



Service Priorities and Programmes Electronic Presentations

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Submitting author: Dr WAI FUN ANNA CHENG

Post title: Associate Consultant, United Christian Hospital, NULL

Collaborative Program between Comprehensive Child Development Service and Caritas Hong Kong for teenage expectant mothers in Kowloon East Cluster

Cheng WFA (1); IP LS (2); Mok KM (2); TO WK (2); Chan HB (1)

(1) Department of Paediatrics and Adolescent Medicine, United Christian Hospital; (2) Department of Obstetric and Gynaecology, United Christian Hospital

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Introduction

Comprehensive Child Development Service (CCDS) in Kowloon East Cluster (KEC) is an interdisciplinary service among Department of Paediatrics and Adolescent Medicine, Department of Obstetrics and Gynecology, United Christian Hospital and Department of Psychiatry, KEC, Department of Health and Social Welfare Department. CCDS uses Maternal and Child Health Centre (MCHC) as the platform for providing one-stop service to the high risk expectant mother, their infants and families.

Objectives

The Program: Caritas Project Hyacinth The recruited expectant mothers will be interviewed by CCDS midwife who offers an in depth psychosocial assessment , ongoing emotional support and antenatal education to them. The consented clients will be referred to the social workers of Caritas for engagement in the project Hyacinth in the same antenatal checkup session in the obstetrics outpatient clinic. The social worker of Caritas will then pay regular home visits , organizing community based support groups to these expectant mothers, aiming to improve their self-image, coping and interpersonal skills, positive parenting skills . The social worker will also accompany these young clients and their born infants to attend the medical follow ups in HA outpatient clinics and MCHC. Continue tracking of the health and development of the infant, monitoring mother's childcare competency, anticipatory guidance for child development and strategies for fostering maternal-infant bonding are offered by visiting CCDS paediatrician at MCHC. Regular meeting between social workers of Caritas and CCDS team will be held every 4 months to review the progress of the recruited cases.

Methodology

Service Statistics: 2009-2015: total 104 cases referred 2 cases declined the service and 2 cases were lost contact 3 cases still have not delivered their babies and 50 cases were being followed up in other MCHCs 47 cases have been actively followed by CCDS Paediatrician in the 3 MCHCs in KEC 18 / 47 cases were closed after vaccination completed and stable for a period of observation Profiles of

teenage mothers: Age Range 14-18 years old 8 married, 2 divorced and 37 single
10/47 has returned to work, 5/ 47 continue studying, 2/47 both works and studies, 30
as housewives 2/47 with adjustment disorder and 2/47 with depression 8/47 have
history of illicit drug use but stopped at time of pregnancy No. of smokers: 15/47
Quitted smoking since pregnancy: 9/15; decreased to 1/2 amount: 3/15; quitted
smoking at pregnancy but resmoke after delivery: 2/15; 1 continue smoking during
pregnancy Rapid Repeated pregnancy (childbearing within two years of prior
pregnancy) 4/47 (8.5%) Outcomes of the children: Preterm(<37 weeks of
gestation): 5/47 ; term: 42/47 SGA: 1/47; LGA: 1/47; LBW(<2.5KG) 3/47; VLBW(<1
kg) :1/47 Growth : Fair weight gain: 2/47 Development: ASD 1/47; global delay:
2/47; borderline delay 2/47; speech delay: 2/47; borderline speech/ fine motor delay:
1/47 Vaccination completed: 47/47 Caretaker: 2/ 47 on foster family, 1/47 in
residential home, 15/47 by mother herself, 11/47 by grandparent, 18/47 by mother
helped by other relative/maid No confirmed case of child abuse/neglect

Result

Conclusion: Teenage pregnancy is associated with biological, social and representational challenges. Teenage mothers are more likely to engage in problematic nutritional behaviors, smoking, drug and alcohol use than mother in low-risk contexts. Teen pregnant mothers also facing difficulty in getting good social support for emotion and childcare, especially insecure relationship with own partner. Moreover, teen mothers may experience chronically high levels of relationship insensitivity or hostility. They also have sense of helplessness in their relationship representation. All these will lead to dysfunctional mother-child interaction, insecure attachment of the child to the mother. Pregnancy is obviously a golden window of opportunity of intervention. The present project focuses on equipping the teens with positive opportunities in personal, social, educational and professional spheres. It also helps reducing biological risks for teen mothers in a proactive manner. Through close collaboration between CCDS team and Caritas Hong Kong, we can identify the biological, psychological and social problems of these families in a timely manner and hence provide cost-effective interventions.