Introduction

- Despite contraceptive methods and reproductive resources, unintended pregnancies are common.
- Women between the ages of 15 & 44 are at greatest risk of an unintended pregnancy.
- 40% of all pregnancies in MN were unintended.
- Prevalence of pregnancy in non-Hispanic Black or Hispanic women is double that of White women.
- 32% of women who seek publicly funded family services are assisted with contraceptive services & supplies.
- Factors contributing to unprotected sex:
  - Assumptions that risk of pregnancy is low
  - Inaccurate knowledge of birth control methods
  - Inaccurate knowledge of STI transmission
- Surveying 487 colleges & universities revealed:
  - 70.6% had a health center
  - 73.0% offer STI diagnosis & treatment
  - 70.1% offer contraceptive services
  - 66.8% offer condoms on campus
- Surveying 95 UMR students revealed:
  - 50% of students are uncertain if sexual health services are available
  - 14% & 23% of students indicate minimum to no (respectively) access to sexual health services
  - 65% of students indicate that concerns over privacy would prevent contraceptive attainment at UMR

Why We Care

- UMR is racially & ethnically diverse
- Cost is an articulated barrier to contraceptive access
- Financial insecurity is a reality of UMR students
- Privacy & comfort are important factors for UMR students’ access to sexual & reproductive resources
- Most effective interventions included:
  - long term or ongoing efforts
  - multiple learning approaches & settings
  - individualized approaches for diverse populations
  - emotional aspects of sexuality and relationships were included in educational materials

“Just In Case”

Aim: Meet UMR students’ sexual health & educational needs

Task: Apply for funding from the Office of the Assistant Secretary for Health: PA-FRP-22-001 (Innovative Strategies to Increase Equitable Access)

Goal: Design & implement a novel & discrete strategy to provide sexual health supplies to the UMR student population

Ex. “Just In Case”: discrete, private, individualized & free care kits delivered directly to students

Ex. “Just In Case”: access to reproductive health products through accessible vending machines

References

S.H.C. & O.R.C.

S.P.S. & S.H.S. & O.R.C.

S.H.S. & S.H.S.

S.H.E. & O.R.C.

S.H.E.

S.H.S.

Onsite Resources of Contraceptives (O.R.C.)

Figure 1: UMR student perception of sexual health services available and desired sexual health services