

EXPERIENCES WITH CHILDHOOD TRAUMA AMONG FIRST-TIME ADOLESCENT AND YOUNG ADULT MOTHERS: RISK FACTOR FOR SUBSEQUENT PREGNANCY WITHIN TWELVE MONTHS

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ABSTRACT

The current study had two objectives: (1) to document the rates of rapid subsequent pregnancy among first-time adolescent and young adult mothers and (2) to assess how experiences with childhood trauma may be associated with rapid subsequent pregnancy. First-time adolescent and young adult mothers ($N=118$) were interviewed during the prenatal period and when their baby was 6 and 12 months of age via home visits. Overall, 18% of the first-time adolescent and young adult mothers experienced a subsequent pregnancy within 12 months. Mothers who had a rapid subsequent pregnancy were more likely to have experienced childhood trauma than mothers who did not have a rapid subsequent pregnancy. These findings suggest the prenatal period offers a critical opportunity for health care providers to identify individual mental health needs of pregnant women and initiate appropriate supports.

INTRODUCTION

Becoming a young mother often significantly alters the woman's life trajectory and presents many societal concerns (CDC 2011; Federal Interagency Forum on Child and Family Statistics 2011). In the United States, three in ten adolescent females become pregnant at least once by the age of 20, with one in five teen births occurring among adolescents who already have a child (National Campaign to Prevent Teen and Unplanned Pregnancy 2011). Experiencing a short interpregnancy interval has been shown to increase risk for adverse maternal and perinatal outcomes, including preterm delivery and low-birth weight (Bratt and Scheepers 2006; Conde-Agudelo, Rosas-Bermudez, and Kafury-Goeta 2006). Meade and Ickovics (2005) reported in a recent meta-analysis that approximately 19% of teen mothers experience a subsequent pregnancy within 12 months and 38% of teen mothers experience a subsequent pregnancy within 24 months. Considerable research has been conducted on age, ethnicity, and income status as risk factors for a short interpregnancy interval among adolescent mothers, indicating rates of short interpregnancy intervals are often greater for younger, African American adolescent mothers from lower economic backgrounds (c.f., Boardman et al. 2006; Coard, Nitz, and Felice 2000; Pfitzner, Hoff, and McElligott 2003; Pulley et al. 2002). Few longitudinal studies, however, have explored how maternal history of trauma exposure may be related to short interpregnancy intervals. To address this gap in the literature, we examined how maternal history of childhood trauma experience relates to rapid subsequent pregnancies (defined as 12 months or less) within a sample of first-time adolescent and young adult mothers from economically impoverished backgrounds.

Maternal history of trauma exposure is hypothesized to be an important risk factor in short-interval pregnancies based on extant literature (cf. Jacoby, Gorenflo, Black, Wunderlich and Eyler, 1999; Raneri and Wiemann 2007) and our previous research (Patchen, Caruso, and Lanzi

2009). Childhood trauma is a major societal issue that is widespread across the United States, affecting approximately six million children annually (US DHHS, 2010). Childhood trauma, as indexed by physical, medical, emotional, educational and/or sexual maltreatment, has been shown to be related to a host of developmental consequences including increased rates of teen and unplanned pregnancies, drug use, dropping out of school, delinquency, and future poor parenting (Bert, Guner, and Lanzi 2009; Langsford et al. 2007; Kelley, Thornberry, and Smith 1997; Runyan et al. 2002).

In a previous study, we assessed differences in mental health indicators and trauma experiences during pregnancy in relation to interpregnancy intervals less than 24 months among a sample of adolescent mothers participating in a program for pregnant adolescent and young adult mothers (Patchen, Caruso, and Lanzi 2009). We found that adolescent mothers who experienced a subsequent pregnancy within 24 months reported more indicators of poor mental health and trauma experiences during the pre-natal and postpartum periods than did mothers who did not experience a subsequent pregnancy within two years. It is noteworthy that reports of physical abuse were greater for mothers who experienced a subsequent pregnancy within 24 months than those who did not experience a subsequent pregnancy with 24 months.

Although research has repeatedly provided evidence of the multiple risk conditions surrounding short interpregnancy intervals among adolescent mothers, little is known about the role of childhood trauma exposure. Documenting rates of rapid subsequent pregnancy among teen mothers and studying how experiences with childhood trauma relates to rates of rapid subsequent pregnancy is the overall objective of the current study.

METHODS

Participants

Participants were drawn from the *Parenting for the First Time Study*, a NIH 4-site (Birmingham, Alabama;