

# Maori Youth Sexual Health: Analysis of Risk and Protective Factors

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THE UNIVERSITY OF AUCKLAND  
NEW ZEALAND

culture



# What is Resilience?

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Resilience as the dynamic process of encompassing positive adaptation within the context of significant diversity

(1) exposure to significant threat or severe adversity

(2) the achievement of positive adaptation despite major assaults on the developmental process.

(Luthar, Cicchetti and Becker, 2000)

# Background

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Maori young people have rates of adolescent pregnancy, drug and alcohol abuse, and suicide that are among the highest in the Western World

Many interventions which reduce risk alone have been unsuccessful for Maori

Move toward a resilience & protective focus, rather than exclusively risk focused

# Question

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Are protective factors associated with Maori youth consistently using contraception?

- Family
- School
- Community

A close-up photograph of a lush green fern forest. The image is filled with various shades of green, from bright lime to deep forest green. The fern fronds are detailed and layered, creating a sense of depth. The word "Methodology" is centered in the image in a bold, orange, sans-serif font with a slight shadow effect.

# Methodology

# Adolescent Health Research Group

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**Peter Watson**

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**Robyn Dixon**

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# Self-report Questionnaire

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Ethnicity & Culture

Home

School

Neighbourhood

Spirituality

Health

Food & Activities

Substance use

Sexual health

Injuries & Violence

# Schools Surveyed

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# Response Rates

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- 86% (114/133) schools consented
  - 70% state funded; 68% urban
- 75% (9699/12,928) students consented
- Final total of 9570 student surveys  
4.0% of all NZ school students

A close-up photograph of a lush green fern forest. The image is filled with various types of fern fronds, some in sharp focus and others blurred in the background, creating a sense of depth. The lighting is soft, highlighting the intricate patterns of the leaves. The word "Demographics" is centered in the image in a bold, orange, sans-serif font.

# Demographics

# Age and Gender- Total sample

(9569 students)

	N	%
<u>Age</u>		
13	1972	20.8
14	2285	24.1
15	2179	23.0
16	1725	18.2
> 17	1308	13.9
<u>Gender</u>		
Male	4416	46.2
Female	5153	53.8

# Ethnicity of Total Sample

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	Census		Sampled Students	
	N	%	N	%
Maori	43767	17.5	2325	24.7
Pacific	18096	7.2	769	8.2
Asian	16923	6.8	679	7.2
NZ Euro	167370	67.1	5200	55.3
Other	3455	1.4	43	4.6

# Age and Gender of Maori Sample

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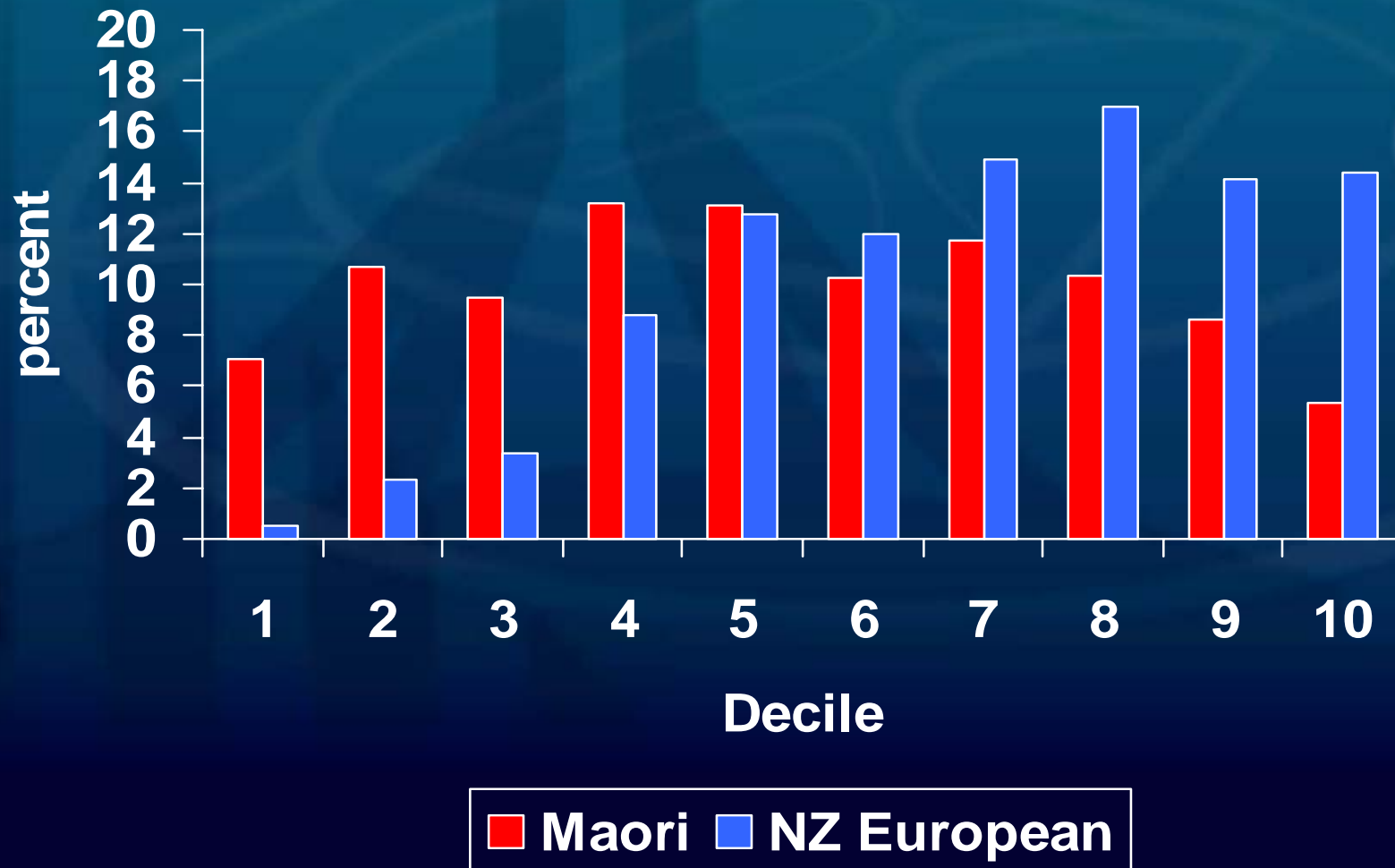
(2340 students)

<u>Age</u>	n	%
≤13 years	576	24.7
14 years	1237	28.3
15 years	540	23.1
16 years	359	15.4
≥17 years	199	8.5

<u>Gender</u>	n	%
Male	1237	52.9
Female	1103	47.1

# Socio-economic Characteristics

## School deciles



# Being Maori

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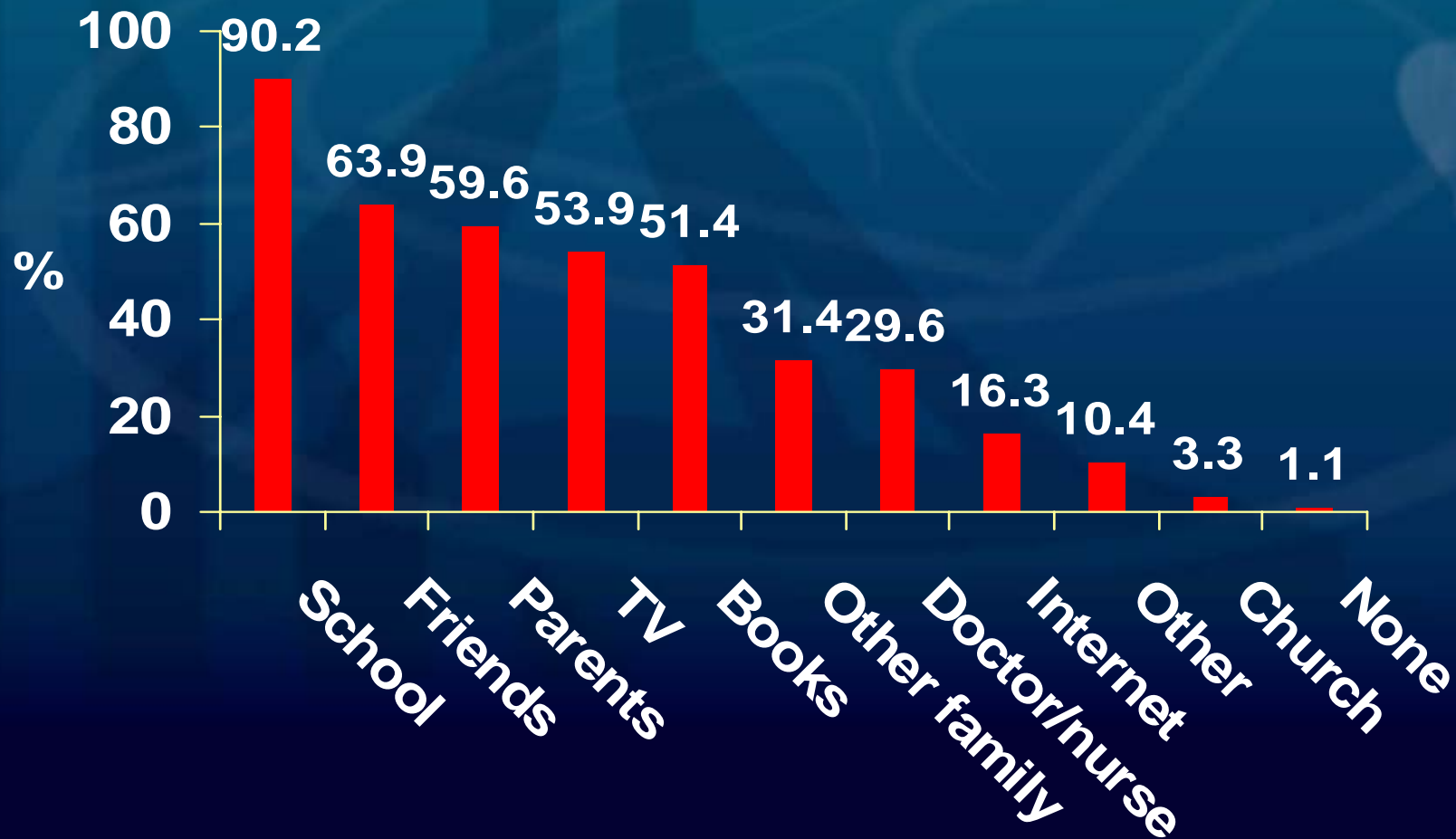
- 71% report they are very proud to be Maori
- 72% say it is important to them to be recognized as Māori
- 88% felt accepted by other Māori
- 84% report Māori values are important to them



# **Sexual & Reproductive Health**

***Maori specific results***

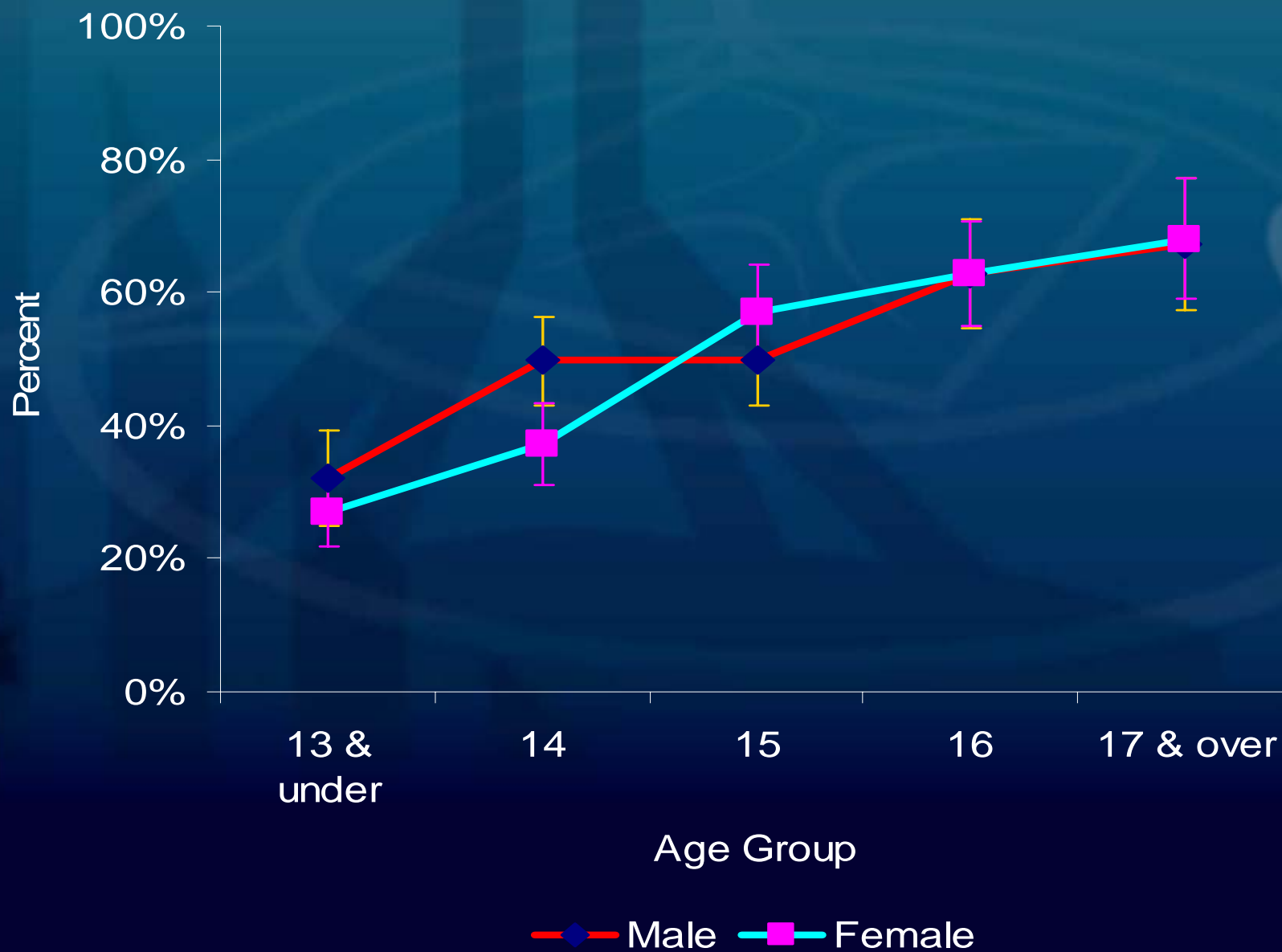
# Where have you got your sexual health information from?



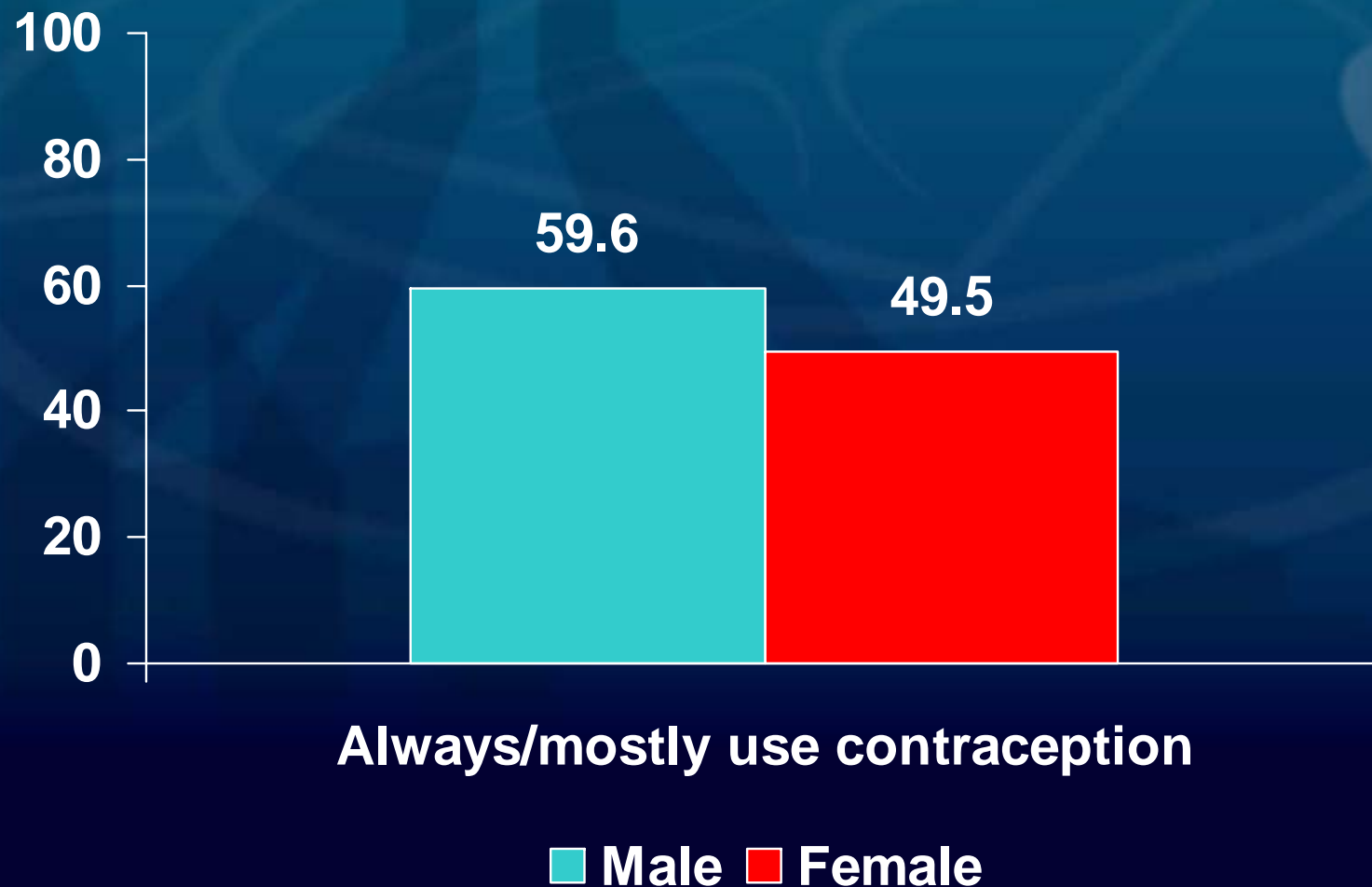
## **Currently Sexually Active (sex within the last 3 months)**

- 31.4% (n=389) Maori females are currently sexually active
- 29.7% (n=328) Maori males are currently sexually active
- 30.6% of Maori sample reported that they were currently sexually active

# Have you ever had sex?



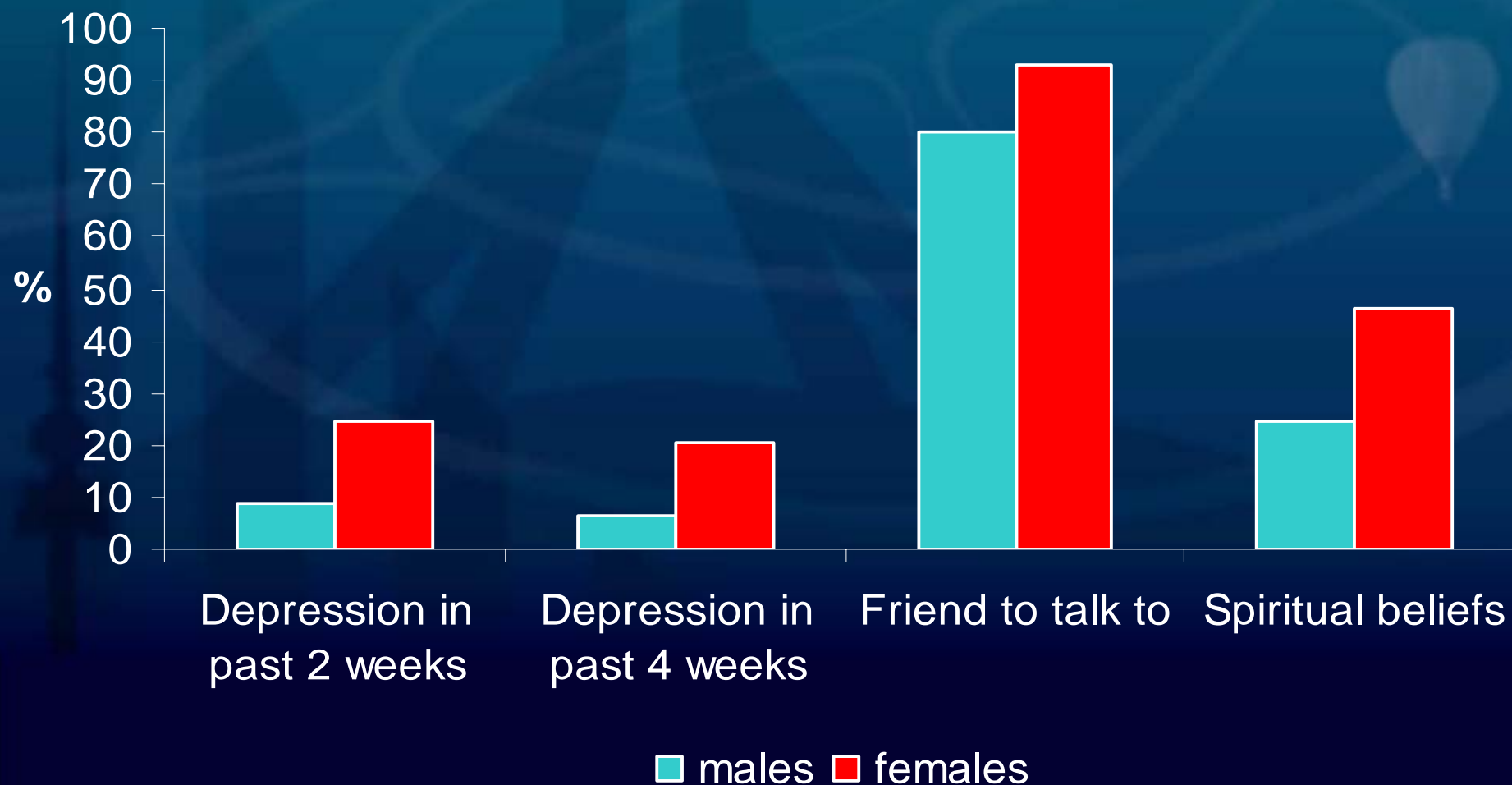
# How often do you or your partner use contraception?



## **Those students who consistently use contraception are more likely to:**

- Get enough time with their parents ( $p < 0.0015$ )
- Have a family meal together ( $p < 0.0343$ )
- Feel their teachers care about them ( $p < 0.0155$ )
- Feel their neighbourhoods are safe ( $p < 0.0099$ )
- NOT not have depressive symptoms in the past 4 weeks ( $p < 0.0036$ )

# Gender differences



# Logistic Regression I

Teachers care OR 1.6 ( $p < 0.0593$ )

Enough time with parents OR 1.6 ( $p < 0.0141$ )\*

Family meal OR 1.4 ( $p < 0.1014$ )

Neighborhood safe OR 1.5 ( $p < 0.1504$ )

Depressive symptoms 4 weeks OR 0.6  
( $p < 0.0818$ )

History of sexual abusive situation OR 0.9  
( $p < 0.9133$ )

Marijuana use weekly OR 0.5 ( $p < 0.0051$ )\*

# Logistic Regression II

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Teachers care OR 1.8 ( $p < 0.0102$ )\*

Enough time with parents OR 1.7 ( $p < 0.0063$ )\*

Family meal OR 1.4 ( $p < 0.1693$ )

Depressive symptoms 4 weeks OR 0.6  
( $p < 0.0345$ )\*

History of sexual abusive situation OR 0.9  
( $p < 0.8607$ )

Marijuana use weekly OR 0.5 ( $p < 0.0004$ )\*

# What does this mean?

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Those students who report that teachers care about them (OR 1.8  $p < 0.0102$ ), they get enough time with parents (OR 1.7 ( $p < 0.0063$ ), have an absence of depressive symptoms over the previous 4 weeks (OR 0.6  $p < 0.0345$ ), and do not report weekly marijuana use are more likely to consistently use contraception OR 0.5 ( $p < 0.0004$ )\*

Contraception use is mediated by multiple psychosocial factors, effective sexual health programs must involve multiple components

# Implications

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Single focused strategies are unlikely to be effective

Sexual health education and screening

Effective substance assessment and treatment

Effective mental health services and primary mental health screening for youth

Consistent safe and caring school environments

Public policy to ensure safe communities for young people

Support social policy that supports families to have enough time with their teens

# Limitations

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Cross sectional study

Associations do not infer causality

Small sample size of some items  
(neighbourhood)

Sensitivity of questions to understand the complexities of protective factors and how they operate

# Where to from here?

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Are there protective factors that we don't know about yet for Maori youth?

Qualitative research must be conducted which explores the experiences of protection and resilience for Maori youth

Longitudinal study for Maori youth to study causality

# Acknowledgements

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Elizabeth Robinson

Adolescent Health Research Group

Young people who participated in the  
survey

Michael Resnick

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