Research Objectives

• The primary goal was to assess caregivers’ level of self-efficacy in educating and supporting foster youth about sexual health and reproduction.

• A secondary focus was to examine the different levels of self-efficacy based on caregivers’ sociodemographic characteristics such as the relationship to youth, gender, and education level.

Introduction

Foster youth are particularly at risk for pregnancy and are 2.5 times more likely to become pregnant by age 19 than their peers that are not in the child welfare system (Comlossy, 2013).

Researchers have gathered that parents and children are commonly apprehensive when it comes to discussing sexual health and reproduction. Limited research has been conducted regarding the roles of caregivers as advocates for youth and caregivers’ perceptions of how to carry out this role as an educator.

This study aims to further investigate caregivers’ beliefs of their self-efficacy levels in assisting youth with their sexual health and reproduction.

Methods

Voluntary self-reported surveys measured caregivers’ comfort level and knowledge of adolescent reproductive health. A total score per survey of 23 minimum and 120 maximum was assessed for each respondent.

Participant Demographics

Total n = 41
34 females, 7 males
17 relatives, 24 non-relatives
9 graduated high school or less, 23 had an education greater than high school, 3 missing

Results

The results of the Histogram indicate caregivers feel competent when discussing sexual health and reproduction with youth.

Efficacy Levels of Caregivers

Mean = 91.98 Std. Dev. = 13.469 N = 41

Since the results were skewed, a Mann-Whitney U Test was used to compare the medians. The relationship to youth (Sig-value = .681) and education levels (Sig-value = .654) had no significant difference on levels of efficacy. Gender had a slight significant difference (Sig-value = 0.20) on caregivers’ level of efficacy.

Discussion

Although high levels of efficacy were displayed in the results, social desirability and the use of self-reports may have played a role in reported levels of efficacy reported by the caregivers.

Community collaboration and culturally appropriate programs are needed in order to support caregivers with creating opportunities to discuss important issues with youth such as sexual health and reproduction.

Future Research

Additional research must be conducted to understand the values, concerns, and beliefs of caregivers with educating youth about sexual health and reproduction.

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References