



# Preventing Teen Pregnancy Through Outreach and Engagement:

## TIPS FOR WORKING WITH FOSTER CARE AND JUVENILE JUSTICE

### Introduction and Overview

There are almost half a million children living in foster care in the United States.<sup>1</sup> The median age of youth in foster care is 9.7 years old and approximately 32 percent are teenagers (age 13-17).<sup>2</sup> Youth who have ever lived in foster care tend to take more risks sexually and engage in other risky behavior (e.g. ever been arrested before age 18)—more so than the rest of the population.<sup>3</sup>

It is not surprising, therefore, that teens in foster care, many of whom suffer abuse and neglect, are much more likely than teens outside the system to get pregnant. In fact, teen girls in foster care are 2.5 times more likely than their peers not in foster care to get pregnant by age 19, and half of 21-year-old men aging out of foster care report they had gotten someone pregnant, compared to 19 percent of their peers who were not in the system.<sup>4</sup> In addition, the children born to teen mothers are at elevated risk for participating in the foster care system, and child welfare costs account for one quarter of total public spending related to teen childbearing (\$2.8 billion out of \$11.9 billion annually.)<sup>5</sup>

Clearly, youth in foster care are a critical group of at-risk youth to consider when determining the scope of your teen pregnancy prevention efforts. At the same time, the foster care system often presents valuable and untapped opportunities for greater partnership in serving the youth in their care. The same can be said for the juvenile justice system, which serves many of the same youth. This tip sheet offers practical tips for engaging the foster care and juvenile justice communities in your teen pregnancy prevention efforts, with a focus on helping these providers understand how teen pregnancy prevention relates to their mission and the concrete steps you can take in working with them to reduce teen pregnancy.

### Making the Connection between Teen Pregnancy, Child Welfare, and Juvenile Justice

To successfully engage the child welfare and juvenile justice communities as partners, you first need to make sure they see the connection between teen pregnancy prevention efforts and their missions. Any data you gathered from these sectors during your community needs assessment may help you in this

regard, but in the absence of such data, the following national perspectives are helpful to keep in mind:

- One of the leading concerns among foster care administrators is the wellbeing of adolescents aging out of foster care. Extensive research has documented their increased risk of dropping out, homelessness, unemployment, criminal activity, dependence on public assistance, depression, and more. Given that teens in foster care are more than twice as likely to become pregnant than teens overall, it's not difficult to make the argument that efforts to increase successful transitions to adulthood for youth leaving foster care should include a focus on pregnancy prevention. One study of former youth in foster care found that among those who were parents:
  - Only one-quarter were employed;
  - Nearly one-quarter had been convicted of a crime after leaving foster care; and
  - Seventy-one percent received need-based government assistance.<sup>6</sup>
- It is also the case that children born to teen mothers are more likely to have contact with both the foster care system and the juvenile justice system.
  - In fact, young teen mothers (age 17 and younger at the time of birth) are 2.2 times more likely to have a child placed in foster care than mothers who delayed childbearing until age 20 or 21, and they are twice as likely to have a reported case of abuse or neglect compared to mothers who delayed childbearing.<sup>7</sup>
  - Teen mothers age 18-19 are about one-third more likely to have a child placed in foster care when compared to mothers who had their first child at age 20 or 21. They are almost 40 percent more likely to have a reported case of abuse or neglect than children born to mothers age 20 or 21.<sup>8</sup>
  - Becoming more familiar with the statistics on outcomes for youth in foster care may help you make your case. Sites such as those listed below are good sources for the latest available research:

- + <http://www.childwelfare.gov/systemwide/statistics/>
- + <http://www.chapinhall.org/research/areas/Child-Welfare-and-Foster-Care-Systems>

- Additional materials that can help you make the case for incorporating teen pregnancy prevention efforts into services for youth in foster care and juvenile justice can be found at [http://www.TheNationalCampaign.org/fostercare/resources\\_other.aspx](http://www.TheNationalCampaign.org/fostercare/resources_other.aspx).
- In particular, the following video can help you begin the conversation with potential partners regarding the heightened risks of teen pregnancy among youth involved in child welfare systems, the negative health and educational outcomes they are more likely to experience, and the additional costs associated with these outcomes: <http://www.TheNationalCampaign.org/fostercare/crucialconnection.aspx>.
- If you do have an opportunity to reach out to the foster care and/or juvenile justice communities during your community needs assessment, consider focusing on the following topics:
  - Asking about the specific structure of the family court in a state will inform the language you use in strategies to engage these partners, as will learning about the organizational structure surrounding the child welfare office and the key players in the lives of youth throughout their time in care (e.g. does the state assign a Guardian Ad Litem as a volunteer position, or is this the title of the attorney appointed to the youth by the state?).
  - Having more information about the characteristics of youth in foster care can strengthen your message regarding the importance of teen pregnancy prevention for this population. While requesting extensive caseload data may not be realistic, especially before strong partnerships have been established, even getting information on age, gender, and length of time in care can help you make the case for prevention efforts.
  - Securing a directory of public/private foster care agencies in the state and their funding sources may guide your decisions about whom to approach as potential partners in teen pregnancy prevention efforts within the foster care system. For example, is Catholic Charities running the bulk of the group homes in the state or are there more publicly funded agencies working directly with the department that oversees child and family services?
  - Ask if there are procedures or protocols in place for dually involved youth in your state and discuss whether there are gaps in service for these youth.
  - If speaking with the juvenile justice system, gathering information about the intake forms used, the role of case workers, and the process for conducting physicals could be helpful in identifying key intervention points.

## Understanding the Crossover between the Foster Care and Juvenile Justice Systems

Often youth in foster care find themselves involved with a second system, the juvenile justice system. These youth are commonly referred to as crossover youth, and before you engage potential partners in the foster care and/or juvenile justice systems, it's important that you understand how their populations cross over and the two systems interact. There are a variety of pathways by which youth can become involved with the foster care and juvenile justice systems. Some youth are arrested while in a foster care placement, often in a group home setting, and the relationship between child maltreatment (i.e. the abuse or neglect that prompts a child to enter the foster care system) and delinquency has been well documented.<sup>9</sup> In fact, child abuse and/or neglect increase the risk of arrest as a juvenile by 55 percent and the risk of committing a violent crime by 96 percent.<sup>10</sup>

While many young people transition directly from the child welfare system to the juvenile justice system, for other young people the transition may go in the other direction. Some youth are arrested for committing a crime and, upon investigation, maltreatment is observed and the youth is entered into the foster care system. Still other youth, upon exiting the juvenile justice system, find themselves without a stable living situation to return to, and thus enter into the foster care system.<sup>11</sup>

On average, crossover youth range in age between 14 and 16 years old.<sup>12</sup> It is difficult to know the exact number of crossover, or dually-involved youth in this country because of barriers to data collection. A lack of coordination between the child welfare and juvenile justice systems is partially responsible for this gap. Defining this population is also problematic because of the variety of ways youth become involved with both systems. Crossover contributes disproportionately to females entering the juvenile justice system, making them the fastest growing population in the juvenile justice system.<sup>13</sup> Crossover females experience emotional and behavioral problems and are more likely to become pregnant than “juvenile justice-only” females.<sup>14</sup>

Nationwide, children in out-of-home care are twice as likely to commit delinquent acts as those receiving in-home services, due to frequent disruptions of care.<sup>15</sup> These disruptions of care and frequent changes in home settings include school disruptions as well. Youth who are constantly changing school settings are not guaranteed to receive sexuality education through the classroom. Nor are these youth able to experience bonding with positive adult figures such as teachers, parents, or counselors. Multiple school and home placements leave these youth at a higher risk for engaging in risky behaviors, with less knowledge about ways to protect themselves from sexually transmitted infections (STIs) and pregnancy. Many crossover youth experience substance abuse and/or mental health issues, making this population even more vulnerable to negative health outcomes.

Research also shows that dually-involved youth are more likely to have adult criminal involvement, to be on public welfare, to access health services, and to access mental health

and substance abuse services. All of these factors increase costs to the public. Studies have shown crossover youth are twice as likely to access three or more service systems within four years of turning 18 (than their peers involved in only one system).<sup>16</sup>

### Other Factors to Consider

**Fragmented services are common.** Ideally, states should exercise a “one family/one judge” approach. This ensures that judges are aware of the family situation of the youth they serve as well as their criminal charges. In this situation, a variety of services can be ordered and managed—meeting all of the needs of the child. However, this often is not the case, and services are sometimes fragmented. In these situations, developing a coordinated effort to address teen pregnancy becomes all the more critical and all the more challenging. It will be helpful to understand how a state assigns cases within child dependency and delinquency courts, and you may want to map out what agencies serve the needs of teens in those systems.

Listening and learning from your potential partners regarding this key set of issues before proposing any changes or new efforts will be worth the time you invest. This effort will help you not only understand the barriers you might face in introducing teen pregnancy prevention efforts, but could also help you identify new opportunities to introduce prevention efforts in settings you may not otherwise have considered.

**There may be high turnover of staff.** Consistency of counsel and caseworkers for youth in foster care and juvenile justice would also be ideal but, again, is often not the case. Turnover in these systems is common—impacting both the child’s case as well as institutional knowledge. Therefore, working with these systems might require more ongoing outreach and education than is typically provided to other community partners.

It might be beneficial to hold annual or biannual trainings and/or information sessions for new social workers and case managers. These sessions could be content specific and address new data on adolescent sexual risk behaviors, positive youth development, a general overview of contraception, and the importance of communication between youth and trusted adults. Offering these trainings and providing credit hours for continuing education or hours of professional development for MSW students could incentivize participation. These trainings would also provide additional opportunities to link direct service providers like social workers and case managers with local resources and referral networks. Clinicians from a local clinic could provide an update for agency staff while building relationships and encouraging referrals for youth in the foster care system, etc.

### Identifying Opportunities for Collaboration

In order to support the diverse needs of youth involved in the child welfare system, including their health needs, it is critical

to involve a variety of stakeholders. When addressing teen pregnancy prevention among youth in the child welfare system, consider the involvement of:

- Juvenile Court Judges
- Family Court Judges
- Social Workers
- Case Managers
- Guardians Ad Litem (legal counsel for the youth)
- Court Appointed Special Advocates (CASA)
- Family Members (legal guardian or foster parents)
- Educational Attorneys
- Individualized Education Plan (IEP) Coordinators (employed by the public school system)
- Teachers, Counselors, and/or Principals
- Therapists and/or Mental Health Specialists
- Substance Abuse Counselors

By bringing a diverse group of stakeholders to the table, the safety net for youth in care is strengthened. These individuals all have unique opportunities to influence the health outcomes of a child, through school, home, treatment, and by court order. It is possible to work with these individuals through a variety of strategies:

- Provide adolescent sexual and reproductive health training for foster parents. In addition to training sessions, the following brief fact sheet may be a helpful resource to share with foster parents: [http://www.TheNationalCampaign.org/resources/pdf/pubs/10TipsFoster\\_FINAL.pdf](http://www.TheNationalCampaign.org/resources/pdf/pubs/10TipsFoster_FINAL.pdf).
- Work with social workers to incorporate family planning and discussions about contraception into transition plans for older youth transitioning out of care or being released after serving their sentence. This resource can help get you started: [http://www.TheNationalCampaign.org/resources/pdf/BrieflyEffectivePlanning\\_ChildWelfareLeaders.pdf](http://www.TheNationalCampaign.org/resources/pdf/BrieflyEffectivePlanning_ChildWelfareLeaders.pdf).
- Talk with school staff about clinical referrals during IEP meetings.
- Get the school nurse involved. Often youth in care are dealing with a variety of health issues and will already have a relationship with a nurse to address other needs—why not expand the conversation to pregnancy prevention?
- Involve school counselors. They might be well-positioned to deliver family planning messages if they already have an existing relationship with youth.
- Provide professional development for case managers on the topic of teen pregnancy prevention.
- Work with independent living programs to implement evidence-based teen pregnancy prevention programs as part of mandatory courses for youth residing in group foster care and those in juvenile detention centers. The National Campaign’s list of effective programs can be sorted to identify

those serving youth in foster care and juvenile justice: <http://www.TheNationalCampaign.org/resources/programs.aspx>.

- Propose sexual health screening questions for intake forms used with youth entering detention centers to ensure they receive appropriate services.
- Partner with clinics that serve youth as they enter the juvenile justice system and throughout their time in detention centers (often clinics are on-site at a detention center). Provide training to clinical staff on how to address the sexual and reproductive health needs of youth.
- Provide tools to juvenile and family court judges that include the topic of teen pregnancy prevention and why they should care about the issue. See, for example, [http://www.TheNationalCampaign.org/resources/pdf/pubs/critical\\_judgment.pdf](http://www.TheNationalCampaign.org/resources/pdf/pubs/critical_judgment.pdf).
- Stay informed about special funding streams for preventing teen pregnancy among the foster care population and discuss with your potential partners if relevant. The brief below describes a federal funding stream that was under consideration at the time this tip sheet went to print: [http://www.TheNationalCampaign.org/policymakers/PDF/FY13\\_FosterCare\\_TPBudgetProposal.pdf](http://www.TheNationalCampaign.org/policymakers/PDF/FY13_FosterCare_TPBudgetProposal.pdf)

### What it all Means

Addressing teen pregnancy prevention among youth in foster care and youth involved with the juvenile justice system is important and *can* be done. In fact, many state and local agencies across the United States are beginning to address this issue in a variety of ways: through trainings with foster parents and case workers, through programming for teens, through programming offered as part of independent living courses, and through discussions during the development of an independent living plan. It is important to consider that youth in these settings often lack the support and opportunity that could help reduce the risk of teen pregnancy, and they may have different perceptions about pregnancy at a young age, compared to the general population of teens. As a result, those interested in addressing teen pregnancy among this population should become familiar with the child welfare system in their own community and begin to identify areas in which they might offer support and resources on the topic of teen pregnancy prevention to those working with these youth. A full list of National Campaign resources related to working with the foster care and juvenile justice systems, as well as links to other helpful sources of information can be found at: <http://www.TheNationalCampaign.org/fostercare/default.aspx>

### Summary Tips for Working with Foster Care and Juvenile Justice:

- As with any potential partner you want to approach, make sure they understand the connection between

teen pregnancy prevention and their mission—both the heightened risk of teen pregnancy among youth in these systems, and the negative impact of teen pregnancy on youth as they exit these systems.

- Consider including foster care and juvenile justice staff in your community needs assessment and stay familiar with the latest research on teen pregnancy and other risky outcomes for youth in these systems.
- Familiarize yourself with the organizational structure surrounding the family courts and foster care systems in your state and community.
- Pay particular attention to the crossover of youth between the foster care and juvenile justice systems, and the heightened risks that these dually-served youth face.
- To the extent possible, make sure all the relevant sectors are at the table when sitting down to discuss teen pregnancy prevention. Have you considered all the possible settings in which these youth are being served and where teen pregnancy prevention efforts might be introduced or strengthened?
- Understanding systemic barriers is critical to making a difference. Exploring the realities of fragmented services, rapid staff turnover, professional development needs, and sustainability of programming are big picture issues that need to be included in a successful teen pregnancy prevention plan. Be sure to include the necessary decision makers in your deliberations to ensure follow through on suggested changes or new efforts.
- In addition to working with the foster care and juvenile justice agencies, consider opportunities to work with foster parents and the youth themselves. There are materials available to help get you started.

This publication was made possible by Grant/Cooperative Agreement Number U88/CCU322139-01 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC. Readers who are interested in the CDC's current efforts to promote teen pregnancy prevention can find more information here: <http://www.cdc.gov/TeenPregnancy/PreventTeenPreg.htm>.

### Endnotes

- <sup>1</sup> Child Welfare Information Gateway: Foster care statistics 2009. (2011). Washington, DC: U.S. Department of Health and Human Services, Children's Bureau. Retrieved on May 30, 2012, from <http://www.childwelfare.gov/pubs/factsheets/foster.pdf>.
- <sup>2</sup> Adoption and Foster Care Analysis and Reporting System (AFCARS) FY 2010 data (October 1, 2009 through September 30, 2010). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families. Retrieved on May 30, 2012, from [http://www.acf.hhs.gov/programs/cb/stats\\_research/afcars/tar/report18.htm](http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm).
- <sup>3</sup> Fast Facts: Reproductive Health Outcomes Among Youth Who Have Ever Lived in Foster Care. (2009). Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy. Retrieved on May 30, 2012, from [http://www.TheNationalCampaign.org/resources/pdf/FastFacts\\_FosterCare\\_Reproductive\\_Outcomes.pdf](http://www.TheNationalCampaign.org/resources/pdf/FastFacts_FosterCare_Reproductive_Outcomes.pdf).
- <sup>4</sup> Effective Planning for Child Welfare Leaders to Help Prevent Teen Pregnancy: An Agency Assessment. (2010). Washington, DC: The National Campaign to Prevent

Teen and Unplanned Pregnancy and The National Association of Public Child Welfare Administrators. Retrieved on May 30, 2012, from [http://www.thenationalcampaign.org/resources/pdf/Briefly\\_EffectivePlanning\\_ChildWelfareLeaders.pdf](http://www.thenationalcampaign.org/resources/pdf/Briefly_EffectivePlanning_ChildWelfareLeaders.pdf).

- <sup>5</sup> Counting it Up: The Public Costs of Teen Childbearing: Key Data. (2011). Washington, DC: The National Campaign to Prevent Teen Pregnancy. Retrieved on May 30, 2012, from <http://www.thenationalcampaign.org/costs/pdf/counting-it-up/key-data.pdf>.
- <sup>6</sup> Courtney, M., Hook, J.L., & Lee, J.S. (2009). *Distinct Subgroups of Former Foster Youth During Young Adulthood: Implications for Policy and Practice*. Chapin Hall Center for Children at the University of Chicago, Chicago.
- <sup>7</sup> Hoffman, S.D. (2006). *By the Numbers: The Public Costs of Adolescent Childbearing*. Washington, DC: The National Campaign to Prevent Teen Pregnancy.
- <sup>8</sup> Ibid.
- <sup>9</sup> Herz, D. et. al. (March 2012). *Addressing the Needs of Multi-System Youth: Strengthening the Connection between Child Welfare and Juvenile Justice*. Washington, DC: The Center for Juvenile Justice Reform, Georgetown University, and Robert F. Kennedy Children's Action Corps.
- <sup>10</sup> Widom, C. S. (Fall 2008). *Child Abuse, Neglect, and Violent Criminal Behavior*. *Criminology*, 27, 251-271. 1989. (As cited in *Child Welfare and Juvenile Justice: Two Sides of the Same Coin*, by Shay Bilchik and Judge Michael Nash. *Juvenile and Family Justice Today*. Fall 2008.)
- <sup>11</sup> Bilchik, S. & Nash, M. (Fall 2008). *Child Welfare and Juvenile Justice: Two Sides of the Same Coin*. *Juvenile and Family Justice Today*. (pgs. 16-20).
- <sup>12</sup> Herz, D. et. al. (March 2012). *Addressing the Needs of Multi-System Youth: Strengthening the Connection between Child Welfare and Juvenile Justice*. Washington, DC: The Center for Juvenile Justice Reform, Georgetown University, and Robert F. Kennedy Children's Action Corps.
- <sup>13</sup> Bilchik, S. & Nash, M. (Fall 2008). *Child Welfare and Juvenile Justice: Two Sides of the Same Coin*. *Juvenile and Family Justice Today*. (pgs. 16-20).
- <sup>14</sup> Ibid.
- <sup>15</sup> Thornberry, T. P. (May 2008). *Co-occurrence of problem behaviors among adolescents*. Presented at Multi-System Approaches in child Welfare and Juvenile Justice: Wingspread Conference. 2008, May 7. (as cited in, *Child Welfare and Juvenile Justice: Two Sides of the Same Coin*. *Juvenile and Family Justice Today*.)
- <sup>16</sup> Herz, D. et. al. (March 2012). *Addressing the Needs of Multi-System Youth: Strengthening the Connection between Child Welfare and Juvenile Justice*. Washington, DC: The Center for Juvenile Justice Reform, Georgetown University, and Robert F. Kennedy Children's Action Corps.