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Condom Dispenser Program

Madilynn Turner

California State University, Monterey Bay

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Condom Dispenser Program at California State University Monterey Bay

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Abstract

Health and Wellness Services (HWS) at California State University Monterey Bay (CSUMB) takes an integrative health approach to support the CSUMB campus community. There six entities that make up HWS, however, the Condom Dispenser Program (CDP) was implemented under Health Promotion and Education (HPE). The mission of HPE is to ensure that CSUMB community members are reaching holistic wellness through the adoption of healthy behaviors. This goal is met through programming, outreach, and education that is provided.

The need that was discovered through analysis of the National Collegiate Health Assessment (NCHA) was that students are not using condoms to prevent sexually transmitted infections (STIs). The contributing factors are the cost, lack of convenient access, social norms, and lack of knowledge on how to use a condom effectively. The consequences that can stem from not using condoms to prevent STIs would be increased risk and undiagnosed STIs.

In order to begin to address some of the contributing factors HPE collaborated with Monterey County Health Department, Student Housing and Residential Life, Campus Planning and Development, Campus Facilities, and the Dean of Students to install 14 external condom dispensers in the housing facilities. The expected outcomes were to address the convenience and cost barrier that students have when accessing condoms. The results that were gathered from students had a low response rate and conclusions cannot be fully made, however, the project will continue on past the graduation of the student intern.

Keywords: condom distribution program, CDP, college campus, health promotion and education, sexual health resources
Agency and Community Served

Health and Wellness Services (HWS) at California State University Monterey Bay (CSUMB) is comprised of six different entities that focus on the idea of an integrative health approach. The Campus Health Center (CHC), Personal Growth and Counseling Center (PGCC), Student Disability Resources (SDR), Campus Chaplaincy, Campus Advocate, and Health Promotion and Education (HPE) support this approach through “emphasizing the partnership between the student and the health practitioner in strengthening one's overall well-being” (Health and Wellness Services, n.d.). Through an integrative and collaborative approach HWS is able to support and engage students, faculty, and staff in promotion of holistic wellness.

Specifically, HPE has a mission to, “encourage and enhance practices of wellness among members of the CSUMB community” (Health Promotion and Education, n.d.a). The goals that Health Promotion and Education have in order to ensure that CSUMB community members are reaching holistic wellness are to increase knowledge and awareness, facilitate the adoption and maintenance of health behaviors, offer health education programs, promote awareness of services, and provide practical experience for peer educators, interns, and others that want to pursue a career in the health field (Health Promotion and Education, n.d.a). The programs and outreach that HPE offers enable these goals to be met.

Through the POWER Peer Educator program, students are trained “to provide primary prevention education and health promotion to foster academic success and well-being” (Health Promotion and Education, n.d.b). To become a certified Peer Educator one must complete a two unit course and pass The BACCHUS Initiatives of NASPA peer educator exam. The Conversation Couch Program emphasizes inclusiveness and interactive discussion through providing students with the opportunity to discuss and share their opinions in a welcoming space
Lastly, the Otter Be Well Program encourages students to improve their mental and physical wellness through a physical activity program which incorporates a peer assistant to support the student and encourage the physical activity that is chosen (Health Promotion and Education, n.d.d). As Health Promotion and Education are under the category of Health and Wellness Services the primary community being served is CSUMB, specifically the students.

In the Spring of 2018, there were a total of 7,161 students, and of those 63 percent (4,532) were female, 40 percent were from the local tri-county area, and within that 40 percent, three quarters were from Monterey County. The majority (77%) of students were between the ages of 18-24. As for race and ethnicity, 42 percent were Latino, 30 percent were White, and 8 percent were two or more races (Institutional Assessment and Research, 2018). The demographic breakdown is essential to understanding the target population which was CSUMB students.

**Problem Description**

Sexually transmitted infections (STIs) “are passed from one person to another through sexual activity including vaginal, oral, and anal sex” (Center for Disease Control and Prevention [CDC], 2016b). The Center for Disease Control and Prevention (CDC) estimates that out of the 20 million new cases of STIs that occur each year in the United States, 50 percent are diagnosed in the age range of 15-24 (CDC, 2017). This is significant to CSUMB because there are 77 percent of the student population that are between the ages of 18-24 (Institutional Assessment and Research, 2018). Over the course of five years the percentage of students at CSUMB that are protecting themselves from the transmission of STIs has decreased substantially. In 2015, 49.2 percent of students self-reported using an external condom when participating in sexual activity however, the latest survey shows that in 2018 only 40.7 percent of students are protecting
themselves from STIs. This number is almost 6 percent lower than the national average among college students (National College Health Assessment, 2018). Finally, STIs impact women and they will bear long term health consequences at a greater rate than men (CDC, 2011). This is relevant to CSUMB students because majority are women.

Individual Contributing Factors

Risk Factors

At an individual level, the lack of knowledge associated with condom use puts individuals at a greater risk of not using condoms. For example those that do not know how to use a condom effectively or do not having confidence in using a condom properly (Farrington, Bell, & DiBacco, 2016) will be more likely to misuse condoms or not use condoms at all. A study completed by the Kinsey Institute for Research in Sex, Gender, and Reproduction found that of those that used condoms, “28% reported breakage or slippage” and an even greater percentage reported not receiving proper instruction of how to use a condom (Sanders, Graham, Yarber, Crosby, 2003, para. 1). As external condoms are one of the only methods of contraception that protect against STI transmission as well as pregnancy it is important that individuals use condoms effectively and consistently. The second risk factor would be those that are sexually active and between the ages of 15-24. As previously mentioned, the CDC estimates that this age range makes up about one quarter of the sexually active population, but accounts for half of the 20 million new STIs diagnosed annually in the United States (CDC, 2017). This is prevalent to the CSUMB student population because majority fall in that age range.

Protective Factors

The first protective factor would be the individuals’ choice to abstain from being sexually active (CDC, 2016a). Abstaining from sexual activity is the most reliable way to avoid infection.
However, for those that choose to be sexually active, using condoms effectively and consistently will lessen the risk of contraction. These protective factors can potentially reduce the likelihood of an individual contracting STIs, other infections, or pregnancy.

**Relationship Contributing Factors**

For those that choose to have sexual relationships there are ways to protect yourself and your partners from STIs. Reducing your number of sex partners can greatly reduce the possibility of contracting an STI (CDC, 2016a). Secondly, being in a mutual monogamy relationship is a protective factor because this is a relationship where both partners agree to only be sexually active with one another (CDC, 2016a). A mutual monogamy relationship results in less of a likelihood that they would contract or transmit an STI or HIV (Foster, 2014). Finally, getting tested and discussing the results with your partners before having sex is a way to protect the health of you and your partner(s) (CDC, 2016a). Taking precautions when participating in sexual activity is the best way to prevent contracting or giving an STI.

**Community of Society Contributing Factors**

At a societal level, a risk factor would be the “norms that actively discourage condom use” (Farrington, Bell, & DiBacco, 2016). An example of this is the conversations that peers have around what a “hassle” using condoms are because they are not conveniently available. Ensuring that one has the proper education on how to use condoms effectively, has convenient access to condoms, and engages in open discussions about sexual health and condom use will begin to decrease the norms around discouraging condom use. The socio ecological model that is displayed below is a visual representation of the contributing factors that have been mentioned.
Capstone Project Description and Justification

Project Purpose

The overall purpose of the Condom Dispenser Program is to increase access and promote awareness of condom use to reduce the risk of contracting an STI. This will be accomplished through the implementation of condom dispensers in the common areas of on-campus housing. The condoms are provided for free to eliminate the cost barrier that students face. The last purpose of the project is to educate students and provide resources about sexual health. This will be accomplished through displaying a QR code on an informational graphic. The QR code links to a webpage that provides materials on prevention methods, how to use condoms properly and other resources.

Project Justification

The Condom Distribution Project is shown to have success when the following considerations are taken into account: condoms are provided free of charge, wide scale
distribution occurs, implementation of a social marketing, promotion of risk-reduction, and community mobilization (CDC, 2018a). There is correlation between the considerations that the CDC recommends and the implementation strategy used for this capstone project. Providing condoms free of charge and increasing the locations that students can access condoms will ensure success of implementing condom dispensers. According to an exploratory study that was published in 2016, students perceived condoms to be accessible and available following the implementation of 10 condom dispensers that were placed around a large public university in the Southeastern United States. This study shows that through a short period of time there were students that were more aware, resulting in greater use of condoms (Francis, Noar, Widman, Willoughby, Sanchez & Garrett, 2016). The implementation of condom dispensers will alleviate an access barrier and provide greater convenience and awareness.

A second justification for this project is based on results from a study titled, “Perceptions of a Campus-wide Condom Distribution Programme: An Exploratory Study.” The results found that students’ perception of availability and accessibility of condoms was heightened following the implementation of the dispensers (Francis, Noar, Widman, Willoughby, Sanchez & Garrett, 2016). The results of this survey are significant to this capstone project because a goal and expected outcome were to increase students’ awareness about the access they have to free condoms.

When looking at ways in which HIV/AIDS has been prevented, “peer group intervention focused on personal as well as work-related HIV prevention can reduce health workers' risky behaviors in their personal lives” (Study Data from M.M. Mbeba and Colleagues Update Understanding of HIV/AIDS, 2011). This correlates with the Condom Distribution Program because although the condom dispensers will be installed in on-campus housing, students can
inform other students who do not reside in on-campus housing about the access they have to free
condoms at the Campus Health Center. Finally, the responses from the survey sent to the
Residential Advisors (RAs) showed that 66.7 percent do not have condoms available to their
students. There were barriers that RAs felt for the lack of condom distribution which were not
having time (66.7%), not knowing where to pick up condoms (22.2%), and not wanting to
personally distribute (11.1%). The full survey can be seen in Appendix B and the key results
discussed can be seen in Appendix C.

implementation process

The implementation process began with planning, gathering stakeholders, and finding an
evidence-based program that discussed important steps to take to ensure the implementation is
successful in reaching the target audience. Through planning and discussion it was determined
that the key stakeholders were Health Promotion and Education, Student Housing and
Residential Life, and the Chronic Disease Prevention Coordinator for the Monterey County
Health Department. During the Spring of 2019, an expected implementation timeline was
completed. The dispensers would be delivered over the summer break to the HPE office, the
HPE intern would then tape-off locations, and the housing facilities would install the dispensers.
Following the return to the Fall 2019 semester, the inventory would be counted, condoms would
then be stocked, and programming and promotion of this new resource would overlap with the
events and programming of the RAs. However, there were unforeseen circumstances, key
stakeholders that were not approached, and documentation that had not been discussed. A full
scope of work can be seen in Appendix A.

The implementation timeline was extended and the installation of the dispensers was
delayed. The main barrier that implicated the schedule for this project was the lack of
communication and position changes that occurred over the summer session. Following this, communications were continued and Campus Planning and Development was contacted as an additional stakeholder. The process was able to move forward with proper documentation which was signed by the Dean of Students. With the new stakeholders’ established and proper documentation completed, a second accessibility survey was done (the progress of taping off and accessibility surveys can be seen on Appendix D) and the 14 dispensers were completely installed October 3, 2019. The initial stocking of the condom dispensers took place on October 10, 2019 and this is when the infographic was displayed (Appendix E). The webpage that the QR code links to can be seen on Appendix F.

Project Results

The assumed outcomes of this project were that the dispensers would be beneficial to provide students who live on campus with convenient access to free condoms, there would be an increased knowledge of STI prevention methods, and students who live on campus would share with students that do not, where and when they have access to free condoms.

To assess the student perception, a retrospective pre-post survey was developed and allowed students perception to be captured (Appendix G). There were a total of 20 respondents who took the survey and majority who took it resided in North Quad. Sixteen out of the twenty respondents knew that they had access to free condoms before the dispensers were installed, and fourteen knew the location of the dispenser that they would have access to. When asked on a scale of one to five how likely they are to utilize the condom dispenser in your housing area with five being extremely likely, two student responded with a five, seven students responded with a four, two responded with a three. When looking at the question about utilizing the QR code to access additional resources majority of the answers were rated a one or a two. Lastly, 40 percent
were extremely likely to tell a friend that does not live on campus where they can access free condoms. This was the data that was collected, however, there was such a low number of students that took the survey that this does not create the means for definite conclusions.

The final result is in relation to the sustainability of the Condom Dispenser Program. Resulting from a meeting that the student intern had with Student Housing and Residential Life, there would be a student assistant that was designated to be responsible for the restocking of the dispensers. This individual will coordinate with Health Promotion and Education to ensure that ordering of the condoms is done and the dispensers can be stocked.

**Conclusion & Recommendations**

Overall, there should also be more evaluation of the program because the response rate for student perception of the CDP was not enough to fully make conclusions. However, based on the results that were collected from students I would make would be to follow up with students and learn how they would access additional information about the dispenser program, STIs, or other related information. This is in response to the majority of students that responded that they were not likely to utilize the QR code that is on the front of the dispenser, which was to take the place of the typical pamphlets or flyers that were not being taken when this program was done at another location supported by the Monterey County Health Department. A second recommendation would be to create a new page that would be laminated and put in the dispenser that would state the availability of internal condoms, latex free, and lubricant is available in the Campus Health Center. This is in response to a question that was asked by one of the RAs during a meeting.
**Personal Reflection**

Through the process of planning, coordinating, and evaluating a program I learned key skills that I will be able to take with me into my professional career. From the moment that I began the first semester of the field placement course I was nervous and feared the idea of creating a project or program and then having that be something that my name is attached to. Being an inter with Gary and Lindsay at the Health Promotion and Education office I gained confidence in myself through the greater responsibility that I received throughout my three semesters there. The idea of implementing this capstone was brought to my attention by Evelyn who works for the Monterey County Health Department Communicable Disease Program. We met at a tabling event and this was during my first semester at my internship. I was unsure about ideas for capstone and she said if this is something that I wanted to do then she would be happy to support it. Beginning my second semester I was working on creating infographics about the National College Health Assessment data and realized the decline in those students that self-reported condom use. This was surprising to me because the student population at CSUMB is continuing to grow, however the health survey data did not seem to be reflecting that. As I went into a little research there were things like accessibility, cost, and norms that can get in the way of students not using condoms to prevent STIs. As I continued to learn more about target populations and those who are at a greater risk. CSUMB students fit two of the categories for those who are at a greater risk of contracting STIs, women and those between the ages of 15-24.

Through research and previous interest in learning more about sexual health education I brought the idea back to my mentors with a plan as to what would need to be done based on a similar program that is used to prevent HIV and is supported by the CDC. When this was done
and showing that the data and research matches the decision was made that my capstone would be the implementation of a 14 unit Condom Dispenser Program.

When looking back there were skills that I was learning on the job and this enabled me to learn even more about the campus culture and community at CSUMB. Previous experiencing has allowed me the opportunity to work with the student organizations side, but this was entirely a new learning curve. I learned of the time that is needed to ensure that all key stakeholders are brought to the table and the importance of follow up emails, phone calls, and meeting in person in order to get the answers needed to move forward. I learned communications skills that were the main essential in the completion of this project. The second greatest lesson I think I learned was adaptability and the importance of back up plans. Sometimes the easiest way to get answers from the right people were to just walk to their office and have a face to face conversation. Relationship building and knowing who to contact in order to advance the flow of the project when it got stuck created momentum that was able to get the implementation process started and completed.

Overall, I have been able to have experience with the work that must be done in order to sustain a successful program for example of there was greater time for evaluation I would have loved to find out how students access additional resources and be able to meet those student needs. Throughout my undergrad experience at CSUMB in Collaborative Health and Human Services I have learned key skill in professional communication, collaboration, leadership, systems management, research methods, and conflict resolution that were all key skills in being able to complete this capstone project. I am grateful for the experiences that I have had with my internship because these are not skills that will leave me when I graduate, but will be carried into my future professional career.
References


CDC. (2016b). Sexually Transmitted Disease- What are STDs? Received from https://www.cdc.gov/std/general/default.htm


Health and Wellness Service (n.d.) Retrieved from https://csumb.edu/hws

Health Promotion and Education. (n.d.a). Retrieved from https://csumb.edu/healthpromotion

Health Promotion and Education. (n.d.c). Conversation Couch. Retrieved from
https://csumb.edu/healthpromotion/conversation-couch

Health Promotion and Education. (n.d.d). Otter Be Well. Retrieved from
https://csumb.edu/healthpromotion/otter-be-well

https://csumb.edu/iar/enrollment-fast-facts-2018-fall


Study Data from M.M. Mbeba and Colleagues Update Understanding of HIV/AIDS. (2011). Obesity, Fitness & Wellness Week, 2248. Retrieved from
http://link.galegroup.com/apps/doc/A255452319/AONE?u=csumb_main&sid=AONE&xid=f81c67a1
### Appendix A - Full Scope of Work

<table>
<thead>
<tr>
<th>Activities</th>
<th>Date</th>
<th>Outputs</th>
<th>Supporting Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planning Meeting</td>
<td>January 29, 2019</td>
<td>Agreed upon CDP as capstone project</td>
<td>Gary Rodriguez, Lindsay Wetzel Polin, and Madilynn Turner</td>
</tr>
<tr>
<td>Research of other CDPs</td>
<td>February 5- February 19, 2019</td>
<td>Research on how to have a successful CDP</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Planning Meeting-Research follow up</td>
<td>February 20, 2019</td>
<td>Decided who to reach out to for collaboration</td>
<td>Gary Rodriguez, Lindsay Wetzel Polin, and Madilynn Turner</td>
</tr>
<tr>
<td>Scheduling</td>
<td>February 21, 2019</td>
<td>Monterey County Health Department (MCHD) and Student Housing &amp; Residential Life (SHRL) meeting planned</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Meeting with SHRL</td>
<td>February 27, 2019</td>
<td>Gained support of the CDP</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Created Google Form</td>
<td>March 5, 2019</td>
<td>Form will gather interest from the RAs</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Planning Meeting</td>
<td>March 7, 2019</td>
<td>Emailed google form to Robyn DoCanto and was then forwarded to RAs</td>
<td>Gary Rodriguez, Lindsay Wetzel Polin, and Madilynn Turner</td>
</tr>
<tr>
<td>Meeting with MCHD</td>
<td>March 13, 2019</td>
<td>Discussed the logistics of the CDP: implementation, budget and possible installation timeline</td>
<td>Evelyn Alvarez, Gary Rodriguez, Lindsay Wetzel Polin, and Madilynn Turner</td>
</tr>
<tr>
<td>Planning Meeting with SHRL</td>
<td>March 27, 2019</td>
<td>Recapped meeting with MCHD. Agreed upon timeline for installation, spaces where dispensers will be installed, and use of QR code</td>
<td>Robyn DoCanto, Andrew Porteous, Gary Rodriguez, Lindsay Wetzel Polin, and Madilynn Turner</td>
</tr>
<tr>
<td>Communication with MCHD</td>
<td>April 2, 2019</td>
<td>Finalized the ordering of 14 CDs. Will take 3 weeks to get delivered</td>
<td>Madilynn Turner and Evelyn Alvarez</td>
</tr>
<tr>
<td>Google Form Disbursement</td>
<td>April 3, 2019</td>
<td>Finalized Google Form for the incoming RAs, Robyn sent to Community Directors</td>
<td>Robyn DoCanto and Madilynn Turner</td>
</tr>
<tr>
<td>Event Description</td>
<td>Date</td>
<td>Details</td>
<td>Responsible Parties</td>
</tr>
<tr>
<td>-------------------</td>
<td>------</td>
<td>---------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Planning and Mapping</td>
<td>May 2, 2019</td>
<td>Rough locations of dispensers agreed upon</td>
<td>Robyn DoCanto and Madilynn Turner</td>
</tr>
<tr>
<td>Dispensers arrived at Health Promotion and Education Office (HPE)</td>
<td>July 2, 2019</td>
<td>Lindsay picked up the dispensers and created cardboard stencil</td>
<td>Lindsay Wetzel Polin and Evelyn Alvarez</td>
</tr>
<tr>
<td>Mapping and Communication</td>
<td>July 5, 2019</td>
<td>Locations taped off with and blueprints sent to facilities and other stakeholders</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Mapping and Communication</td>
<td>August 4, 2019</td>
<td>Re-tapped dispensers to meet the accessibility requirement of max 48 inches from the ground.</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Timeline Adjustment and Communication</td>
<td>August 5-28, 2019</td>
<td>Campus Planning and Development (CPD) contacted to assist facilities in the installation. New accessibility survey, Project Request Form, and approval to be completed</td>
<td>Josh Goin, Campus Facilities, CPD, and Madilynn Turner</td>
</tr>
<tr>
<td>Student Survey</td>
<td>August 21, 2019</td>
<td>Student survey drafted</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Project Request Form Approved</td>
<td>August 29, 2019</td>
<td>Dean of Students contacted and signed form</td>
<td>Lindsay Wetzel Polin and Leslie Williams</td>
</tr>
<tr>
<td>QR Code</td>
<td>September 3, 2019</td>
<td>Got in contact with University Communications and established QR code</td>
<td>Allen McClellan, Joan Iguban Galiguis, and Madilynn Turner</td>
</tr>
<tr>
<td>Survey of Accessibility</td>
<td>September 6, 2019</td>
<td>Survey is completed and recommendations are made</td>
<td>Edward Redono</td>
</tr>
<tr>
<td>Web Page is Published</td>
<td>September 13, 2019</td>
<td>Final verbiage of web page was uploaded</td>
<td>Lindsay Wetzel Polin, Gary Rodriguez and Madilynn Turner</td>
</tr>
<tr>
<td>Event</td>
<td>Date</td>
<td>Description</td>
<td>Responsible Part of Staff</td>
</tr>
<tr>
<td>--------------------------------------------</td>
<td>--------------------</td>
<td>--------------------------------------------------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>Advertisement</td>
<td>September 13, 2019</td>
<td>QR code generated and info graphic is made</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Dispensers picked up from HPE office</td>
<td>September 19, 2019</td>
<td>Installation process started</td>
<td>CSUMB Facilities</td>
</tr>
<tr>
<td>Student Survey</td>
<td>September 23, 2019</td>
<td>Student survey finalized</td>
<td>Madilynn Turner, Lindsay Wetzel Polin and Gary Rodriquez</td>
</tr>
<tr>
<td>Dispensers are installed</td>
<td>October 3, 2019</td>
<td>All condom dispensers are installed</td>
<td>CSUMB Facilities</td>
</tr>
<tr>
<td>Initial stocking of dispensers</td>
<td>October 10, 2019</td>
<td>All dispensers are stocked and infographics are displayed</td>
<td>Madilynn Turner and Lindsay Wetzel Polin</td>
</tr>
<tr>
<td>Evaluation</td>
<td>October 10-31, 2019</td>
<td>Condom dispensers are restocked and condoms are counted</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Presentation</td>
<td>October 28, 2019</td>
<td>Presentation done at the monthly RA meeting to talk about the CDP.</td>
<td>Madilynn Turner</td>
</tr>
<tr>
<td>Student Survey</td>
<td>November 4, 2019</td>
<td>Student survey is sent out</td>
<td>Katie Hill, RAs, and Madilynn Turner</td>
</tr>
<tr>
<td>Program Sustainability Meeting</td>
<td>November 8, 2019</td>
<td>A SHRL student assistant will coordinate with HPE in order to maintain stocked condom dispensers.</td>
<td>Madilynn Turner, Robyn DoCanto, James Kimbrell</td>
</tr>
</tbody>
</table>
Appendix B

Google Form that was sent to Residential Advisors.

* Required

Where are you an RA? *

- Residential Hall
- North Quad
- Promontory
- East Campus

Do you have condoms available to students who reside where you are an RA? *

- Yes

If yes, how many would you say you distribute a week?

- 1-5
- 5-10
- 10-15
- 15-20
- 20+

If no, what is a barrier to distributing condoms?

- I did not know that was an option
- I do not know where to pick up condoms
- I do not have time to distribute condoms
- I do not want to personally distribute condoms

How likely are you to encourage the use of the condom dispensers, if they are to be installed? *

1 2 3 4 5

I will not mention it to my residents

I will discuss this resource at all meetings.
Appendix C

Most relevant responses from the Google Form that was sent to the RAs

1. Do you have condoms available to the students who reside where you are an RA?
   a. Yes
   b. No

2. If no, what is a barrier to distributing condoms?
   a. I did not know that was an option
   b. I do not know where to pick up condoms
   c. I do not have time to distribute condoms
   d. I do not want to personally distribute condoms
66.7%
11.1%
22.2%

I did not know that was an option
I do not know where to pick up condoms
I do not have time to distribute condoms
I do not want to personally distribute condoms
Appendix D

Figure 1: This was the initial taping off of the 14 dispenser locations that was completed by the Health Promotion and Education Intern.

Figure 2: This was the second taping off of the dispensers that was completed by the Health Promotion and Education Intern. This was done in order to meet the 48 inch maximum height requirement, sent via email, in order to be accessible to all students.

Figure 3: This was the final survey of the locations which was completed by the Inspector of Records and sent to Campus Planning and Development. This was forwarded to Campus Facilities in order to complete the installation of the dispensers.
Appendix E

Informational Graphic that was displayed on the dispenser

Condom Dispenser Program
Please take only what you need

Did you know? 15-24 year olds
make up 50% of the 20 million new STD cases per year in the U.S.
-CDC

Scan the QR code to access educational material and resources about prevention, how to use condoms and testing locations.

The Condom Dispenser Program is a student capstone project that is a collaborative effort between Health Promotion & Education, Student Housing & Residential Life, Campus Planning & Development, Campus Facilities, Dean of Students and the Monterey County Health Department Division of Communicable Disease.
Appendix F

Webpage that was linked to the QR code on the infographic

Condom Dispenser Program

According to the National Collegiate Health Assessment (NCHA) conducted at CSUMB in spring 2018, 54.8% of students who took the survey reported that they or their partner used an external condom the last time they had vaginal intercourse, which prevents the transmission of STDs/STIs. This percentage is 5.0% lower than the national NCHA comparison group and is 4.4% lower than when the assessment was previously conducted at CSUMB in spring 2015.

The Condom Dispenser Program (CDP)* aims to increase access and promote awareness of condom use to reduce the risk of STD/STI transmission. The links below provide more educational material and resources:

Prevention

How to prevent Sexually Transmitted Diseases (STDs)

STD Prevention Infographic

Monterey County HIV program

When to get tested

Condoms - How to use them

External condoms

Internal condoms

Dental Dams

Additional Resources

Monterey County HIV/STD Resource Guide - Testing Locations (the Campus Health center is a testing location)

Monterey County STD Partner Notification Services

*The CDP is a collaboration between Health Promotion & Education, Student Housing & Residential Life, Campus Planning & Development, Campus Facilities, Dean of Students and the Monterey County Health Department Division of Communicable Disease. This collaborative effort has provided 14 dispensers to be installed across on-campus housing units.
Appendix G

Google Form to understand students’ perception of the CDP

* Required

Where do you reside on campus? *

Choose

Did you know, that as a student at CSUMB, you had access to free condoms before the condom dispenser was installed? *

☐ Yes
☐ No

Do you know where the dispenser is located that you would have access to? *

☐ Yes

How likely are you to appropriately utilize the condom dispenser in your housing area? *

1 2 3 4 5

Not at all likely ☐ ☐ ☐ ☐ ☐ Extremely likely

How likely are you to utilize the QR code that is located on the front of the dispenser to access additional resources? *

1 2 3 4 5

Not at all likely ☐ ☐ ☐ ☐ ☐ Extremely likely

How likely are you to tell a friend who does not live in campus housing that they can get free condoms through Health and Wellness Services? *

1 2 3 4 5

Not at all likely ☐ ☐ ☐ ☐ ☐ Extremely likely