The Association Between Generational Status and Sexual-Health Knowledge Amongst Native and Foreign-Born Adolescents



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Introduction

- Inadequate sexual education and lack of knowledge about contraception use and reproduction account for 41% of adolescents' risky sexual behavior. (Spence, N. J. and K. L. Brewster 2010)
- Disadvantaged youth, especially those with low socioeconomic status, familial instability, limited education-access, and poor self-perception/efficiency, face disparities in sexual-health resources, inherently shaping knowledge and attitudes towards social, romantic, and sexual integration. (Browning et al. 2004; Fletcher 2007;)
- Immigrant youth often experience cultural-stressors during assimilation, including differing cultural perceptions, social norms, familial values, and language acquisition, which can disrupt socialization. (Yeung, J. W. K., et al. 2022)
- Although sexual-health-knowledge levels and sexeducation access have been studied and associated amongst adolescents, little research has evaluated generational status (foreign-born and native-born)

Research Questions

- Is there a relationship between generational status, foreign-born and native-born, and knowledge level of sexual-health?
- Does this association of sexual-health knowledge and immigration-status differ between male and female adolescents?

Methods

Sample

 Respondents were drawn from the US. National Longitudinal Survey of Adolescent Health (AddHealth), a nationally representative sample tracking adolescents well-being and development through various sociological lenses. The survey was conducted annually from 1994 to 2017.

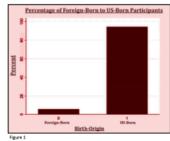
Measures

- Sexual-Health Knowledge level was assessed using the participants' sum score from 17 questions related to sexualactivity safety, protection, STIs, etc. The sum score was calculated by participants' number of correct answers (1=correct 0=incorrect).
 - The final mean score is coded on a scale of 0 to 4, with 4 indicating high sexual-knowledge level, and 0 indicating low-sexual knowledge.
 - Generational Status was assessed through participants response to if they were born in the US. Coded as a binary variable, with 1=Yes and 0=No.

Results

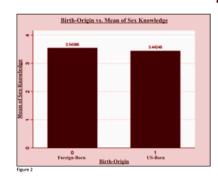
UNIVARIATE

- Approximately 91.25% of participants were born in the United States, with 8.75% of foreign-born participants.
- There is a large ratio in number of native-born to foreign-born participants, and should be considered in assessing knowledge mean scores



BIVARIATE

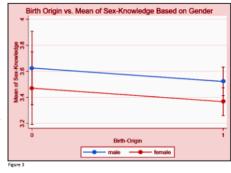
- Analysis of Variance (ANOVA) revealed amongst immigrant-youth, knowledge-level score resulted with a 3.54 mean (s.d ±2.52) while nonimmigrant youth had a 3.44 mean (s.d ±2.77).
- ANOVA analysis showed there is no significant relationship between generational-status and level of sexual-health knowledge



· This bivariate graph is showing a comparative-visual representation of the explanatory variable 'bornUS' (0=1 and 1=yes) and response variable 'SexKnowledge.' Through creating a composite score of Sex Knowledge questions, the mean refers to participants' performance; The graph's comparison of mean value between immigrant and nonimmigrant participants shows there is relatively little statistical difference. These results thus reject the predicted results, and accept the null hypothesis.

MULTIVARIATE

- Although Figure 3 indicates there is slight variation in sexknowledge score amongst biological sexes, the results are not statistically significant enough to state this is a strong moderating variable.
- After controlling for generational status and sexual-health knowledge, biological-sexes do not significantly differ and thus accept the null hypothesis.



Discussion

- The findings indicate that there is not enough evidence to conclude a relationship exists between sexual-health knowledge and birth-origin status. With both groups, native-born and foreign-born, receiving relatively the same mean scores, the null hypothesis is accepted. Biological-sex does not represent a moderating variable nor has a strong relationship with sex-knowledge level.
- The present findings are based on cross-sectional data and do not reflect the exact year and age at which immigrant youth migrated to
 the United States. Thus, more research and moderating factors are needed to consider if generational-status relates to sexual-health
 awareness and likelihood of risky-sexual behavior.
- This research contributes to identifying risk factors and prompters of risky sexual behavior, helping to inform preventative strategies
 and perspectives aimed to reduce contraction of STIs, early pregnancy, and overall emotional and physical well-being.
- More research is needed to evaluate if adolescents of different birth-origins, foreign-born and native-born, show differences in sexual-health attitudes and understanding of sexual health.