



# The impact of early childbirth on socioeconomic outcomes and risk indicators of females transitioning out of foster care



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## A B S T R A C T

Few studies have documented the relationship between early childbirth and the adjustment of females transitioning out of foster care. In this study, data from the National Youth in Transition Database were used to evaluate the associations between childbirth at three time points (prior to age 17, ages 17–19, and ages 19–21) and females' socioeconomic outcomes and risk indicators at age 21 ( $n = 3173$ ). Findings revealed that over 40% of females had given birth at least once by age 21, with a substantial increase in birth rates from adolescence to early adulthood. Multivariate analyses showed that childbirth between ages 17 and 19 and between ages 19 and 21 was associated with decreased likelihood of obtaining a high school diploma/GED or higher. However, only most recent childbirth (between ages 19 and 21) was associated with decreased likelihood of employment and increased likelihood of receiving public assistance. Contrary to the hypothesis, childbirth was unrelated to homelessness, substance abuse referrals and incarceration at age 21, once earlier presence of such risks was taken into account. Overall, while childbirth between ages 19 and 21 was linked to negative socioeconomic outcomes as females entered young adulthood, earlier births did not appear to confer a unique, prospective risk for the majority of the variables studied. These findings underscore the importance of expanding specialized services designed to promote educational and vocational opportunities for young mothers transitioning out of foster care, especially in the first years following childbirth. The importance of targeting foster youth for pregnancy prevention programs will also be discussed.

## 1. Introduction

The United States has one of the highest rates of adolescent childbirth in the industrialized world, despite a decline of > 60% from 1991 to 2014 (Hamilton, Martin, Osterman, Curtin, and Matthews, 2015). Females placed in foster care are especially vulnerable to adolescent childbirth, exhibiting birth rates two to three times higher than their peers in the general population (Svoboda, Shaw, Barth, and Bright, 2012). The rate of childbirth continues to increase as females transition out of foster care and begin living independently, generally between the ages of 18 and 21 (Putnam-Hornstein, Hammond, Eastman, McCrosky, and Webster, 2016; Shpiegel, Cascardi, and Dineen, 2017; Svoboda et al., 2012). Nevertheless, there is limited prospective research examining the impact of early childbirth<sup>1</sup> on the adjustment of female foster youth during the period of transition to adulthood (Shpiegel and Cascardi, 2015; Svoboda et al., 2012).

In the general population, early childbirth has been linked to a range of adverse outcomes for females, including educational

underachievement, employment difficulties, and financial instability (Barnet, Liu, and DeVoe, 2008; Boden, Fergusson, and Horwood, 2008; Furstenberg, 2016). However, few studies have focused on the outcomes of females with foster care backgrounds (Massey Combs, Begun, Rinehart, and Taussig, 2017). Some scholars have argued that childbirth may exacerbate challenges commonly linked to foster care involvement, such as educational/vocational difficulties, homelessness, and engagement in risky behaviors (Dworsky and Gitlow, 2016; Hook and Courtney, 2011; Massey Combs et al., 2017). Others have pointed out that childbirth may provide a renewed sense of purpose and motivation to some youth, resulting in more favorable outcomes (Pryce and Samuels, 2010). Overall, longitudinal research on this topic has been limited, thus, the specific influence of childbirth on the adjustment of female foster youth is largely unknown. Moreover, research has not previously investigated whether the *timing* of childbirth differentially relates to variations in females' adjustment as they transition to adulthood. The current study aims to address these gaps by examining the impact of childbirth at three time points—prior to age 17, between

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<sup>1</sup> The term “early childbirth” will be used throughout the paper to refer to childbirth during adolescence and the period of transition to adulthood (i.e., until age 21).

ages 17 and 19, and between ages 19 and 21– on socioeconomic outcomes and risk indicators of females aged 21.

### 1.1. Early childbirth and socioeconomic outcomes of foster youth

It has been well established that foster youth face multiple challenges as they leave the child welfare system and begin living independently (Courtney, 2009; Shpiegel, 2012). According to recent studies, these youth are less likely to complete high school and attend college, and more likely to experience unemployment and dependence on public assistance (Courtney, 2009; Naccarato, Brophy, and Courtney, 2010; Stott and Gustavsson, 2010; Yates and Grey, 2012). Findings from *qualitative* studies reveal that females who have children are especially likely to report a difficult transition to adulthood, often struggling to finish school, obtain employment and establish economic self-sufficiency (Chase, Maxwell, Knight, and Aggleton, 2006; Haight, Finet, Bamba, and Helton, 2009). *Quantitative* studies further demonstrate that childbirth is associated with poorer educational and vocational outcomes in young adulthood, particularly among females (e.g., Massey Combs et al., 2017). Nevertheless, existing research on this topic has been limited, and did not evaluate the relationship between the *timing* of giving birth and later socioeconomic outcomes. When childbirth occurs between the ages of 18 and 21, it generally coincides with the transition out of foster care and loss of valuable supports and resources provided by the child welfare system. The combined experience of navigating independent living while simultaneously caring for a child may significantly impair females' ability to complete education, obtain employment, and become financially independent (Shpiegel and Cascardi, 2015).

### 1.2. Early childbirth and risk indicators of foster youth

Prior studies have also documented an association between early childbirth and various risk indicators among foster youth, including homelessness, criminal justice involvement, and running away (King and Van Wert, 2017; Massey Combs et al., 2017; Shpiegel et al., 2017). According to some scholars, these risks may serve as a proxy for recklessness and impulsivity more generally, possibly contributing to improper or irregular use of birth control, and subsequent pregnancy and birth (Matta Oshima, Carter Narendorf, and McMillen, 2013). At the same time, it has also been suggested that childbirth represents a major life stressor that may worsen existing problems (Hoffman and Maynard, 2008; Radey, Schelbe, McWey, Holtrop, and Canto, 2016), possibly heightening the risk of homelessness, criminal justice involvement, and other difficulties after birth. These challenges may be especially pronounced as youth transition out of foster care and lose eligibility for services provided by child welfare agencies (Shpiegel and Cascardi, 2015). As noted above, childbirth after age 18 frequently coincides with the transition out of foster care, possibly conferring greater risk than childbirth at a younger age, when youth continue to be under the care and supervision of child welfare. Overall, existing research has not yet attempted to isolate the unique influence of childbirth at different ages on females' adjustment at age 21, while also accounting for foster care status and prior risk indicators.

### 1.3. Gaps in research and the purpose of the present study

Although research on childbirth among foster youth has been limited, general population studies point to a strong relationship between early childbirth and subsequent negative outcomes, including decreased educational and vocational attainment, lower earnings, and higher incidence of psychopathology (Boden et al., 2008; Barnett et al., 2008; Falci, Mortimer, and Noel, 2010; Furstenberg, 2016). Nevertheless, early childbirth may not be the *root cause* of these difficulties, but rather, a marker of broader social and economic disadvantage (Furstenberg, 2016; Hoffman and Maynard, 2008). This may be

especially relevant for foster youth, as the difficulties associated with early childbirth overlap substantially with the reduced life opportunities linked to child welfare involvement. Research on childbirth among foster youth has generally been cross-sectional in nature (King, Putnam-Hornstein, Cederbaum, and Needell, 2014; Massey Combs et al., 2017), and lacked comparison groups of youth who have not given birth (Chase et al., 2006), thus, the risk conferred specifically by early childbirth cannot be easily identified. A prospective examination of females transitioning out of foster care can help to determine whether childbirth, in general, and the *timing* of childbirth, in particular, contribute uniquely to adverse socioeconomic outcomes and other difficulties during the period of transition to adulthood. Conducting such research using large, national samples is of particular importance, given that most existing studies have been confined to one or few states (Dworsky and Gitlow, 2016; Hook and Courtney, 2011; King et al., 2014; Massey Combs et al., 2017).

To address the aforementioned gaps, the current study used data from the National Youth in Transition Database to examine the prospective associations between childbirth at three time points – before age 17, between ages 17 and 19, and between ages 19 and 21 – and females' socioeconomic outcomes and risk indicators at age 21. Specifically, this study aims to achieve the following goals:

- (1) Document the proportion of females who had given birth at least once by age 21, and examine the rates of childbirth at different time points described above. We hypothesize that childbirth rates in this population will be higher than the rates reported among similarly-aged females in the general population. Moreover, we hypothesize that the rates of childbirth will increase with age.
- (2) Compare females who had given birth and those who had not, on education attainment, employment, receipt of public assistance, homelessness, substance abuse referrals and incarceration, and explore the associations between the timing of giving birth and these variables. We hypothesize that childbirth, both overall and at each time point, will be significantly associated with socioeconomic outcomes and risk indicators at age 21.
- (3) Examine the contribution of childbirth at each time point to socioeconomic outcomes and risk indicators at age 21, controlling for race/ethnicity, foster care status, and risk indicators prior to age 19. We hypothesize that childbirth will be *independently* associated with worse socioeconomic outcomes and more risk indicators at age 21, with stronger associations present for more recent births.

## 2. Methods

The present study uses data from the National Youth in Transition Database (NYTD). Created by the John H. Chafee Foster Care Independence Program (CFCIP), NYTD data collection began in federal fiscal year (FFY) 2011 and was designed to (a) track *services* provided through CFCIP; and (b) collect certain *outcome* measures to assess the effectiveness of the program. All 50 states and the District of Columbia were required to submit information to NYTD during designated reporting periods (National Data Archive on Child Abuse and Neglect, 2016).

The NYTD dataset includes two separate components; one consists of service-related information, and the other includes self-reported youth outcomes. The present study used the *outcome component only*, which was collected in three waves: a baseline survey with youth who were in foster care at age 17 (FFY 2011), and two follow-up surveys, the first at age 19 and the second at age 21 (FFY 2013 and FFY2015). All youth who reached their 17th birthday in FFY2011, and were in foster care within a 45-day period beginning on their birthday, were eligible to complete the baseline survey. States could choose to administer the survey in person, via the Internet or over the phone, provided that it was administered to the youth directly. Youth participation was voluntary, with freedom to refuse without adverse consequences, or to

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