Case: An 18-year-old female presents to the Adolescent Clinic at the University of Kentucky for her checkup as part of the Young Parents Program Teen and Tot Clinic. She is accompanied by her boyfriend and father of her baby, and her 2-week-old baby. She reports that she and her baby are doing well, she is breastfeeding exclusively, and she reports no new concerns. The baby gained weight compared to the last visit and he is above their birth weight. They currently live with the father’s extended family. The father notes he is working on finding employment and they are being supported by the extended family. Overall, mom feels she and her baby are safe and supported.

According to an article published in Pediatrics in 2021 by the Committee on Adolescents and Council on Early Childhood, adolescent parents and their children have an “increased risk for medical, psychological, developmental and societal problems”. The 2021 article also provides updates to a previously published report for guidance on the care of adolescent parents and their children from 2012. While overall birth rates and repeat birth rates among adolescent women have steadily declined, in 2020, Kentucky ranked 6th out of all 50 states in terms of highest rates of teen pregnancies with 23.8 births per 1000 females aged 15-19 years old. Kentucky also has a significant infant mortality rate at 23.7 deaths per 1000 live births.

The pediatrician plays a part the moment the adolescent mother gets a positive pregnancy test. Not only are they in a unique position of discussing with the expectant parents their options and connecting them to the resources they will need, but they also must explain to them their rights as parents because parental rights differ from state to state when it comes to teen pregnancies. The AAP recommends that expectant mothers/parents meet with the pediatrician again in the 3rd trimester to establish care post-birth. The use of a multidisciplinary team, including Teen-Tot clinics, in the care of adolescent parents has also been shown to improve outcomes by providing emotional support to the new parents. It also allows better coordination of care for the new family unit.

Recommendations for care of adolescent parents emphasizes parental wellness, mental health, social history, and family resources. These include the following:

- Education on safe sex practices for the parents of the baby and contraceptive counseling depending on the preference of the mother with LARCs being the most effective
- Counseling mothers to exclusively breastfeed during the first 6 months and providing proper education and access to lactation support
- Determine the involvement of the father of the baby in the care and provide them with the care and support that they need as paternal wellness matters too – 18-25% of teen pregnancies involve a father under the age of 20 and not much data is available on the care/needs of the adolescent father
- Regular mental health checks, especially if either parent has history of mental health disorders – parenthood is a huge shift in their lives on many levels and could place them at risk for depression. Use the Edinburgh Postnatal Depression Screen (can also be given to the father)
- Screening for Intimate Partner Violence with self-assessment tools like the Woman Abuse Screening tool – adolescent mothers are at higher risk of IPV compared to older mothers and IPV has effects on the child and could lead to maltreatment and abuse
• Determine the amount of support the adolescent parent/s will be getting but still stress that the responsibility of raising the baby is theirs
• Consider social determinants of health like poverty, educational attainment, housing status, and employment and provide resources or assistance as deemed necessary – factors like these can add on to the stress the parents experience
• If the parents are still in school, emphasize the need for them to finish their education and advocate for them with regards to getting accommodations they need to allow them to continue their studies
• Become more aware and advocate for programs that can provide support to adolescent parents, their child, and their families like support groups

References: