Abstract: Sexually transmitted infections (STIs) have become a major health concern among college students in the United States. As the incidence of STIs continues to increase, this study compared several behavioral risk factors of STIs among female college students from two different educational settings including condom use, the number of sexual partners, type of sex (anal or vaginal), and drinking habits. This study also compared different socioeconomic risk factors (low income and parent’s education level) that have been shown to be related to an increased incidence of STIs among college-aged students. Of the 278 college students who were asked to participate, 143 female students responded with 68 responses from female students attending a four year university and 75 students attending a two year community college. This cross-sectional design study was based on two models: the precautionary-health-behavior model (where individuals act regardless of consequences) and the health-behavior-change model (where individual behaviors either increase one’s risk of contracting or preventing an STI). Surveys were collected and data were analyzed using chi-square, linear, and logistic regression analyses to determine which educational setting has females with more STI behavioral risk factors and to also determine if socioeconomic status and parents’ education levels impact those behavioral risk factors. The authors concluded that female college students exhibited different behavioral risk
factors based on their educational setting. Two-year community college students were at greater risk of contracting STIs due to the higher average number of sexual partners, while four year university students were at higher risk due to the low use of condoms during intercourse. We hope that this research could help increase awareness of STIs among female college students which can lead to lower STI incidence rates regardless of the institution type. Universities and colleges could alter programs based on the risk factors that are more prevalent among their student population.

**Christian worldview integration:**

Through Christ, we are each given the gift of wisdom and we are to use this gift as a means of working to pursue deeper knowledge and understanding of the world around us. This involves the pursuit of knowledge that will allow us to undertake work and research serves a meaningful purpose. As Christians, we are called to love and care for all people. This can be translated into the field of public health where one of the main goals is to work towards achieving health and well-being for all human beings. As Christians in the field of public health, we are called to help others with all of the strength and energy that God supplies us (I Peter 4:10-11). In order to do this, it is important to take the time to pursue knowledge through research in a way that honors God and His children. Working in the area of epidemiology within the field of public health, it is important to treat the people who are being interviewed with respect and love. This means ensuring that each study participant is made fully aware of the purpose of the research and aware that they can withdraw from participation or decline to answer questions based on their personal opinions.
In order to serve people from the public health perspective, we need to ensure that programs, interventions, and health services are appropriate to people according to their social, cultural, physical and spiritual contexts. Although we are all a part of the same body in Christ Jesus, there are differences among individuals and among groups (Galatians 3:28). This research involved surveying female students who attended two distinct educational settings – a two-year community college and a four-year university. Although both of these schools are higher education institutes, the social and behavioral risk factors and demographics among the student populations are different. This research is important because it notes that although these two settings are at the same level of education with the majority of the populations in the same age group, there are many distinct differences between the two populations. These differences are important in forming strategies that will help reduce the incidence of sexually transmitted infection (STI) prevention/education programs in these groups and can also help to plan other health interventions in the future to work towards improving the overall health status of college students.