Student Awareness and Utilization of STI Screening Options Available on a College Campus

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Background
In 2018, 20% of U.S. adults reported having a STI¹
Almost half of new cases were among those ages 15-24¹

Miami-Dade County STI burden:
Consistently increasing rates of gonorrhea over the past decade²
High rates of new HIV diagnoses (2020 rate: 28.4 per 100,000) in Florida

UM STI Screening Services:
Ongoing: STI screening at the SHS on campus
New in Spring 2022: UM ACTS, in partnership with UM’s DWR, provide free, monthly STI screenings, risk assessments, & linkages to free treatment options at the Wellness Center

Objective:
To assess students’ awareness, utilization, and perceived barriers of STI screening options at UM.

Methods
Spring 2023 Recruitment:
• Currently enrolled students (18+ years) were eligible
• Invitation to Qualtrics survey (via a QR code) advertised in on-campus public spaces and social media platforms

Survey content & format:
Multiple choice questions assessed demographic information, sexual history, & awareness, utilization, & perceived barriers of STI screening at the UM SHS and ACTS

Compensation: $5 gift card to Starbucks for survey completion

Data Analysis: Descriptive statistics (#,%) were calculated & Chi-Square Tests of Independence were used to assess associations between variables

Sample Characteristics (n=455):
Predominantly 18-20 years of age (58.9%), undergraduates (86.8%), White (62.2%), non-Hispanic (65.7%), non-Greek Life (66.6%), & currently sexually active (58.2%)

Results
Screening Awareness & Utilization:
Ever screened → 40.6%
SHS: 72.1% aware; 32.1% screened; 45.4% prefer
ACTS: 29.0% aware; 7.6% screened; 76.7% willing to use; 22.6% prefer
No Preference: 32.1%

Subpopulation Differences:
Less SHS utilization: 18-20 years*, 1st & 2nd year**, non-Greek*, Hispanic*
Less screening awareness: SHS: non-Greek*, 1st, 3rd year* ACTS: non-Greek*, 1st, 3rd year*

More ACTS Utilization Intent:
18-20 years*, Family insurance*, LGBTQ*

Top Barriers to Utilization:
SHS: No need (n=161), Unaware (n=132), Parents would know (n=73)
ACTS: Unaware (n=205), No need (n=132), Peers would know (n=36)
No barriers: SHS, n=124; ACTS, n=92

Subpopulation differences: Cost was more of a barrier for LGBTQ (p=.003), Non-Greek (p=.021), & Hispanic (p=.017) students

Discussion
Key Findings: Although awareness of ACTS was low and many students prefer STI screening at SHS, willingness to be screened at ACTS was high. Variability in awareness & utilization was present among some subpopulations.

Limitations: The cross-sectional study design precludes causal inference.

Implications: Alternative STI screening options are viable; Efforts to promote utilization should target subpopulations with limited awareness & more perceived barriers.

Acronyms: ACTS = Adolescent Counseling and Testing Services; DWR = Department of Wellness and Recreation; SHS = Student Health Service; STI = Sexually Transmitted Infections; UM = University of Miami