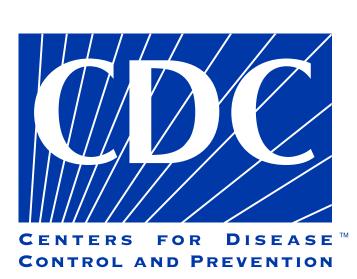


# School-based Health Center Access, Reproductive Health Care, and Contraceptive Use Among Sexually Experienced High School Students



Kathleen A. Ethier, Ph.D.1, Christine J. DeRosa, Ph.D.2, Patricia J. Dittus, Ph.D.1, Penny S. Loosier, MA, MPH1, Emily Q. Chung, MPH, CHES2, Esteban Martinez2, Peter R. Kerndt, MD, MPH3

1. Centers for Disease Control and Prevention, Atlanta, GA 2. Health Research Association, Los Angeles County Department of Public Health, Sexually Transmitted Disease Program

The findings and conclusions in this presentation are those of the author(s) and do not necessarily represent the official positions of the Centers for Disease Control and Preventi

## Background

- School-based health centers (SBHC) can be a means to reach adolescents for reproductive health services to prevent teen pregnancy and sexually transmitted diseases.
- The number of school-based or –linked clinics has risen dramatically over the past 20 years, yet the provision of contraceptives, condoms, and STD screening remains controversial.
- SBHCs may be restricted from providing a full range of reproductive health services, due to limited resources, state and local policy, or burdens associated with providing primary care services.

# Purpose

• The purpose of this study was to examine whether students from urban high schools, selected from areas with high rates of teen births and STDs, differ in their receipt of reproductive health care and use of contraception depending on whether they have access to a school-based health center.

#### Measures

Primary Covariate: Whether or not student has access to a SBHC

#### Outcomes

- Health Care Services:
  - Ever received reproductive health care
  - Ever received disease or pregnancy prevention care
  - Ever had an STD test
- Condom & Contraceptive Use:
  - Used condoms at last intercourse
  - Used hormonal contraceptives at last intercourse
  - Used emergency contraception at last intercourse

# **Data Analysis**

- Analyses were conducted on males and females separately.
- Bivariate associations were tested with chi-square and t-tests, as appropriate.
- A series of multiple logistic regression analyses examined the association between access to a SBHC, receipt of services, and contraceptive use, controlling for age and race/ethnicity.

# Sample characteristics and bivariate group differences

				Females (n = 13/4)		
	No SBHC	SBHC	p	No SBHC	SBHC	p
Age (mean in years)	16.8	16.7	.07	16.7	16.7	.42
Grade: 9	18.7%	12.2%	.004	11.8%	12.1%	.89
10	17.4%	15.4%		19.7%	18.2%	
11	24.1%	25.1%		26.3%	25.9%	
12	39.8%	47.4%		42.3%	43.8%	
Race/ethnicity: African-American	13.8%	11.7%	.01	14.6%	13.8%	.01
Latino	77.1%	78.5%		74.0%	77.8%	
White	3.2%	1.1%		3.4%	0.9%	
Other	5.6%	8.7%		8.1%	7.6%	
Ever received reproductive health care	71.6%	71.0%	.81	67%	71.2%	.10
Ever received disease/pregnancy prevention care	39.0%	40.2%	.68	53.1%	61.4%	.002
Ever tested for STD	15.8%	17.9%	.34	22.7%	33.8%	<.001
Used condom (last intercourse)	74.3%	71.1%	.23	59.6%	63.4%	.16
Used hormonal contraception (last intercourse)	15.1%	13.1%	.30	12.4%	18.1%	.003
Used emergency contraception (last intercourse)	2.5%	2.3%	.83	1.8%	3.8%	.03

#### Results

### Logistic Regression Analyses

- Males: Those with access to a SBHC were no more likely to have ever received any of the health care services examined, nor to have used contraceptives or condoms at last sex.
- Females: Those with access to a SBHC were more likely to have:
  - had disease or pregnancy prevention care (AOR = 1.45, 95% CI=1.16-1.80);
  - been screened for an STD (AOR = 1.85,95% CI=1.43-2.4);
  - used hormonal contraceptives at last sex (AOR = 1.68,95% CI = 1.24-2.28);
  - used emergency contraceptives at last sex (AOR = 2.1,95% CI=1.08-4.22).

## Methods

- Sample and Procedure
- High School Students from randomly selected classrooms in 12 high schools in an urban California school system. High schools were selected from catchment areas with high rates of CT and teen live births. Half of the schools had SBHCs.
- Students completed in-class surveys as part of the baseline measurement for Project Connect, a multi-level school-based intervention to reduce STDs and pregnancy among adolescents.
- Of the 5,930 students who completed a survey, 2,603 (44%) reported ever having had sex and comprised the sample for this analysis.

## Conclusion

- Among sexually active female students, access to school-based health centers is associated with increased hormonal & emergency contraceptive use, receipt of disease & pregnancy prevention care, and STD screening, suggesting these centers are providing much needed services to adolescent females.
- Despite having access to a SBHC, only 13% of males and 18% of females used hormonal contraceptives at last sex and although condom use was higher, nearly 30% of males and 36% of females were unprotected at last sex. STD screening rates were also low among these students, with just 18% of males and 34% of females reporting ever being tested.
- Better reproductive health care options are needed for males access to a SBHC had no impact on receipt of any type of reproductive health services for males.
- Even with access to care on-site in school, a significant portion of at-risk students remain under-served.
  - A single clinic cannot serve all students in a large, urban high school.
  - Efforts to increase emphasis on SBHCs as a source of care for adolescents need to ensure that access to reproductive health care remains a priority.

