

Young women, national and state advocates, provider agency executives, researchers, foundation representatives and Capitol Hill staff members met in Washington, D.C., May 12, 2011 to begin a national dialogue about the experiences of young mothers in foster care. The National Crittenton Foundation (TNCF), which has a 128-year history of using a social justice framework to support marginalized girls and young women convened the meeting to provide an opportunity for a diverse array of people and organizations to hear directly from young mothers in foster care about their experiences and their suggestions for making foster care more effective for them and their children.

Executive directors from five of the 26 members of the Crittenton family of agencies also shared information from a direct service perspective about what works to support young mothers as they work to change behaviors and break destructive cycles that in many cases are family “traditions.” Barriers to providing services to young mothers in foster care created by state and national policy and funding perspectives and priorities were also discussed. Group discussion identifying critical gaps and needs rounded out the day. Throughout the convening the young mothers participated as “experts” providing their ideas and perspectives about how the child welfare system can better support them in being stable, raising healthy children and being connected to caring adults and family.

The National Crittenton Foundation knows from more than a century of experience that if provided a robust continuum of services for both parents and children, including the supports needed for a successful transition to adulthood, young mothers in foster care can break the intergenerational cycle of abuse and neglect that has marked their families for generations. We are thrilled that so many organizations (see below for list of interested organizations) have committed to joining with us in this effort.

This document highlights the day’s activities, key discussion points, and presents policy recommendations for addressing the needs of young mothers in foster care.

YOUNG MOTHERS IN FOSTER CARE: AN OVERVIEW

Jeannette Pai-Espinosa, President of The National Crittenton Foundation, provided an overview of the issue and some background on the convening. Jeannette explained that young mothers in foster care and their children are among the most marginalized, invisible and misunderstood population in American society. For example, **the vast majority of girls and young women who enter foster care pregnant or become pregnant, while in foster care, are survivors of child sexual, physical and emotional abuse or persistent neglect.** Additionally, many grew up in homes marked by domestic violence and substance abuse, and they continue to experience violence in their lives. As a result, they bear the life-long burden of healing from trauma and face significant challenges such as profound social isolation, addiction, depression and low educational achievement. They also tend to live in rural and urban poverty and to be disproportionately young women of color. In addition to being in foster care, many are also

involved in the juvenile justice system, or are homeless. Despite what we know through years of experience about the needs of young mothers in foster care, **there is no national data about the size or characteristics and needs of this population.** This lack of data within and across child welfare, juvenile justice, education, runaway and homeless youth and mental health systems makes it very difficult to advocate for them at the state or national level.

Standards and a clear definition of the continuum of services needed to effectively support them are also lacking. While significant time, energy and resources are dedicated to pregnancy prevention, little exists to support young women who have chosen to keep and parent their babies. Moreover traditional teen pregnancy prevention models may not be as effective with girls and young women in foster care because they do not address the reasons they become pregnant and choose to parent, such as their search for unconditional love and creating a family of their own.

Jeannette concluded her presentation by offering that TNCF convened the meeting to share what is happening in the field for young mothers in foster care. The Crittenton family of agencies has served this population for over 128 years, and the continuum of care they provide is an essential resource for young mothers in their efforts to heal from trauma and transform their lives. TNCF aims to fill a void in the national conversation and join with other experts in the field to better meet the needs of these young mothers and their children.

SUMMARIES OF KEY PRESENTATIONS

Stories from Young Mothers

Five extraordinary women ranging in age from 18 to 34 demonstrated that being a young mother in foster care does not have to confine young women and their children to a life of failure; rather, with the right services and supports, it can be an opportunity to turn one's life into a positive example for others to follow.

Charese, age 34, West Virginia/Utah

Charese is a survivor of incest and physical and emotional abuse. At 14, she became suicidal and was placed in foster care, then later chose to move in with her mom, but soon discovered it was not the environment she wanted to live in. At age 16, she moved out and at the same time learned she was pregnant. She was placed in state custody and moved into Crittenton Services in Wheeling, West Virginia. It was there that for the first time she truly felt safe and supported. The therapy, parenting skills and educational support she received helped her to change her life. Without a safe place to call home and intensive treatment, Charese believes she might have been an abusive parent.

Instead she and her college-aged daughter have a close, loving and healthy relationship. Today, Charese is graduating from college magna cum laude. She said: "My daughter is the light of my life and now we are working on her college plans. My life is amazing but I know that none of this would have been possible if I had not found a safe place to heal and grow."





Shemia, age 21, Georgia

Shemia was in foster care and then “aged out” of the system. Over the years she lived in more than 25 foster homes and was also involved with the juvenile justice system. She felt her placements were very unstable and that some foster families became foster parents for the wrong reasons, such as the financial reimbursements they received. Shemia found a Second Chance Home at Families First where she gave birth to her son. There she finished her GED and received therapy for depression and dealing with her anger. Shemia finally felt like she found a family in the staff and other young women at Families First. Everyone there wanted to support and listen to her and she felt loved. She is still connected to the young women she met at Families First. After a year, Shemia made a very hard decision to place her son, Kaden in a foster home. Eventually, her stepmother took him into her care and Shemia was and is involved in his life. Later she got involved with a transitional living program, again through Families First, and moved into her own apartment and started college. In 2009, Shemia gave birth to a daughter she named Honesty with whom she lives today. She has also earned an Information Technology Certificate, works at a retail store and hopes to regain custody of her son one day soon.

“I’m going to succeed no matter what. I even plan to get Kaden back one day when I can take care of both him and Honesty.”

Shante’, age 20, New York

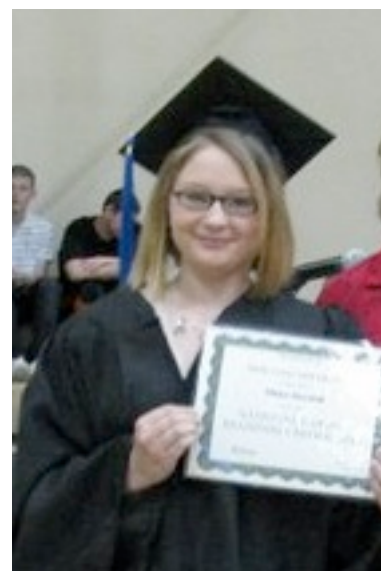
Life took a turn for Shante’ at age 10 when her father left her family. From that point, her mother became a different person. She started physically and mentally abusing Shante’ despite the fact that Shante’ was a good student. Shante’ kept running away so she was sent to California to live with her father. There, she worked hard to “not be like her mother,” and eventually she moved back to Brooklyn because her dad lost his job. She lived with her grandmother and did what was expected of her doing well in school and working. Later, when she learned she was pregnant, her grandmother kicked her out and the father of her baby denied that the baby was his. Shante’ had nowhere to go until she found Inwood House in the Bronx. Inwood House offered a family environment, which she liked. She said: “They pushed me every day because they knew I could do it,” Shante’ said. They helped her with her pregnancy and taught her parenting skills and today she is the proud mother of a newborn. This summer she will start studying forensic science at the John Jay College of Criminal Justice.



**Believe
Achieve
Empower**

Mikka, age 19, Kentucky

Life was good for Mikka until she was 11 and her grandmother died. Her grandmother had cared for Mikka because her parents were both addicted to drugs. Soon Mikka turned to drugs for solace. If she could not afford drugs she would resort to stealing or to trading drugs for sex. One day, she and her mother got caught using together. Mikka was sent to detox and it was there she learned she was pregnant. She was sent to Florence Crittenton for substance abuse treatment and lived there for 23 months. She quit using and became clean for her baby. While she has had her ups and downs, Mikka wants to be a good mother. “I can’t express all that Crittenton did for me– the home, the treatment and the staff. Without the time I spent there, I wouldn’t be alive and neither would my son,” Mikka said. She is currently living in a foster home with her son and is still drug free. She’s received her GED and is now working full-time and studying to become a nurse.



Selene, age 18, Oregon

For many reasons Selene’s childhood in Mexico was very difficult. One reason was the sexual abuse she endured at the hands of her older brother. She was lucky to get away from him when she moved to the United States. But soon, he and the abuse followed. With the help of a friend, she escaped and was placed in foster care and lived with several foster families who were “very good to her.” When she became pregnant at 17 she had to leave her foster family even though they wanted her to stay with them and were willing to support her. She was placed by the state in the White Shield Center in Portland where she learned parenting skills, continued her education and gave birth to her son. There she learned to value what she had in life. She expresses her thankfulness for all the programs and support she received at White Shield. She and her son now live with the same foster family she was living with when she became pregnant. Selene plans to enlist in the Navy. She said: “I’m proud that I’m the first in my family to have traveled outside of Portland, Oregon. Today, I am a young mother who knows what to do with her future.”

Continuum of Care for Young Mothers and Their Children: Best Practices from the Field

Five leaders of Crittenton agencies from West Virginia, Tennessee, Montana, Kentucky and New York gave an overview of the services their agencies provide; explained why these services are critical given the unique needs of girls they serve; and talked about barriers to providing such services.

The speakers were:

- Linda Bryant, Executive Director, Inwood House–New York
- Barbara Burton, Executive Director, Florence Crittenton Home and Services–Montana
- Nancy Christian, President/CEO, The Florence Crittenton Agency–Tennessee
- Kathy Szafran, President/CEO, Crittenton Services–West Virginia
- Mary Venezie, Executive Director, Florence Crittenton Home And Services–Kentucky

Though the variety of services vary from state to state, all leaders emphasized the importance of the “trauma-informed and specific” continuum of care that is provided to their clients in a variety of settings such as residential treatment, home-based services, transition and independent living, mother/baby family foster care and community based care.

What makes their work unique is that services are customized for each young women, and are characterized by being trauma-informed and gender and culturally-responsive. Wherever possible and appropriate, they are using evidence-based models to guide their work. Services for parents include therapy, parenting, attachment and bonding, pre-natal care, nutrition, healthy relationships and much more. Education, workforce readiness and career development support is also provided by all agencies. Services are also available for their children and include early childhood development and health services. Whenever possible, agencies also try to engage fathers and/or young men in the lives of the children, as well as working to reunify young mothers with their families.

The agency executives noted the growing bias in child welfare against residential treatment and the challenges to their work that result from this position. **All agreed that the best place for any young person is with a family, but they stressed that for some of the young women they serve this is not an option due to severe histories of trauma and intergenerational cycles of abuse and neglect.**

Agency executives proposed that the dichotomy between residential treatment and family foster care should be reframed to emphasize that some placements work better for different youth and that they can also be seen as points on a continuum. The former Crittenton clients echoed this sentiment, and some described how residential treatment was the most appropriate for them given the obstacles they faced. They also emphasized the importance of the lasting connections formed with peers in their programs. The panelists agreed that while some young mothers in foster care require a higher level of treatment, stabilization and structure than most traditional family foster homes are prepared to provide, it is also clear that more work is needed to develop strong models of foster care in which young parents and their babies can live together. This includes models to recruit and train specialized foster homes that can support young mothers through their pregnancy and help them form attachments to their babies after delivery. The leaders then identified the most significant policy barriers to providing a comprehensive continuum of care. These include:

- Lack of data about the population.
- Lack of understanding of the unique histories and underlying trauma experienced by this population.
- Challenge of piecing together multiple disparate funding streams.
- Lack of a definition of a comprehensive continuum of care for pregnant and parenting teens.
- Absence of clear standards across the continuum for young mothers.
- Adapting to public agency accountability measures, such as performance based contracting, given longer lengths of stay for pregnant and parenting teens.

- Practices in some states of babies automatically being committed to the state if the mother herself is in care.
- Child support policies that inhibit father involvement in the lives of their children.

Federal Panel: Policy Directions

Diedra Henry Spires (Senate Finance Majority), Becky Schipp (Senate Finance Minority) and Barbara Pryor (Senator Rockefeller (D-WV)) spoke about opportunities for federal policy reform to address the challenges faced by pregnant and parenting teens in foster care. They acknowledged the bias in federal policy against residential care, and expressed an interest in finding ways to distinguish the “good” facilities from “the bad.” They had not experienced many opportunities to hear directly from women who had been in residential care and the federal staffers emphasized that hearing their stories was reshaping their opinions on the role of residential care.

Among the opportunities for policy reform the group mentioned were: (1) legislation to expand and extend child welfare waivers, which has passed the House and is still pending in the Senate; (2) reauthorization of Promoting Safe and Stable Families (PSSF), due in September; (3) reauthorization of Temporary Assistance to Needy Families (TANF), also due in September; (4) using the Social Security Block Grant (SSBG) to support these services; and (5) Reauthorization of the Elementary and Secondary Education Act (ESEA), which will provide a new forum for discussing issues related to the educational needs of children in foster care.

Research and Data Presenters

Jennifer Manlove, a senior research scientist from Child Trends provided a contextual overview of what is known about teen pregnancy and parenting among youth in foster care and emphasized that not enough is known about this population, particularly young mothers. The teen birth rate in the United States has been declining gradually since the 1980’s, but there have been two upticks, highlighting the need to constantly assess pregnancy prevention programs. Significant data points include:

- 87 percent of teen pregnancies occur outside of marriage, an increase since the 1980s.
- 70 percent of teen pregnancies occur between the ages of 18 and 19, suggesting that certain types of interventions might be tailored to different age groups.
- African-American and Latino girls are at increased risk of becoming parents as teenagers compared to their White peers.

For teens in foster care, risk factors for teen pregnancy include: growing up in poverty, family turbulence; living in a family structure outside two biological parents; low educational attainment; adolescent acting out; and early sexual experiences. There is also evidence of a cycle between involvement in the foster care system and teen pregnancy.

For example an Illinois study found that 60 percent of girls in foster care became teen mothers, and in the United States roughly half of all teen mothers are investigated for child maltreatment. Unfortunately, research on this population does not indicate whether the young mothers received services to meet their unique needs. Finally, repeat teen births are associated with especially bad outcomes for the children. One in five births to teen mothers are repeat teen births – a fact that often goes unmentioned in dialogues of pregnancy prevention. More information is available at www.childtrends.org

POLICY RECOMMENDATIONS

Several policy recommendations arose during the presentations and subsequent question and answer sessions. Key recommendations that TNCF will pursue include the need to:

1. Collect more data and conduct more research on young mothers in the child welfare system as well as other systems in which they are involved, including juvenile justice, education, behavioral health, and homeless and runaway.

Currently there is no data on the size, characteristics and needs of this population of young mothers. More data will be essential for advocates to make the case to policymakers and grant makers regarding services tailored to this population. TNCF will advocate for a national data collection effort across systems so that resources, policies and programs can be better targeted to this population.

2. Articulate the continuum of services and placement options needed for young mothers in foster care and their children and establish standards of care to support successful outcomes.

Currently no framework exists for the appropriate continuum of services required by this population of young mothers and their children. Oftentimes services and supports for the general foster care or juvenile justice population meet with little success because they do not take into account the unique needs of young mothers.

A continuum is needed and must encompass the following:

- Community-based services to help young women and their babies remain with their families;
- Specialized foster care where mothers and their babies can remain together;
- Residential treatment for young mothers with serious histories of trauma and abuse; and
- Support to help young mothers achieve educational success and financial stability as they transition to adulthood.

Practitioners in successful programs can be key partners for developing this continuum for adaptation by public and private agencies interested in improving outcomes for this population. TNCF and the Crittenton family of agencies are in the process of outlining this continuum.

Additionally, the field would greatly benefit from **national standards of care** to inform service delivery for this population along the continuum. In addition to the importance of services that are trauma-informed and gender-specific, it is critical to consider realistic timeframes for achieving permanency for young mothers and their babies. **Additional considerations across the continuum include:**

High-quality residential treatment: We must identify the distinguishing characteristics of high-quality residential treatment for the population of young mothers with severe histories of trauma so that they can break the intergenerational cycle of abuse and neglect. This is particularly important in light of the increasing bias against residential treatment.

Best practices for mother-baby foster care: We must develop best practices for recruiting and training foster parents who are willing to support young mothers in their parenting role and help them make a successful transition to adulthood. Foster parents who take on this

responsibility must understand their role as supportive of both generations – young mother and baby – and understand how histories of trauma have shaped the young woman’s life.

Successful transitions to adulthood: We must integrate education, career and life planning, and workforce development into all service delivery across the continuum so that young mothers can make a successful transition to adulthood while also supporting their children. This strategy requires meaningful collaboration with multiple systems to ensure a seamless and coordinated plan for transition to adulthood.

Meaningful adult connections: We must ensure that young mothers and their children have an opportunity to make meaningful adult connections with their own families, their extended family network, or other adults/mentors in the community who can help them make a successful transition to adulthood. Young mothers need support to achieve this given their past histories of abuse, rejection and isolation within their own families and communities.

3. Ensure that the voices of young mothers are part of any discussion about programs and policies designed to meet their needs.

Along with many of our partner organizations across the country, TNCF has adopted a philosophy of “nothing about us without us” to ensure that the voices of young people can inform programs and policies designed to meet their needs. The voices of young mothers can help shape greater understanding about what works to help them become successful parents and young adults. Public and private agency administrators, practitioners, policymakers and researchers are urged to include the voices of young mothers, including those who have made a successful transition to adulthood, in all aspects of policy and program development for this population. We also promote the inclusion of father voices to better understand how to engage fathers as a critical influence for healthy child development.

4. Encourage every state to adopt a specific policy that prevents babies from being separated from their mothers solely because the mother is in foster care, or from being brought into state custody as a way to financially support placement for the baby.

Despite widespread agreement that babies of young mothers in foster care should only be in state custody if there is a validated safety concern, there continues to be instances of violation of mothers’ basic custody rights. Additionally, some jurisdictions continue to place babies into state custody as a way to access funding for placement for the baby, even though federal policy allows foster care funds to be used to support babies who are not dependents of the system if their parents are in care. States that have not adopted explicit policies to protect the custody rights of young mothers in foster care should be encouraged in that direction.

Additionally, states and local jurisdictions should educate their frontline workers about the custody rights of young mothers. TNCF’s “Rights and Resources” handbook on the custody rights of young mothers in foster care has been instrumental in educating young mothers, workers, attorneys and others on this issues. It is available at [www. NationalCrittenton.org](http://www.NationalCrittenton.org).

NEXT STEPS

The Young Mothers in Foster Care Convening was a first step toward creating a national conversation to ensure a successful future for young mothers, their babies, and when possible, the fathers of the babies. TNCF is grateful to all of the individuals and organizations that participated in the convening and to those who expressed interest in continuing the dialogue.

Toward that end, we intend to take the following steps to make forward progress:

- 1) **Broaden the Base** – we will continue talking to national, state and local constituencies that care about young mothers in foster care and want to work together to achieve the above recommendations. We are particularly interested in organizations dedicated to healthy child development that are also committed to helping young mothers and their babies succeed.
- 2) **Make Progress on Recommendations** – over the course of the next four months, we will share these recommendations more broadly and seek strategic opportunities to move them forward. In particular, we will be defining the continuum of care for young mothers and their children as the foundation for developing national standards to meet their unique needs.
- 3) **Re-convene in 2012** – early in 2012 we intend to re-convene to discuss progress made and to continue the dialogue. Through this convening we hope to raise further awareness about the needs of young mothers in foster care and their children and to celebrate successes achieved.

PARTICIPANTS AND SUPPORTING ORGANIZATIONS

Administration for Children & Families	Georgetown University Center on Poverty, Inequality and Public Policy
American Humane Association	Healthy Teen Network
American Institutes for Research	Inwood House
Annie E. Casey Foundation	International Center for Research & Innovation in Fostering
Casey Family Programs	National Association of Mother's Centers
Casey Family Services-Baltimore Division	National Campaign to Prevent Teen & Unplanned Pregnancies
Center for the Study of Social Policy	National Women's Law Center
Chapin Hall	Office of Adolescent Pregnancy Programs, HHS
ChildFocus	Office of Juvenile Justice & Delinquency Prevention
Children's Defense Fund	Rebecca Project for Human Rights
ChildTrends	Senate Caucus on Foster Youth
Crittenton Services of Greater Washington	Senate Finance Committee (Majority Staff)
Crittenton Services, Inc., West Virginia	Senate Finance Committee (Minority Staff)
Delaware Center for Justice, Inc.	Senator Jay Rockefeller's office
Delaware Girls Initiative	Salvation Army, White Shield Center, Portland
Eightfold Strategy	Youth Services, Inc., Philadelphia
Families First, Atlanta	Zero to Three
Federal Strategy Group	
Florence Crittenton Home & Services, Montana	
Florence Crittenton Home, Kentucky	
The Florence Crittenton Agency, Knoxville	

If you are interested in knowing more about our national agenda to improve outcomes for young mothers in foster care and their children, or you want to join us in this effort, please contact Jessie Domingo Salu at Jessie@NationalCrittenton.org.