



WHAT'S SEX GOT TO DO WITH IT?

Healthy Sexual Development to Improve Outcomes
for Youth in Foster Care

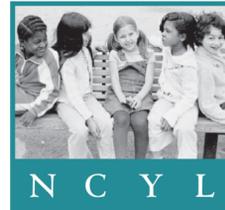
December 18, 2018 • 8:30AM - 4:00PM • East Los Angeles College

*What the
Data Tells
Us*

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Director, LA RHEP*

What is LA RHEP?

LA RHEP is a partnership of adult advocates and foster youth working to dismantle systemic barriers in an effort to improve access to sexual and reproductive health care services for youth in care.



National Center for Youth Law



Department of Children and Family Services



Children's Law Center
of Los Angeles



Seattle Children's
HOSPITAL • RESEARCH • FOUNDATION



Youth Advisory Board

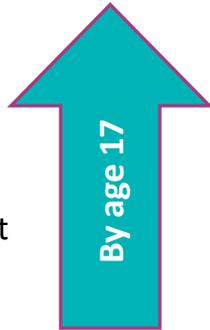


Youth
Voice

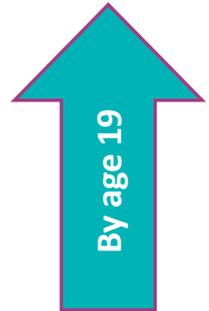
Reproductive Realities for Youth in Foster Care

What the
Data Tells
Us

- **26.0%** have ever been pregnant as compared to 13% in general population
- **22.0%** have been pregnant 2 or more times



- **52%** have ever been pregnant as compared to 20.1% in general population
- **20.6%** have been pregnant 2 or more times



Dismantling the “filling a void” narrative – this is about systemic barriers

What the
Data Tells
Us

Young women in foster care at age 19:

Wanted to become pregnant:	%
Definitely no	33.8%
Probably no	3.7%
Neither wanted nor didn't want	28.8%
Probably yes	7.5%
Definitely yes	26.1%

66.3%

28% report using contraception at last pregnancy



Young men in foster care at age 19:

Wanted partner to become pregnant:	%
Definitely no	16.2%
Probably no	21.1%
Neither wanted nor didn't want	33.4%
Probably yes	14.0%
Definitely yes	15.3%

70.7%

2.3% report using contraception at last pregnancy

Prenatal Care & Pregnancy

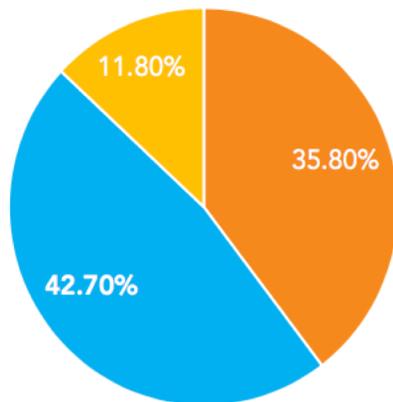
What the
Data Tells
Us

Of foster youth surveyed at 17 who reported pregnancy:

■ Live Birth

■ Stillbirth or Miscarriage

■ Abortion



***42.7% had a stillbirth or miscarried**

***20.7% never received prenatal care**



Early, unintended pregnancies and related education & employment outcomes



At age 19, of those who had not enrolled in **higher education**, 30% of foster youth cited the need to care for children as a major barrier to returning to school.

At age 24, having a child reduced a woman's odds of being **employed** by 30%—even after holding educational attainment constant.

Youth
Voice

What the
Data Tells
Us

"[Unintended pregnancy] stops youth from staying in certain homes. Makes each check stretch to make ends meet. School is harder to attend, child care is hard to find. Work is harder to attend and becomes unstable. A lot of meetings to attend with social workers, doctors, ILP workers, dentist, lawyers, etc."

Sexually Transmitted Infections (STIs)

What the
Data Tells
Us

Compared with peers:

- At least 3 times more likely to have certain STIs
- Young women: Chlamydia, gonorrhea, trichomonas, genital herpes, genital warts
- Young men: Chlamydia, gonorrhea
- Possible increased risk of HIV for certain populations

Unique factors place youth at risk for STIs



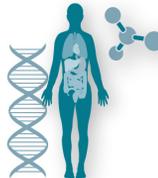
Insufficient Screening

Many young women don't receive the chlamydia screening CDC recommends



Confidentiality Concerns

Many are reluctant to disclose risk behaviors to doctors



Biology

Young women's bodies are biologically more susceptible to STIs



Lack of Access to Healthcare

Youth often lack insurance or transportation needed to access prevention services



Multiple Sex Partners

Many young people have multiple partners, which increases STI risk

Demographics: Sexual Orientation & Gender Identity



- Nationwide, **22.8%** of children in the foster care system identify as LGBTQ
- A study of foster youth in LA found that the percentage of those who are LGBTQ is approximately **twice** that of youth not in foster care
 - *Often due to discrimination
- Within LA County, **83% of LGBTQ foster youth were black or Latino**



Structural Drivers of Inequity v. Individual Blame

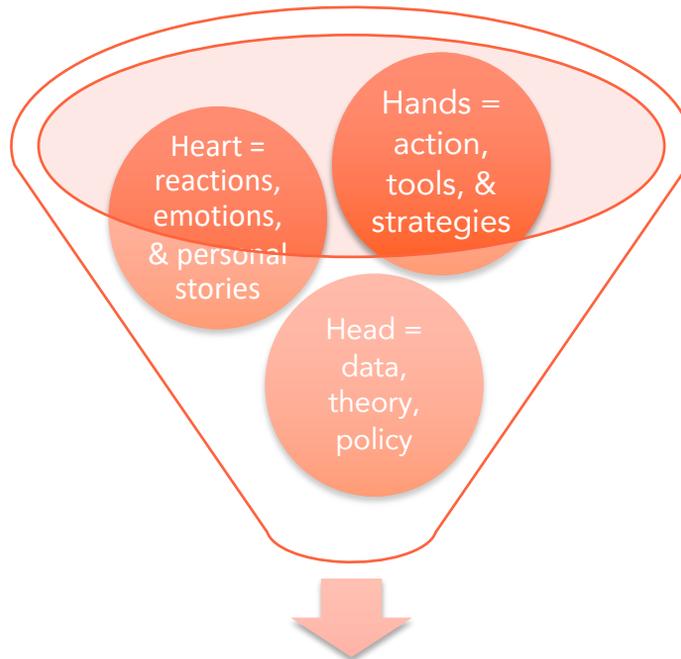
Lack of clarity on policies lead to actively infringing on youth rights

Lack of knowledge regarding reproductive and sexual health rights

Inconsistent access to comprehensive sexual health education & gaps in medical care

Historical oppression, structural racism & bias

Head + Heart + Hands Framework for Taking Action on Equity



A framework for having productive conversations on equity that can lead to effective action

Our Goals Today:

Learn about **policies in LA** to connect foster youth to sex education, as well as provide support for pregnant & parenting youth

“Head”

Obtain tools to **shift harmful beliefs** about what it means to support foster youth’s healthy sexual development

“Heart”

Get **practical strategies** for conversations with foster youth about healthy relationships, consent & sexual health, no matter what role you play

“Hands”

Sexual & reproductive health intersects in a really complex way across the life of youth in foster care, requiring coordination between multiple systems & stakeholders.



“There is no such thing as a single-issue struggle because we do not live single-issue lives ... our struggles are particular, but we are not alone.”

- Audre Lorde

LA's Dynamic Solar System for Advancing Equity for Youth in Foster Care

On a “cloud” or “star” sticky:

- Write the name of your org and/or a primary service or program
- Place your moon or star next to the “planet” that most closely reflects your primary service