SEXUAL AND REPRODUCTIVE HEALTH KNOWLEDGE: EMPOWERING WOMEN THROUGH SOCIAL DETERMINANTS OF HEALTH

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PURPOSE

- The COVID-19 pandemic dynamic of sheltering-in-place affords possible opportunities to address social determinants of health (SDOH), as they relate to sexual and reproductive health knowledge (S&RHK).
- Strategic and crucial opportunities might exist for educational interventions by caregivers engaging in more frequent and prolonged encounters with young people.
- The purpose of this study was to evaluate whether two social determinants of health, income and education, are associated with sexual and reproductive health knowledge among adult women.

METHODS

- A 50-item survey was administered to women, aged 20-89 years, in two outpatient, metropolitan, primary care clinics in the United States.
- 18 of the 50 questions gauged S&RHK, and had only one correct answer. The maximal attainable score was 18.
- Data was coded and analyzed using IBM-SPSS. Statistical analysis included: Pearson correlation, *t,* and Chi-squared tests. Statistical significance was established at $p < 0.05$.

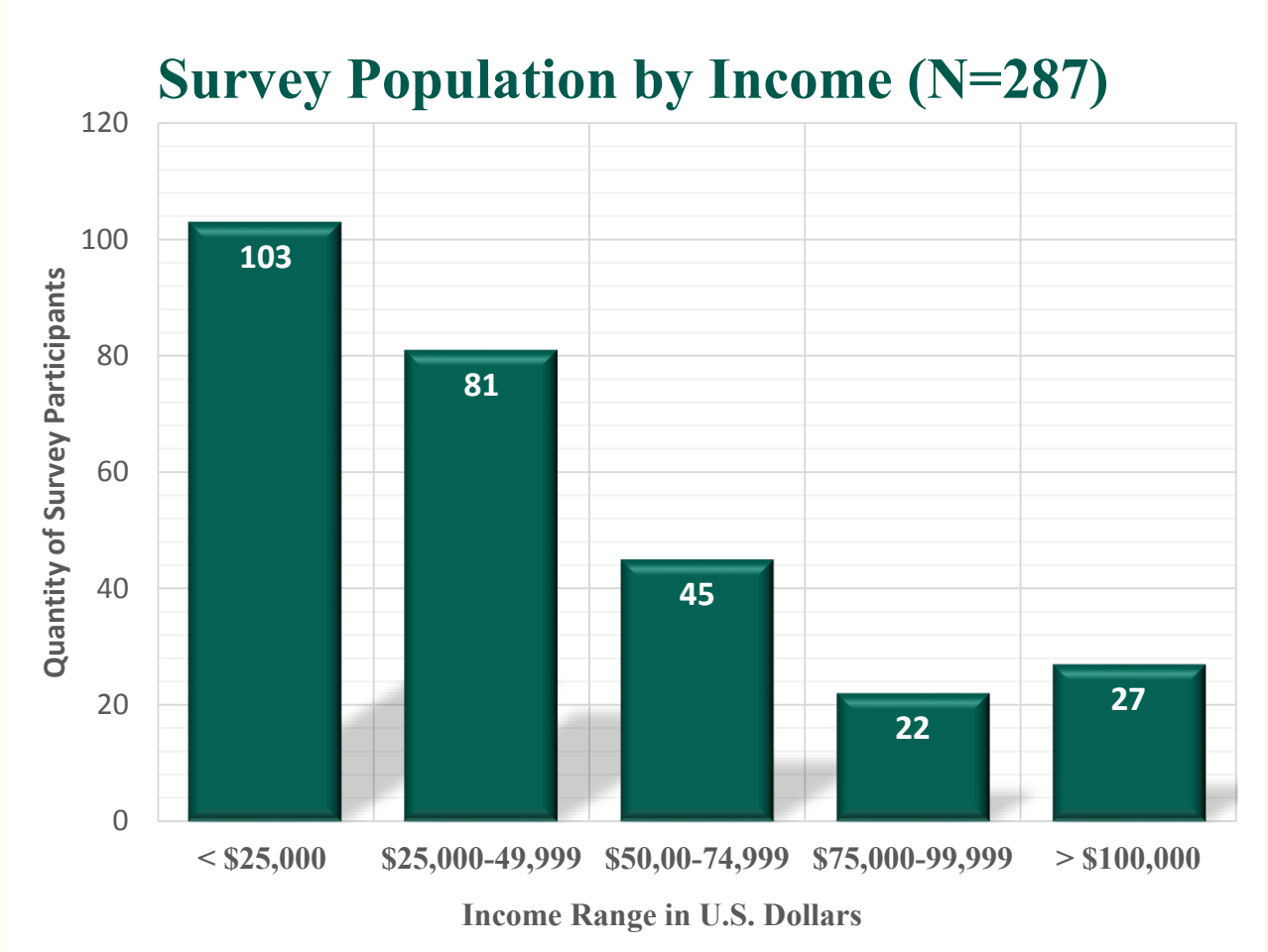
RESULTS:

- 287 women, with a mean (± SD) age of 55.3 ± 14.2 years, were surveyed.
- The majority (85.7%) were African-American, with 66 % having incomes ≤ $50,000.
- The group had a mean (± SD) 14.1 ± 2.5 years of formal education, and an S&RHK score of 10.2 ± 3.6, on a scale of 0-18. Of those with formal sex education, 43.5% stated it was sufficient.
- 32% reported no history of formal sex education. 97% reported that having sufficient S&RHK was important. Positive correlations were found between years of education, income, and S&RHK scores ($p<0.001$); a negative correlation between age and S&RHK scores ($p<0.001$).

DESCRIPTIVE STATISTICS

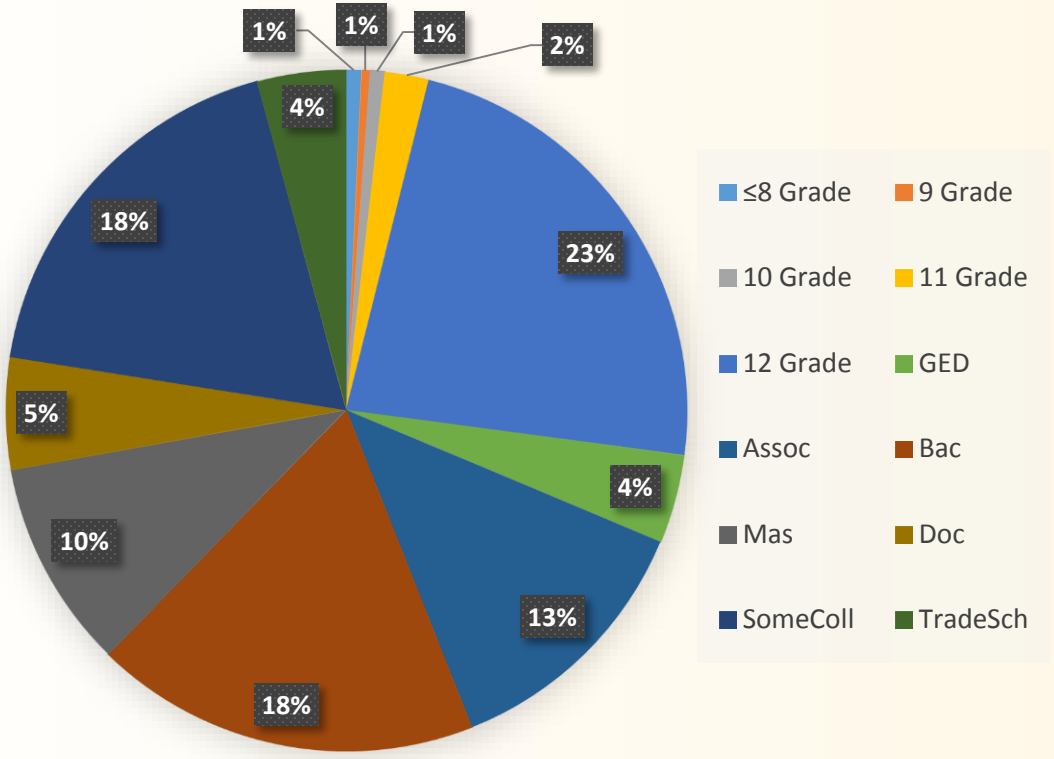
	Mean	Std. Deviation
SRHK Total Score	10.40	3.448
Age	55.34	14.807
Years of Ed	14.19	2.474
Income	2.24	1.293

Results

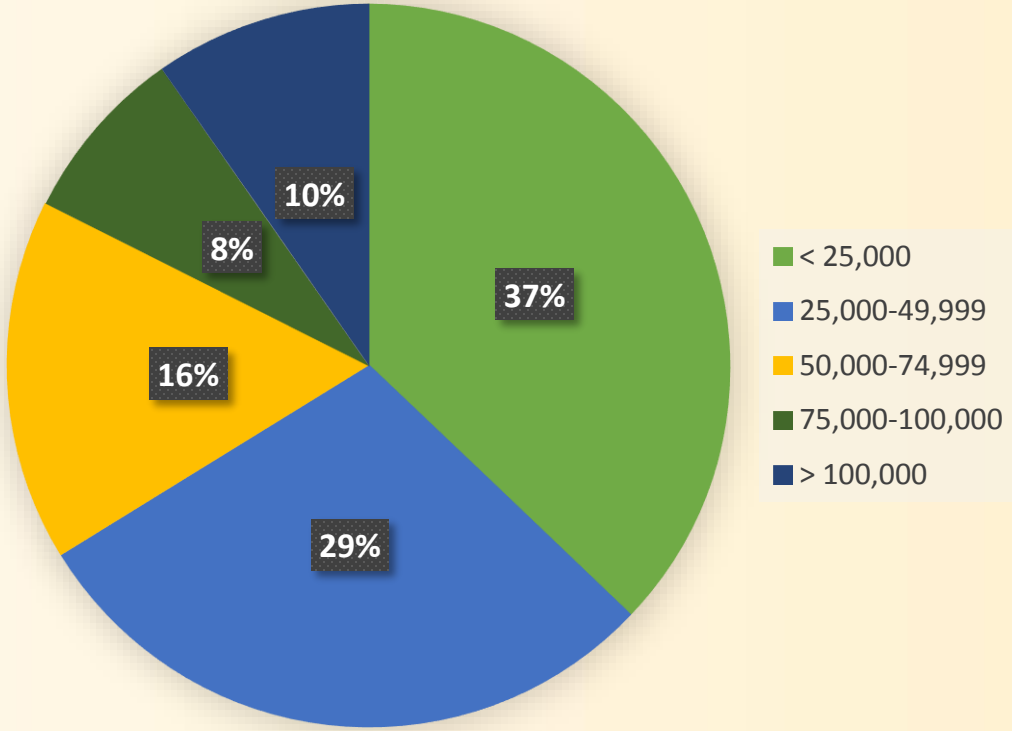

Survey Population by Income (N=287)
120
100
80
60
40
20
0
Quantity of Survey Participants
103
81
45
22
27
< $25,000
$25,000-49,999
$50,00-74,999
$75,000-99,999
> $100,000
Income Range in U.S. Dollars

RESULTS

Patient Characteristics by Level of Education

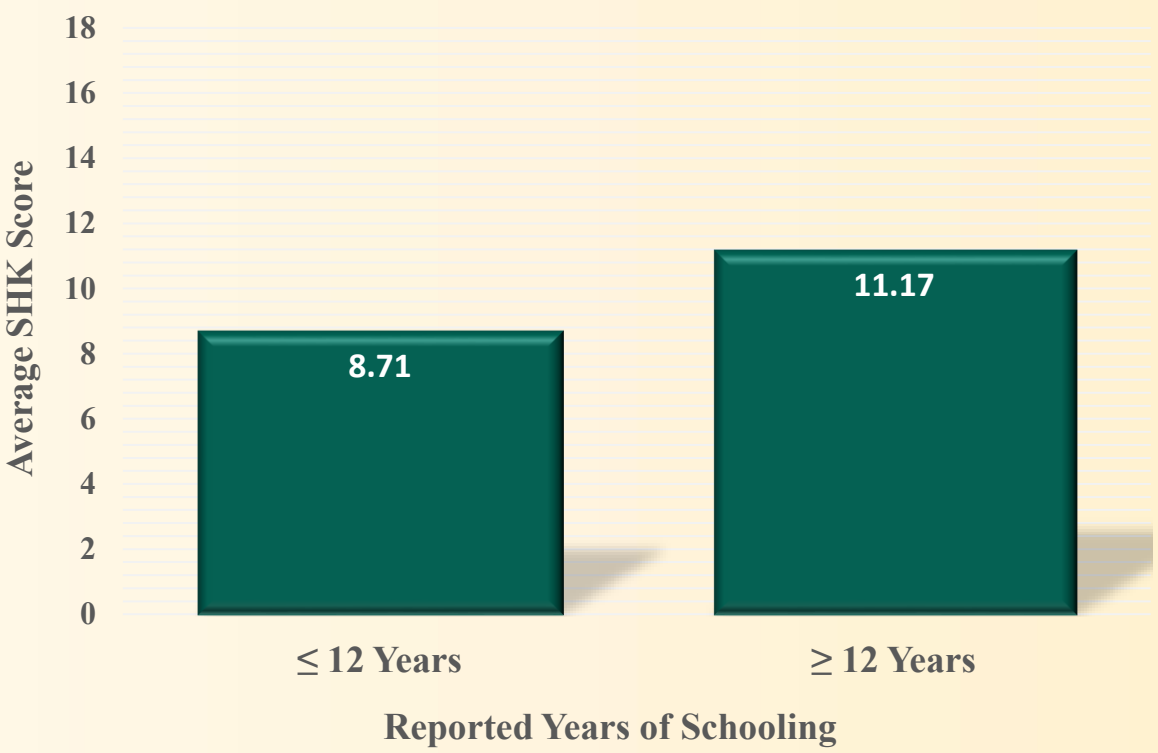


Patient Characteristics by Income

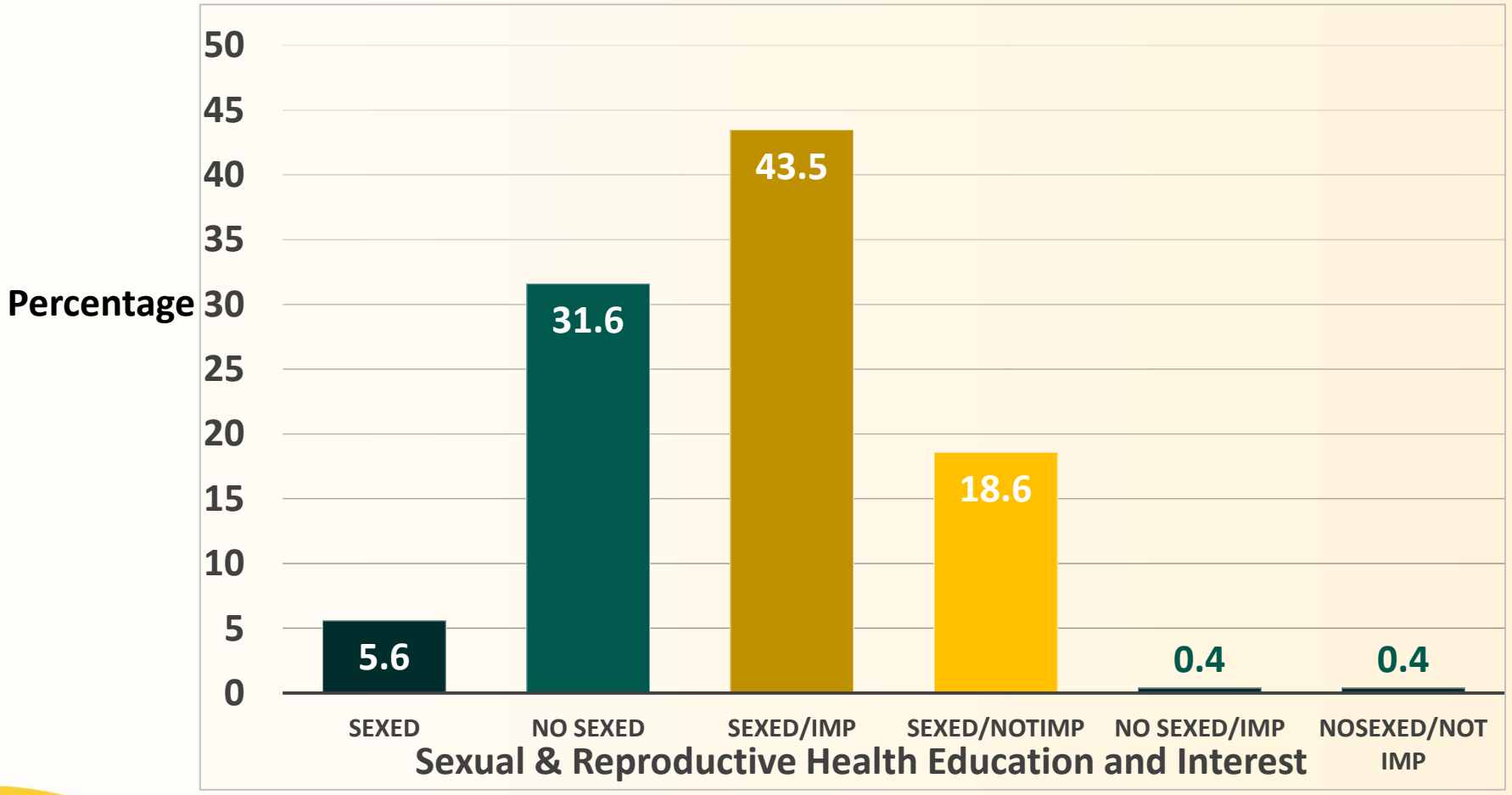


Results

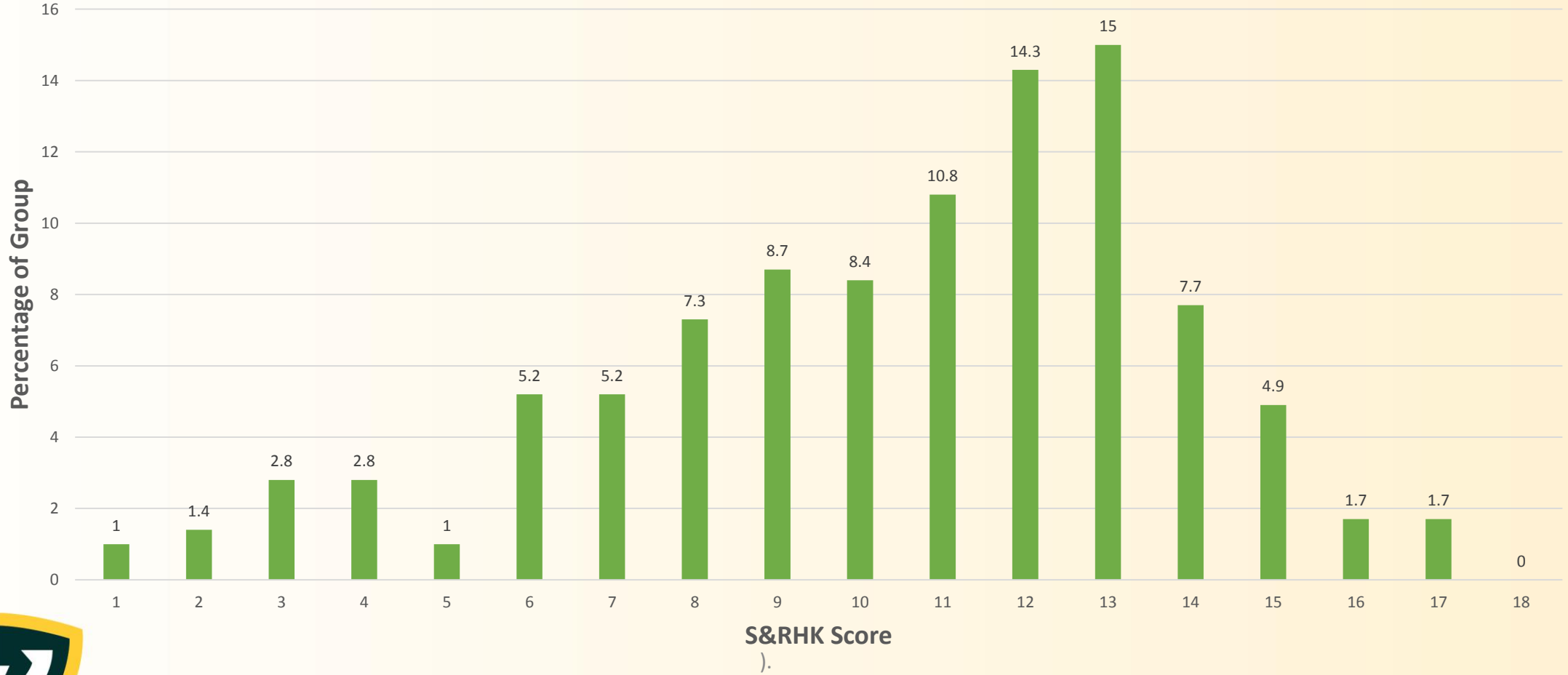
SHK Score by Total Years of Education (P= 0.001)			
Reported Years of Education	**Mean SHK Score**	**N**	**Standard Deviation**
Less than or equal to 12 years	8.71	89	3.39
Greater than 12 years	11.17	195	3.46



PRIOR S&RH EDUCATION AND SELF-EVALUATION OF IMPORTANCE



PERCENTAGE OF S&RHK SCORE



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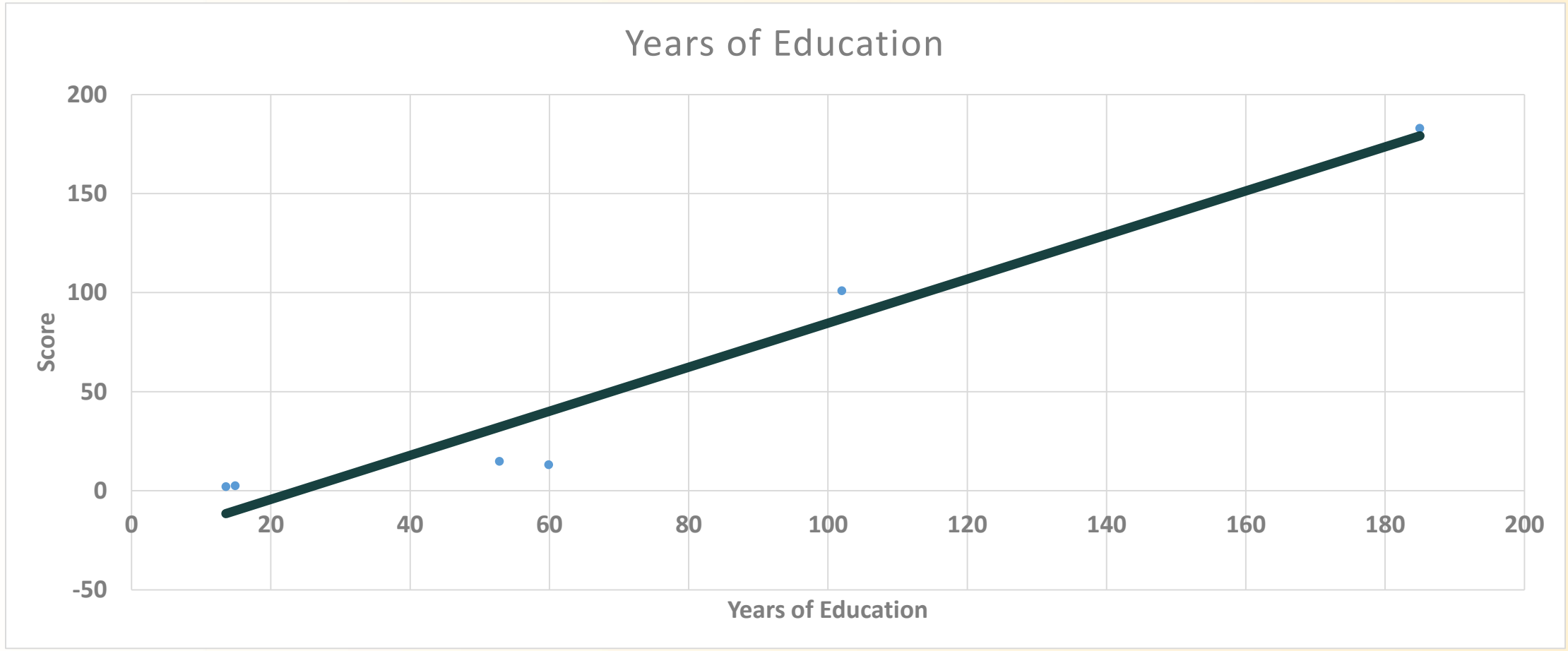
WOMEN IN THE STUDY BY AGE

Years of Ed	Pearson Correlation	.386**
	Sig. (2-tailed)	0
	N	284
Income	Pearson Correlation	.256**
	Sig. (2-tailed)	0
	N	278
Age	Pearson Correlation	-.193**
	Sig. (2-tailed)	0.001
	N	287

**. Correlation is significant at the 0.01 level (2-tailed).

EFFECT OF EDUCATION ON S&RHK SCORE



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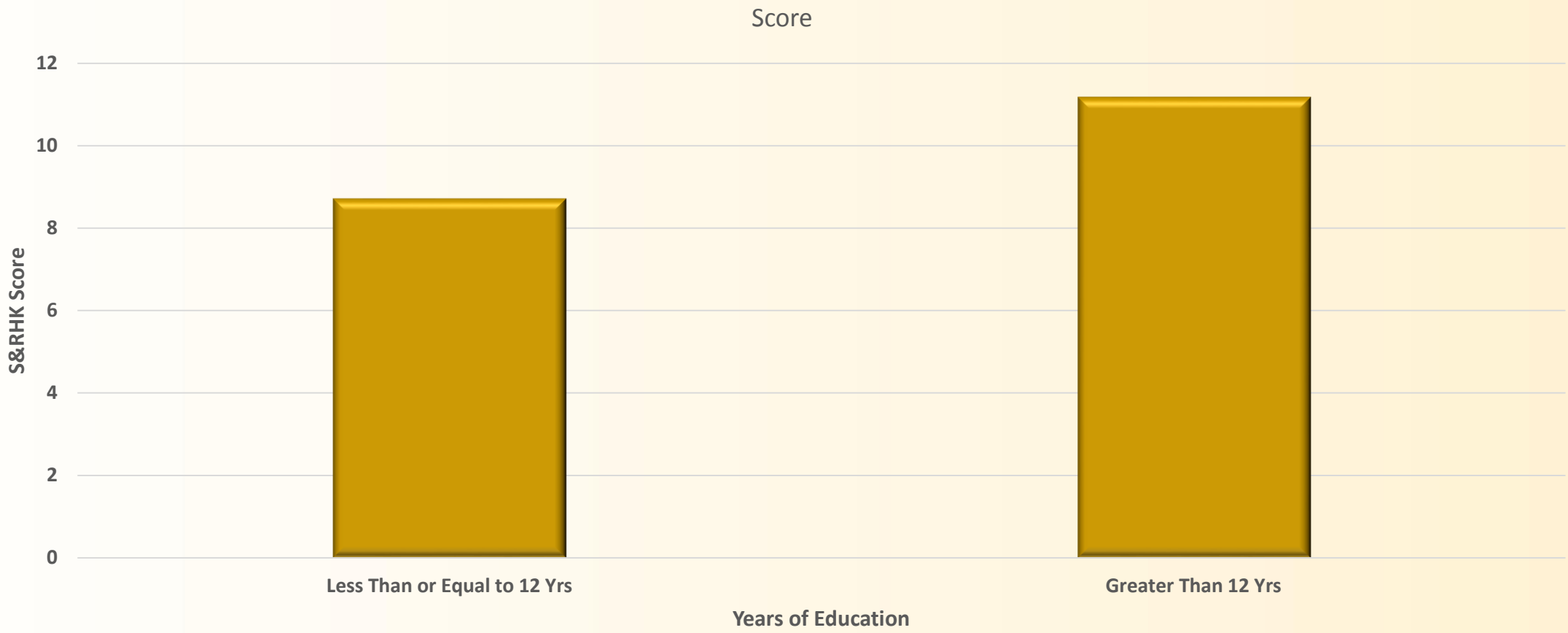
EFFECT OF EDUCATION ON S&RHK SCORE



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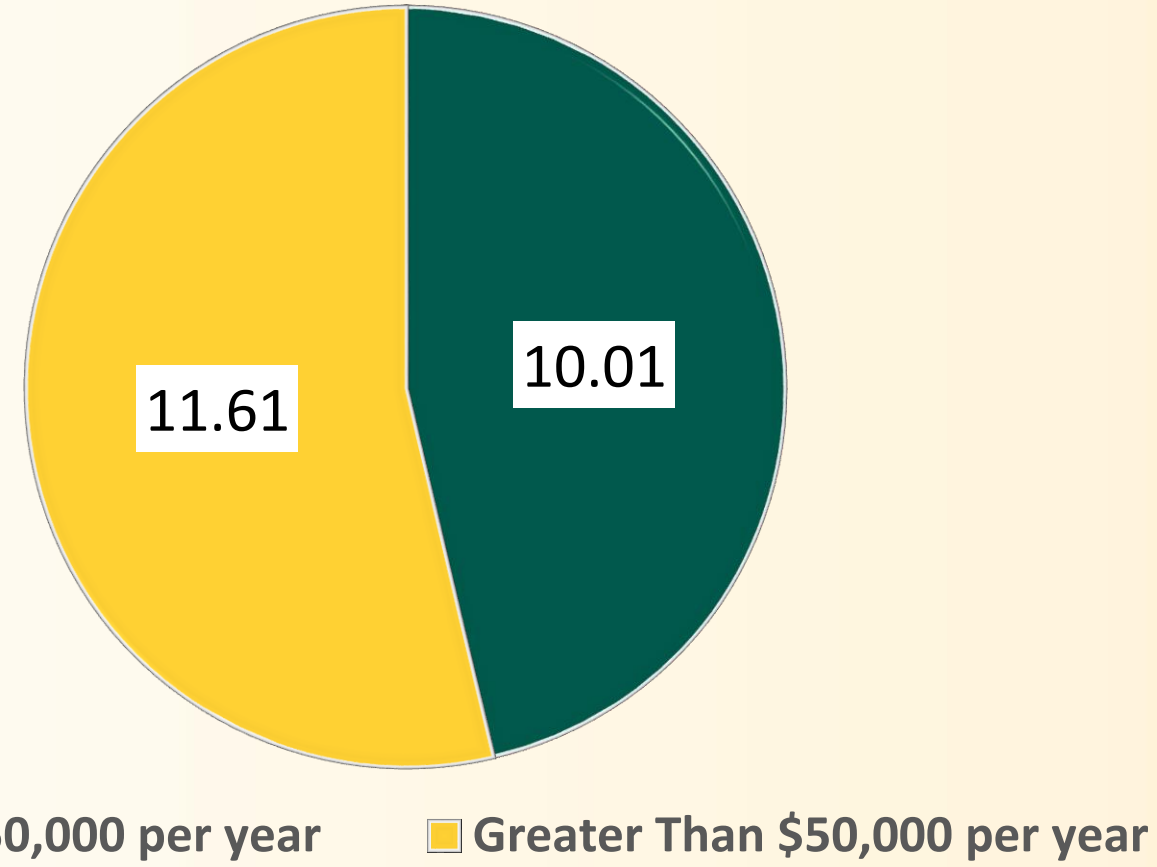
MEAN S&RHK SCORE BY INCOME



MEAN S&RHK SCORE BY INCOME

- S&RHK was strongly associated with education and income: two SDOH.
- Older women, irrespective of income, were found to score lower. Educational attainment seemed to have been the discriminating factor in this demographic.
- All three may figure prominently into an assessment of the effects of social accountability (i.e. the micro-, meso-, and macro- elements of social determinants of health) on health outcomes.

Strengths & Limitations

- **Strengths**
  - **Relatively large sample size**
  - **Broad income and educational representation**
  - **Survey confidentiality ensured by research team throughout**
  - **Significant correlation between education level and S&RHK score**
  - **Significant correlation between income level and S&RHK score (though to a lesser extent)**

- **Limitations**
  - **Absence of Research Assistants on-site to do Exit Interviews**
    - **Incomplete or misunderstood information**
    - **Non-compliance with instructions on answering questions**
  - **Validation of the S&RHK survey tool in different demographics**
    - **Men**
    - **Non-African-American populations**
    - **Students**

Conclusion

- **S&RHK was strongly associated with education and income: two SDOH.**
- **Older women, irrespective of income, were found to score lower.**
- **Educational attainment seemed to have been the discriminating factor in this demographic.**
- **All three may figure prominently into an assessment of the effects of social accountability (i.e. the micro-, meso-, and macro- elements of social determinants of health) on health outcomes.**

References

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- **Practising Social Accountability From theory to action –Sandy Buchman**

Thank you for your attention!