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LONG-TERM DRUG USE AND MENTAL HEALTH OUTCOMES ASSOCIATED WITH TEEN PARENTHOOD

Background: Research has found that precocious transitions in the life course contribute to the onset and change in life trajectories over time. When transitions occur at an earlier age than individuals are developmentally prepared, detrimental behaviors, such as drug use, are likely to result. Compounded in disadvantaged environments, some transitions, such as teenage parenthood, may drastically alter an individuals' social and economic resources and contribute to an increased risk environment. Building on previous research of precocious transitions among socioeconomically marginalized Latino men in San Antonio, TX, this study documents the long-term drug use and adult mental health outcomes associated with teen parenthood for women living within the same disadvantaged community.

Methods: The current study uses data from Proyecto SALTO, a longitudinal study examining health outcomes among a cohort of Mexican American women. Data was collected through mixed-method interviews, in which life history calendars including drug use were collected for a 15-year period. Current health and mental health outcomes were collected at the time of follow-up. To date, 213 interviews have been conducted.

Results: 93% of the sample have children, and 63% reported giving birth before the age of 20. Teen mothers were on average significantly younger at the time of birth of their first child (16.9 vs. 23.0 years, $p < .001$) and had significantly more children on average (3.9 vs. 2.6 children, $p < .001$) than non-teen mothers. Significant differences ($p < .01$) were found in terms of custody, with 32.8% of teen mothers having ever lost custody of a child, as opposed to 13.8% of non-teen mothers. In adjusted analysis, no significant differences were found in depression, PTSD, or suicidal ideation outcomes. While there were no differences in ever using any of the drugs examined between teen mothers and non-teen mothers, teen parents with a history of use had significantly less cumulative months of meth use ($p < .001$) and more cumulative months of heroin use ($p < .05$) than non-teen mothers.

Discussion: Findings suggest that teen mothers and non-teen mothers within this community have similar risks for deleterious mental health outcomes. Difference identified among average number of months of meth use suggests that teen parenthood may serve as a protective factor, with earlier initiation into parenthood curbing meth use earlier in the life course. Due to many barriers, these individuals may lack access to preventive healthcare and other social services.