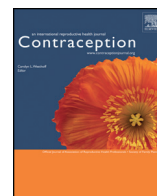




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Abortion and student health services expanding the conversation with student perspectives

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ABSTRACT

Objective: College students are known to experience unintended pregnancy and seek abortions. However, few student health centers currently offer abortion services. In this exploratory study, we aimed to expand understanding of student perspectives regarding on-campus abortion services.

Study design: We invited UC Davis students to complete an anonymous web-based survey using 16 campus listservs and in-person recruitment. We elicited student knowledge of and opinions about on-campus Student Health and Counseling Services (SHCS) with 29 questions.

Results: The 502 participating students primarily identified as female (80%) and heterosexual (86%); most (90%) were undergraduates. In the past year, 9% of female respondents had used emergency contraception (EC), and 9% had sought clinic-based pregnancy testing. Only 68% of respondents were aware that SHCS provides EC. Although SHCS has not yet offered abortions, 24% of respondents believed that SHCS currently offers medication abortion and 13% believed that SHCS clinicians perform abortion procedures. Most respondents (64%) believed that SHCS should offer abortion services; 12% of respondents felt SHCS should not. Reasons for support of on-campus abortion services included the need to compassionately care for campus survivors of sexual assault and abortion's role in allowing students facing undesired pregnancy to complete their education. Reasons for opposition included concerns regarding SHCS's ability to offer high-quality abortion services, the potential for controversy related to on-campus abortion services and personal opposition to abortion.

Conclusion: Most responding students favor on-campus abortion services, and a number of students incorrectly believe that abortion services are currently offered on the UC Davis campus.

Implications: Student health centers should offer medication abortion on campus.

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1. Introduction

Unintended pregnancies are most common among women between the ages of 18 and 24 [1], when many US women are college students [2]. Nationally, it is estimated that over 2% of college students experience an unintended pregnancy each year and approximately 50% of students have had sexual intercourse one or more times [3]. Thus, many student health centers strive to provide sexual and reproductive health education and counseling, and ensure access to contraception. Research has shown student health centers can safely provide both emergency contraception (EC) [4] and medication abortion [5]. Although on-campus access to EC has grown [4], with some campuses now offering EC in vending machines [6], provision of abortion care is still limited on most campuses.

The University of California (UC)'s 10 campuses annually serve over 264,000 students [7], over half (53%) of whom are female [8]. All UC

students are required to participate in the UC Student Health Insurance Plan (SHIP), a not-for-profit, self-funded student health benefit plan administered by UC Office of the President, unless they have other health insurance. UC SHIP was created with a student shared governance model to meet a mandate from the UC Regents that all registered students have health coverage as a nonacademic condition of enrollment. UC SHIP covers a wide range of health services, including abortion. Each UC campus has a student health center which offers immunizations and other preventive health care, including sexual and reproductive health services [9]. For example, the UC Davis (UCD) Student Health and Counseling Services (SHCS) currently offers STI testing, contraception and pregnancy testing [10] to more than 36,000 students, of whom 58% are female and 81% are undergraduate students [7]. When abortion services are needed, students are currently referred off campus for care.

In 2017, California Senator Connie M. Leyva (Democrat) introduced Senate Bill 320 [11], which would require student health centers on the campuses of UC and California State University (CSU) schools to provide medication abortion services. To understand students' perspectives

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related to this bill, we surveyed UCD students to assess their utilization of reproductive health services on campus and their attitudes toward the current availability of abortion services at SHCS.

2. Methods

We distributed an anonymous web-based survey to current UCD students during the 2016–2017 academic year. We approached 72 academic listserv administrators at UCD, representing all four colleges on campus (i.e., the College of Agricultural and Environmental Sciences, the College of Letters and Science, the College of Biological Sciences and the College of Engineering [12]). Sixteen listserv administrators agreed to distribute (on a single occasion) an email inviting students on their listserv to complete the survey. Listserv administrators emailed approximately 10,000 students an electronic request to complete a survey titled “Reproductive Health Services Survey.” We also recruited individuals walking through the UCD Quad during the summer of 2017. We asked individuals who expressed interest in participating if they were a UCD student but did not require that they show a student ID. We did not compensate students for their participation. We collected all survey data using REDCap (Research Electronic Data Capture, Vanderbilt University, Nashville, TN, USA), a secure web application for building and managing online surveys and databases [13].

2.1. Measures

We distributed a survey that contained 29 items, with skip patterns based on participant responses resulting in a shorter survey for some. We collected information on students' demographic characteristics (age, gender and sexual identity), academic degree status, health insurance coverage and pregnancy history. In addition, we assessed knowledge and use of health services offered by the UCD SHCS. Open-ended free-text responses were used to collect students' perspectives on why abortion services should or should not be offered on campus.

2.2. Analysis

We tabulated respondents' demographic characteristics and used chi-square tests and Fisher's Exact Tests when needed to examine the significance of differences in responses provided by students who had used SHCS. We had two investigators code the open-ended responses using an iterative process and tabulate statements representative of each theme using Excel. Quantitative analyses were conducted using SAS statistical software 9.4 (Cary, NC, USA). The UCD Institutional Review Board reviewed this study (number 1065458-1) and determined it to be exempt.

3. Results

Between June and August 2017, a convenience sample of 502 individuals completed the survey (estimated response rate, 5%). We recruited most participants (92%) by email; 42 (8%) were recruited in-person. Participants primarily identified as female (80%) and heterosexual (86%) (Table 1). Participants ranged in age from 18 to 44, with an average age of 22. Most (90%) were pursuing a Bachelor's degree. Only 27% were participating in the SHIP; 73% of students had other health insurance coverage. Students were more likely to participate in SHIP if they were over 25 years of age or graduate students (data not shown). Older students were also more likely to have visited the on-campus SHCS (Table 1).

Over half the participants (53%) reported receiving reproductive health services in the past year, such as prescriptions for hormonal contraception (received by 36% of female respondents), condoms (21% of female participants and 27% of male participants, $p=.17$) and/or STI testing (20% of female participants; 16% of male participants, $p=.31$). Emergency contraceptive pills were used by 9% of female respondents

Table 1
Participating student characteristics by use of on-campus SHCS, $N=502$

Student characteristics	Yes, used SHCS $n=312$ (n)	No SHCS ^a $n=190$ (n)	Chi-square p value
Age (years)			
18–19	14% (45)	28% (53)	<.001
20–21	40% (125)	38% (70)	
22–23	29% (89)	23% (43)	
24–25	6% (18)	8% (15)	
26–44	11% (35)	4% (8)	
Gender identity			
Female	81% (253)	77% (148)	.14 ^b
Male	19% (58)	20% (38)	
Other	0.3% (1)	2% (4)	
Sexual identity			
Heterosexual	85% (265)	86% (163)	.92
Sexual minority	15% (45)	14% (27)	
Anticipated degree			
Bachelors	89% (278)	93% (176)	.43
Masters	3% (10)	2% (4)	
Doctoral	8% (24)	5% (10)	

^a Students responding “I don't know” ($n=4$) were categorized as not having used SHCS.

^b Fisher's Exact Test.

in the past year. Clinic-based pregnancy testing was reported by 9% in the past year. The majority of respondents (62%) reported receiving health care from UCD SHCS in the past year. Respondents who utilized SHCS services reported higher rates of hormonal contraception, condom use, STI and pregnancy testing in the past year than those who did not (Table 2).

Most respondents knew that there was an SHCS on campus (98%), and the large majority knew that SHCS offers STI testing (89%), condoms (85%) and hormonal contraception (80%) (Table 3). Most participants knew that the SHCS offers pregnancy testing (88%), pregnancy counseling (77%) and emergency contraception (68%). Although SHCS does not currently offer abortion services, 24% of respondents believed that SHCS provides abortion pills and 13% believed that SHCS offers abortion procedures (Table 3). Respondents who had utilized SHCS services had a greater level of awareness about the reproductive health services offered by SHCS than those who did not (Table 3). The majority of respondents (64%) were in favor of SHCS offering abortion services; 12% were opposed to on-campus abortion services, while 24% were unsure about whether the SHCS should provide abortion services (Table 3). Respondents' support for on-campus abortion services did not vary by demographic characteristics (data not shown).

Among those students who favored on-campus abortion services ($n=322$), reasons given for this support included the role of abortion

Table 2
Receipt of reproductive healthcare in the past year by utilization of on-campus SHCS, $N=502$

	Yes, SHCS $n=312$ (n)	No, SHCS ^a $n=190$ (n)	Chi-square p value
Prescription for birth control pills, patch or ring	33% (102)	23% (43)	.01
Contraceptive injection	0.3% (1)	1% (2)	.30
Condoms	26% (82)	15% (29)	<.01
Emergency contraception pills	8% (24)	8% (15)	.93
IUD placement or removal	9% (29)	6% (12)	.24
Contraceptive arm implant placement or removal	4% (11)	2% (4)	.36
Sexually transmitted infections testing	27% (83)	7% (14)	<.001
Pregnancy testing	9% (28)	4% (7)	<.01
Abortion pills	0% (0)	0.5% (1)	.37 ^b
Preconception care	0.3% (1)	0% (0)	1.0 ^b
Prenatal care	0.6% (2)	0% (0)	.53 ^b
I did not utilize any of these services	39% (123)	58% (111)	<.001

^a Students responding “I don't know” ($n=4$) were categorized as not having used SHCS.

^b Fisher's Exact Test.

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