



The impact of state policy environment on contraceptive access: A comparison of community college students in California and Texas

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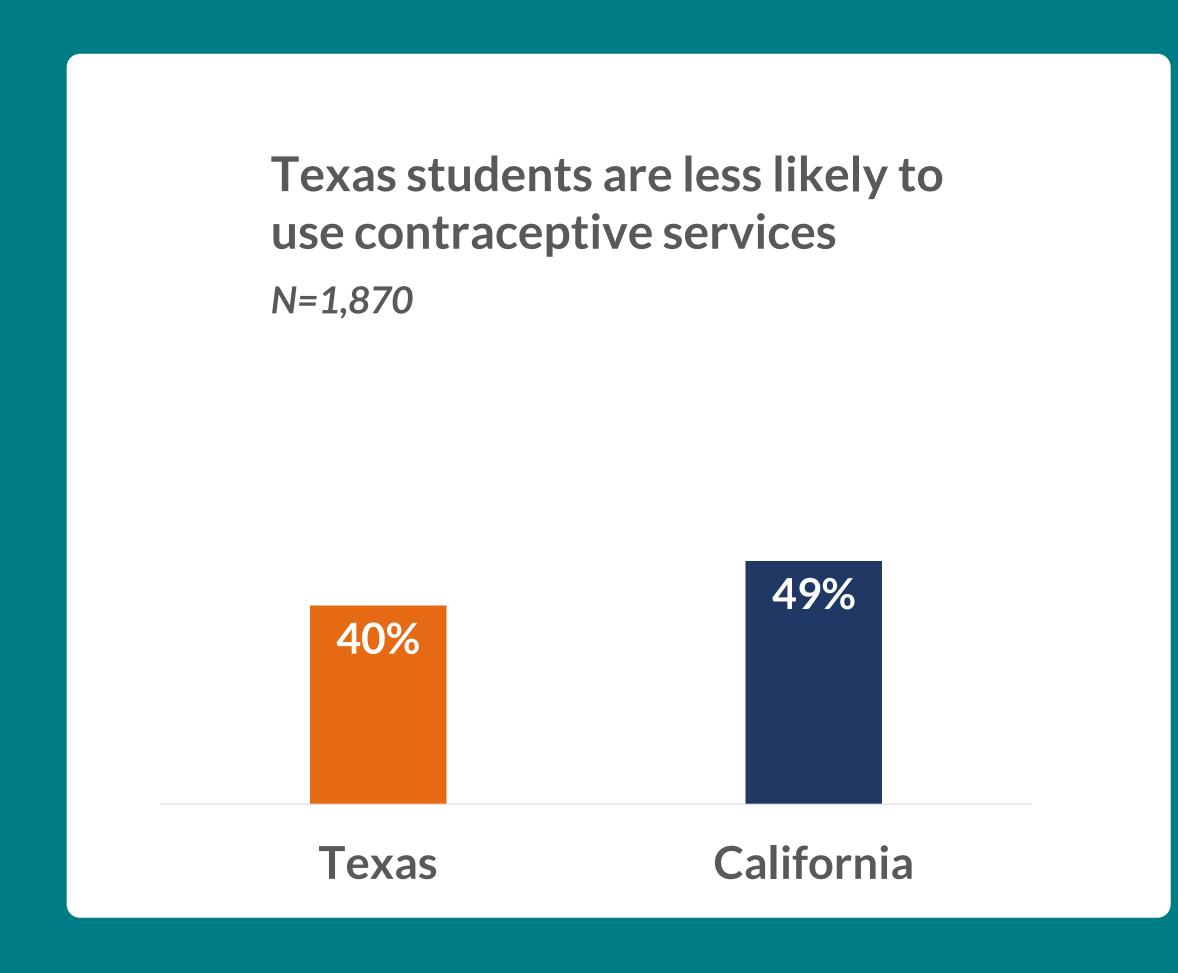
Introduction

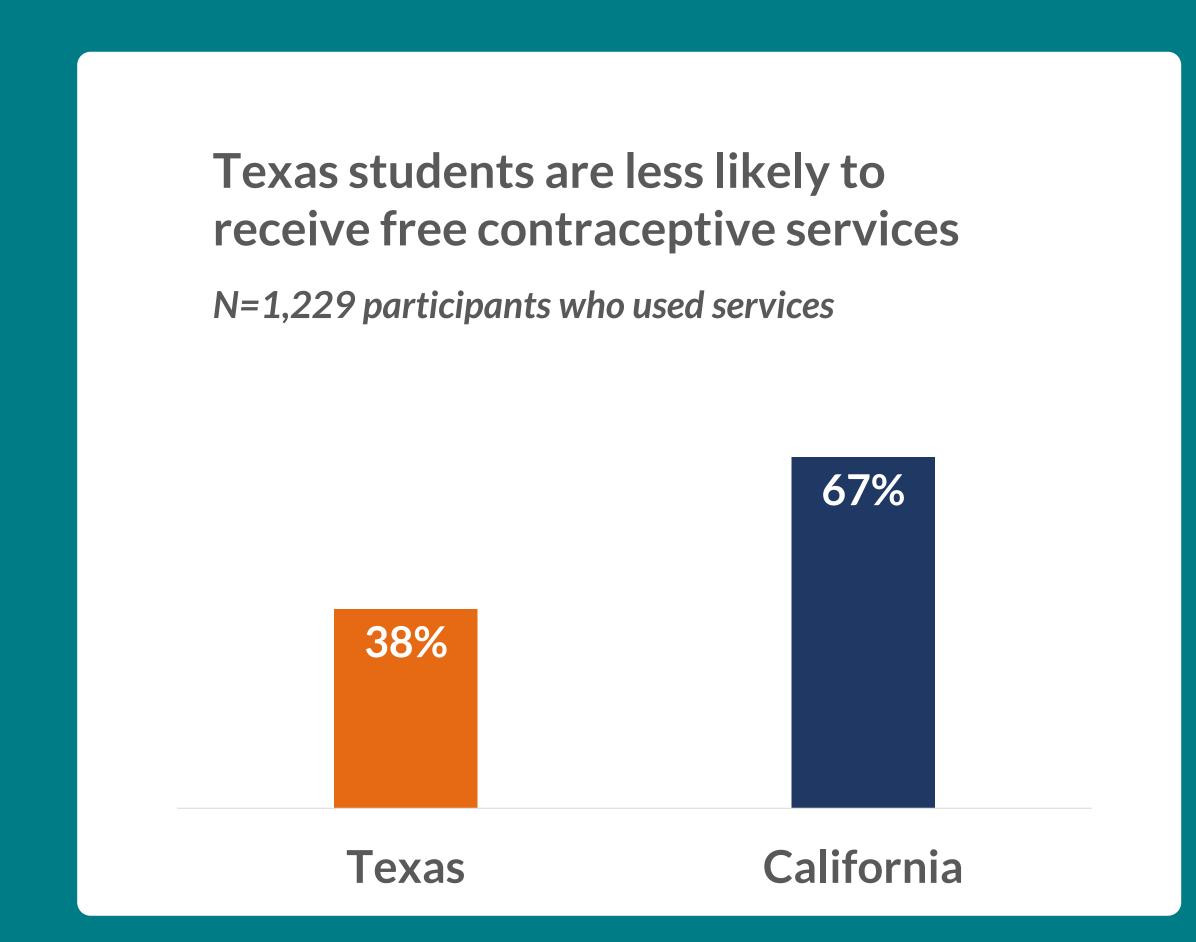
- Funding for family planning services for people with low incomes is more restricted in Texas than California. 1-2
- Differences in the state policy and program environment may influence whether cost is a barrier to contraceptive access.
- We examine differences in use of contraceptive services between community college students in California and Texas, along with perceived cost barriers to contraceptive care.

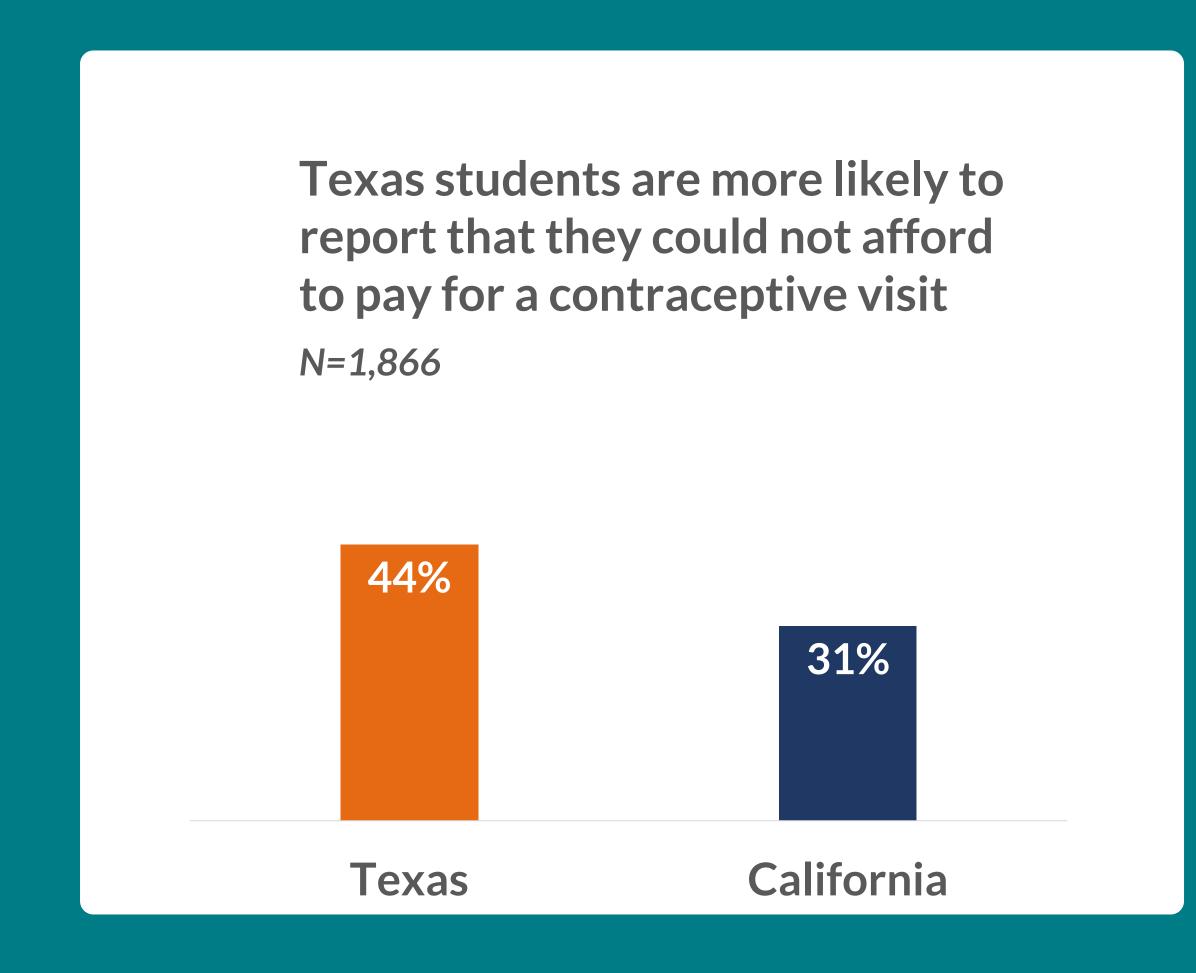
Methods

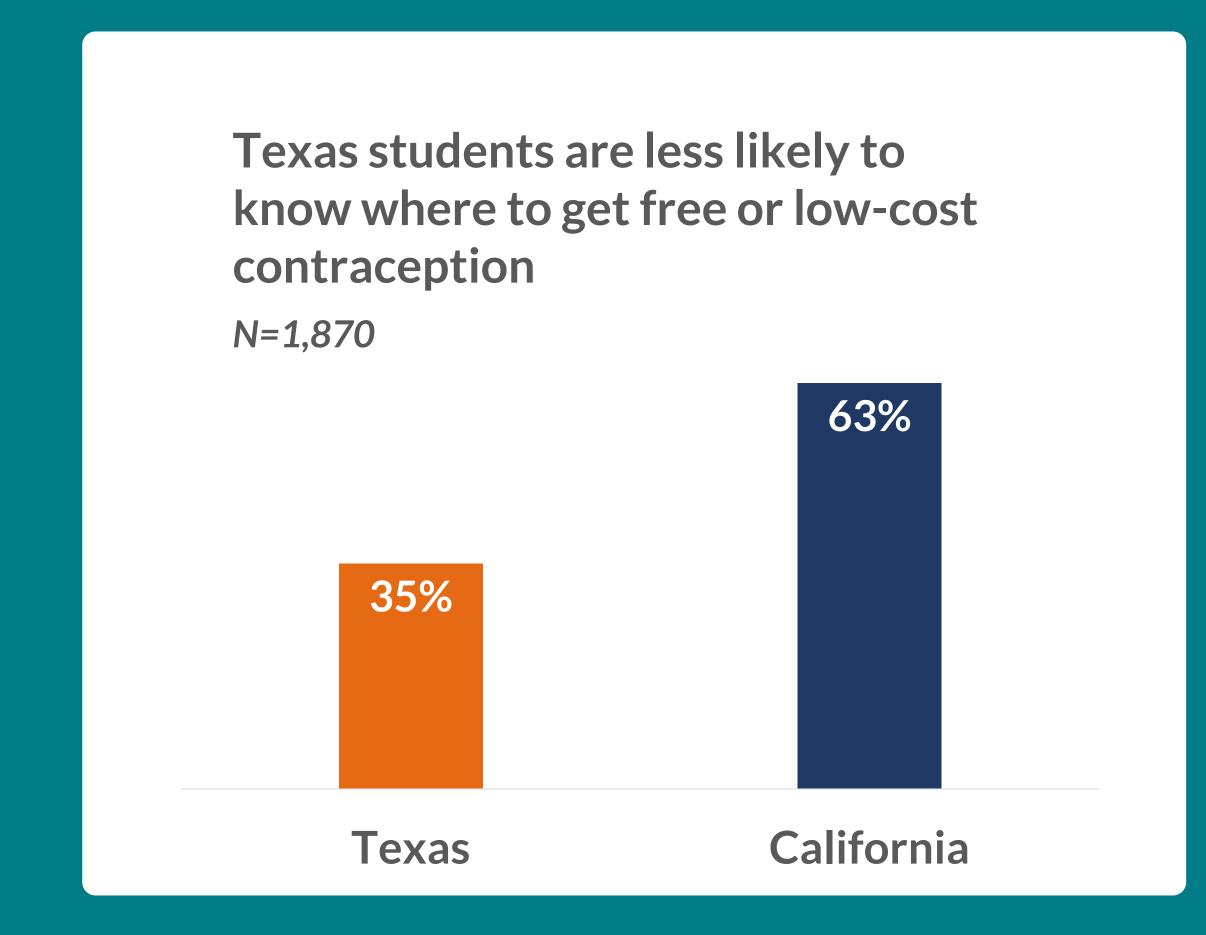
- We analyzed baseline data from an ongoing randomized controlled trial testing a multi-level intervention with health providers and students.
- Sites included 29 community colleges in California and Texas.
- Sample included 1,870 students ages 18-25, assigned female at birth, sexually active, and not desiring pregnancy.
- Surveys collected April 2018-June 2022.
- We used multivariable mixed-effects logistic regression with random intercepts for site to compare use of contraceptive services by state, health insurance status, and other sociodemographic characteristics.
- We also assessed use of free contraceptive services, perceived cost barriers to contraception, and knowledge of where to get free or low-cost contraception.

Community college students in Texas have less access to affordable contraceptive services than students in California









P < .05 for all graphs, based on univariate mixed-effects logistic regression, clustering by site

Conclusions

- Students in Texas have less access to affordable contraceptive services than those in California, reflecting policy changes at the state level that have restricted funding for family planning.
- State differences are significant even after accounting for the important role of insurance and sociodemographic factors in contraceptive access.
- State policies and programs can help address young adults' cost barriers to contraception during their pursuit of higher education.

Additional Results

Received contraceptive services from health care provider in past year (N=1,870)

	Odds
Characteristic	Ratio
Texas (Ref: California)	0.73*
Age 18-19 years (Ref: Age 20-25 years)	0.94
Race (Ref: White)	
Latinx	0.96
Black	0.82
Asian	0.78
American Indian/other/multi-racial	0.75
Speaks language other than English at home	0.57***
Receives public assistance	1.04
Insurance (Ref: Private)	
Uninsured/Don't know	0.63***
Public	0.73*
<u>Has children</u>	1.48

^aMultivariable mixed-effects logistic regression models included random effects for site; *p<.05, *** p<.001

References

¹Guttmacher Institute, 2022. "State Family Planning Restrictions."

Acknowledgements

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Take a picture to download the poster or contact jennifer.yarger@ucsf.edu

² Rajni, Salganicoff, Sobel, Gomez, 2019. "Financing Family Planning Services for Low-income Women: The Role of Public Funding." Kaiser Family Foundation.