

CREATE Position Paper

Issue: Young people leaving care as parents

CREATE's Position

Young people preparing to transition from care face numerous challenges, such as an increased risk of early pregnancy. There is minimal population data in Australia, although the collated results of several smaller studies suggest that the rate of pregnancy amongst care leavers is 24 times higher than the rate of teenage pregnancy in the general population (Mendes, 2009).

Young parents with a care experience have spoken to CREATE about the challenges they have faced, such as perceived stigmatisation from health care professionals because of their age and care history. CREATE presented this evidence to the National Commissioner for Children and Young People in 2017, but continues to argue that targeted support and resources must be made available to this particularly vulnerable group of young people. This should include targeted interventions to reduce the stigma of young parenthood, as well as education and health services for this group of young people.

Table 1
Out-of-Home Care National Standards that to young parents with a care experience (FaHCSIA, 2011)

National Standards	Measures
13. Children and young people have a transition from care plan commencing at 15 years old which details support to be provided after leaving care	13.2 The proportion of young people who, at the time of exit from out-of-home care, report that are receiving adequate assistance to prepare for adult life

Evidence

- International data suggests that 32.9% of young women with a care experience aged 17-18 have been pregnant, compared to a rate of 18.4% in the general population (Dworsky & Courtner, 2010). Research into teen motherhood in Australia, especially for young women leaving care, tends to be limited to smaller, qualitative studies (Mendes, 2009; Radely, Schelbe, McWey, Holtrop & Canto, 2016). CREATE's 2009 Report Card for example found that 28% of the 471 young people transitioning from care interviewed were already parents themselves (McDowall, 2009).
- Research demonstrates that care leavers often experience negative life outcomes, such as homelessness, unemployment, criminal justice involvement, and poor mental health. Pregnancy and early parenthood complicates the leaving care process and creates additional stressors, such as hormonal changes and poor sleep effecting overall health, and difficulty accessing education due to challenges of sourcing affordable child care (Australian Human Rights Commission, 2017).
- Young parents may be reluctant to access formal support services as a result of stigma and feeling stereotyped by health professionals and social workers as being irresponsible and incompetent (McArthur & Barry, 2013). Young parents with a care experience however face additional stigma as a result of their out-of-home care history (CREATE, 2017; Denzel & MacDonald, 2014).
- Further, young parents may be reluctant to utilise support services due to fear of repercussions such as their child being taken into care, particularly when considering evidence of a 'surveillance bias' for care experienced young people who are parents from child protection services (Widom, Czaja, & DuMont, 2015).
- It is important to acknowledge that young parents with a care experience most often perceive having a child as a positive experience that provides a sense of purpose. Similarly, qualitative research identifies that young parents with a care experience are motivated to meet the needs of their children in a manner their parents could not for them (Aparicio, Gioia & Pecukonis, 2018; Aparicio, Pecukonis & O'Neale, 2015).

Actions

CREATE calls on Commonwealth, state and territory ministers with responsibility for child protection to provide non-judgemental assistance for young parents that builds upon their existing resilience and motivation to provide for their children. This support should include helping the young person access financial and relationship assistance, sourcing stable accommodation, and facilitating the development of parenting skills. This support should commence early as part of their transition to independence planning. Target interventions to reduce stigma and introducing prioritisation for young care leavers in accessing health services will minimise barriers to support seeking. Open discussions about the importance of education regarding young people's health and relationships and the services and assistance available for them should also be included as part of casework practice.

References

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