Caring for the Caregiver: Addressing the Mental Health Needs of Teen Parents

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National Family Caregivers Month provides us an opportunity to reflect on the unique experiences and challenges caregivers encounter. Their mental health is an area that deserves special attention, especially for adolescent parents who may face additional barriers to receiving treatment. As a new Stoneleigh Emerging Leader Fellow at PolicyLab, I have a keen interest in leveraging research and the pediatric care setting to determine how best to support the mental health needs of teen parents.

The Intergenerational Impact of Adolescent Parent Depression

Unfortunately, adolescent mothers have a significantly increased risk of perinatal mood and anxiety disorders (PMADs), such as depression and obsessive-compulsive disorder, with prevalence estimates ranging from 26% to more than 50%—a stark increase compared to the national average of 12%. Despite this risk, they often do not receive the mental health care they need. In addition to increased rates of PMAD, teen parents face a multitude of barriers to accessing and receiving mental health care including transitions in health coverage, isolation and stigma associated with seeking help. They are also more likely to have experienced trauma and be involved with many systems, such as juvenile justice and child welfare. In fact, PolicyLab researchers found that more than 4 in 10 low-income adolescent and young adult mothers have past exposure to the child welfare system.

PMADs are not only detrimental to a mother’s health and well-being, but also impact the health and development of her children, causing negative socio-emotional development, cognitive delays and behavioral issues. For example, children of depressed mothers have increased school absences and more pediatric emergency department visits. Considering the far-reaching effects of PMADs and high prevalence among teen mothers, there is an impetus to act.

Reaching Teen Parents Where They Are
Several policy and research developments have made now the ideal time for innovation in how we address a parenting teen’s mental health needs in pediatric medical settings. Recent research has revealed that as many as 40% of mothers do not themselves visit the doctor after having a baby; however, the literature and experiences tell us that moms do use pediatric care for newborns. As such, it is an optimal place to reach teen parents.

Following the American Academy of Pediatrics recently updated guidelines, Children’s Hospital of Philadelphia’s Primary Care practices now screen all mothers for postpartum depression during the one-, two-, four- and six-month well-child visits. Teenagers are also screened for depression during well-child visits starting at age 12.

While screening has been effective in identifying mothers with depressive symptoms, PolicyLab research revealed that in the six months after screening positive for postpartum depression, only about 1 in 10 mothers referred for mental health care actually received treatment. We have a responsibility to find ways to improve this system to ensure caregivers are getting the services they need.

Where We Go From Here

Teen parents have a wealth of knowledge and are experts on their lived experiences. Research has overlooked their voices and therefore, we are missing a crucial piece of the puzzle in tailoring services and supports for their mental health. While the benefits of screening for maternal depression have been studied in depth, there is little guidance on best practices and reimbursement strategies for pediatric physicians to effectively connect adolescent parents to services or provide services to both caregiver and child.

Over the next two years, in collaboration with PolicyLab clinicians, researchers, policy experts, and key community stakeholders, my fellowship will explore the role of the pediatric medical home and identify gaps in knowledge and practice on how best to serve the mental health needs of parenting teens. First, I will complete a comprehensive needs assessment and identify best practices, programs and policies that support mental health needs of adolescent parents. My collaborators and I will also want to hear directly from teen parents about their experiences during the postpartum period and better understand their perspectives on barriers and facilitators to accessing mental health care generally and specifically within the pediatric medical settings. With this information, we hope to develop a plan to incorporate patient- and evidence-informed best practices into pediatric health care services.

Now is the time to rethink the role of pediatric medical homes in the effort to improve the mental health of teen parents. Knowledge generated from the needs assessment and qualitative research we will conduct has the potential to inform the work of other health systems and city, state and federal policies. Facilitating teen parents’ access to mental health care can create better health outcomes and be a pathway towards breaking the cycles of intergenerational maltreatment and poverty.

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