BAE-B-SAFE Grant

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INTRODUCTIONS

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- Sydney Briggs, MPAff, Research Associate
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We support educational success and increase graduation rates among community college students by:

• reducing unplanned pregnancies; and
• providing young people with life skills to protect their futures
• Competitive Personal Responsibility Education Program (C-PREP)
• Sept. 2015 - Sept. 2018
• Serve 18-19 year olds (20 year olds, if pregnant or parenting)

A 3 year grant by the Federal Youth Services Bureau (FYSB) under Administration for Children and Families
BAE-B-SAFE Grant

3 Campuses

Alamo Community Colleges District:
• San Antonio College
• St. Philip’s College
• Palo Alto College
• High-risk area in Southern Bexar County, primarily Hispanic population

• 6 feeder zip codes with 2 times the national rate of teen pregnancies

• 1 of the 6 zip codes has 3 times the national rate (79.8 per thousand)
ST. PHILIP’S COLLEGE

- Located in the 78203 zip code, serving 51 percent Hispanic and 12 percent African American population
- 4 times the national rate of teen pregnancies
- 2.5 times Texas’ teen birth rate
SAN ANTONIO COLLEGE

• Located downtown serving many high-risk zip codes

• Feeder zip codes 78207 and 78201 are 3 to 4 times the Nat’l rate

• 2.5 times Texas’ teen birth rate

COMMUNITY COLLEGE STUDENTS’ REPRODUCTIVE HEALTH NEEDS:

Preliminary Findings from the BAE-B-SAFE Evaluation

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Child and Family Research Partnership
The University of Texas at Austin
March 30, 2017
CFRP collected data between September and December 2016 from 194 community college students who agreed to participate in Seventeen Days or SHARP prior to completing the programs.

**Seventeen Days participants**
- 149 women, all from PAC
- 94% Hispanic or Latino
- 91% straight
- Average age 18.5
- 12 have ever been pregnant
- 8 have children

**SHARP participants**
- 50 men: 37 from PAC, 12 from SPC, 1 from SAC
- 90% Hispanic or Latino
- 94% straight
- Average age 18.4
- 2 have ever had a partner become pregnant
- 0 have children
Two out of three students have ever had sexual intercourse

Percent of women who have ever had sexual intercourse (N=148)
- Yes: 64%
- No: 36%

Percent of men who have ever had sexual intercourse (N=50)
- Yes: 64%
- No: 36%

Most sexually active students had just one partner in the past three months

Men are far more likely than women to report intent to have sex, regardless of prior sexual activity.

Intent to have sexual intercourse in the next six months if the opportunity arises.

Sexually active students use contraception inconsistently

Current use of hormonal birth control among currently sexually active women (N=77)*

- Yes: 30%
- No: 70%

Frequency of condom use among currently sexually active students

- None of the time
- Intermittent use
- All of the time

Women (N=77)
- None of the time: 31%
- Intermittent use: 38%
- All of the time: 31%

Men (N=25)
- None of the time: 64%
- Intermittent use: 12%
- All of the time: 24%

*Note: Here hormonal birth control includes the implant (Nexplanon), the shot (Depo-Provera), NuvaRing, the patch (Ortho Evra, Xulane), birth control pills, and all IUDs (Mirena, Skyla, Liletta, and ParaGard)
The second most prevalent contraceptive method is no contraceptive method.

Current use of contraceptive methods among women who are currently sexually active (N=71)

- Condom only: 39%
- No contraceptive method: 32%
- Pill: 15%
- Implant: 7%
- Shot: 3%
- Patch: 1%
- NuvaRing: 1%
- IUD: 0%

Note: 11% of women using a hormonal method of birth control also report using condoms. Not shown.
Among all students, few feel very knowledgeable about LARC

Students who feel very knowledgeable about each method of contraception

- **Women (N=146)**
  - IUD: 9% 
  - Implant: 21% 
  - Pill: 57% 
  - Condom: 77%

- **Men (N=49)**
  - IUD: 12% 
  - Implant: 18% 
  - Pill: 47% 
  - Condom: 79%

Women’s primary concerns about LARC are side effects and pain.

Concerns about LARC among women who report being “unlikely” to use LARC (N=96):

- Side effects: 68%
- Pain during insertion: 52%
- Cost: 25%
- Know someone who had a bad experience: 20%
- Religious beliefs: 11%
- Opposition from partner: 3%

Lack of knowledge is a significant barrier to LARC use

“I’m not sure what it is exactly. So I would want to know what it’s for and how it affects my body.”

“I don’t know anything about it or any side effects. This is why I am unlikely to use it.”

“I do not understand what this even means.”

“Stronger, [more] painful periods and fear of the procedure.”

One in three students faces barriers to accessing healthcare

31% of students have **NOT** seen a primary care provider in the last 2 years

36% of students do **NOT** have health insurance

Over half of sexually active women have not seen a reproductive specialist in at least 2 years

73% of all female students have **NOT** seen a reproductive health care specialist in the last 2 years

55% of female students who are currently sexually active have **NOT** seen a reproductive health care specialist in the last 2 years

Insured and uninsured students face distinct barriers to accessing health care.

Top three barriers to health care access among insured students (N=89):
- Don't know where to go: 43%
- Fear or anxiety: 36%
- Cost: 21%

Top three barriers to health care access among uninsured students (N=58):
- Lack of insurance: 55%
- Cost: 53%
- Don't know where to go: 24%

ON THE GROUND...

- High-level of Interest
- Lack of knowledge
- Male Engagement
  - Promising
ON THE GROUND...

• Stigma/Shame:
  • Most discomfort comes from Campus Faculty and Staff

• Social Norms:
  • Shifting

• Traditional gender roles still exist

• Not ready to Adult?
PERCEPTIONS?
PROGRAM MODEL

• On-campus presence
• Raise awareness
• Evidence-based curriculum
  • + Adulthood Preparations Subjects
  • Integrate into courses, when possible
• Connect students to clinics
• Additional Resources (information, referrals, condoms)
CHOOSING A CURRICULUM

• Few evidence-based curricula studied in older teens
• Need brief intervention, if possible
• FOCUS*
  • Studied in female Marine recruits ≥ 17 y.o.
  • Fewer partners at 11 months (among those who had not had sex)
  • Higher proportion of control group had post-intervention STI or unplanned pregnancy
• But: Discussions with developer: no permission to adapt

CHOOSING A CURRICULUM

• Three Online Lessons
  • The National Campaign to Prevent Teen and Unplanned Pregnancy’s
  • Not permitted by FYSB: not evidence-based
Choosing: SEVENTEEN DAYS

• 1 session: 1+ hours
• Engaging video
• Clinic-based randomized control trial
• Findings:
  • Increased abstinence at 3 months
  • Fewer STDs at 6 months
• Adulthood Preparation Subjects (APS)
  • Healthy Relationships
  • Adolescent Development
  • Healthy Life Skills
• 1 session: 4 hours
• For males
• Needed lots of adaptation
• Was “HIV Risk Reductions Among Detained Adolescents”
• Research Findings:
  • Decline in condom use over time was less among participants

• Contains APS: Healthy Relationships, Healthy Life Skills
ADAPTATIONS

- New video (from Oklahoma)
- We revised the video game:
  - More inclusive,
  - More relatable images
- We revised the "Wheel of the Future"

- Added
  - Anatomy (Big Decisions)*
  - Contraception (Big Decisions)
  - Relationships (Engender Health)

- Deleted:
  - Alcohol material

*Added APS: Adolescent Development
INTERVENTIONS

Seventeen Days includes:
Designed for those that identify as female:

• Condom Negotiation Skills
• Condom Demonstration
• STI information
• Trip to Gynecologist
• All methods of birth control

Plus a Seventeen Days Party
Seventeen Days
INTERVENTIONS

**SHARP+ (Evidence based + Evidenced Informed)**

Designed for those that identify as male:

- HIV prevention (SHARP)
- Condom Demonstration (SHARP)
- Anatomy and Contraception (Big Decisions)
- Healthy Relationships (Gender Matters)
REACHING THE STUDENTS

Most effective:

• Classroom Implementation
• Recruitment Events
• Campus Presence
• Interdepartmental Relationships
REACHING THE STUDENTS

Least effective:
- Email/E-blasts
- Flyers
- Tabling
- Classroom Presentations
- Extra Credit

We offer Resources such as:
- Birth Control Information
- STI Information
- Clinic Information
- Condoms

COME BY OUR OFFICES
The Learning Center
Room 115

COME CHILL, TALK, ASK QUESTIONS!
MOVING FORWARD

• Developing Institutional Support
• Maintaining a presence on campus
• Integrating into existing courses
  • Nat’l Campaign Online Resources
MOVING FORWARD

• Training for Faculty and Staff
  Cardea will train campus faculty and staff to serve as knowledgeable resources for students to aid against unplanned pregnancies.

• Sex Ed. 101
• Trauma Informed-Gender Diversity
• Cultural Proficiency
• Values Neutral
• Answering Sensitive Questions
• Clinical Linkages
• Advanced Facilitation Skills
• Motivational Interviewing
MOVING FORWARD

• Clinical Partnerships and Linkages
  - University Health Systems
    • teen friendly certifications
  - CentroMed Clinic
    • streamlined process to connect student directly to services
  - Private Practices
THANK YOU!