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ECHO: Development of an Inclusive Peer-Led Sexual Health Education Program for Undergraduate Students: Experiences and Lessons Learned from SUNY Geneseo

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[video transcript]

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With that, I'll turn it over to you for the presentation.

00:13

Okay. Hi guys. So here is our presentation titled development of an inclusive peer led sexual health program for undergraduate students experiences and lessons learned from SUNY Geneseo. You can advance okay, no financial relationships. Okay, so our two learning objectives today. First, we're going to discuss the importance of providing comprehensive sexual health education to undergraduate students. Then we will describe the process by which a sustainable campus based and peer led sexual health education program can be developed via collaboration between faculty, staff and student activists. Okay, so a little bit of background about why this type of research and program development is important. So college students are a high risk group for negative sexual and reproductive health outcomes such as unwanted pregnancy and STI s. So students are not getting the education that they need before they become independent adults and college students and potentially become more sexually active. These negative outcomes can adversely affect students mental and physical health, academic performances and their likelihood of completing a degree or health or even an unwanted pregnancy can result in higher stress and it takes away from a student's ability to do work. Oh gosh. So as an example for community colleges, nationally, unplanned births account for nearly one in 10 dropouts among female students at community college and 7% of dropouts among community college students overall. So students are coming into college with broadly inconsistent knowledge and skills relating to sexual and reproductive health. Um, many K through 12 schools offer minimal sexual health education, if any, and it doesn't have to be evidence based or medically accurate. And usually it's not inclusive of students gender and sexual identities. So currently, only 39 states require some kind of sexual or STI education for students. And out of those only 17 states require sex and STI education program to be medically accurate. One thing I noticed in my own life as someone who's planning to become a physician assistant and kind of always had a little bit of clinical background, people would come to me with questions and advice a lot. And I needed to do some sort of project for my senior capstone. So I decided I kind of wanted to explore a little bit more about sexual health resources and education at SUNY Geneseo can advance. Okay, so we started our research early in the fall 2022 semester. And we had three central research questions which are what our SUNY Geneseo students needs regarding on campus sexual health education resources. What are the strengths and weaknesses of the current resources on campus? And how can we improve the provision of sexual health services, especially to diverse student populations. This last one was important because of the general lack of inclusion of queer students and education, especially in high school. So it was an important population for us to target. There's also a recent prioritization of diversity and social justice within the SUNY system. So there was a new emphasis on addressing underserved groups. The ultimate goal of the research was to learn how to provide students was somebody that they could benefit from in terms of sexual health by asking for open suggestions to build some sort of program, which we didn't know what we were

going to build until the research was over. Okay, you can advance. Okay, so we had four focus groups with 21 total participants, and you can see the demographic breakdown here on the right. So we tapped into a lot of different resources for recruitment, clubs, sororities, campus first response, so other clinicians my own sorority and sororities other girls, I knew we designed eye catching flyers posted them around campus. We had departments email, student listservs and also just word of mouth and snowball sampling. To be included participants needed to self identify as female, be over 18 and be a current Geneseo student. So in terms of demographics, we had a really good split in terms of sexual orientation. We had mostly seniors participate. And then at the end, we wanted to kind of up the racial and ethnic diversity. So we did a little bit of specialized recruitment. We made new flyers as well as more targeted outreach to different clubs. You can advance Okay, so many students reported that they believe that they lacked sufficient sexual health knowledge which was in part due to a lack of relevant K through 12 education. So as an example, one of our participants reported that their health class was one week over the summer, and it didn't include sexual health at all. They did a project on Lyme disease, and that was their entire health class. Many reported that if they did get sexual education, it was often absent in space. And it wasn't clear and queer inclusive. So some students got education that didn't even apply to them. We heard a lot of reports that lack of knowledge was especially problematic during the students first year. So this student said, the high school I went to was very much abstinence based. I definitely feel like when I went to college, I experienced a lot of hypersexuality and made a lot of really not poor decisions, but decisions that I probably wouldn't make now with the knowledge I have. So these students are getting sudden independence from the first time in their life, which may lead to hypersexuality. You know, students want to explore. So first year students are moving out for the first time in their lives, and they're kind of free to do what they please. And court decisions, you know, that could mean having unprotected sex or not getting STD tested, et cetera. Students also noted there's limited knowledge of on campus resources. So once you don't record it, that it's not something that we talk about much or gets mentioned anything, classes or clubs or anything. Unless you really pay attention to the flyers in the unit or something. I don't really know how people would find out. So there's a bunch of on campus resources the Lauderdale Health Center, which is SUNY Geneseo zone Health Center offers regular medical services as well as specialized sexual health resources such as STD testing, birth control, and plan B. And then the Department of of health also has its own center for sexual health and wellness on campus where you can get IUDs implanted, you can get new birth control prescriptions, and so on. So, when students are talking about passive resources or passive outreach, that kind of requires students to make a more specific effort to learn about their services. However, they might not know what they can get when it's needed. Okay, advance. So we got a lot of suggestions for greater variety and inclusivity, and educational materials and modes of delivery. So we had a student say, I feel like maybe trying to have conversations with clubs that are notably LGBTQ, for example, Pride Alliance, Iris magazine, which is a queer magazine. She said, I feel like by reaching out to those clubs and seeing if a representative can come and speak, that could be helpful. So it's important for groups like this, who are underrepresented in medicine historically, to kind of have those in person connections and communication in an environment that's comfortable for them. And it's going to help build trust between Geneseo and those students, which is only going to kind of make their health outcomes better. Another student said, being able to get that information, especially as a person of color, if you're in any sort of club or

organization where you feel comfortable within that club, possibly doing activities just to reach out because underrepresented under representation is a big thing everywhere, especially now. So just because of the political climate for students and marginalized groups, rights are under attack, and people need support now more than ever. And it's really nice. When you can kind of reach out in a space where somebody feels comfortable within that club, you know, you're with people, you know, and trust, and it kind of just fosters a better conversation. Okay, advance. So students wanted in your face outreach instead of passive outreach. So we got a lot of suggestions to add stuff about Lauderdale during college orientation, which is like before in kind of the first week of freshman year, and just kind of let students know about everything they offer, especially freshman year when that's the notorious sexual for yourself year, talk about what they offer because God forbid something happens, you know, you can do so it's important that information is proactive instead of reactive. So you know, issues can be prevented before they happen instead of students having to scramble and deal with issues that have already happened. Another student reported, I think what would work is that everybody does now is they're posting on your Instagram, or having a table in the Union like what everyone does, that catches a lot of people's attention as they walked by. So Geneseo. Like many other college has a student union and it's like a really big gathering place for students. There's a Starbucks, a tons of tons of study spots, food and stuff. So there's a lot of on and off campus students that like walk through there during the day. And there's tabling that happens during like the kind of big open areas. So putting up a table here would reach many students at once, essentially. And then again, social media has become a big way for people our age to receive information, maybe some social media campaigns. This was a common suggestion we got specifically like Instagram campaigns and ads Okay, events. Okay. So after we did our student research, we needed to move on to

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asking questions to kind of representatives and administrators, we knew that there was the need for sexual health education outreach, but we had to find out if it was going to be possible to create a program that address those things from a college and administrative perspective. So our central research question when we interviewed these people, is what are the barriers and facilitators to implementing a sexual health education program here at SUNY Geneseo. So, we spoke to a representative and administrators for many departments and programs that are responsible for health and well being of students. So Lauderdale Health Center, we spoke to the director Lauderdale is again the on campus health center that offers both sexual and non sexual health services. We talk to the Vice President of Student and campus life as well as people from the Department of student life. We talk to the Assistant Director of Multicultural Affairs for LGBTQ life, the title nine coordinators. And then we also spoke to people who weren't necessarily directly involved in Student Health, but just other people who may be involved in the program, such as the Assistant Director of Residence Life, to learn how we can integrate sexual health education into residence hall programming. And for example, we learned that RAS can host workshops and even make them mandatory. And the idea for this was kind of to make it as easy as possible for students to attend a workshop. And then Dr. Brooks majors spoke to faculty directors for relevant peer driven programs to learn how to best plan for program delivery. So at Genesee, we have pathways peer counseling, which is a mental health thing. And then safezone, which is on campus, LGBTQ IA diversity training. So these are both like peer driven

programs, and we kind of wanted to take some pointers for them and see how they created their programming. Okay, events. So after we completed our research, we needed funding to create a program. So I applied to the student ambassadorship program at Geneseo and got a \$5,000 award. This program is something that funds students to support change making student design projects, combining independent learning innovative approaches to problem solving and community based action. So because I was a senior, I only had January through May to use this money and kind of do as much as I could with it. So we brainstorm program design elements and steps towards implementation, we created a budget. And we held meetings with external stakeholders, external stakeholders and coordinators from similar Sunni programs. Okay, events

12:56

you're muted.

13:00

Thank you very much. I appreciate that. So we were able to raise a number of external stakeholders and program coordinators. This started off with Olivia has connections to the Livingston County Department of Health. She became connected to them when she was a COVID vaccinator. And eventually, she did an internship with them and she was able to shadow in their sexual health clinics. So that was a very important initial contact that Olivia was able to meet with also able to reach out to Dr. Urban to get her advice. They've been amazingly supportive. So thank you very much, Dr. Urban and the folks there. I was also able to speak to representatives of Planned Parenthood of Central and Western New York, not only their restore program, which is a program that is available on college campuses, for those who have been affected by sexual assault, but Planned Parenthood representatives from their public relations department as well. They were very supportive. Trillium Health is one of the premier HIV service organizations in Rochester, which is 40 minutes from here. And it's the closest largest city and they have also been very supportive in terms of letting us know how people can get out to Rochester and access their services as well. And then finally, because we knew that this was Sunni, and we wanted to get the advice of somebody who had been involved in this kind of work from a food perspective, we were able to speak to Natalie sunsky, the coordinator of the project shape sexual health care educators at SUNY Albany. They've had a long standing program and their her advice was really, really important to allow us to understand exactly what the barriers might be from a standing perspective and how to really reach out to students the way they have, because they were really a model program for us. And then finally, we had one major deliverable at the end of the spring semester, and that is our website. This is the link to the website here. There's also going to be a QR code at the very end of the presentation. But I just want to kind of walk you through what we were trying to accomplish with this website. Can factor. So this is the basic front page part of it anyway, you can see we have our snazzy logo, which is actually modeled on the New York City condoms that were given out in the mid 90s. And you can see from the very beginning, you know, we talk about inclusivity. And we talk about things like body positivity, communication, and pleasure. So this is not merely, you know, you need to use condoms, you need to get tested. And that's it, we're taking a very, very broad approach to sexual health. And we're also taking an approach that emphasizes social justice, which is really important. I'm a sociologist, that comes naturally to me, but I think that in terms of

providing health education, it's not the most common message that students get, it's certainly not condemned Natori of sexual activity. In fact, we are asserting that pleasure should be celebrated and should be a right. If things are consensual, and people are safe. And it's good to be positive about sexuality, it's good to be positive about your body, regardless of appearance, regardless of gender, identity, or expression. All of these things are very important to us from a philosophical standpoint, as well as an educational one. And so you can actually see here that these are the topics, the educational topics that we have listed available on the website, again, sex positivity, body positivity, intersectionality, and reproductive justice. For those who are not familiar with the idea of reproductive justice, reproductive rights are often cited as the right to terminate a pregnancy. However, the fact that women of color have been sterilized, and oppressed in terms of had their reproductive control taken away from them, indicates the need for reproductive justice standpoint, the term was created by a an organization called Sister song which is made up of black women, women of color. And the idea behind reproductive justice is not just the right to terminate a pregnancy, but the right to have a child if you want one and to parent that child in a safe and healthy environment. So that combined with intersectionality can kind of reflect the the social justice orientation, that we are taking choices, no matter what the choice is, the choice is to be respected. Communication and consent, also very important gender and sexual identity very broadly defined again. And then of course, there is the traditional knowledge about HIV STIs, and safer sex, in terms of the resources that are available educational resources, obviously, online and off clinical resources. So we have the links to some of the organizations that we spoke of earlier, both locally, and regionally. And also online support organizations. So for example, if you've just come out, you don't know where to go, who to talk to links to that sort of thing. And then also advocacy, because I think a lot of students, at least what we've seen is that they're really excited about these kinds of programs, and they want to get involved, they just don't know how. And so these are links. Not only can they volunteer with us, but if they want to fight for comprehensive sexual sexuality education, or LGBTQ plus rights across the board, we'd have links to that as well. And again, this is just an example of the information you can see from the right that yes, we do have the traditional knowledge about safer sex, how to engage in safer sex activity. But you can also see on the left, our emphasis on sex positivity, and then also not only includes those who want to participate, but those who choose not to, again, it's about autonomy and agency. I'm not imposing your particular value on folks. In terms of the future directions, we are going to be conducting focus groups later this semester. Additional ones expanded to all genders. The program is actually going to be housed in the Department of Sociology, I will be directing it and in fact, in May I receive named a Provost Award for a sexual health micro credential micro credentials, you take a certain series of courses and then you get a badge that you put on LinkedIn or your transcript. The core course will be a sociology of sexual health course that I will be developing in the spring. There will be the integrative and applied learning component which is required for all micro credentials. You don't have to do a micro credential to do an internship but if you wanted to that would be the peer educator internship. And then I have already been speaking to a number of different interdisciplinary departments who have been thinking about how they could contribute to multicore sexual health micro credential so electives for example, the Department of Psychology, I know somebody was thinking okay, we I could possibly psychology of women, another psychology faculty member said okay, I want to teach a course on the psychology of sexual assault, communication, somebody said, Oh, I can teach internet, intimate

communication, women gender studies, I can teach gender identity socio medical sciences, they just hired someone to teach the politics of reproduction. So, you can actually have a multi course interdisciplinary, many program, I suppose, in sexuality studies with this peer educator, internship as a as the core. And then finally, of course, we are exploring additional funding and grant opportunities to make sure that this is a sustainable program. And then finally, in terms of our future directions, yes, we are going to be doing the traditional posters and flyers, but as you can see by the photo here, this is one of my interns, Livia Jaworski, we have three interns currently working to do the promotion and to help set up the program. So we are doing tabling in the Student Union, we have established an Instagram account, we're going to be increasing our social media presence, we're very conscious of including inclusive resources, not only for the website and off, we are conducting outreach. So we have business cards, and I was able to get them finished in time to give them to student life, student life gave them to all the orientation leaders who give them to every single incoming first year students, I believe, is that the exact number of I think it's like 100 to 1000 new students got access to our information. And so at least at the very least, they could sign into the website and see what we had to offer. And then finally, active collaborations with student organizations. So I've been in touch with Vox which is the Planned Parenthood organization on campus and also the Geneseo Pride Alliance. And to believe you take it away.

22:50

Okay. So just to kind of summarize main lessons learned from this experience. Many undergraduate students want and need additional information regarding sexual and reproductive health access is often lacking High School and also during their college career. Many colleges don't have programs like this, and students are frequently unaware of available resources to them. If we want our program to be successful, like we imagined, we must prioritize inclusivity to all students. It's important to have wide ranging partnerships across programs, departments, and even external agencies. This is crucial for program planning and buy in. And then it's really important that you consider that time flexibility and creativity is really important to help alleviate obstacles that are kind of inevitable.

23:43

And I just want to kind of talk about this from a clinical perspective, because I know that most if not all of you are clinicians, whether you provide services for college students on campus, or whether you do it, just in your own practice. I think one of the biggest lessons that I that I've learned personally, is don't assume what college students know or don't know, especially because of the lack of consistency of the education that they have received. And I remember I was sitting with some of my interns at a during tabling when I was introducing them to the practice. And somebody came up and asked what is the clitoris? And my student interns were very taken aback Oh, how could somebody not know but the point was was that they were coming to us to ask us that's our job. Our job is to give that education. And so that was one of the main things that I wanted to let them know that we can't make assumptions about what people know or don't know, even at that age. And it's really important to kind of find out where people are at before providing services. In addition, I think that also talking about inclusivity inclusivity I know that students have responded very, very well. And we have I think we've been tabling for three weeks, twice a week, two hours each time. And we have 50 people who have

signed up for more information. And they constantly tell us how amazing the information that we're giving us, because it's not just inclusive. But it's also it speaks to their age group. They are very, it's very modern looking educational materials, and it doesn't speak down to them, or make them feel marginalized in any way or left out. I'll also talk about, you know, the inclusivity of the information that we're giving out. So we have cones that we're getting out. And some of the pins, one of them says erection does not equal consent. Another one is boys in BDSM. Another one is rip SCI stigma, create consent culture and end slit and performing. So this is very, very much, again, something that the students have really, really, really responded to, I think we're almost out of those bins. And again, we haven't really been handling all that much. Students need to hear that they don't necessarily, they've heard their whole life necessarily don't do it. Or if they have gotten education, do it, but only do it safely. They're not getting that broad approach. And I think that broad approach is really important for that. And then finally, be creative with social media. Because again, I know nothing about social media. I'm 45 years old, I know nothing about nothing. However, that's why I have student interns that know more about Instagram than I do. And if you have, if you're able to leverage that social media to outreach to patients, I think that's also a good idea. And here are references. And thank you. If you have any questions, let us know.

26:56

All right, thanks so much. That was really interesting. There are a couple of questions that have come in, and you're getting some literal emoji type things. So one question is, what challenges did you encounter that impacted the absence of bipoc and LBT TQ a representation on your panel? I think they're referring to this panel, I'm not sure if they're referring to your, your panel at the school, these voices matter to the discussion.

27:34

Olivia, I don't know if you want to address that I don't identify as BiPAC or LGBTQ plus, I don't want to speak for other folks on the panel. In terms of representation, I think that we certainly, from my perspective, we certainly made a point to include them in the input we were getting in creating the program. One of my current Intel interns does identify as bi POC and LGBTQ IA, I believe, not sure if she's has class right now. But her input is certainly valued, in terms of in terms of running the program. And again, we're going to be doing very targeted outreach. Also, when we're doing the newer the newer focus groups as well. So I don't know if Olivia, you have anything to add to that.

28:36

Um, I mean, just the fact that we made sure to do outreach to these kind of like specialized clubs. And we also were kind of asking them what they thought and get and getting their input on program development and what might be good for them like club leaders, and what they thought might work for their clubs. So we definitely made sure to get as much information from those underrepresented groups as possible before we made our program and our program is still in development. So we're still kind of looking into that.

29:09

I will also say that the question is absolutely a fantastic one. And I think as time goes on, we're able to recruit, because the whole program is not going to launch into 2024. So we're very much at the beginning stages of this. Believe me, as soon as I have interns, I will be giving them every single space to present as I possibly can, because you're right, their voices very much matter. to that discussion. That's again, a political commitment that I've made and that I believe in, the more that I could be inclusive, in terms of the leadership as well as, as well as actual presenting workshops is very important to us. So hope that answers the question.

29:55

I think the second question was really addressed later in the talk. I'm curious If you know if your outreach in that spring semester led to any changes in people seeking health care in at the local health care center, if there was more interest in sexual health services at your, your college center,

30:18

it's actually it's interesting because we were doing the preliminary planning and talking to organizations, but we actually just started any sort of outreach to students three weeks ago, like that, like, very, very beginning. So hopefully, we will be able to talk to both Livingston County, their center for sexual health and wellness, as well as our Lauderdale Health Center to see what the breakdown in terms of improving those kinds of services. Also important to recognize that even when people don't need to the whole point is to make sure that people are protected so that they don't have to go get treated for STIs. And we want people to get tested. But certainly people who don't need clinical services in the moment can also very much benefit from the information that we're providing. That's something that we're going to have to figure out maybe at the end of the semester wants me to have more time. Okay, great.

31:17

And then there's another comment. Thank you. And any advice to create opportunities to provide sexual education to high school and college? Maybe, maybe if you could put your email in the chat? Because that seems kind of big. Shouldn't there?

31:37

Yeah, so I'm going to put my email in the chat. That easy you. So you and then Olivia has just put her there as well. college and high school are a little different just because of who runs who has control over the curriculum. Even so it's very tricky matter, because obviously these issues are very political. You have to kind of tread gently in terms of making sure that that people's needs are our own concerns are addressed. But if you would like to have a brainstorm session or chat offline, or somewhere else on Zoom, as the case may be, please feel free anybody on the chat to come and then email me and we can set something up.

32:25

All right. Well, thanks very much.

[Transcript End]