



Wear One

5-Year Progress Report





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The Wear One Program

This section of the report includes data about the Wear One program, including its history, program activities, and goals.

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The Wear One Program

This section of the report includes data about the Wear One program, including its history, program activities, and goals.



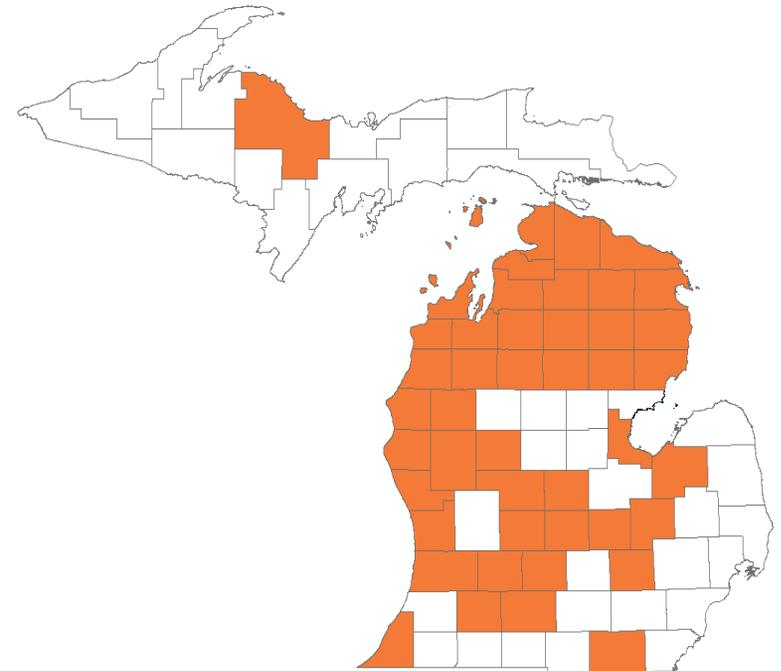
Introduction

This report was created to provide an overview of the Ottawa County Department of Public Health's (OCDPH) Wear One program and highlight its accomplishments over the last 5 years. This report also includes the results of the first dual county survey on sexual activity and sexual health of the Wear One program's target population. This data will serve as a baseline measurement from which to measure the effectiveness of Wear One in the future.

Program History

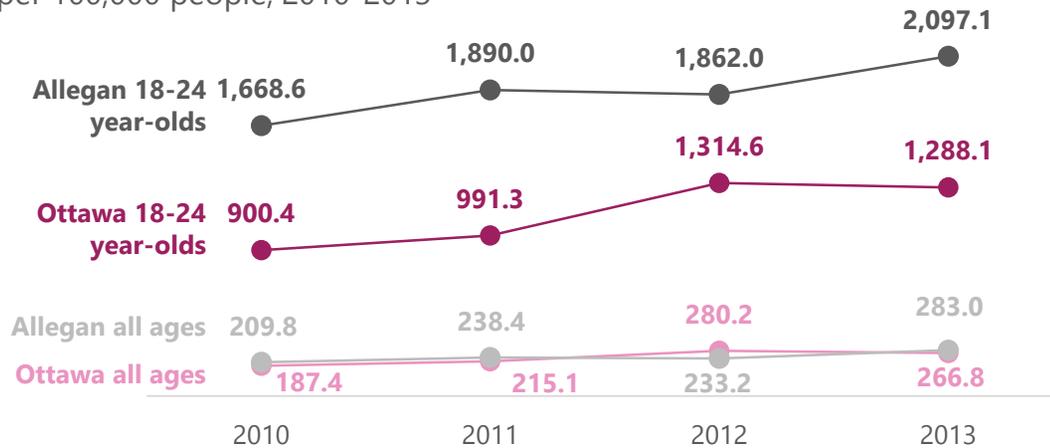
Wear One was launched in Ottawa County in March 2014 and in Allegan County in 2016 in response to rising chlamydia rates. This program is geared toward individuals 18-24 years of age because individuals in this age group typically have had high rates of chlamydia.¹ Wear One is modeled after research from the Centers for Disease Control and Prevention² as well as condom distribution programs in California³ and Philadelphia.⁴

The Ottawa County Wear One program has been replicated in 44 other Michigan counties as well as several universities, providing branding and messaging continuity across county lines.



Chlamydia Rates for Allegan and Ottawa Counties¹

per 100,000 people, 2010-2013



1. Calculated using MDSS and U.S. Census Bureau data. MDSS is the Michigan Disease Surveillance System, with data reflecting completed/completed follow-up and confirmed, probable cases of Chlamydia with onset date in the given year, or referral date if onset date unknown.
 2. <https://www.cdc.gov/hiv/programresources/guidance/condoms/index.html>
 3. <https://www.teensource.org/condoms/free>
 4. <http://phillycondom.org/distribute/>



Each Wear One package is a brown bag that contains:

- 10 condoms in a variety of sizes and brands (Kimono, Lucky Boy, Crown Beyond Seven, Kyng)
- 3 packs of lubrication (ID water-based brand)
- Information cards that contain website links and phone numbers to learn about confidential STI/STD testing and treatment, chlamydia information, birth control resources, Wear One package locations, proper use and fit of condoms, and sexual consent and relationships.

The cost to purchase supplies for the Wear One packages in Fiscal Year 2019 was \$6,686, with the cost per Wear One package being \$1.07.¹ Additional program expenses include staff time, mileage, equipment, as well as program marketing expenses.

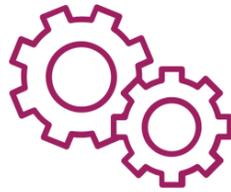
Wear One is primarily funded with Ottawa County dollars, but some funding is received from the Michigan Department of Health and Human Services STD Program as well as the Federal Family Planning Title X Program.



1. Includes the cost of condoms, paper bags, Wear One labels, informational cards, postage, and envelopes.

Wear One provides the following program activities to individuals 18-24 years of age in order to achieve the desired outcomes listed below.

Program Activities



- Increase condom accessibility
- Increase condom availability
- Promote acceptance of condom use
- Provide information about OCDPH clinic services and STI/STD testing

Outcomes



- Decrease the number of reported chlamydia cases
- Reduce unintended pregnancies

Progress with Program Activities

Increase Condom Accessibility

The OCDPH has built a network of community partners—73 businesses and agencies in Ottawa and Allegan counties—that have agreed to promote Wear One and assist with the distribution of Wear One packages. The community partners include businesses and agencies that are frequented by individuals 18-24 years of age such as party stores, restaurants and bars, college campuses, tattoo parlors, vapor stores, nail salons, barbershops, and many more. A complete list of community partners is available on the Wear One webpage—miOttawa.org/WearOne.

Each community partner signs a Memorandum of Agreement with the OCDPH to distribute Wear One packages at no cost to individuals 18-24 years of age, display Wear One promotional materials in their business, and maintain confidentiality of the people requesting the packages. A survey of community partners revealed that 100% of respondents will continue to partner with Wear One and the OCDPH in the future.

In 2018, the OCDPH expanded their distribution options to include free, confidential delivery of Wear One packages through the mail. The mail delivery option was modeled after a condom distribution program in California.¹ It was added to increase the options available for accessing Wear One packages. The mail delivery option is available to anyone 18-24 years of age who lives in Ottawa or Allegan counties. The order form is available on the Wear One webpage (a truncated sample of the website is provided to the right). The OCDPH is the only known agency in Ottawa County to offer free condom distribution through the mail.



Condoms by Mail Order Form

Fill out this confidential form. We will mail you a free package of 10 condoms, lubricant, and sexual health and STD testing information in an unmarked envelope. We can only mail condoms to addresses within Allegan and Ottawa County. You may reorder condoms every 30 days. Please note in cases of extreme temperatures (hot and cold) your condom order may be delayed. If you order after 5 pm on a Friday, condoms will not be mailed until the following Monday. If you received condoms and did not place an order by mail please, contact Heather Alberda at halberda@miottawa.org.



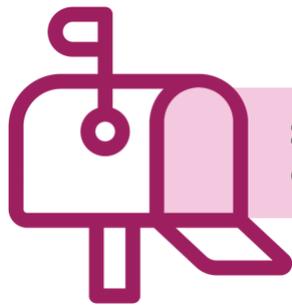
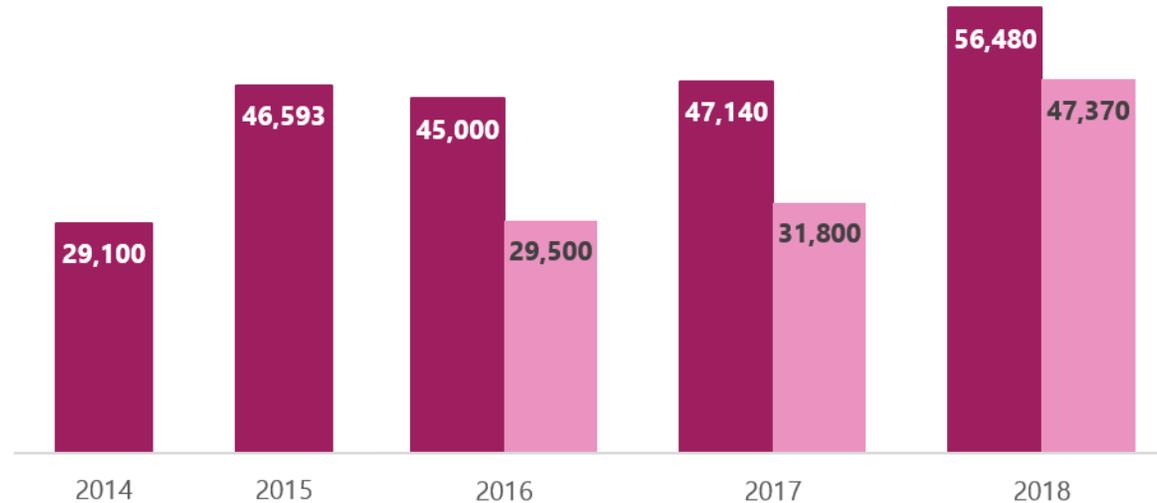
By checking this box, I affirm I live in Allegan or Ottawa County, I am between the ages of 18-24 and I am making this request for myself. I also agree these condoms will be used for personal use between consenting individuals and will not be sold.

1. <https://www.teensource.org/condoms/free>

Increase Condom Availability

Nearly 333,000 condoms were distributed as part of the Wear One program from March 2014 through the end of 2018 in Ottawa and Allegan counties. This equates to an average of 47,000 per year in Ottawa County and 46,000 per year in Allegan County.¹ The annual increase in condoms distributed is due to new community partners coming onboard, existing partners distributing more condoms, and the creation of the mail distribution option.

Number of Condoms Distributed in Ottawa County and Allegan County¹



Since launching the new mail distribution option in January 2018, just over 6,000 condoms were distributed through the mail to Ottawa and Allegan County individuals.²

1. Data provided by the Ottawa County Department of Public Health. The average per year for Ottawa County is based on 9-months of data in 2014 and 12-months of data in 2015 through 2018. The average per year for Allegan County is based on 4-months of data in 2016 and 12-months of data in 2017 and 2018.

2. Data provided by the Ottawa County Department of Public Health. The total number distributed by mail is from January 2018 through September 2019.

Promote Acceptance of Condom Use

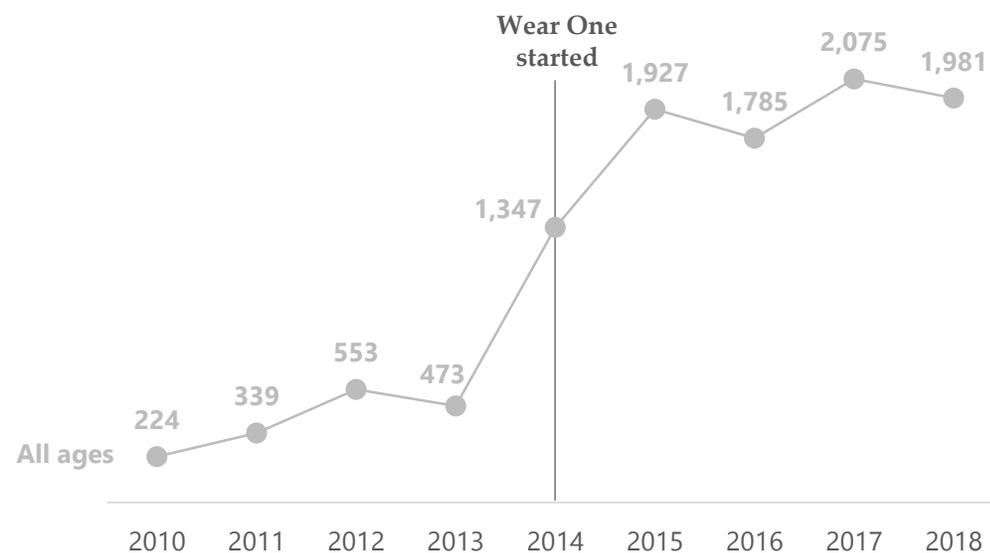
OCDPH staff members spend time marketing the Wear One program, including promoting the acceptance of condom use. Prior to starting this report, no data were available to understand the acceptance of condom use among the Wear One program's target population. The data collected in this report will serve as a baseline measurement of condom acceptance attitudes of the Wear One target population.

Provide Information about OCDPH Clinic Services & STI/STD Testing

Each Wear One package includes information cards that contain website links and phone numbers to learn more about confidential STI/STD testing and treatment.

The figure on the right shows the number of chlamydia tests given to patients of all ages—test data broken down by age group is not available. The number of tests for chlamydia at OCDPH clinics have, for the most part, increased since 2010. A dramatic increase occurred between 2013 and 2014 that is largely due to multiple factors including the recommendation to routinely test sexually active young women, increased access to care, and the start of the Wear One program.

Number of Chlamydia Tests Provided at OCDPH Clinics¹
2010-2018



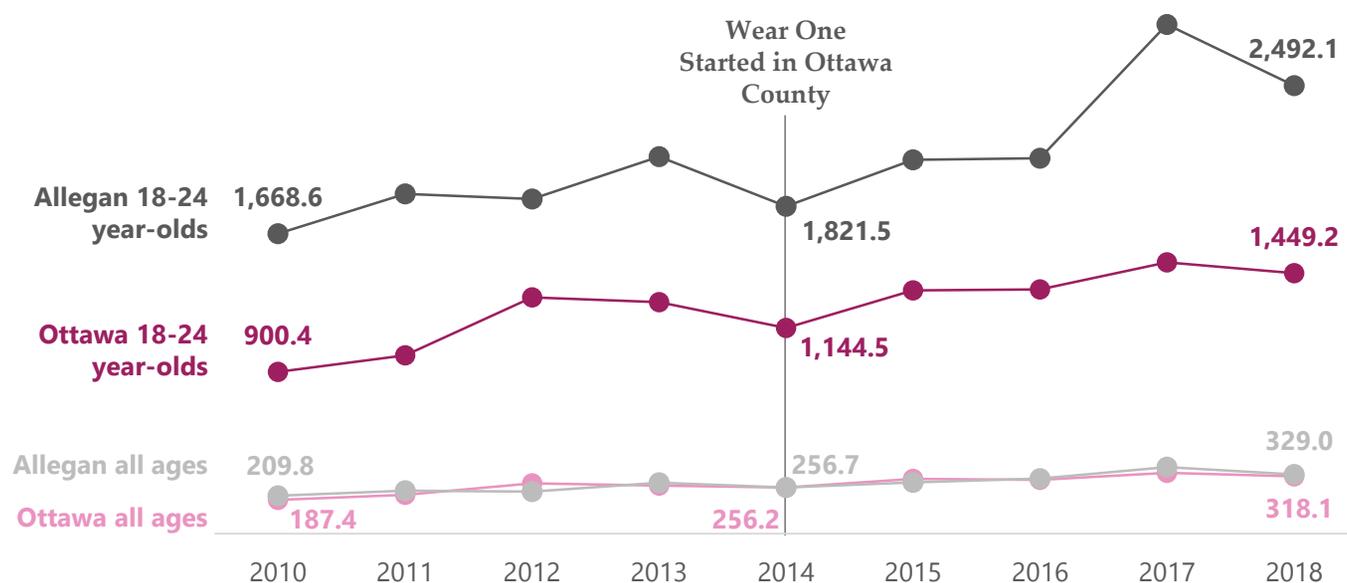
1. OCDPH Clinical data from Insight EMR on patients of all ages seen at any of three OCDPH clinical sites. Patients may not all be Ottawa County residents. Data specific to the Wear One program's target population is not available from Insight EMR.

Decrease the Number of Reported Chlamydia Cases

The Wear One program is striving to achieve a decrease in chlamydia rates among its target population of individuals 18-24 years of age.

Since Wear One was launched in March 2014, chlamydia rates have continued to trend upward—among the total Allegan County and Ottawa County populations as well as among those 18-24 years of age. This is likely due to a number of reasons such as increased access to care¹, the recommendation to test all sexually active young women², and programmatic changes implemented by OCDPH that provide field delivery of STD testing services—in schools, community kitchens, health fairs, universities, jail, detention—in addition to clinic-based services. Data on STI/STD testing rates over time is not available.

Chlamydia Rates for Allegan and Ottawa Counties³
per 100,000 people, 2010-2018



1. <http://www.ncsl.org/research/health/american-health-benefit-exchanges-b.aspx>

2. <https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>

3. Calculated using MDSS and U.S. Census Bureau data. MDSS is the Michigan Disease Surveillance System, with data reflecting completed/completed follow-up and confirmed, probable cases of Chlamydia with onset date in the given year, or referral date if onset date unknown.

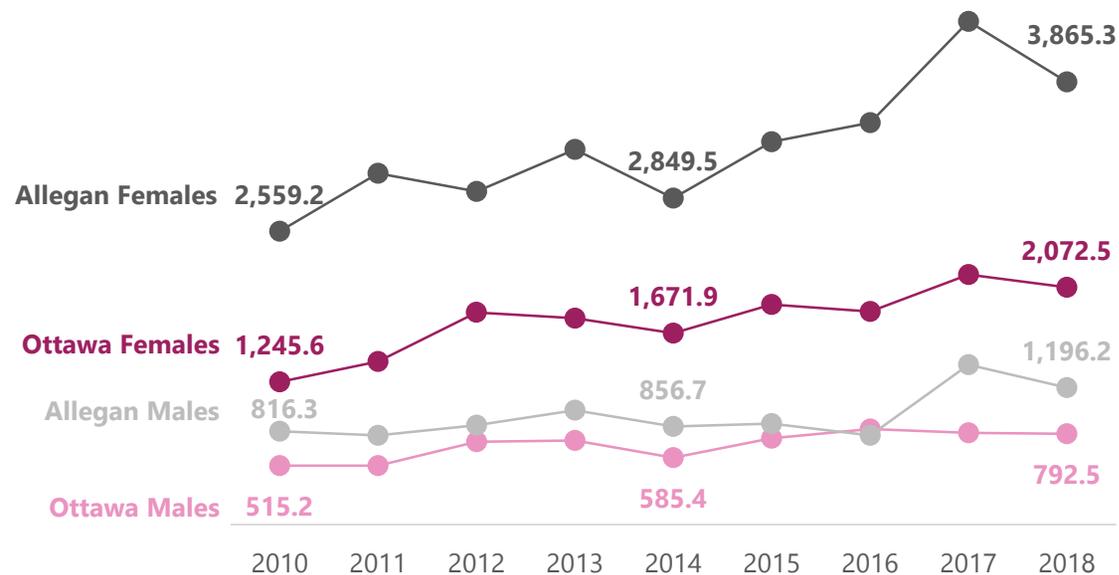
Decrease the Number of Reported Chlamydia Cases

Among the Wear One target population of individuals 18-24 years of age, the chlamydia rate among females is about 2.5 times greater than the chlamydia rate among males. The higher rate of chlamydia among females may be attributable to national guidelines that recommend more frequent chlamydia testing for females.

When examining chlamydia rates by race and ethnicity among individuals ages 18 to 24, the highest rate is among people who identify as Black or African American—with the rate being about 5 times higher than the rate among people who identify as White, Non-Hispanic.

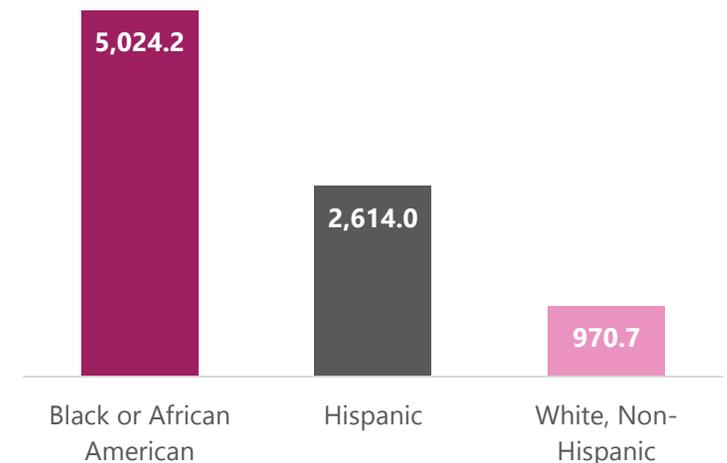
Chlamydia Rate by Gender¹

per 100,000 Allegan and Ottawa County 18-24-year-olds



Chlamydia Cases by Race/Ethnicity in 2018²

per 100,000 Ottawa County 18-24-year-olds



1. Calculated using MDSS and U.S. Census Bureau data (1 year population estimates). MDSS is the Michigan Disease Surveillance System, with data reflecting completed/completed follow-up and confirmed, probable cases of chlamydia with onset date in the given year, or referral date if onset date unknown.

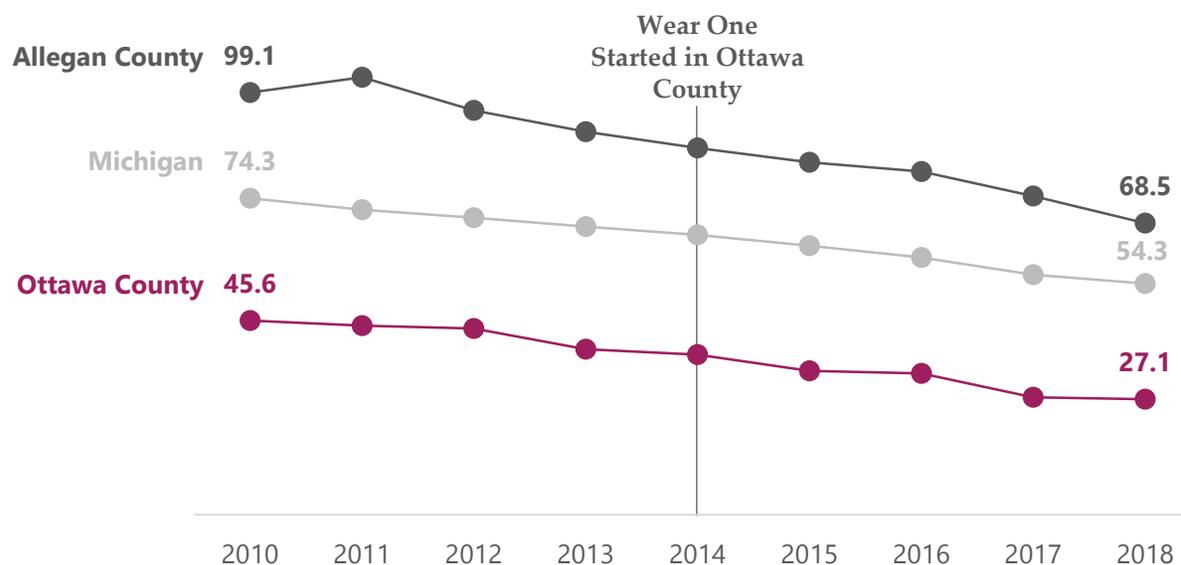
2. Historical chlamydia data by race/ethnicity is not included in this report because of reporting inconsistencies where race/ethnicity data was missing for many cases in past years.

Reduce Unintended Pregnancies

Through Wear One, the OCDPH is working to decrease unintended pregnancy rates among individuals 18-24 years of age. Although local data highlighting unintended pregnancy rates among this age group are unavailable, birth rates for this age group are available and can be used as a proxy.

Since 2010, birth rates have been decreasing at a similar rate among individuals in the Wear One target population in both Ottawa and Allegan counties as well as statewide. Reasons for the decrease in birth rates among this age group are complex and not well understood but factors such as increased use of contraception and decreased face to face interactions have been shown to play a role.¹

Birth Rate per 1,000 18-24-Year-Old Females²
 Allegan & Ottawa Counties, Michigan, 2010-2018



1. <https://pewrsr.ch/31fCuD1>

2. United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2007-2018, on CDC WONDER Online Database, September 2019. Accessed at <http://wonder.cdc.gov/natality-current.html>

The Survey

This section of the report includes the results of the first survey on sexual activity and sexual health of the Wear One program's target population – individuals 18-24 years of age who reside in Ottawa and Allegan counties. Survey data was gathered to serve as a baseline measurement and to help inform the future direction of the Wear One program.

You may click the links below to navigate to the six key areas of The Survey section, with crosstabulations of survey data included when they offer additional insight:

[Methodology](#)

[Demographics](#)

[Sexual Activity](#)

[Wear One](#)

[Condoms](#)

[STIs/STDs](#)

[Birth Control](#)

Survey Development

The Planning and Performance Improvement Department (PPID) assisted the OCDPH with the creation of the survey. The survey was designed by reviewing previous surveys conducted of the Wear One program, reviewing program activities, and reviewing the outcomes that the Wear One program is aiming to achieve. To request a copy of the survey, please send an email to plan@miottawa.org. While analyzing the survey data, the PPID became aware of survey questions that could use improvement. Potential improvements include the following:

- Add a time frame to the question “Are you currently sexually active?” to clarify what is being requested. One possibility is to reword the question to “Have you had sex at least once in the past 12 months?”.
- Add common open-ended responses to some questions to make the survey easier for respondents to complete.
- Exclude respondents from the question “Do you obtain condoms yourself?” if they report never using condoms.
- Combine similar questions into one. An example is to create one question that asks “What are the reasons you don’t get tested for STDs at least once per year?”.
- Move the demographic questions to the beginning of the survey. This can help screen respondents for inclusion/exclusion to the survey.



Promotion

The electronic survey opened on April 2, 2018. The OCDPH and Allegan County staff members promoted the survey through press releases, GovDelivery, paid social media ads (Facebook, Instagram, Google, YouTube), personal social media posts (Facebook and LinkedIn), at meetings and community events, through list serves and other contact groups, on the Ottawa and Allegan County websites, as well as through presentations at Hope College and Grand Valley State University. As a participation incentive, five \$100 Amazon gift cards (funded with MDHHS grant funds) were given away randomly to respondents.

Sampling Method

The original sampling method was a non-probability quota sample using geography as the stratification parameter. The sample was stratified using population estimates of individuals 18-24 years of age from the U.S. Census Bureau, 2016 population estimates. Ottawa County was split into four quadrants while Allegan County remained a separate population. The intended quotas for Ottawa and Allegan counties were 308 and 73 respondents, respectively, as shown below.

	Ottawa County	Allegan County	Total
Number of 18-24-year-olds ¹	38,125	9,021	47,146
Sample size	308 ²	73	381

After a year of data collection, the survey was closed on April 8, 2019, despite not obtaining the quotas that were initially set. A total of 466 people started the survey. A total of 339 people were included in the analysis after removing those who dropped out of the survey prior to completion, were not part of the Wear One program's target population (i.e. people who do not reside in Ottawa and Allegan counties and/or who are not 18-24 years of age), or were duplicate respondents.

Non-probability samples are subject to bias. As a result, the sample may not be representative of the 18-24-year-old population in Ottawa and Allegan counties.

Data Collection & Analysis

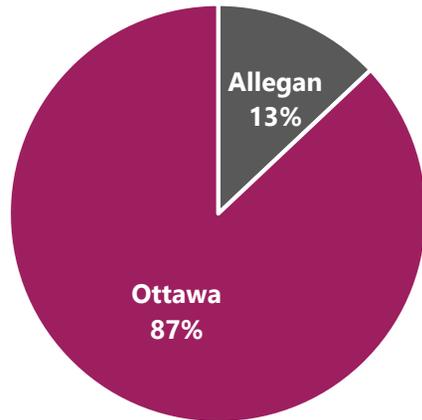
Survey data was collected using SurveyMonkey. Results were exported from SurveyMonkey into Microsoft Excel where responses were cleaned, tabulated, and analyzed. Further analysis and crosstabulations were performed using SPSS.

It was possible for the same person to take the survey multiple times. When cleaning the data, respondent IP addresses, telephone numbers, and email addresses were reviewed and verifiable duplicate respondents were excluded from the analysis.

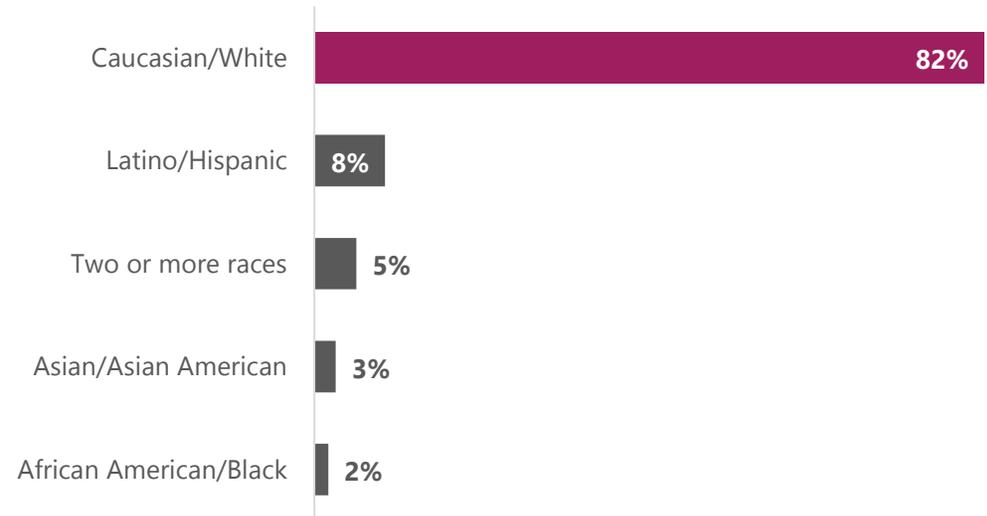
1. U.S. Census Bureau, 2016 population estimates.

2. Ottawa County's sample size was stratified into quadrants as follows: 37 in NW, 100 in NE, 73 in SE, and 98 in SW.

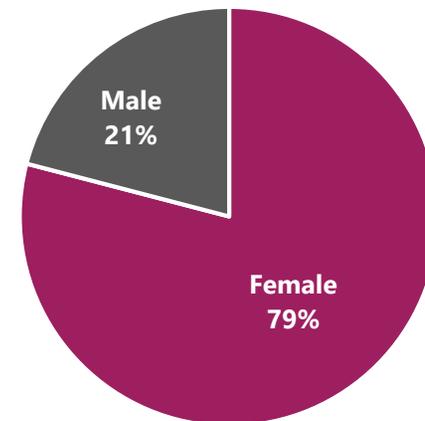
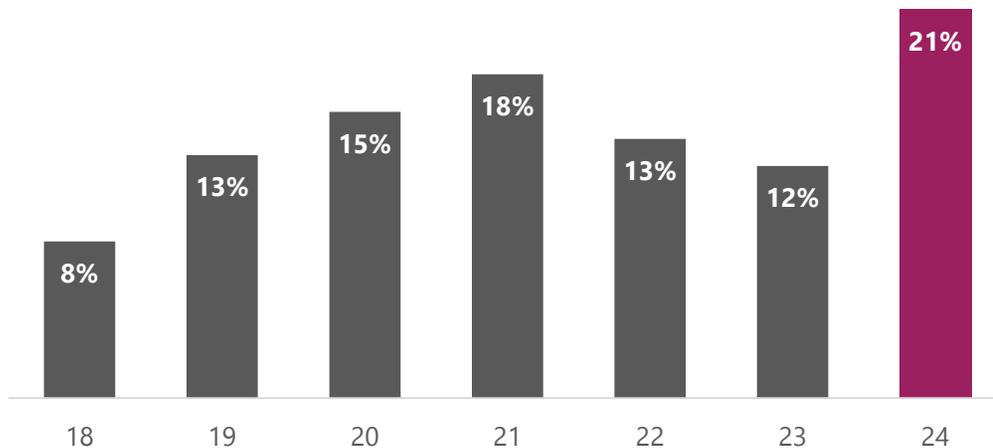
87%
of survey respondents report **currently living in Ottawa County**¹



82% of respondents are Caucasian or White¹



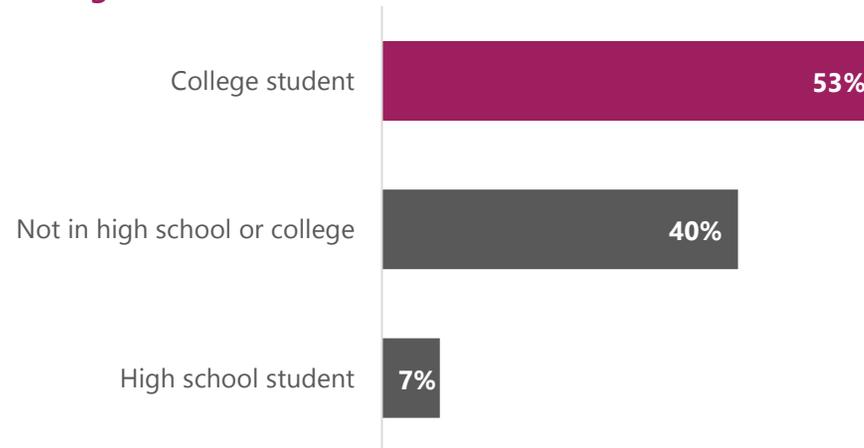
24 year-old individuals comprise the greatest proportion of survey respondents at 21%²



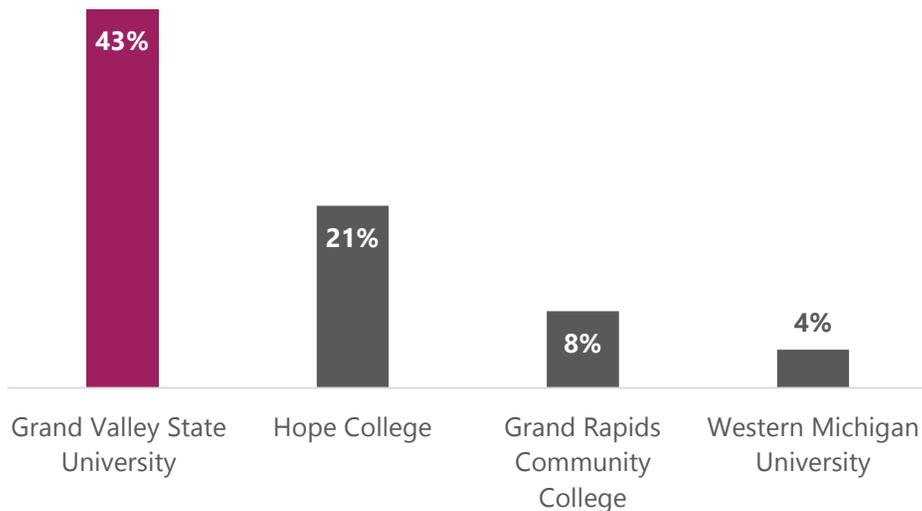
79%
of survey respondents identify as **female**¹

1. 339 survey respondents answered these questions. Race/ethnicity of survey respondents is representative of Ottawa County's population.
2. 339 survey respondents answered this question. Data reflects age at time of survey response.

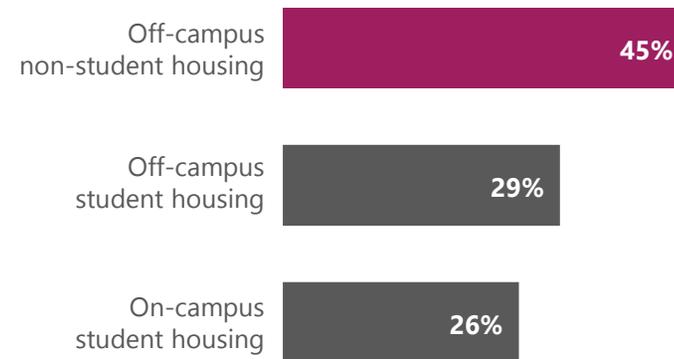
53% of survey respondents report being full or part-time college students¹



43% of college student respondents attend Grand Valley State University²

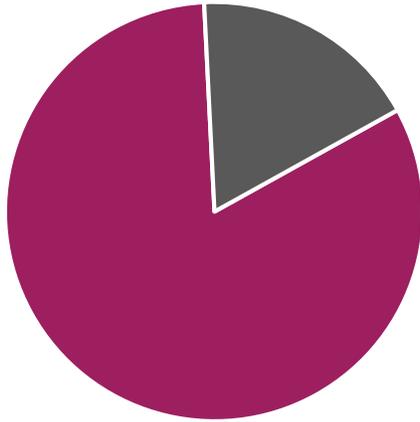


45% of college student respondents live in off-campus non-student housing. This trend differs among Hope College students who responded to this survey, with the majority of them living in on-campus student housing (such as a dorm room)³



1. 337 survey respondents answered this question.
2. 180 survey respondents who are college students answered this question. Excluded from the graph are schools attended by 1% or less of survey respondents.
3. 137 survey respondents who attend one of the 4 main schools answered this question.

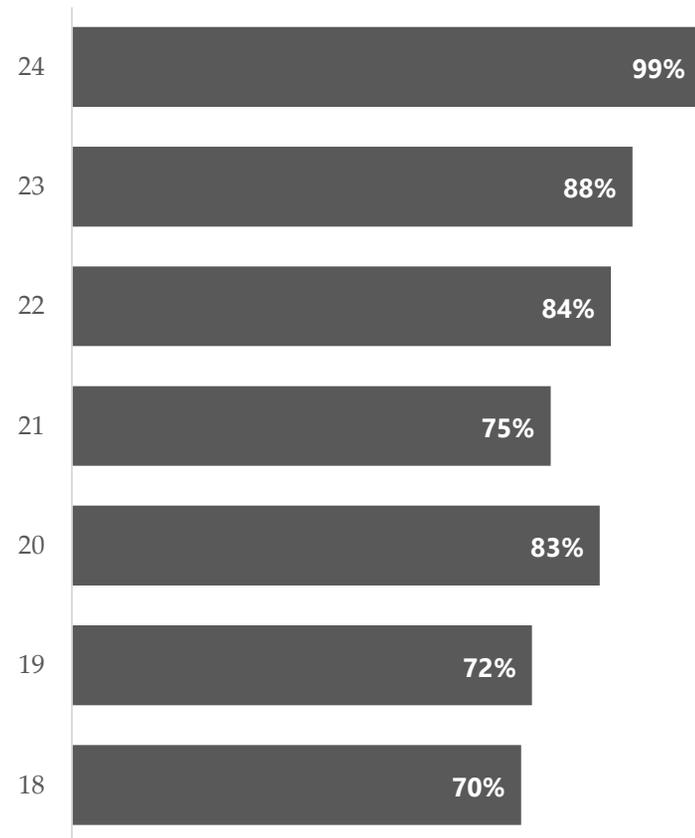
83%
of respondents
report being
sexually active¹



A larger proportion of **female** respondents report being sexually active when compared to male respondents¹

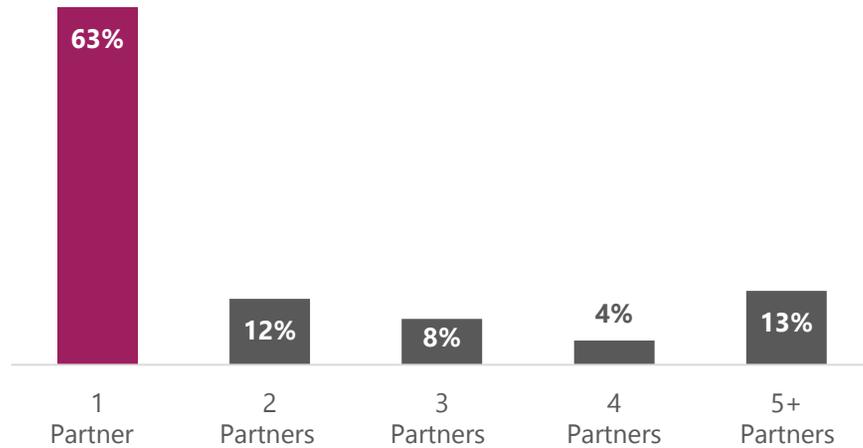


As age increases, the percent of respondents who report being sexually active generally increases¹

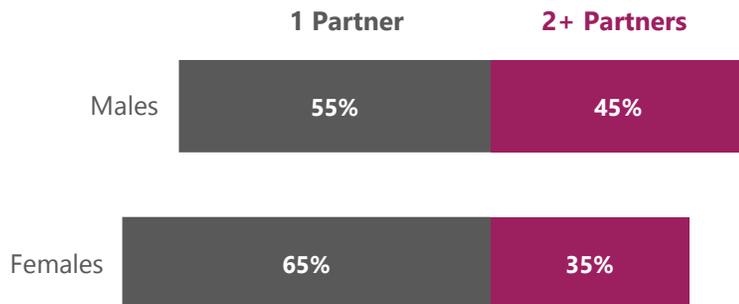


1. 339 survey respondents answered these questions.

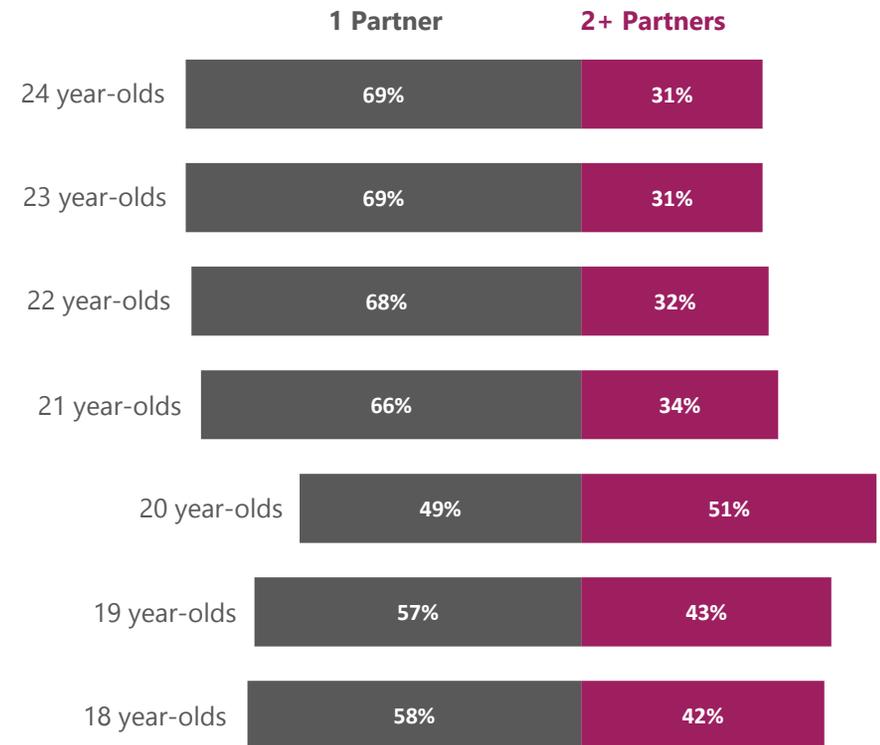
63% of sexually active respondents had one partner in the past year¹



A larger proportion of sexually active MALE respondents had 2 or more partners in the past year when compared to female respondents¹

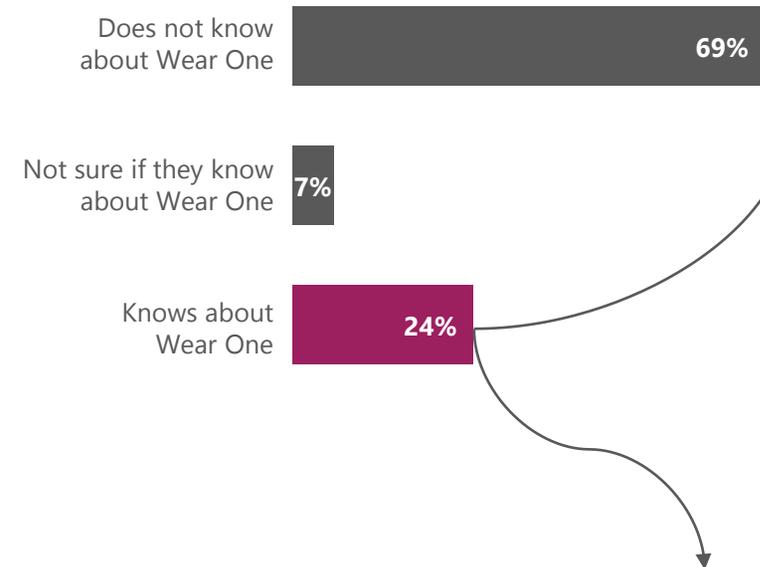


A larger proportion of sexually active 18-20 year old respondents had 2 or more partners in the past year when compared to 21-24 year old respondents¹

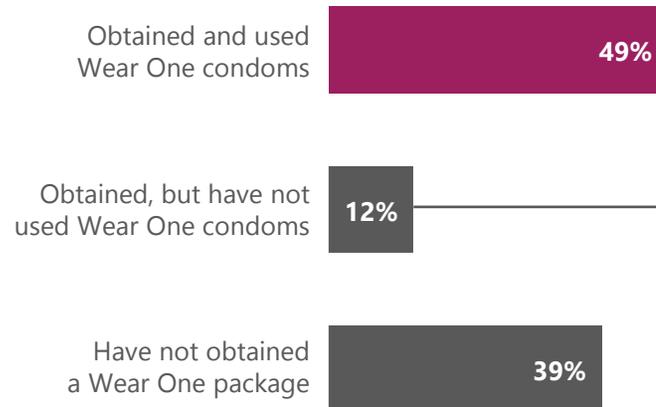


1. 278 survey respondents who are sexually active answered this question.

24% of sexually active respondents report knowing about Wear One¹



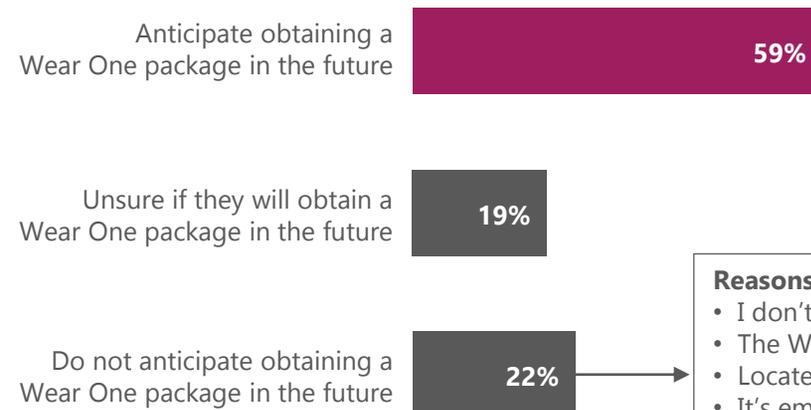
49% of respondents who report knowing about Wear One have obtained and used condoms from a Wear One package²



Reasons for not using Wear One condoms:

- I'm concerned the condoms in the Wear One package are lower quality (2 similar responses)
- The Wear One package doesn't have the brands/styles that I need (2 similar responses)
- We are using what we have first (1 similar response)
- I just haven't

59% of respondents who report knowing about Wear One anticipate obtaining a package in the future²



Reasons include:

- I don't use condoms (13 similar responses)
- The Wear One package doesn't have the brands/styles I need (5 similar responses)
- Located at inconvenient or difficult to reach locations (3 similar responses)
- It's embarrassing/awkward obtaining a Wear One package (2 similar responses)
- In a long-term relationship or on birth control (2 similar responses)
- I purchase my own (1 similar response)

1. 282 sexually active survey respondents answered this question.

2. 69 sexually active survey respondents who know about Wear One answered these questions.

Provided below are suggestions from survey respondents regarding ways to enhance the Wear One program. Many of the suggestions offered include current Wear One distribution channels, locations, and partners.

Suggestions for additional Wear One condom distribution locations/partners:

- High schools/Public schools (*4 similar responses*)
 - Bathrooms
 - Sex-ed classes
- Hospitals/Doctor's offices/Pharmacies (*3 similar responses*)
- Gas station/Party store (*3 similar responses*)
- Hope College campus (*2 similar responses*)
- Restaurants (*2 similar responses*)
- Local businesses (*2 similar responses*)
- Bars downtown/Holland (*1 similar response*)
- Coffee shops (*1 similar response*)
- GVSU campus + downtown campus (*1 similar response*)
- Hotels (*1 similar response*)
- College campuses in general
- Around Hamilton
- Music festivals
- Hopkins High School
- Library
- Meijer
- Planned Parenthood

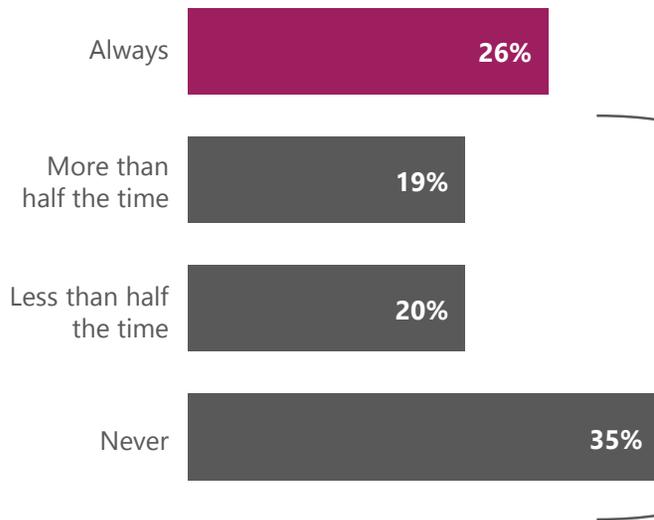
Advertising suggestions for Wear One:

- Facebook ads
- Billboards
- Radio
- School posters

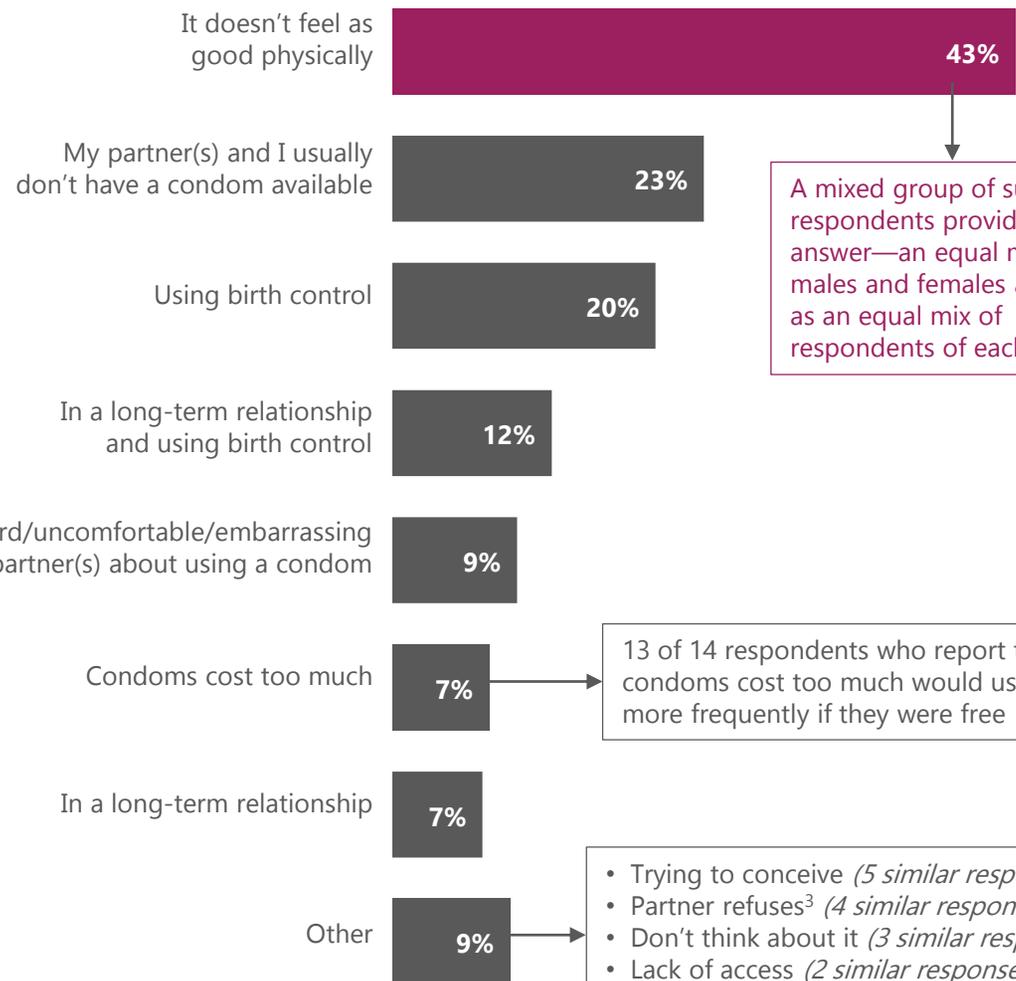
Other suggestions for Wear One:

- Better condoms/more varieties (*2 similar responses*)
- More STI/STD testing information/cheaper testing (*1 similar response*)
- Send the packages discreetly in the mail (*1 similar response*)
- Advertise more (*1 similar response*)

26% of sexually active respondents who engage in vaginal sex report ALWAYS using a condom¹



43% of sexually active respondents cite "it doesn't feel as good physically" when asked why they don't use condoms more often during vaginal sex²



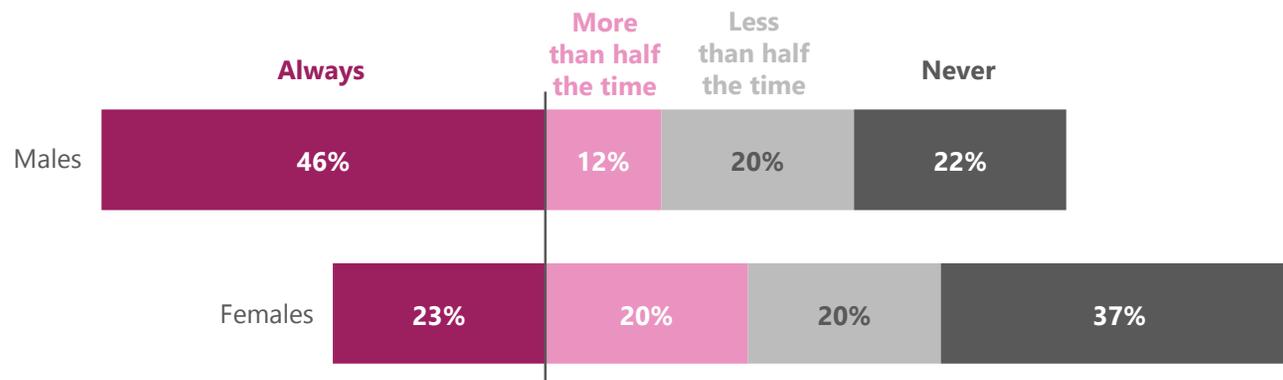
A mixed group of survey respondents provided this answer—an equal mix of males and females as well as an equal mix of respondents of each age.

13 of 14 respondents who report that condoms cost too much would use them more frequently if they were free

- Trying to conceive (5 similar responses)
- Partner refuses³ (4 similar responses)
- Don't think about it (3 similar responses)
- Lack of access (2 similar responses)
- Allergic to latex

1. 263 survey respondents who report engaging in vaginal sex answered this question.
 2. 194 survey respondents answered this question. Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.
 3. These are all female respondents.

A larger proportion of sexually active MALE respondents who engage in vaginal sex report ALWAYS using a condom when compared to female respondents¹

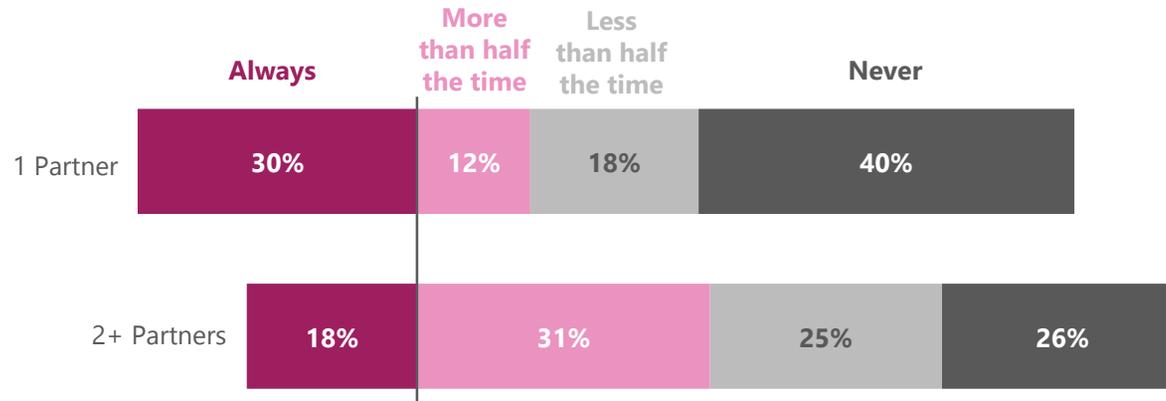


Why are fewer females using condoms?

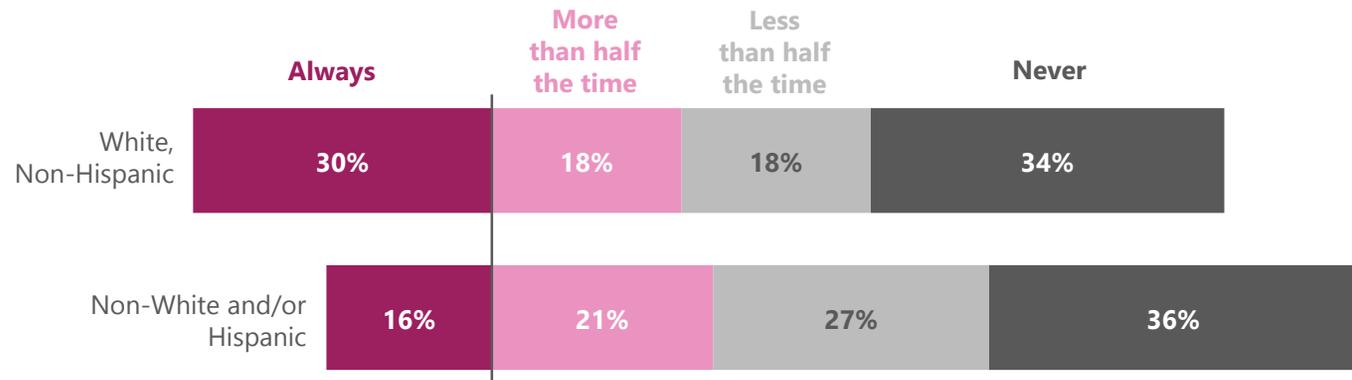
- One explanation is that they are in a monogamous relationship – with 65% of female respondents having 1 partner in the last year.
- Another explanation is that they are using birth control – with 68% of sexually active female respondents currently using birth control.

1. 263 survey respondents who report engaging in vaginal sex answered this question.

A larger proportion of respondents with 1 partner in the past year who engage in vaginal sex report **ALWAYS using a condom** compared to respondents with 2 or more partners¹

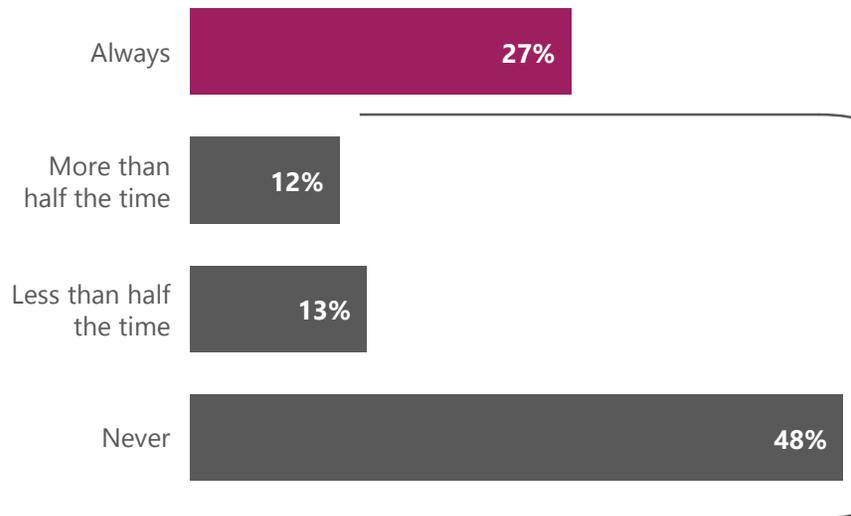


A larger proportion of sexually active **WHITE, NON-HISPANIC** respondents who engage in vaginal sex report **ALWAYS using a condom** when compared to non-white and/or Hispanic respondents¹

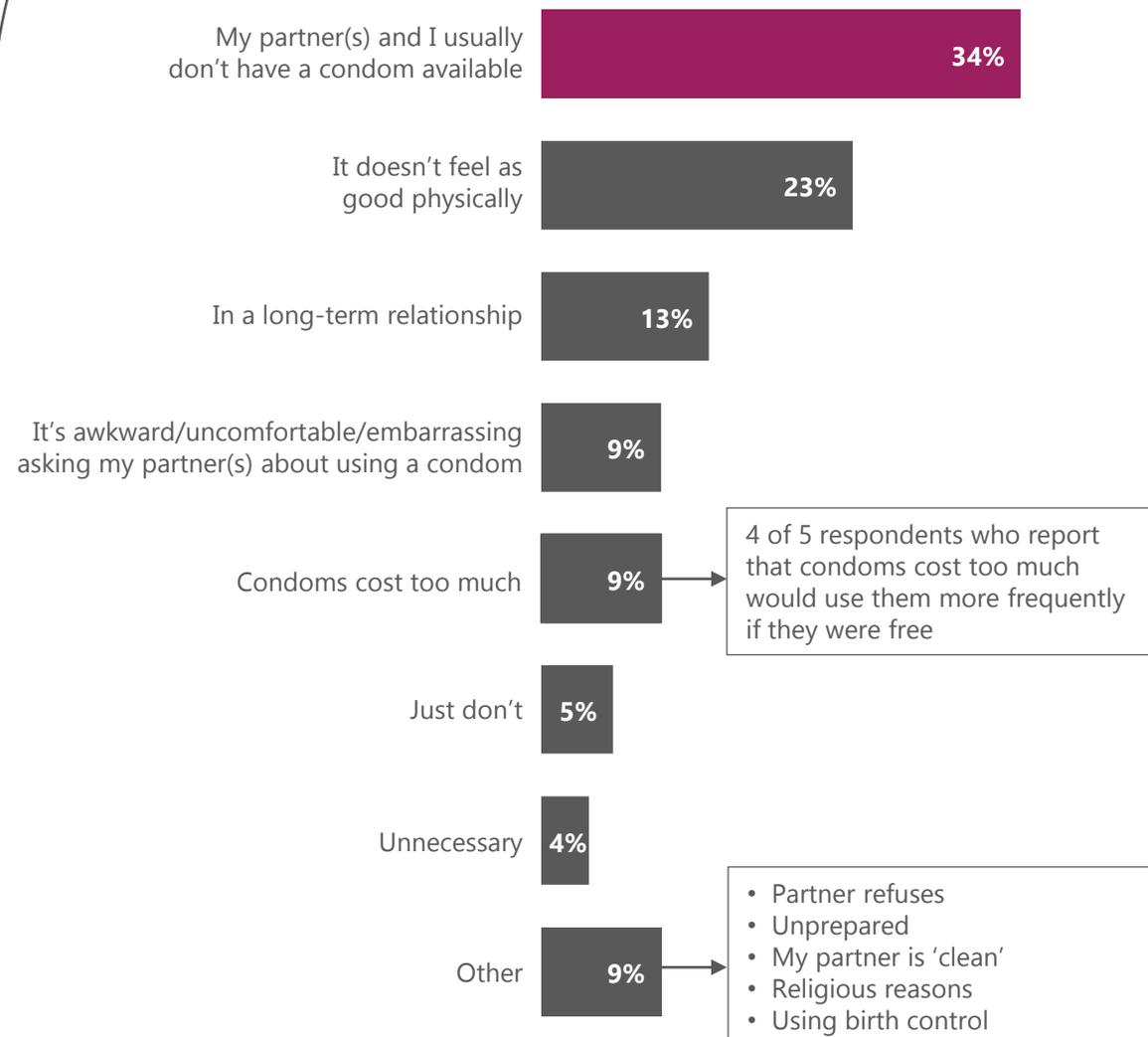


1. 263 survey respondents who report engaging in vaginal sex answered this question.

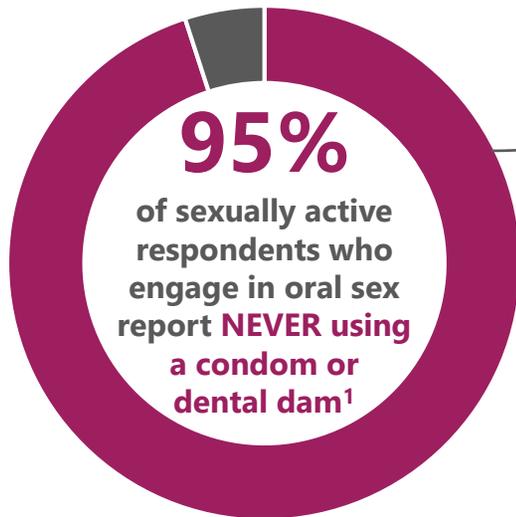
27% of sexually active respondents who engage in anal sex report ALWAYS using a condom¹



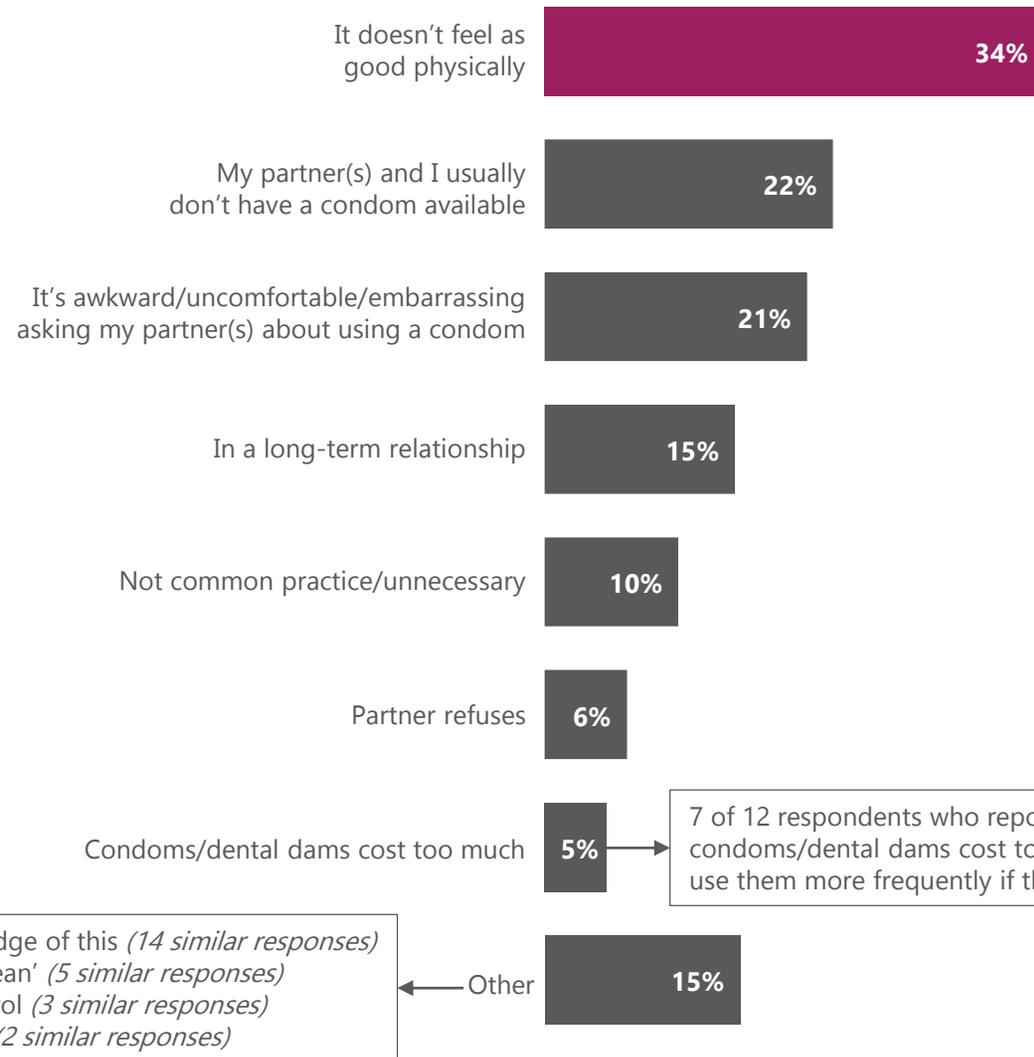
34% of sexually active respondents cite lack of availability when asked why they don't use condoms more often during anal sex²



1. 77 survey respondents who report engaging in anal sex answered this question.
2. 56 survey respondents answered this question. Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.



34% of sexually active respondents cite **'it doesn't feel as good physically'** when asked why they don't use condoms/dental dams more often during oral sex²

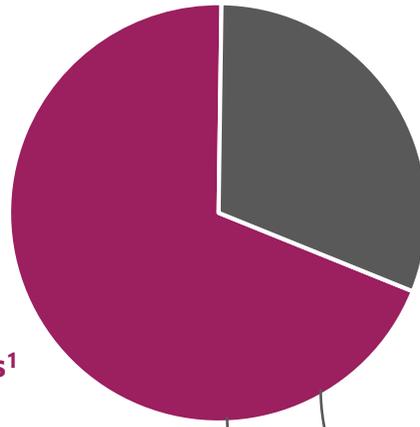


7 of 12 respondents who report that condoms/dental dams cost too much would use them more frequently if they were free

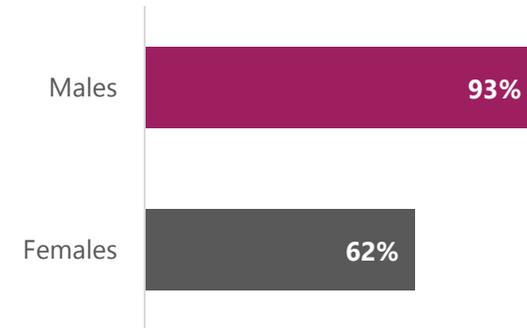
- No prior knowledge of this (14 similar responses)
- My partner is 'clean' (5 similar responses)
- Using birth control (3 similar responses)
- Allergic to latex (2 similar responses)

1. 257 survey respondents who report engaging in oral sex answered this question.
 2. 244 survey respondents answered this question. Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.

68%
of sexually active respondents who use condoms obtain their own condoms¹



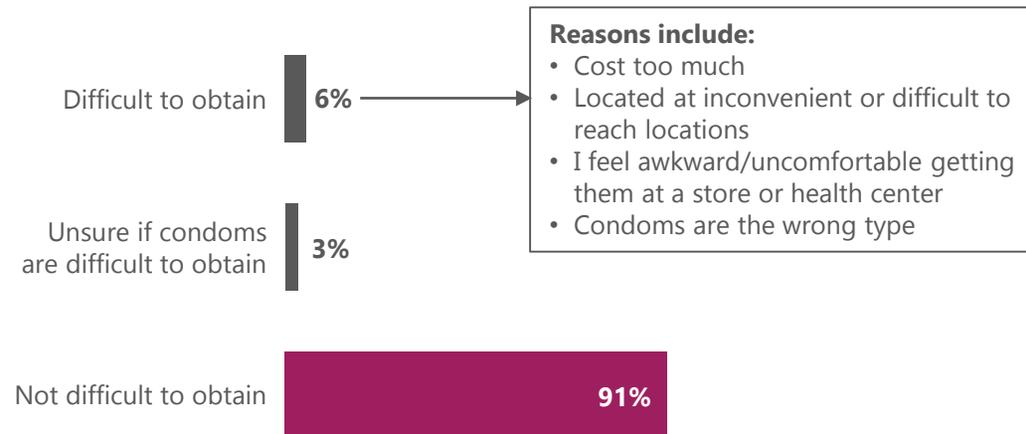
A larger proportion of male respondents who use condoms obtain their own condoms when compared to female respondents¹



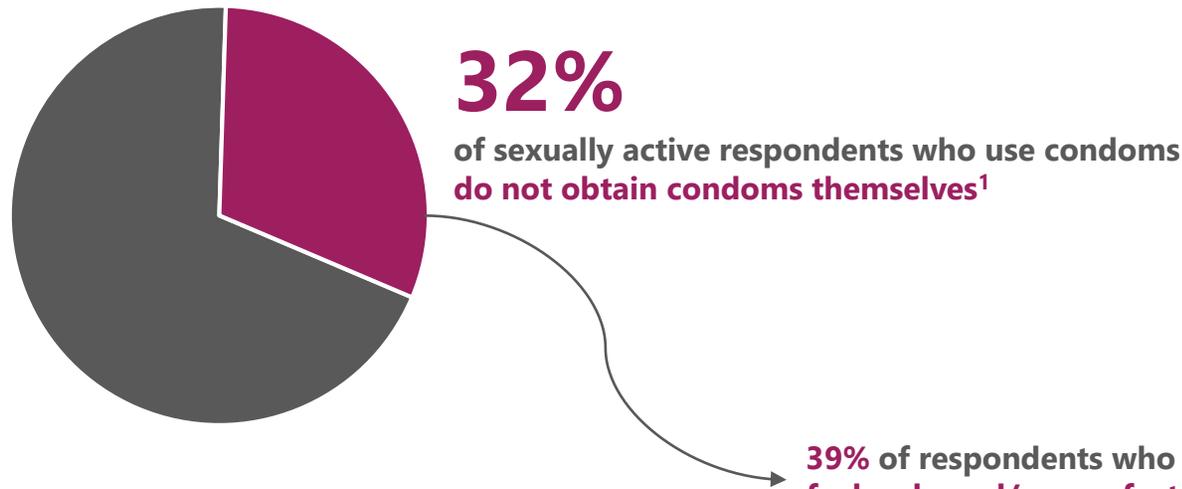
49% of respondents who obtain their own condoms get them for free at businesses, health clinics, or online²



91% of respondents who obtain their own condoms do not think they are difficult to obtain³

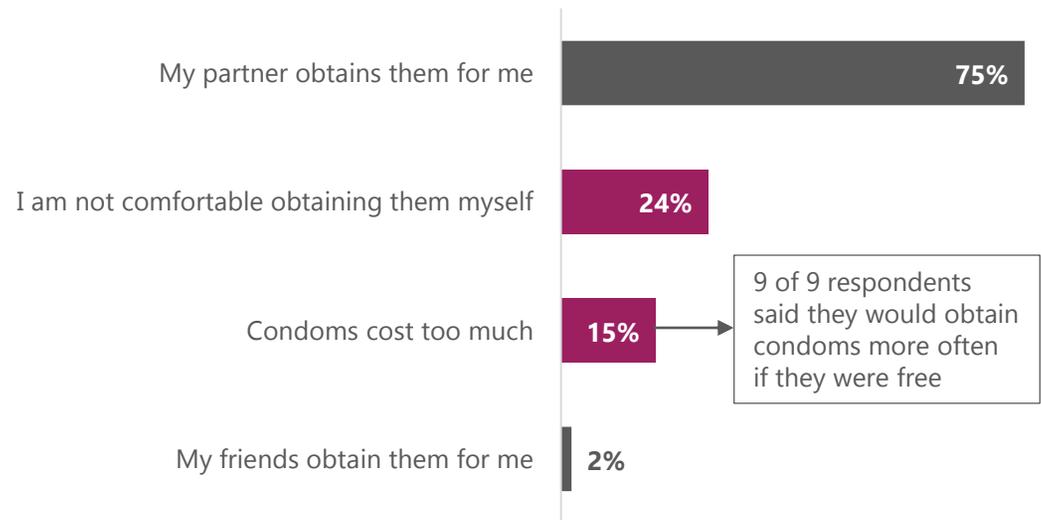
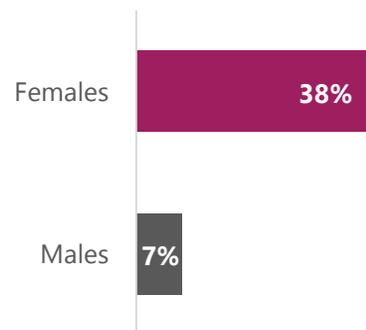


1. 187 survey respondents who report using condoms answered this question.
 2. 128 survey respondents who obtain their own condoms answered this question. Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.
 3. 128 survey respondents who obtain their own condoms answered this question.

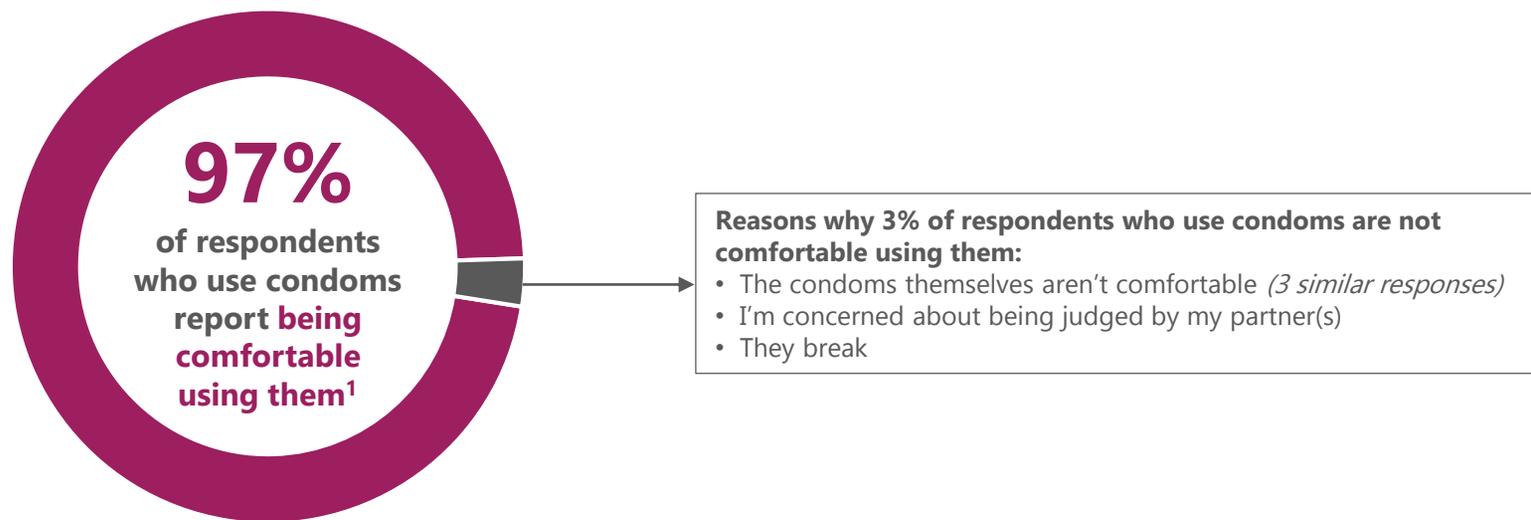


39% of respondents who do not obtain condoms themselves feel awkward/uncomfortable getting them at a store/health center or think condoms cost too much²

38% of female respondents do not obtain condoms themselves—making up the majority of survey respondents who do not obtain condoms themselves¹

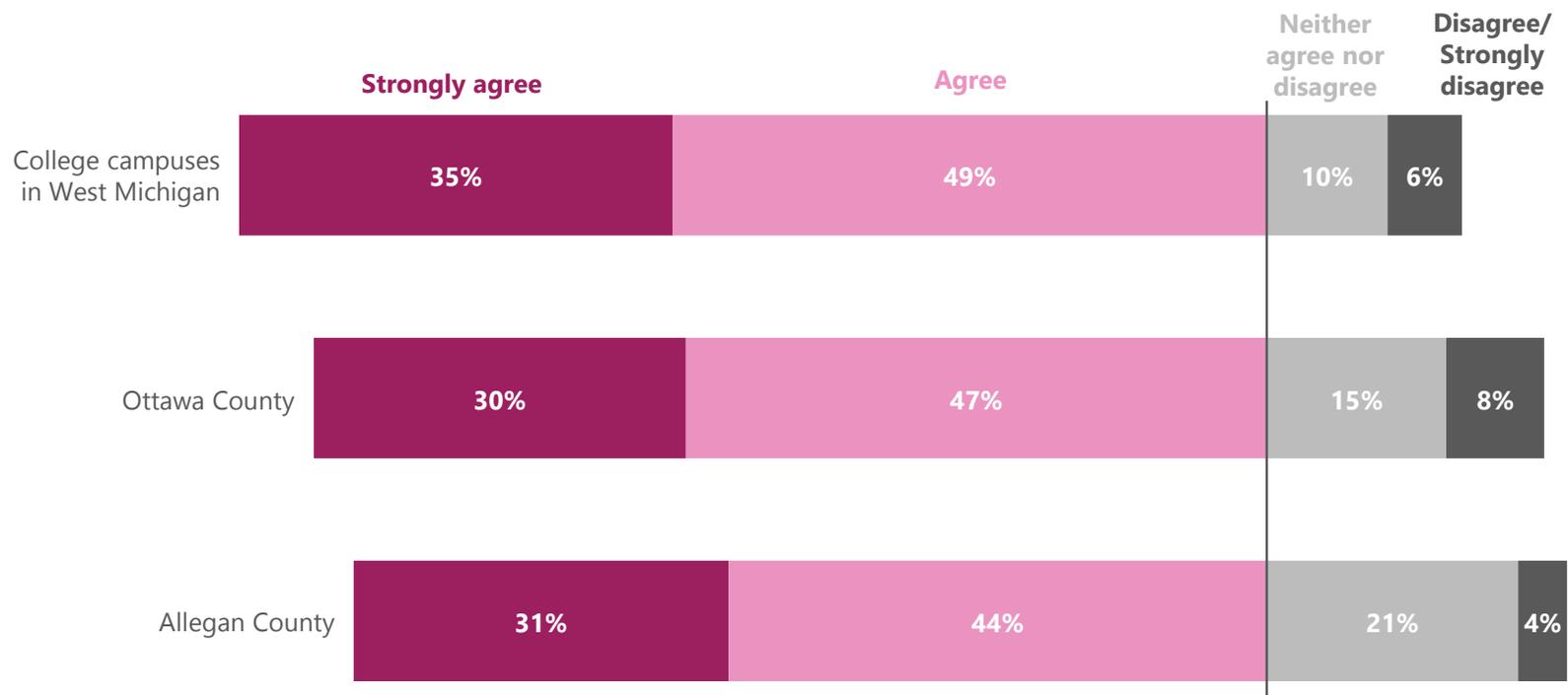


1. 187 survey respondents who report using condoms answered this question.
2. 59 survey respondents who do not obtain their own condoms answered this question.
Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.



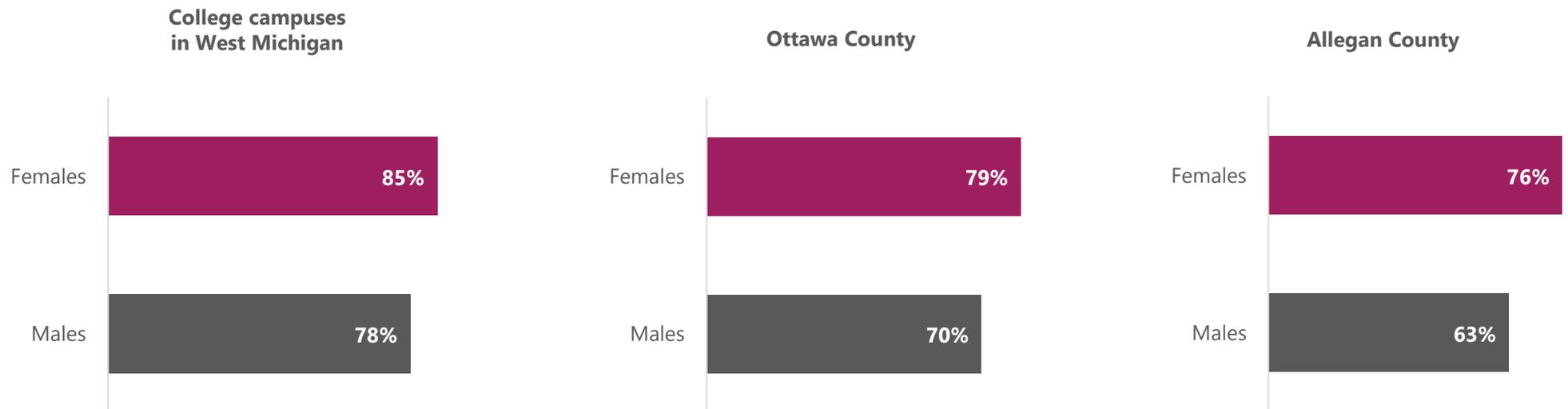
1. 187 survey respondents who report using condoms answered this question.

75% or more of all survey respondents **Strongly agree or **Agree** that STIs/STDs are a significant problem among 18-24 year-olds on college campuses in West Michigan as well as in Ottawa and Allegan counties¹**



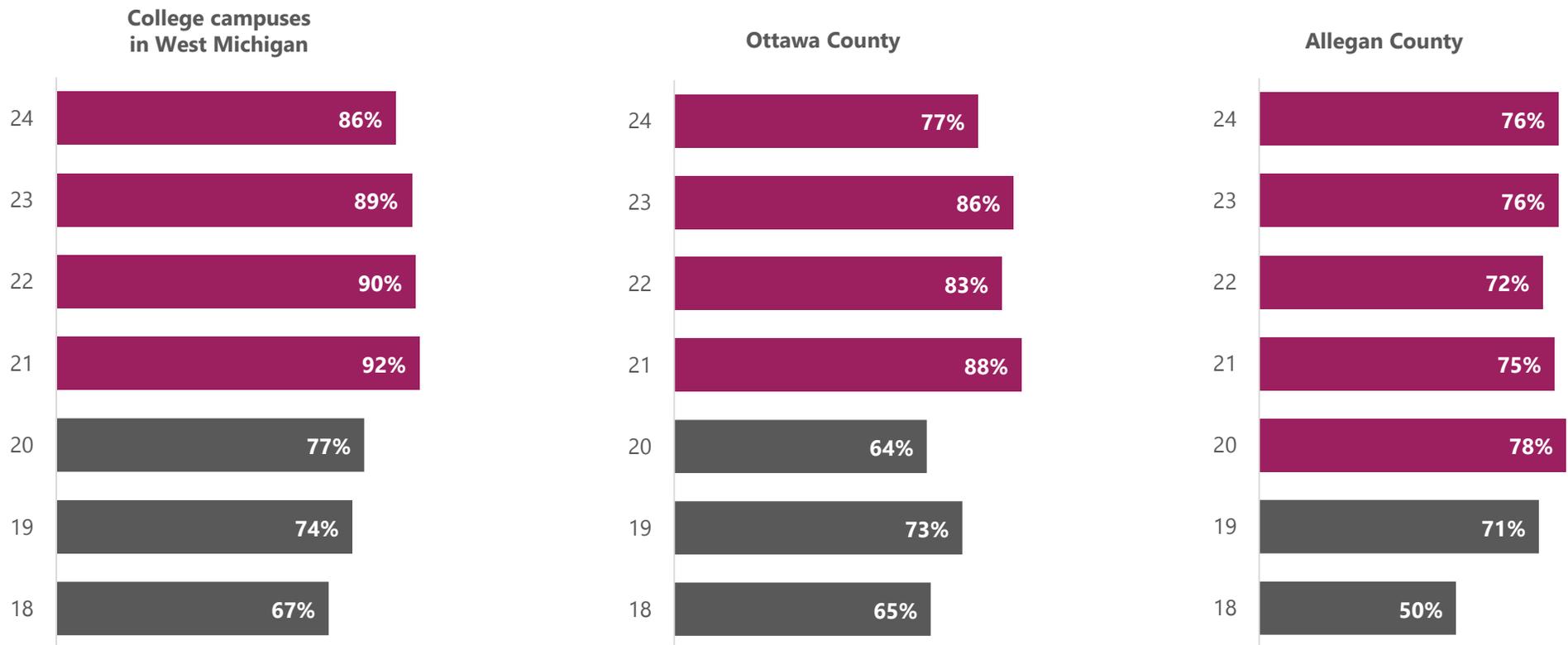
1. 231-304 respondents answered these questions and are included in the graph. 35-108 additional respondents answered these questions, but are excluded from the graph because they answered 'don't know'.

A larger proportion of **FEMALE** survey respondents **STRONGLY AGREE** or **AGREE** that STIs/STDs are a significant problem among 18-24 year-olds on college campuses in West Michigan, in Ottawa County, and in Allegan County when compared to male survey respondents¹



1. 231-304 respondents answered these questions and are included in the graph. 35-108 additional respondents answered these questions, but are excluded from the graph because they answered 'don't know'.

As AGE increases, the percent of respondents who STRONGLY AGREE or AGREE that STIs/STDs are a significant problem among 18-24 year-olds on college campuses in West Michigan, in Ottawa County, and in Allegan County generally increases¹

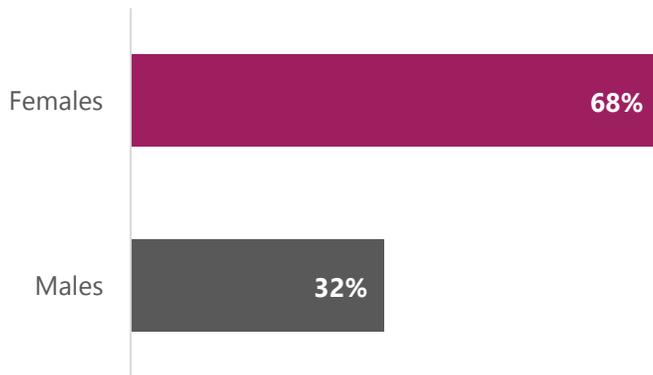


1. 231-304 respondents answered these questions and are included in the graph. 35-108 additional respondents answered these questions, but are excluded from the graph because they answered 'don't know'.

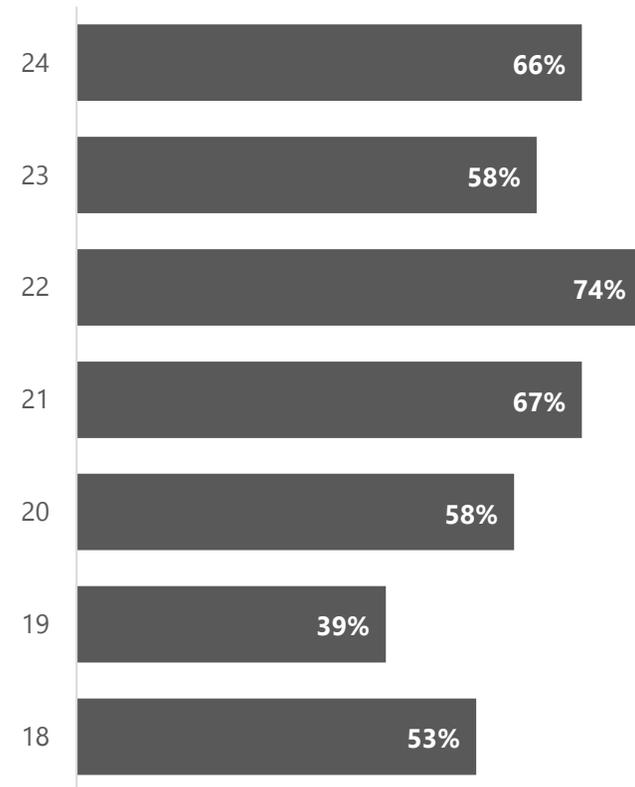


A larger proportion of FEMALE survey respondents report having been tested for an STI/STD when compared to male survey respondents¹

This could be explained by recommendations from the U.S. Preventative Services Task Force to test all sexually active young women.²

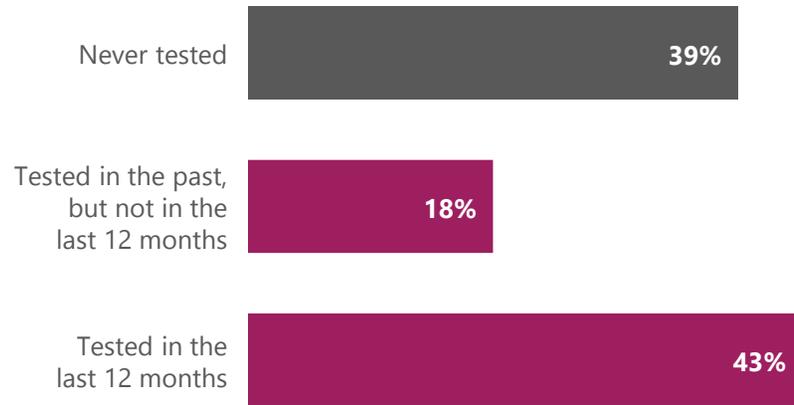


As AGE increases, the percent of respondents who report having been tested for an STI/STD generally increases¹

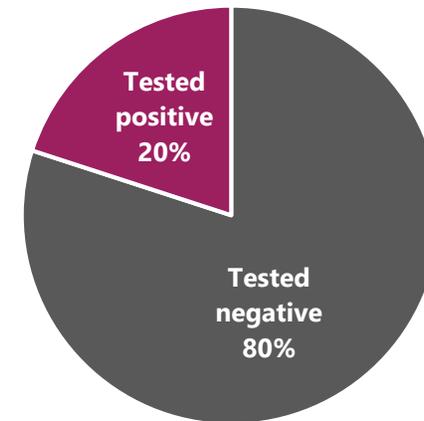


1. 282 sexually active respondents answered these questions.
2. <https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>

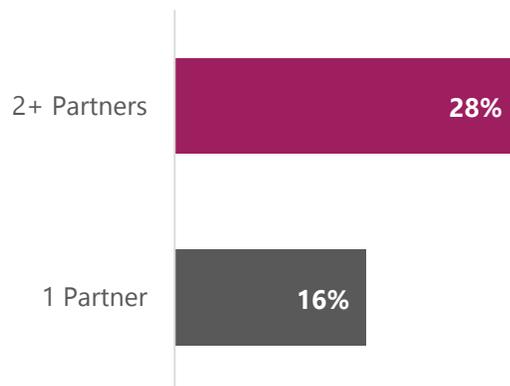
61% of sexually active respondents report having been tested for an STI/STD¹



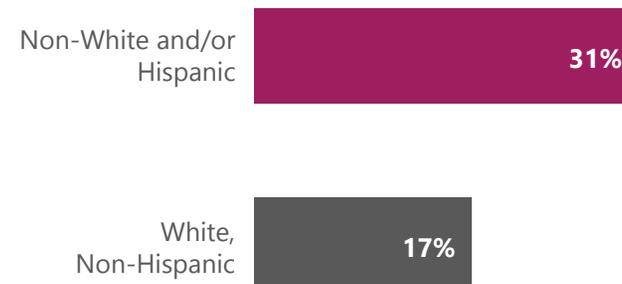
20% of those who report having been tested for an STI/STD have tested positive²



A larger proportion of respondents with 2 or more partners in the past year report having been tested positive for an STI/STD compared to respondents with 1 partner²

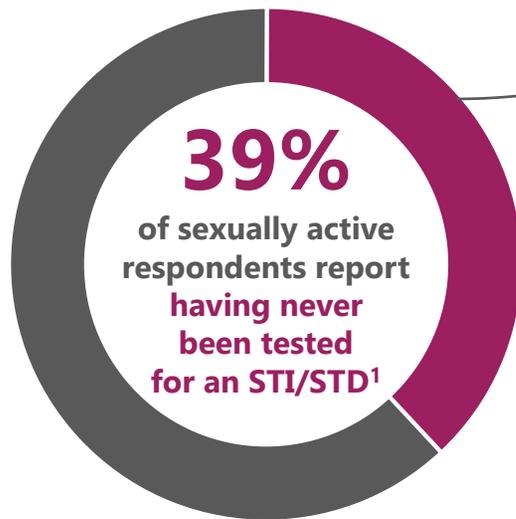


A larger proportion of respondents who are non-white and/or Hispanic report having been tested positive for an STI/STD compared to respondents who are white, non-Hispanic²

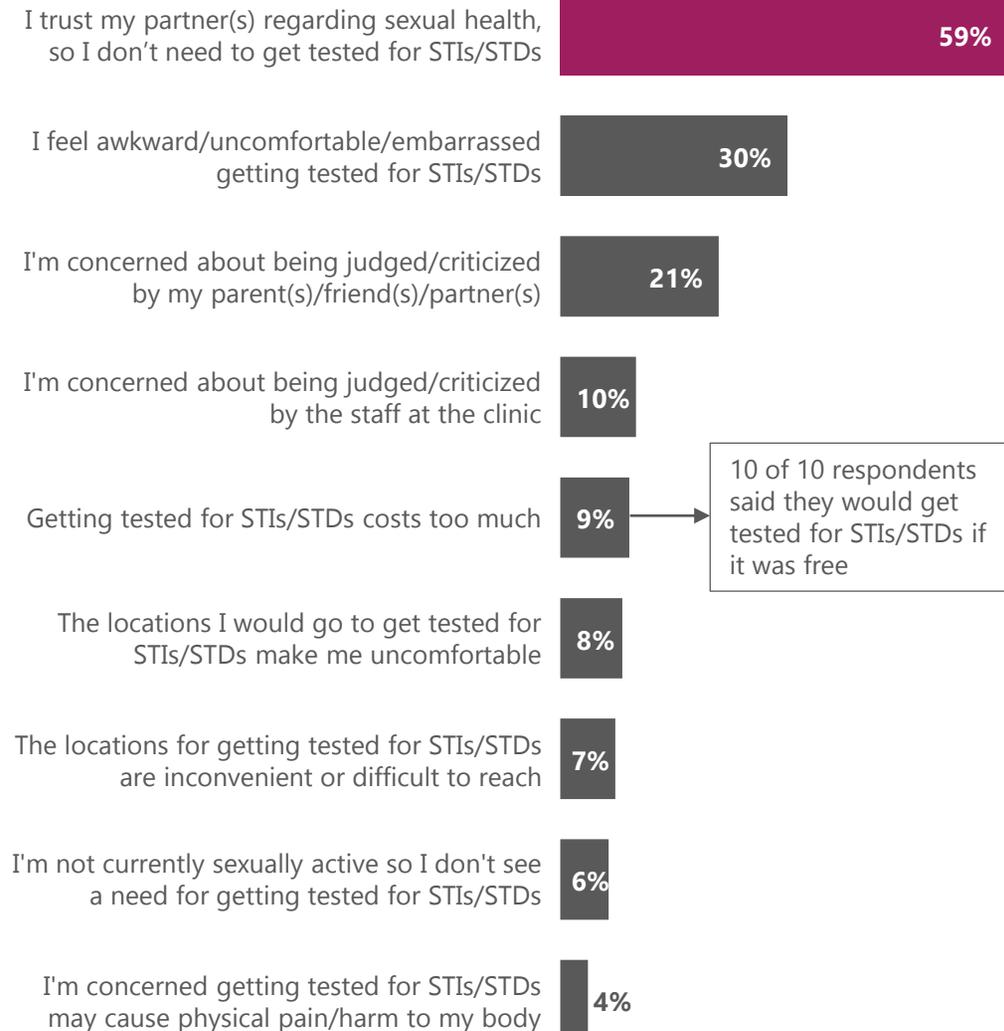


1. 282 sexually active respondents answered these questions.

2. 173 sexually active respondents who have been tested for an STI/STD answered this question.

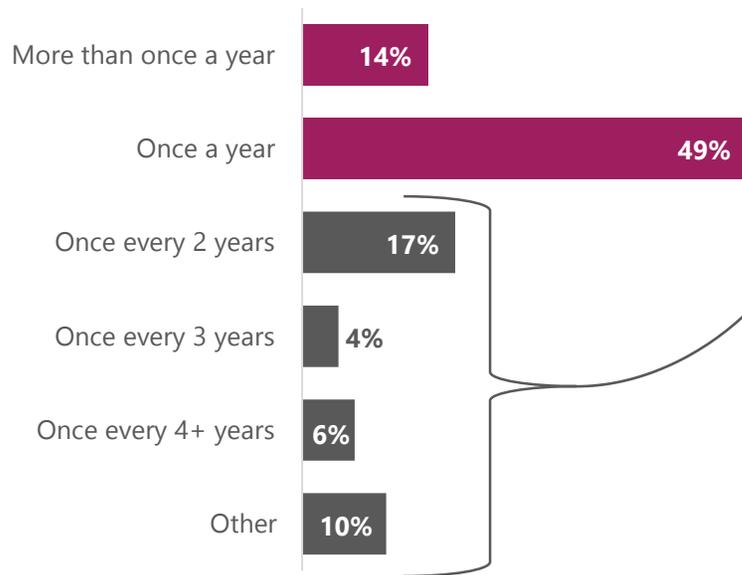


59% of those who report having never been tested for an STI/STD cite **trusting their partner** as a reason²

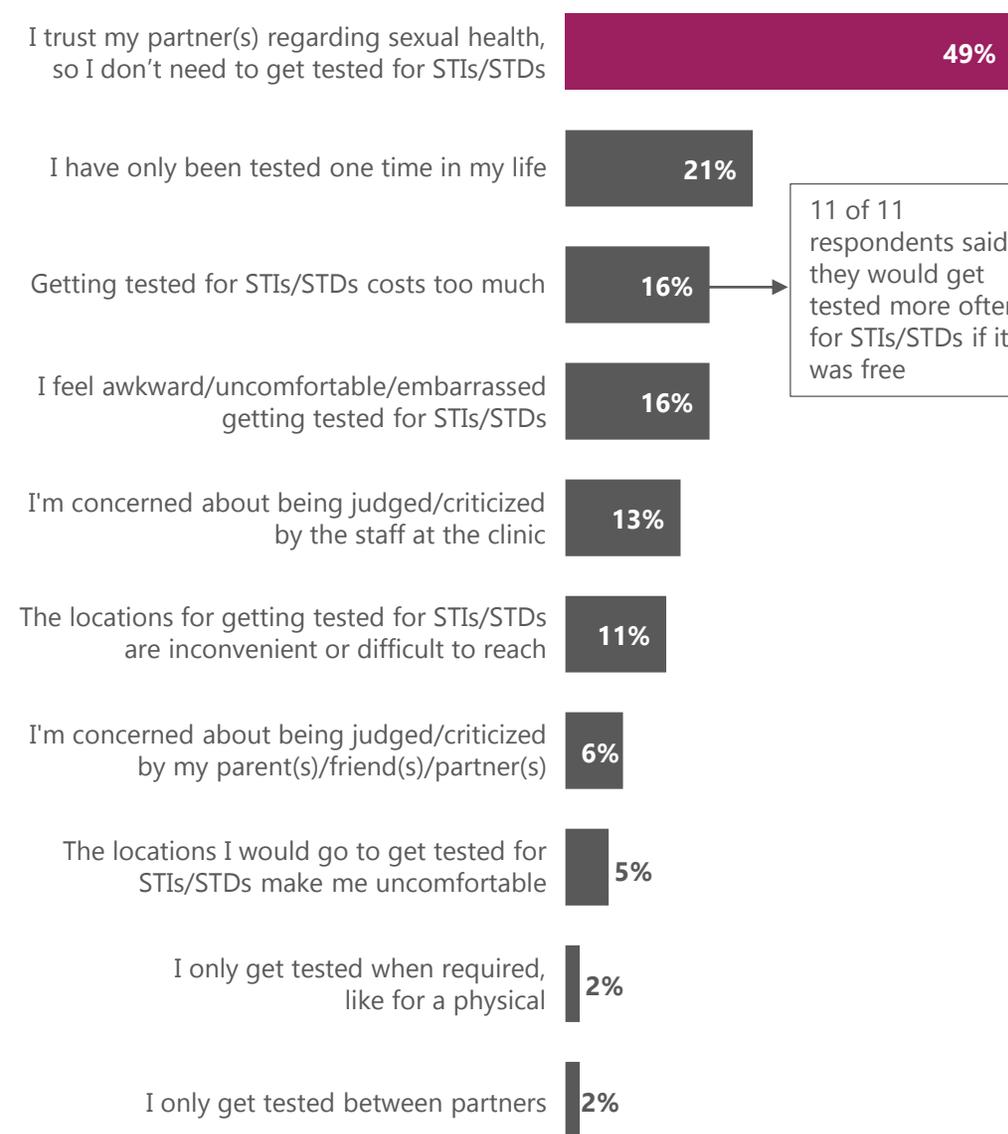


1. 282 sexually active respondents answered these questions.
 2. 109 sexually active respondents who have never been tested for an STI/STD answered this question.
 Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.

63% of respondents who report having been tested for an STI/STD report generally **getting tested at least once a year**¹



49% of those who generally do not get tested at least once a year cite **trusting their partner** as a reason²

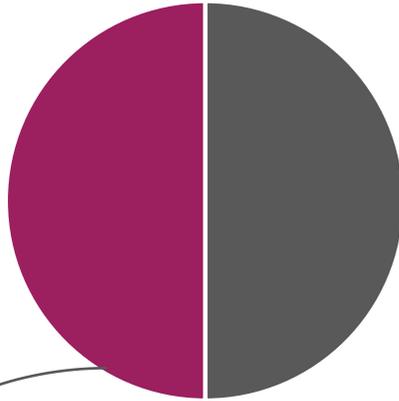


11 of 11 respondents said they would get tested more often for STIs/STDs if it was free

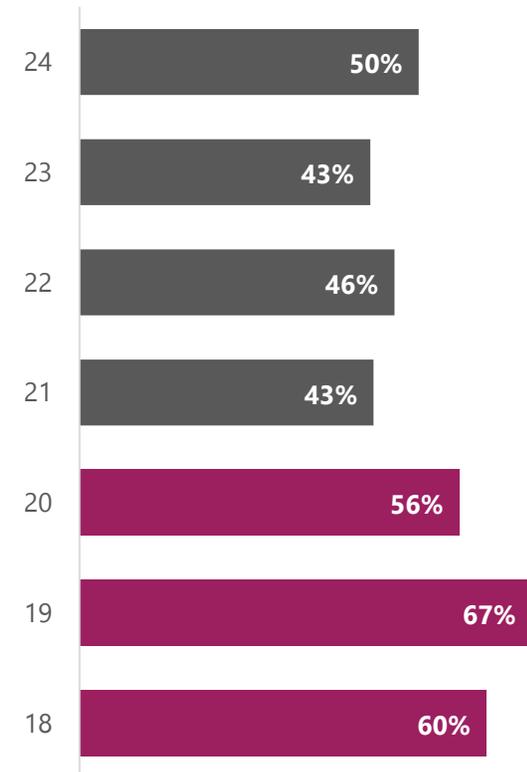
1. 172 sexually active respondents who have been tested for an STI/STD answered this question.
 2. 63 sexually active respondents who are generally tested for an STI/STD less than once a year answered this survey question. Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.

50%

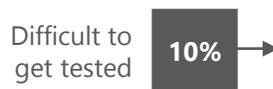
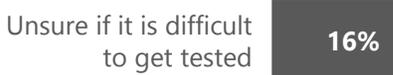
of those who report having been tested for an STI/STD get tested after engaging in sexual activity with a new partner¹



A larger proportion of **sexually active 18-20 year old respondents** who report having been tested for an STI/STD get tested after engaging in sexual activity with a new partner when compared to 21-24 year old respondents¹



74% of respondents who report getting tested for STIs/STDs after every new partner said that **it is not difficult to get tested**²



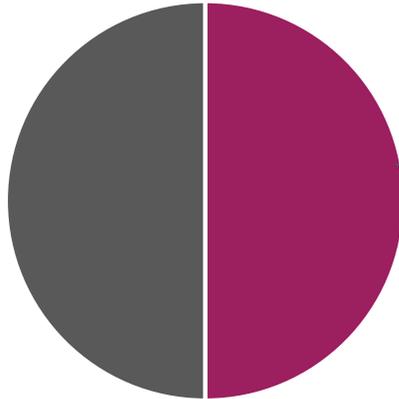
- Reasons include:**
- It costs too much (5 similar responses)
 - The locations for getting tested for STIs/STDs are inconvenient or difficult to reach (4 similar responses)
 - I'm concerned about being judged by the staff at the clinic (4 similar responses)
 - The times that testing locations are open are inconvenient (1 similar responses)
 - Getting tested for STIs/STDs takes too long

1. 172 sexually active respondents who have been tested for an STI/STD answered this question.

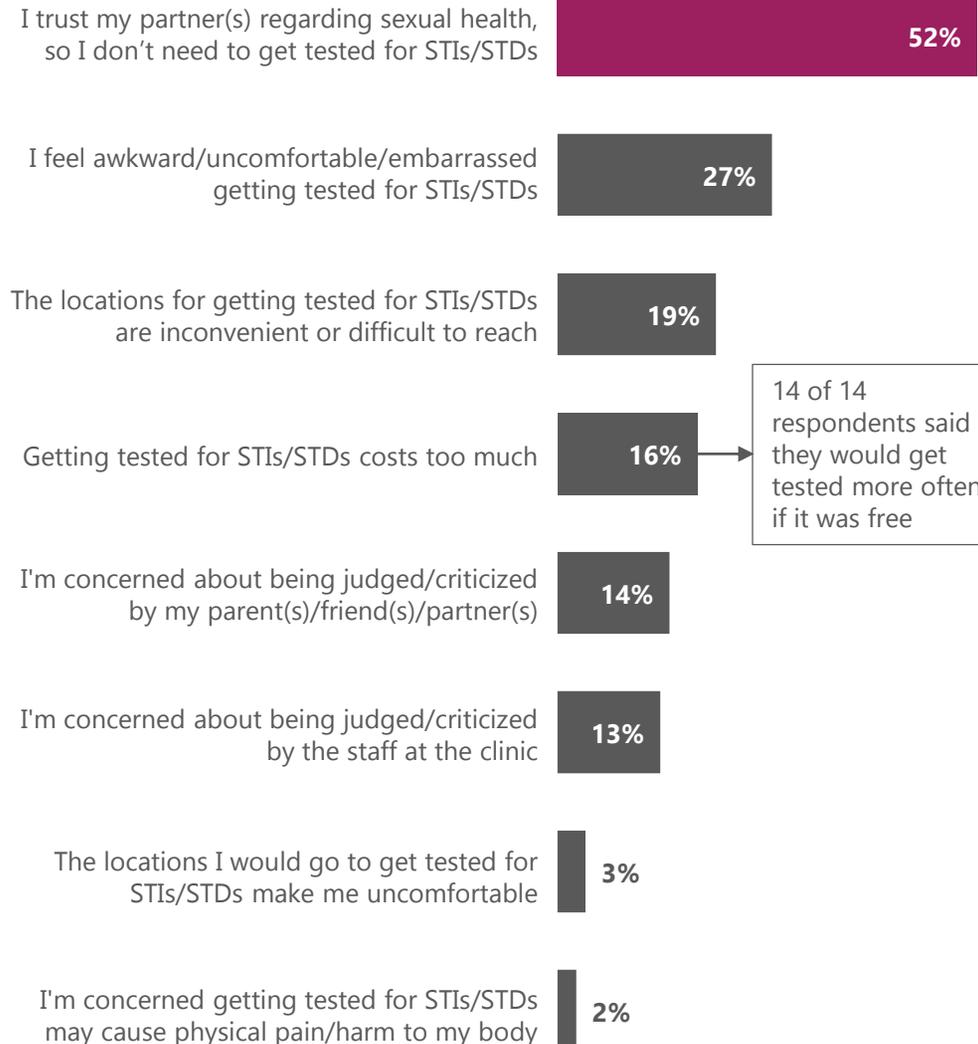
2. 86 sexually active respondents who get tested after every partner answered this question.

50%

of those who report having been tested for an STI/STD do not get tested after engaging in sexual activity with a new partner¹



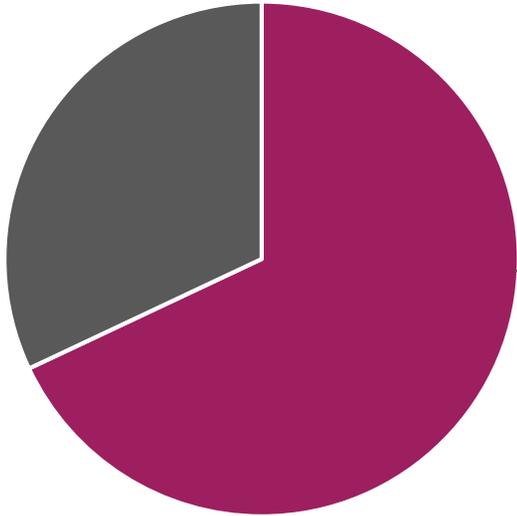
52% of respondents who report not getting tested for STIs/STDs after engaging in sexual activity with a new partner cite **trusting their partner** as a reason²



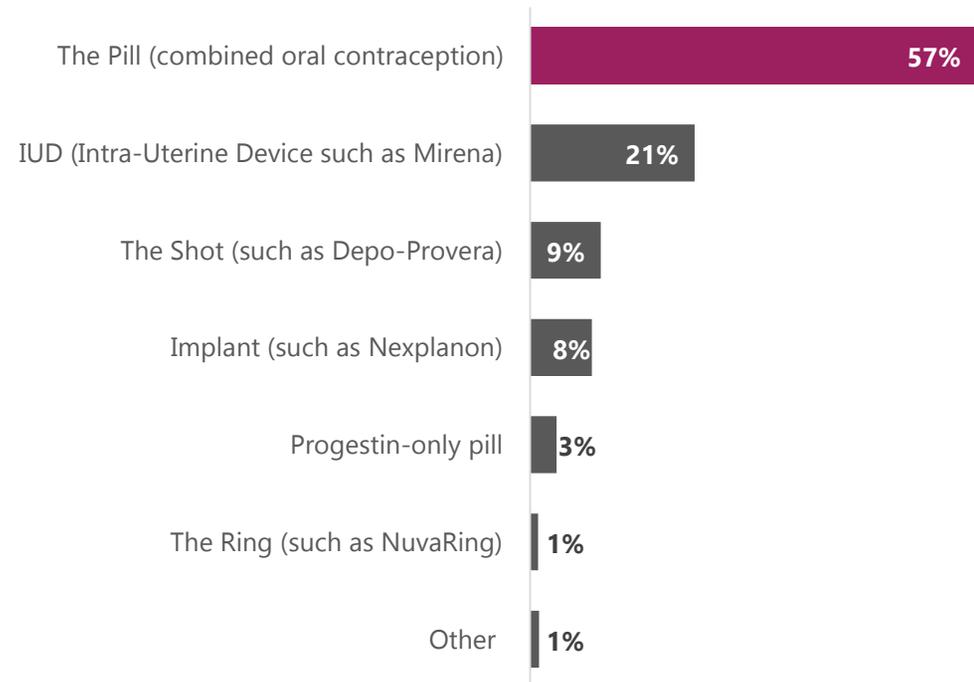
14 of 14 respondents said they would get tested more often if it was free

1. 172 sexually active respondents who have been tested for an STI/STD answered this question.
2. 86 sexually active respondents who do not get tested after every partner answered this question.
Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.

68% of sexually active females report currently using birth control¹



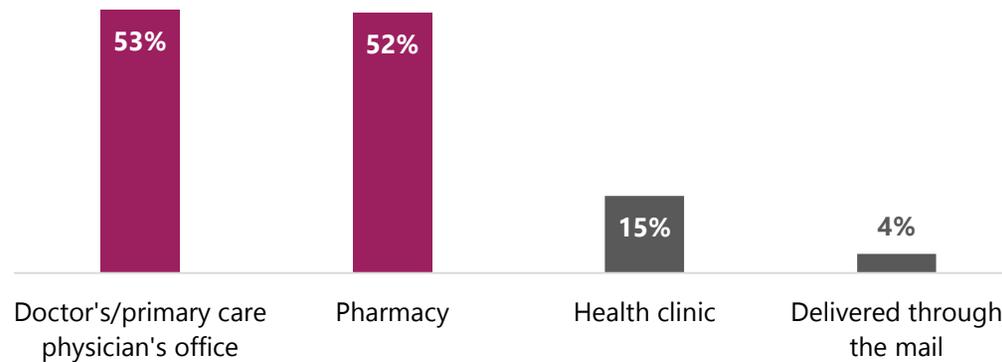
57% of respondents who currently use birth control utilize 'The Pill'²



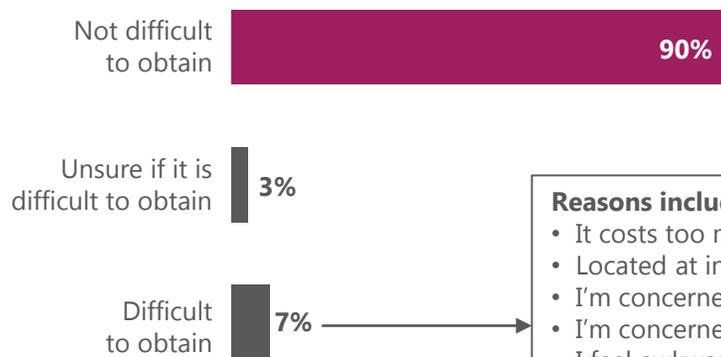
1. 229 sexually active female respondents answered this question.

2. 156 sexually active female respondents who currently use birth control answered this question.

Over half of those who are currently using birth control obtain it from a **physician's office or a pharmacy**¹



90% of respondents who currently use birth control **do not find it difficult to obtain**²

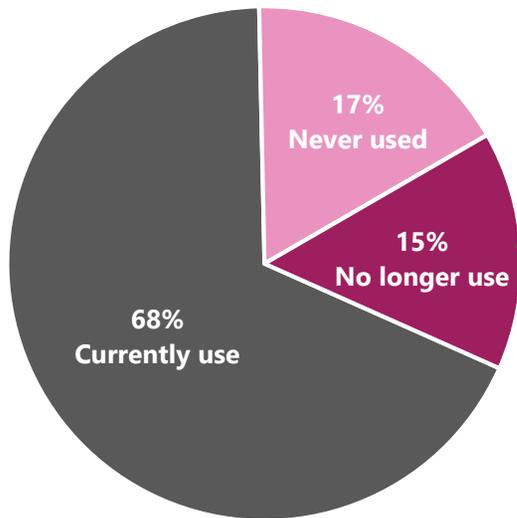


Reasons include:

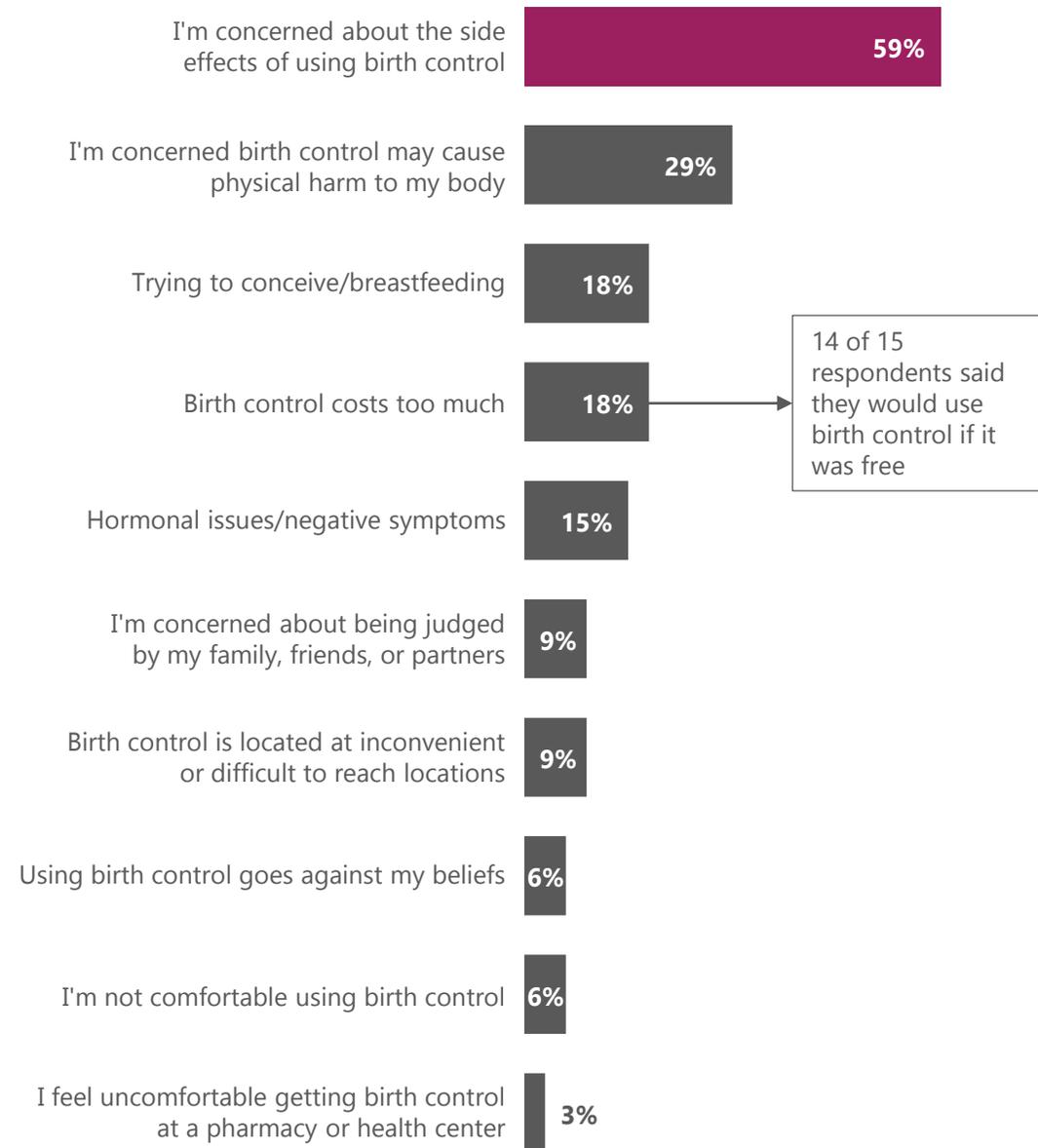
- It costs too much (*5 similar responses*)
- Located at inconvenient or difficult to reach locations (*1 similar response*)
- I'm concerned about being judged/criticized by the staff at the clinic (*1 similar response*)
- I'm concerned about being judged/criticized by my parents (*1 similar response*)
- I feel awkward/uncomfortable getting birth control at a pharmacy or health center
- Untimely refills
- Lack of health insurance

1. 156 sexually active female respondents who currently use birth control answered this question. Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.
2. 156 sexually active female respondents who currently use birth control answered this question.

15% of sexually active females report no longer using birth control¹



59% of respondents who no longer use birth control cite 'concern about its side effects' as a reason²



14 of 15 respondents said they would use birth control if it was free

1. 229 sexually active female respondents answered this question.
 2. 34 sexually active female respondents who do not currently use birth control answered this question.
 Respondents could select multiple answers; as a result, the percentages in the graph are greater than 100%.

STIs/STDs

- Survey respondents are aware that STIs/STDs are a significant problem, with nearly two thirds reporting having been tested in the past.
- More respondents with 2+ partners in the last year reported testing positive for STIs/STDs than those with 1 partner.

Condoms

- Despite knowing STIs/STDs are a significant problem, less than 30% of sexually active respondents always use a condom.
- The most commonly reported reasons for not using a condom more frequently include:
 - It doesn't feel as good physically
 - I don't have one available
 - I'm in a long-term relationship
 - I'm using birth control
- Who is less likely to ALWAYS use condoms?
 - Females, which is likely because they report being in long-term relationships and using birth control
 - People with 2 or more partners in the last year, who are more likely to be males and 18-20 years of age
 - People who are non-white and/or Hispanic

Wear One

- Most survey respondents don't know about Wear One. Only 26% know it exists and 13% have obtained, and used, a Wear One package in the past.

- 1 Consider creating an educational piece that provides information on best practices for sexual health.**
Survey respondents are aware that STIs/STDs are a significant problem, but less than 30% report always using a condom. The educational piece could include a list of local STI/STD testing options, the importance of STI/STD testing, as well as the availability of free condoms through the Wear One program. The educational piece could be distributed to college students on move-in days. This could help lessen the stigma that appears to be contributing to 1/3 of respondents not getting tested and/or not getting tested more frequently for STIs/STDs.
- 2 Consider some targeted promotion of the Wear One program.**
18-20-year-old male respondents tended to have 2 or more partners in the last year. A larger proportion of respondents with 2 or more partners in the last year reported testing positive for an STI/STD—27% compared to 15% of respondents with 1 partner. Additionally, a larger proportion of non-white and/or Hispanic respondents have reported testing positive for an STI/STD—30% compared to 17% of white, non-Hispanics.
- 3 Consider ways to address “it doesn’t feel as good physically” in order to increase condom usage.**
This may involve creating a new marketing campaign and/or enhancing education materials.
- 4 Consider additional channels for promoting the Wear One program as well as additional channels for distribution.**
74% of respondents either didn’t know about Wear One or were unsure if they knew about it prior to taking the survey. Additionally, one of the most commonly reported reasons for not using condoms more frequently is “I don’t have one available”.
- 5 Conduct another countywide survey on sexual activity and sexual health in 5 years.**
Consider utilizing the same methodology to collect survey responses to ensure comparability across time periods.