The Relationship Between Health Insurance and the Likelihood of the Utilization of **Reproductive Health Screenings in College Students**

UC San Diego

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OBJECTIVE

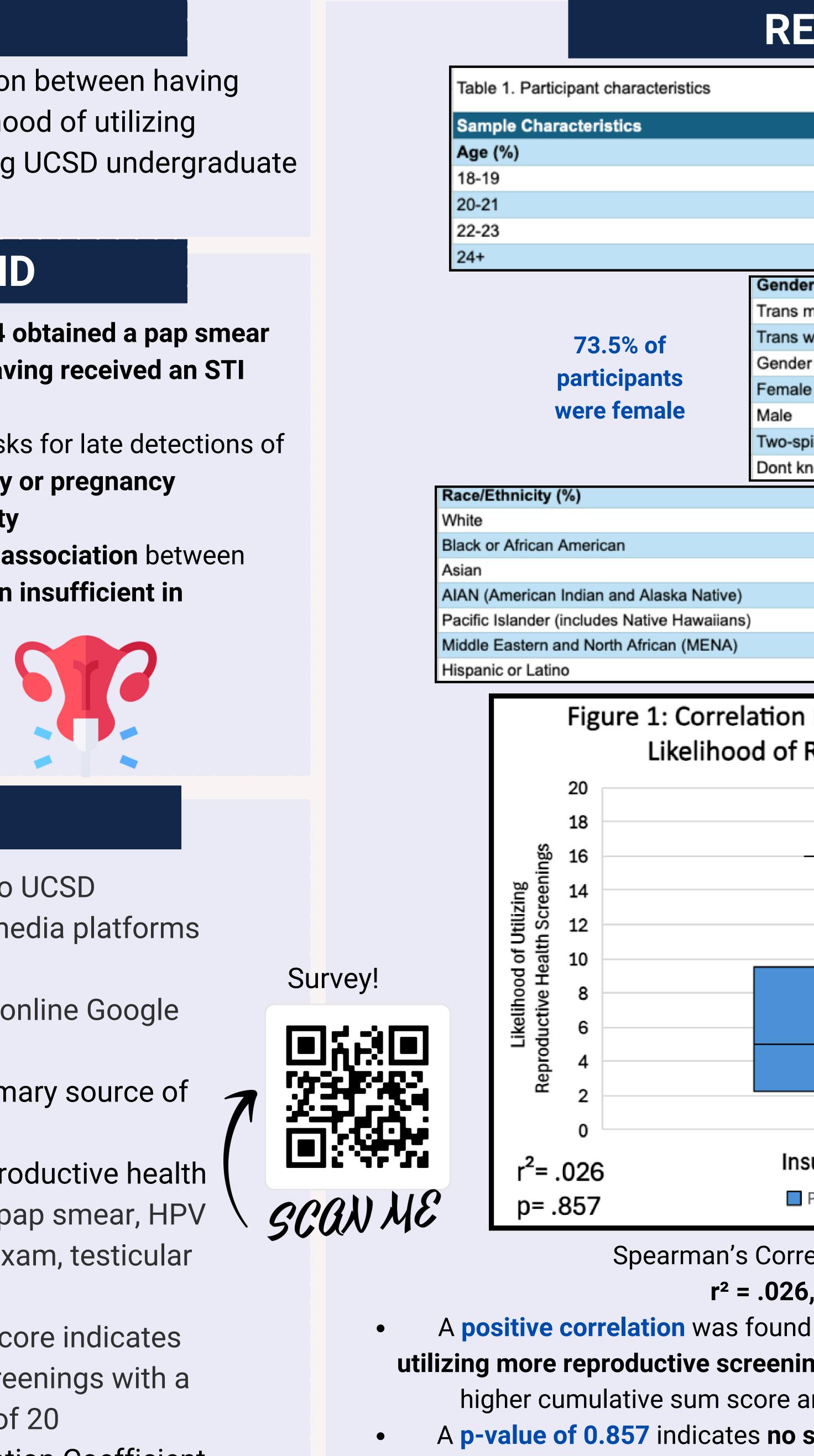
To investigate if there is an association between having private insurance and a greater likelihood of utilizing reproductive health screenings among UCSD undergraduate students.

BACKGROUND

- In 2021, only **59% of women** aged **18-64 obtained a pap smear** test, in addition to 28% of this cohort having received an STI test
- Delays in routine screenings increase risks for late detections of HPV, cervical or breast cancer, infertility or pregnancy complications, and preventable mortality
- Previous literature has found a **positive association** between the exposure and outcome, but has been insufficient in studying college students







METHODS

- Cross-sectional study: distributed to UCSD undergraduate students via social media platforms (Instagram, Discord, Reddit)
- Anonymous, 8 question qualitative online Google Forms Survey
- **Exposure:** Respondent's current primary source of health insurance (private, public)
- **Outcome:** Likelihood of utilizing reproductive health screenings within the past 2 years (pap smear, HPV) test, STI screening, clinical breast exam, testicular exam)
 - Likert scale sum score: higher score indicates greater likelihood of utilizing screenings with a minimum of 0 and a maximum of 20
- **SPSS Software**: Spearman's Correlation Coefficient

Wendy Estrada | Maryam Izadshenas | Santiago Reyes **Senior Capstone**

insurance type and the utilization of reproductive screenings

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CONCLUSION

esults do not support our hypothesis. lay be due to larger number of privately sured participants responding to the survey. articipants also expressed lack of health teracy regarding care they had access to. ample size (49) was likely too small to be stically significant. Further research should ase sample size and take measures to re more even demographic distribution.

POLICY IMPLICATIONS

proving health literacy to improve cess to timely reproductive health rvices and support financially sadvantaged individuals.

pand affordable insurance coverage d train healthcare providers in **cultural** mpetence can boost and encourage e utilization of reproductive health reenings.



ACKNOWLEDGEMENTS

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