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Practicum Site: James Ferguson RISE Fellowship

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Understanding Utilization of Telemedicine in Sexual Healthcare Amongst Adolescents and Young Adults in Baltimore, MD

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Introduction: During the COVID-19 pandemic to minimize reductions in care, the Centers for Disease Control and Prevention called for flexible, pragmatic approaches to traditional sexual health services. Despite its unique challenges in serving adolescents, telemedicine may fulfill a void in existing health disparities related to care delivery. This study seeks to understand care seeking behaviors and telemedicine utilization amongst urban Adolescents and Young Adults (AYAs) enrolled in the COVID-19 Youth Study in Baltimore, MD during the COVID-19 pandemic.

Methods: The COVID-19 Youth Study utilized cross sectional data, from a COVID-19 survey. The survey via telephone and inquired about school closures and stay at home orders following March 13, 2020. 194 participants were included in the study from four previously established sexual health studies. Participants agreed to be contacted for further research, were 13-25 years old, and were at risk or had a current STI diagnosis at the time of enrollment. Demographics, fear of COVID-19 exposure, and care seeking behavior data were evaluated using multivariate logistic regression analyses.

Results: Our regression analysis revealed a statistically significant association between fear of COVID-19 exposure and an increased likelihood for a doctor visit. (OR: 2.37, 95% CI: 1.02, 6.15). There were significant associations in the adjusted model for HIV status and insurance type. Among patients who had a provider visit, the odds of a telemedicine visit were increased for those living with HIV (OR: 2.41, 95%CI: 1.05 5.51) and decreased for those who had public health insurance (OR: 0.34, 95%CI: 0.14, 0.82).

Conclusions: Despite the ongoing pandemic, and fear of COVID-19 exposure, AYAs in this sample continued seeing a doctor during the COVID 19 pandemic. Overall majority of the study participants reported being willing to use telemedicine, however further investigation into factors that impact ability vs. willingness is warranted.