building foundation to help teen mothers and fathers develop self-sufficiency so that they may be successful and engaged parents and productive members of society. Programs that incorporate specific, core components are more likely to achieve desired outcomes. These core components are:

1. **Self-Sufficiency:** Supports and resources to help youth develop basic self-sufficiency skills, so that s/he will be able to transition to independent living and access resources and services without the assistance of a case manager.

2. **Housing Stability:** Supports and resources to facilitate attainment of affordable housing in a safe neighborhood, and continued housing stability and independent living upon completion of the program.

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3. **Financial Stability**: Supports and resources to help youth work toward financial stability by facilitating educational attainment and employment at a livable wage, as well as financial literacy.

4. **Successful and Engaged Parenting and Attachment**: Supports and resources to facilitate successful and engaged parenting skills, fostering attachment between parent(s) and child(ren).

5. **Healthy Relationships**: Supports and resources to cultivate a sense of self-worth and right to healthy relationships with partners, peers, family, and the community, as well as the skills to resolve conflict, solve problems, and negotiate.

These core components build upon each other, forming a foundation for successful pregnant and parenting teens. These core components support the diverse goals and outcomes of programs addressing the unique needs of pregnant and parenting teens.

HTN and Child Trends developed two resources regarding these core components of pregnant and parenting teen programming: 1) a resource defining and detailing what the core components include and 2) a report on findings from the field based on a national survey, phone interviews, and case studies. For further information about each of these core components, see HTN’s resource, “Bricks, Mortar, and Community: The Foundations of Supportive Housing for Pregnant & Parenting Teens”.

**The Role of the Case Manager**

To coordinate and ensure delivery of the supports and resources focusing on these core components, case managers play a critical role, assessing youth as individuals so that their unique needs may be met most effectively. Flexibility, individualization, nurturing, guidance through positive role modeling, and consistent coordination by one caring adult professional are key elements of case management services. Only the most comprehensive programs will provide direct services related to each core component. However, all programs should provide referrals and support access to services and resources in the community. They can accomplish this more effectively by using collaborations and partnerships. The case manager oversees, when not personally providing, access to these direct services. The case manager is the professional primarily responsible for creating an equal partnership with the young parent, developing a life plan driven and owned by the youth to help him/her transition to independent living.

**Including Teen & Young Fathers**

While less is known about teen fathers, they face the same risk factors as teen mothers in their daily lives. Children born to teen parents often have a unique set of needs which leave them at increased risk for repeating early parenting, thus perpetuating the cycle of poverty among future generations.
When working with pregnant and parenting teens, funding streams may dictate the priority population, which may often mean that the pregnant and parenting mothers receive the bulk of the services. However, it is important that programs include the father, as appropriate and as long as it is a healthy relationship for the mother and child(ren). Regardless of whether the teen mother and father are engaged in an intimate relationship or are co-parenting but no longer in an intimate relationship, program providers can work to provide both parents supports and services.

Co-Parenting

Co-parenting is defined as when at least two individuals are expected by mutual agreement or societal norms to have co-joint responsibility for a particular child’s well-being, including areas of: physical, emotional, psychosocial, safety, and development. Most of the literature about co-parenting focuses on adults who co-parent as a result of divorce, never being married, live geographically distant from one another, or are co-parenting due to incarceration. However, this research can inform services for adolescents and young parents. While the research has shown that it is never too late to discuss co-parenting, having that discussion and entering into co-parenting agreements before the child is born is best.

Programs for Pregnant & Parenting Teens

There is some research that identifies programs evaluated to be effective with preventing/delaying subsequent pregnancy among pregnant and parenting teens.


A review of each of these studies suggests the following practices for achieving successful outcomes with pregnant and parenting teens:

- Relationships with staff are critical.
- Home settings may encourage better relationships.
- School-based settings seem to improve school retention.
- There may be positive results for education and employment longer term that may be independent of positive effects in reducing subsequent births.
- Comprehensive services with easy access and a great deal of support are critical.

However, these studies, especially when considered together, indicate additional research is needed in order to compile a more extensive list of evidence-based programs and strategies for

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pregnant and parenting teens. There are still many pregnant and parenting teen programs that have not been evaluated, and of the few evaluation studies conducted, many have methodological concerns. Using evidence-based approaches, such as the Getting to Outcomes approach outlined below, is essential.

10 Steps to Incorporate Evidence-Based Approaches for Serving Pregnant & Parenting Teens

It can be overwhelming to think about how to incorporate evidence-based approaches into a program when a long list of diverse and comprehensive evidence-based programs for pregnant and parenting teens does not exist. Fortunately, there are some concrete steps organizations can complete in order to be evidence-based in their approach to providing supports and resources for pregnant and parenting teens.

Part I: Goal Setting: Identify the needs and resources for their community, in order to set goals.
- Step 1) Needs/Resources: Look at what needs and resources in the community must be addressed by conducting a comprehensive needs and resource assessment.
- Step 2) Goals/Outcomes: Identify goals for the program, the target populations, and desired outcomes (objectives). Develop a logic model to identify the goals and desired outcomes.

Part II: Program Planning: Plan for the implementation of program.
- Step 3) Best Practices: Identify evidence-based programs, or evidence-informed (i.e., promising or innovative) programs to be used in reaching goals. Research existing programs for pregnant and parenting teens.
- Step 4) Fit: Make sure the candidate programs under review fit the needs of target population, and the community. Refer back to the needs and resource assessment to guide this process. (See Selecting An Evidence-Based Program That Fits Tip Sheet)
- Step 5) Capacities: Assess whether the organization has the capacity to implement the candidate programs. Consider staffing, financial resources, leadership, etc. Based on fit with the youth, community, and organization, select an appropriate program to implement.
- Step 6) Plan: Make a plan to implement the program. Prepare for each activity associated with implementation, including recruitment, training, authorization, implementation, fidelity monitoring, and evaluation.

Part III: Program Evaluation: Implement the program and conduct process and outcome evaluation.
- Step 7) Implementation/Process Evaluation: Think ahead about how to determine whether the program has been implemented well. Implement the program and the process evaluation, tracking data such as attendance, participant satisfaction, educator satisfaction, retention, etc.
- Step 8) Outcome Evaluation: Evaluate whether the program is meeting its goals, reaching its priority population, and achieving desired outcomes. Implement the outcome evaluation, tracking data such as the knowledge, attitudes, skills, and behaviors of the priority population.

Part IV: Improving & Sustaining Your Program: Continuously work to improve and sustain the program(s); this is an ongoing process.
- Step 9) Continuous Quality Improvement: Make a plan for continuous quality improvement (CQI) of the program.
**Step 10) Sustainability:** Consider what will be needed to sustain the program if it is successful.

The ten steps identified above provide structure to the program planning and implementation tasks familiar to most organizations. These ten steps are part of the Getting to Outcomes (GTO) framework that incorporates evidence-based approaches, so an organization can utilize an evidence-based approach to providing supports and resources, even if a program proven with rigorous evaluation to change behavior is not available.

### References & Resources

**Pregnant and Parenting Teens**

- **Healthy Teen Network Resources** ([www.HealthyTeenNetwork.org](http://www.HealthyTeenNetwork.org)):
  - Advocacy for Young or Expectant Parents in Foster Care, Healthy Teen Network: [http://www.healthyteennetwork.org/index.asp?Type=B_BASIC&SEC=[344F9750-7169-499D-AEFD-CF5FA7110D9C]&DE={447344D4-D341-470B-A5E9-0FA1E3CF0939}]
  - A BDI Logic Model for Working with Young Families: Resource Kit, Healthy Teen Network: [http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={FFD15D0C-AA07-47BD-B83E-0360C860736}]
  - Bricks, Mortar, and Community: The Foundations of Supportive Housing for Pregnant and Parenting Teens: The Core Components of Supportive Housing, Healthy Teen Network and Child Trends: [http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={97475831-0B51-4319-8C3C-D37F9339A975}]
  - Bricks, Mortar, and Community: The Foundations of Supportive Housing for Pregnant and Parenting Teens: Findings from the Field, Healthy Teen Network and Child Trends: [http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={4B7F22B3-0BA5-4721-9F36-6A40BC93C29A}]
  - Helping Teens Help Themselves: A National Blueprint to Expanding Access to Supportive Housing for Pregnant and Parenting Teens Exiting Foster Care, Healthy Teen Network: [http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={3082AB53-C68F-42F8-AFA8-5E8DC8347A18}]
Promoting Successful Transition from Foster/Group Home Settings to Independent Living Among Pregnant and Parenting Teens, Healthy Teen Network: http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={827ED82D-730A-44EE-882A-84CDEC30FA45}


Young Parent Video Testimonials, Healthy Teen Network: www.youtube.com/user/healthyteennetwork

- American Bar Association: www.abanet.org/child/
  - Adolescent Health: www.abanet.org/child/teen-health.shtml
  - Youth Aging Out of Foster Care: www.abanet.org/child/empowerment/home.html
- Center for Assessment and Policy Development: www.capd.org
  - What Outcomes Should Programs For Adolescent Parents And Their Young Children Seek To Achieve?, CAPD: www.capd.org/pubfiles/pub-1996-10-12.pdf
- Chapin Hall Center for Children at the University of Chicago: www.chapinhall.org/
- Child Trends: www.childtrends.org
- Children's Law Center of Los Angeles: www.clcla.org/facts_teens.htm
- Corporation of Supportive Housing - Youth Supportive Housing: www.csh.org/index.cfm?fuseaction=Page.viewPage&pageID=3220
- Doula Project: www.healthconnectone.org/
- Funding sources for Second Chance Homes: www.hud.gov/offices/pih/other/sch/resources.cfm
- Housing Options for Independent Living Programs by Mark Kroner: www.cwla.org
- It's My Life: Housing: www.casey.org
- Lighthouse Youth Services Training Institute: http://www.lys.org/professionalservices.html
- Moving In: Ten Successful Independent/Transitional Living Programs by Mark Kroner: www.northwestmedia.com
- National Resource Center for Youth Services: www.nrcys.ou.edu/
  - Power Through Choices: Sexuality Education for Youth in Foster and Group Care
- National Crittenton Foundation: www.thenationalcrittentonfoundation.org/

Co-Parenting

Evidence-Based Approaches and Getting to Outcomes


Evidence-Based Programs