

Sexual Health Challenges of California's Foster Youth

A new Public Health Institute study finds that California's foster and transitioning youth face substantial sexual and reproductive health challenges. These challenges include the acceptance of early pregnancy in their families of origin and by their peers, a strong longing for love and a sense of belonging among many foster youth, and a common belief that becoming pregnant can be an effective way to hold onto a partner.

At the same time, foster youth often do not receive school-based sex education because of its limited availability, the frequent changes in foster placements, and caregivers who may withhold permission to participate in sex education. And those who do receive sex education may not be sufficiently engaged, motivated, or assertive to avoid unprotected sex.

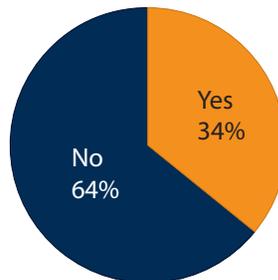
A total of 99 individuals participated in this mixed-methods study, including former foster youth, foster parents, and foster care system professionals from Fresno, Orange, and San Francisco counties. Many youth expressed a strong desire for one-on-one support from a caring adult to help them think through sex-related issues and make wise choices, and disappointment in not having sufficient opportunity to discuss these issues with foster parents and social work-

ers. Another challenge identified was that pregnant foster youth often do not receive counseling on pregnancy options, nor resources and support for avoiding future pregnancies.

Several barriers to addressing these challenges were identified, including inadequate communication between social workers and foster parents; inadequate staff training on adolescent sexual health; moral values among staff, foster parents, and group home providers that may prevent youth from getting sex education and reproductive health services; and unclear policies about appropriate roles for staff and their potential liability. The study's lead author and PHI senior research consultant Wendy Constantine commented: "Administrators, social workers, public health nurses, and foster parents alike all stressed the critical need for clear policies in this area."

The full report and executive summary are available at <http://teenbirths.phi.org>. The report includes nine formal recommendations (see box below). The authors conclude that in the long-term, sex education and reproductive health services should be interwoven with other child welfare improvement efforts to holistically address issues such as absence of long-term relationships with trusted adults and youth's need to belong, both of which can contribute to risky sexual behaviors and pregnancy.

Social Workers Who Said They Received Sufficient Training in Comprehensive Sex Education

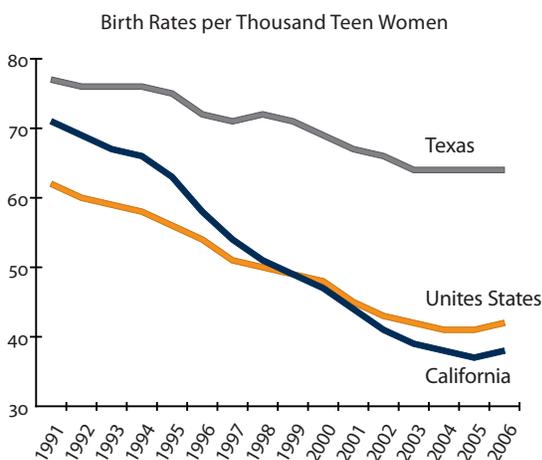


Policy and Practice Recommendations

- Counties should develop and implement specific policies, plans, and procedures to help prevent pregnancy and STDs and promote sexual health among foster youth.
- Foster youth should have regular access to workshops on comprehensive sex education.
- Foster youth in their early teens should have access to sex education prior to becoming age-eligible for Independent Living Program services.
- All staff and foster parents should be trained on adolescent sexuality and reproductive health services.
- Staff and foster parents should routinely initiate discussions with youth around the issues related to sexuality.
- Policies should be developed to ensure that a full range of reproductive health services are provided to pregnant youth.
- Sexual and reproductive health information and resources, including condoms, should be conveniently available on-site at Independent Living Program sites and other youth serving agencies.
- Recruitment processes for caretakers in foster homes as well as group homes should clearly state that foster youth must be allowed to attend sex education provided in school or by other programs.
- Section 16521.5 of the California Welfare and Institutions Code, which addresses age-appropriate pregnancy prevention information and health services for foster youth, should be fully funded and implemented.

Is Texas Missing the Boat?

California has increasingly turned away from abstinence-only approaches in favor of more comprehensive strategies, while making concurrent state level investments in contraception and other reproductive health services for low income teens. This is in stark contrast to Texas, where according to a report just released by researchers at Texas State University-San Marcos, abstinence-only education has become institutionalized throughout the entire state. Based on their systematic analysis of information received from 990 of Texas' 1,031 public school districts, the authors found that 94% of Texas districts provide abstinence-only education. The full report *Just Say Don't Know: Sexuality Education in Texas Public Schools* is available for download at <http://tinyurl.com/dgryhz>.



Pregnancies and STDs Among Former Foster Youth

A longitudinal study from the Chapin Hall Center for Children at the University of Chicago has documented alarming sexual and reproductive health outcomes of Midwest foster and former foster youth. Among its findings...

- By age 17, young women who were in foster care were almost twice as likely to have ever been pregnant than were their peers who were not in foster care (33% vs. 19%).
- These young women, however, were far less likely to have had an abortion (9%) than were their peers (36%).
- Almost 25% of the 17-year-old women who were in foster care reported having received testing or treatment for STDs, in comparison with only 6% of their peers.
- By age 19, nearly half of young women who had been in foster care reported they had ever been pregnant, as compared with 20% of their peers.
- By age 21, 71% of young women who had been in foster care had ever been pregnant, as compared with 34% of their peers.
- Half of the 21-year-old young men who had been in foster care had ever gotten a female pregnant, compared with 19% of their peers.

Full reports and supporting materials are available at <http://tinyurl.com/dzondn>.

CWLA Children's Agenda: Teen Pregnancy Prevention

The Child Welfare League of America (CWLA) states that reducing the nation's teen pregnancy rate is one of the most strategic and direct means available to reduce persistent child poverty and improve overall child and family well-being. CWLA proposes four long-term actions for accomplishing this goal: a) ensure that youth in foster care receive well-coordinated health care, including family planning services, b) encourage teen pregnancy prevention programs to serve youth in foster care and to evaluate the effectiveness of interventions, c) increase funding for the Title X family planning program, and d) support funding for effective comprehensive health and sex education (see <http://tinyurl.com/assfc5>).

Sexuality Information

The Sexuality Information and Education Council of the United States (SIECUS) maintains a Web site (<http://tinyurl.com/d55gsv>) with information on adolescent sexuality, comprehensive sex education, sexually transmitted diseases, teen pregnancy, and other related topics, as well as recourses for educators and advocates.

Teen Health Rights

The National Center for Youth Law maintains a Web site (<http://tinyurl.com/d889m6>) with information on teen health rights for California providers of adolescent health services. Information is available on reproductive health, confidentiality, minor consent, and other related topics.



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