

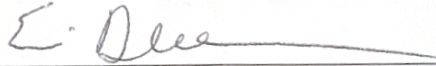
Beyond Dildos and Dental Dams:

Centering Trust, Care, and Education at Choices

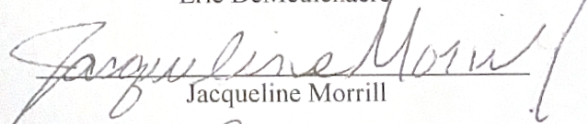
Praxis Project Thesis: Submitted in partial fulfillment of the requirements
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Abstract

Choices is a student-led sexual health organization at Clark University, a small research university in New England. This project examined how students perceive and engage with Choices, with a focus on comfort, accessibility, and participation in peer-led sexual health education. Using a practitioner inquiry approach, data was collected primarily through an anonymous online survey (n=54), with limited additional input from an anonymous question form shared via Instagram. Findings indicate that while many students felt comfortable accessing the space and basic resources, comfort decreased as engagement required more visible or interpersonal interaction, such as speaking with an educator or selecting certain materials. Qualitative responses highlighted concerns related to privacy, visibility, and uncertainty about how interactions within the space might unfold. At the same time, students described Choices as a valuable and generally positive resource, particularly for those already comfortable with sexual health discourse. These findings suggest that access alone does not guarantee engagement. Instead, participation is shaped by how safe, visible, and socially navigable the space feels. This project highlights the importance of designing peer education spaces that meet students where they are, not where we assume they are.

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Introduction

Sex Ed at the Kitchen Table

My earliest experience with sex education didn't come from a classroom, but from my mom. When I was in the third grade, there was a boy in my class who had a crush on me—I knew this because he would bring me little gifts, like a single rose or a cupcake his mom had baked. At the time, I thought it was sweet, even if I didn't entirely understand what it meant. What I *didn't* know was that he had told my best friend he wanted to have sex with me. She told her mom, who then told mine. I hadn't heard it myself and didn't even know it had been said until my mom sat me down to have “the talk.” She explained the situation, then explained what sex was, where babies come from, and emphasized that sex was something people do when they're older. I listened closely, but at some point during her explanation, I was hit with a horrifying realization: if sex is what makes babies... that meant my parents had sex. I remember thinking, *Ew*. Once I got over the initial horror, I was paying attention again. She didn't use any moral or religious language, and she was fairly straightforward in her explanation, but she still framed it entirely in heterosexual terms. That detail always stood out to me. I would later learn that she had a long queer relationship when she was a teen, although she never identified as queer in adulthood. I also grew up around many queer adults, but I didn't understand what queerness was or recognize it in those around me.

When I got to middle school, my mom added to “the talk.” She told me that I shouldn't wait until marriage to have sex, because “what if you and your partner aren't compatible?” Her message about compatibility stayed with me. Other than these two conversations with my mom, I received no formal sex education in school—no health class, no structured curriculum, no

lessons on consent or protection. In the absence of any institutional guidance, I turned to books. I found education through *The Care and Keeping of You*, a series of puberty guides by American Girl aimed at preteens. These books were gendered and binary in their language, but at the time, they felt expansive. I was fascinated. I would read them in bed with my mom most nights, asking questions and soaking in the information. In particular, I was drawn to *The Care and Keeping of You 2: The Body Book for Older Girls*, written by Dr. Cara Natterson and published in 2012. It wasn't literally a kitchen table conversation, but it was our version of it—quiet moments together, paging through the book, and trying to make sense of it. I reread it over and over again and just couldn't get enough. I was excited to learn, to understand, and to have something that felt like it was just for me. When I got an iPod Touch at twelve, I started buying other similar ebooks with birthday money—titles written for preteen and teen girls about puberty, periods, and growing up. My early sex education was informal and incomplete. I was hungry for knowledge and motivated to seek it out on my own. That hunger stayed with me. For my high school senior capstone project, I wanted to do research on sexual health education. But when I tried, all of the websites were blocked on the school computers, making it nearly impossible to do the project. In that moment, it became clear that sex education wasn't just about learning—it was also about who is allowed access to knowledge, and who is not.

Sex Ed on the Green

My first encounter with Choices, Clark University's student-led sexual health organization, was during the club fair at the beginning of my freshman year. Their table was hard to miss: it was filled with free condoms, plush reproductive organs, and a display of dildos and vibrators. While this image is not from the club fair itself, Figure 1 shows a typical Choices setup

from a later event, illustrating the visibility and abundance of resources that shaped my initial impression.



Figure 1. Example of a Choices resource table from a later event (Fall 2025 Spooky Sexy Bingo)

It was bold and unapologetic, and it challenged everything I had internalized about sex being private, awkward, or taboo. Although no formal education took place that day, Choices' presence on the Green marked the first time I saw sexual health treated as something unapologetic, visible, and approachable. I remember walking by feeling a mix of curiosity and discomfort. I didn't stop at the table. I was intrigued, but I felt awkward—worried that if I took a condom, someone might see and assume I was having sex, and worse, that that was something to be judged. At the time, I wasn't sexually active, so I questioned whether I “needed” one. That anxiety stayed with me. There was a condom dispenser attached to the wall in my dorm hall—a full box, not just a handful from the drugstore—and by the third week of the semester, it was already empty. It became a running joke in our hall, with people saying things like, “There's no way everyone here is having *that* much sex,” or “Who even needs that many condoms?” It was

funny at the time, but looking back, the jokes carried judgement, reinforcing the idea that being sexually active—or even just prepared—was something to side-eye.

Later that year, during a particularly difficult spring semester, I went to an event called sex-positive yoga. The lights were off, and that made it feel safer. At the end of the class they raffled off sex toys, and I won one of them. I remember slowly walking up to the front to pick it up, very aware that everyone could see what I was leaving with. It was vulnerable and uncomfortable, but also empowering. It was the first time I had engaged publicly with sexuality outside of private conversations with close friends. The next fall, I applied to be a Choices educator. After the interview, I was accepted and attended the training on a rainy Saturday morning. The room was quiet, which didn't help the anxiety I was feeling. The training, which lasted about an hour and a half, offered a broad overview of Choices—its values, educator commitments, and some campus resources—alongside introductions to topics like sexuality, different types of desire, consent, pleasure-centered anatomy, and STIs. It was designed to cover many concepts at a surface level, with a few interactive elements focused on defining key terms, though participation felt hesitant. Even so, I felt excited and prepared to answer student questions during office hours. But when I had my first shift, no one showed up. In the year and a half I've spent as a Choices educator, no one has asked me a question about sexual health. The only questions I get are logistical: When are you restocking products? Do you have more of [x]? When is the next event? The absence of substantive questions raises deeper questions about how sexual health knowledge circulates on campus. Perhaps there is a cultural expectation that sex is something one should already understand, making curiosity feel like confession rather than inquiry. Or perhaps students don't yet trust peers as legitimate sources of expertise on intimate topics. It may also be that vulnerability carries too much risk in a semi-public space. The

logistical questions feel safer, they allow engagement without disclosure. Whatever the reason, the silence reveals that access to supplies doesn't automatically translate into relational trust or transformative learning. The gap between presence and participation is precisely where my project begins.

More Than Condoms and Club Fairs: Rethinking Peer Education at Clark

This gap between access and engagement is not new. Reflecting on both my early experiences with sex education and my time at Choices, a pattern emerges: access to information or resources alone does not guarantee comfort, trust, or meaningful engagement. Even when resources are available—whether in the form of books, conversations, or free supplies—the deeper work of creating safety, belonging, and openness remains unfinished. These patterns shaped the questions that now guide my project, focused on how Choices can better support students in navigating sexual health with confidence, curiosity, and care.

Choices is a student-led sexual health organization at Clark University that provides free sexual health resources, peer education, and campus programming. The organization distributes supplies such as condoms, lube, and informational materials, hosts meetings and events, and maintains office hours where students can ask questions and access support. As a peer education model, Choices relies on student educators to serve as accessible sources of information and care, positioning sexual health as something that can be discussed openly among peers rather than solely through institutional channels. Figure 2 provides an example of the types of resources and informational materials offered through Choices, illustrating the range of information available to students.



Figure 2. Example of informational materials available through Choices (April 2025)

Access to sexual health information *is* necessary, but it's not sufficient on its own. My early experiences learning about sex at home, and later through my own research, show how informal education can offer valuable knowledge but still leave major gaps in understanding, identity awareness, and critical thinking about relationships, consent, and health. That knowledge may include facts, but it often fails to address the emotional weight people carry: shame, anxiety, or fear. In my experience, shame is not evenly distributed, it's structured by gendered expectations. Those raised under the patriarchal norms of girlhood are often taught to carry sexual responsibility and sexual scrutiny simultaneously—to be desirable, but not too desiring; informed, but not too experienced. That tension can cultivate a persistent undercurrent of shame. Even after we begin to consciously unlearn it, the emotional residue can linger.

Similarly, my early encounters with Choices revealed that even when sexual health resources are highly visible on campus, students may still feel uncomfortable, unsure, or even resistant to engage with them. This dynamic isn't unique to my experience. As Megan Mulvey's

study on Clark University students' perceptions of Choices found "...it became clear that many Clark students do not feel welcome in Choices and therefore choose not to engage" (2025, p. 5). Mulvey's thesis, also conducted as part of a praxis sequence, examined student perceptions of Choices in order to identify barriers to engagement and opportunities for organizational improvement, making it a key foundation for this project.

We can provide all the education, advice, and products in the world, but we can't make people engage with them, and yet the conditions under which people decide to engage are not neutral. Students decide whether to step forward within emotional and relational climates shaped by stigma, prior experiences, and the design of the space itself. Choices presents a bold and open approach to sexual health, but that visibility alone does not, and cannot, dismantle the internalized cultural stigma, anxiety, or self-consciousness many students carry. Meaningful sexual health education requires more than just access to supplies or occasional educational events; it requires attention to relational dynamics, trust-building, and inclusive, affirming spaces where students feel safer seeking support. If engagement is ultimately a personal choice, then shaping the conditions that make that choice feel possible, rather than risky, becomes the responsibility of Choices.

There is a disconnect between what Choices provides and how students actually engage with these resources. Recognizing this disconnect, my praxis project—a long-term community-engaged participatory action research project rooted in the Community, Youth, and Education Studies major (CYES), which brings together reflection, dialogue, and action to create more socially just and relational learning spaces—sought to reimagine how students encounter and engage with Choices by developing modifications to educator training and office hour practices that center relational care, accessibility, and student comfort.

Among Choices educators, questions have arisen about where to find basic sexual health resources, such as STI testing and emergency contraception. Through my own participation in educator conversations and the Choices educator group chat, I observed these questions arise repeatedly, revealing critical gaps in training and preparation. Peer educators are meant to serve as accessible sources of information and support. When educators themselves feel uncertain about where to find these fundamental resources, it undermines the trust and confidence that are essential for successful peer-led education. Taken together, these patterns point to the need for more comprehensive educator training, more intentional relationship-building strategies, and a reimagining of outreach efforts to better support student comfort, accessibility, and engagement.

I have come to recognize that Choices may not be for everyone, and I have learned to be okay with that. Drawing on Mulvey's (2025) distinction between "Choices as a club," and "Choices as a resource," it becomes clear that these functions do not operate identically. While the community-building aspects of Choices may resonate most strongly with students already comfortable engaging in sexual health discourse, the resource space itself must remain accessible to all students, even those who do not identify with the organization's values or culture. Access to condoms, pregnancy tests, and information should not depend on alignment with the organization's culture or comfort with public participation. There are steps we can take to make the space more welcoming, inclusive, and visible to a broader range of students, but it may never be a resource in which every single student seeks community. Acknowledging this is important for framing realistic goals for the organization's growth, my own expectations about this project, and for respecting the different ways students may seek out sexual health information and support.

The goal of this Praxis project is to redesign Choices' educator training to provide more thorough, practical preparation for peer educators, and to reimagine Choices' office hours to create a more welcoming and useful space for students. I began data collection by implementing an anonymous question form where students could submit questions related to sexual health via Instagram to be answered by educators. The questions they generated were then shared publicly, via the Choices Instagram, ensuring that all students had access to important sexual health information. It also acknowledged that some students may have similar questions but feel hesitant to ask or may encounter new information they didn't realize they wanted/needed. These anonymous submissions helped identify common areas of confusion or concern. This process also recognized that talking to peers is not the only way to share knowledge and that the survey and Instagram postings offered a less vulnerable way to share sex education and begin to foster trust in the Choices program. The survey also informed the development of new educational materials for a resource library (again another important sex education resource), as well as helped update the educator training.

Building on this foundation, I conducted an anonymous online survey using Qualtrics and collected anonymous questions via a form shared on the Choices Instagram to gather deeper insights into how students experience Choices and what changes would make the organization more inclusive, responsive, and trusted. The central research question guiding my project is: "What are Choices educators' and students' perspectives on improving inclusivity and accessibility in sexual health education at Clark University?" Additional questions include: "How do Clark University students perceive Choices and its current offerings?" "What barriers currently prevent students from engaging with Choices?" "What changes to educator training and office hour structures would make Choices more comfortable and accessible for students?"

Condoms Don't Talk Back: What the Research Tells Us

I began this review by surveying literature on peer-led sexual health education in higher education and secondary school contexts, with particular attention to program effectiveness, design, and student engagement. As this body of work consistently demonstrated strong gains in knowledge but uneven behavioral outcomes, I expanded the scope of the review to include scholarship on shame, stigma, relational pedagogy, and pleasure-centered frameworks in sex education. Taken together, these literatures illuminate not only what peer education can do, but what it often fails to address, and what becomes possible when sexual health education is designed as relational, affirming, and participatory, rather than purely informational.

Knowledge in the Hands of Peers

Peer education has become one of the most common strategies for sexual health promotion on college campuses and in schools, and for good reason. At its heart, peer education runs on a simple but powerful idea: students are more likely to listen to each other than to authority figures. Unlike the glossy brochures or the awkward guest speaker who parachutes into a classroom once a year, peers bring the same reference points, the same dorm gossip, the same anxieties. That relatability turns sexual health from something abstract into something grounded in reality.

And the evidence backs this up. Wong et al.'s (2019) systemic review shows what many campus educators already know: peer ed reliably improves knowledge and shifts attitudes. Students leave programs better informed and more willing to embrace safer practices. In other words, peer education “works,” at least on the level of awareness. But as Wong et al. also note,

most of these studies track outcomes over the short term. The long arc—whether knowledge sticks, whether behavior shifts—is less certain.

That uncertainty often comes down to design. Dodd et al. (2022), reviewing peer-led interventions in schools, found that the magic of peer ed isn't automatic. Programs worked best when peer educators were well trained, had clear roles, and received real support. Without that, enthusiasm collapsed into inconsistency, and credibility with peers slipped. Peer ed cannot run on goodwill alone; it needs scaffolding and preparation to actually meet students' needs.

But not all peer education happens in workshops or offices. Muraleetharan and Brault (2021) show how much sexual health learning flows through friendship networks, casual conversations in dorm rooms or over coffee, where trust already exists. That's the tricky part for more formal programs like Choices: the real work may be happening outside the structures we build. The challenge isn't just making information available, but cultivating the kind of informal trust that makes students actually want to seek it out.

At the same time, formal peer education programs are not entirely separate from these informal networks, nor are these informal networks inherently deficient. Students already exchange knowledge, stories, advice, and meaning-making in these spaces. Educators move through dorms, classrooms, athletic teams, and friend groups; what they model and share in structured settings can ripple outward. When peer educators are well-trained, confident, and grounded in shame-sensitive and pleasure-centered frameworks, they do not simply deliver information in office hours, they carry those practices into their everyday interactions. In this way, formal programs like Choices don't replace informal networks but participate in them, reinforcing norms of care, accuracy, and openness that can ripple beyond the walls of the space itself. When peer educators model curiosity without judgement, they subtly normalize those

norms in their friend groups and communities, gradually reshaping the broader culture of how sexual health is discussed.

Beyond Knowledge

And even when information lands, behavior doesn't always follow. Nuttall et al. (2022) found that a French peer-led program boosted knowledge but didn't move the needle on behavior. Knowing more didn't automatically translate to doing differently. Why? Because behavior is mediated by shame, stigma, and cultural scripts—barriers information alone can't dismantle. This gap reveals a central limitation of many sexual health interventions: they assume that access will naturally lead to healthier choices, without accounting for the emotional and social realities that shape decision-making. Students are not simply rational actors applying facts; they are navigating fear, judgement, identity, and risk in real time.

This is where innovation matters. Olson et al. (2024) describe a U.S. student-led mutual aid initiative that took a different tack: lower-barrier, anonymous, and student-centered. By prioritizing accessibility and trust, they lowered barriers to engagement and created more accessible pathways for students to engage with sexual health resources. Their model suggests that peer ed works best when it goes beyond information delivery and starts building the conditions— anonymity, compassion, relatability—that make engagement possible.

Taken together, the research paints peer education not as a cure-all but as a powerful starting point. It consistently delivers knowledge and shifts attitudes, but lasting impact depends on trust, design, and attention to stigma. When those elements come together, peer ed is more than a workshop, it's a catalyst. Without them, however, even well-designed programs risk offering knowledge that students understand but still feel unable to act on.

Shame in the Air, Desire Underground

If knowledge were enough, the story would end here. But peer education's biggest lesson may be that facts don't move in a vacuum. Shame, stigma, and silence often decide whether knowledge sticks, whether behavior shifts, whether a student actually feels safe enough to act on what they've learned. These forces operate subtly but powerfully, shaping not only what students do, but what they feel allowed to ask, admit, or even think about in relation to their own bodies and experiences.

Empirical work confirms the weight of shame. Emily Scheinfeld (2021) studied emerging adults navigating STIs and found that shame often led to avoidance: not getting tested, not disclosing, not protecting themselves. Students knew the facts, but shame kept them from acting on them. This is the same gap Nuttall et al. (2022) found in France—knowledge without behavior change—but here we see the mechanism. Shame is what stalls the process. That's why some scholars argue sex ed should not only be “trauma-informed” but also “shame-sensitive” (Dolezal and Gibson, 2022; Scheinfeld, 2021). Dolezal and Gibson (2022) highlight that trauma-informed practices make crucial strides in safety and empowerment, but don't always account for how shame permeates sexual health. Their call for shame-sensitive practice is especially relevant to peer education, where students are trying to decide, in real time, whether they'll be met with curiosity and care or judgement.

This approach is made tangible through resources like Cardea's *Guide to Trauma-Informed Sex Education* (2016), which outlines strategies such as opt-outs, grounding exercises, and flexible participation. These aren't just checkboxes—they signal to students that their boundaries matter, that sex ed isn't about exposure but about consent and safety in the

learning space itself. For peer educators, adopting these practices can shift educational spaces from silent avoidance to cautious openness, creating the conditions where trust and real engagement can begin.

What emerges here is simple but crucial: sexual health education lives or dies by its emotional climate. Knowledge matters, but whether students feel respected and unashamed determines if that knowledge ever leaves the page. When students anticipate judgement or discomfort, silence often becomes the safer choice, even in spaces designed for learning. Creating environments where students feel seen and supported is therefore not an added benefit, but a condition for meaningful engagement.

Pleasure in the Syllabus

Against the weight of shame, a pleasure-centered approach reframes sexual health as choice, dignity, and affirmation. Where much of the literature emphasizes the harms of shame and stigma, a growing body of scholarship argues that affirming pleasure and agency is equally foundational. In this sense, peer education becomes most powerful when it makes space for students to imagine sexuality as something they can approach with curiosity and confidence, rather than only with caution. Black feminist scholarship helps clarify why pleasure matters here: Lorde defines the erotic as, “a measure between the beginnings of our sense of self and the chaos of our strongest feelings. It is an internal sense of satisfaction to which, once we have experienced it, we know we can aspire” (Lorde, 1978, p. 88). In this framing, pleasure becomes a form of knowledge, an internal gauge for what dignity, consent, and self-respect can feel like, which challenges sexual education that treats pleasure as frivolous or dangerous.

Research on peer education highlights this shift. Wong et al.'s (2019) review of campus programs affirms that peer-led initiatives reliably improve knowledge and attitudes, but their framing often stops at risk prevention. Fine's (1988) critique of the "missing discourse of desire" helps explain what gets lost in that stopping point, when sex education centers danger while erasing desire, students may learn to avoid harm without gaining language for consent, pleasure, or autonomy. What is less studied, but increasingly recognized, is how programs can expand beyond harm reduction to support students' sense of autonomy. Dodd et al. (2022) similarly note that training matters most when peer educators are equipped not only to provide accurate information but also to facilitate conversations that validate intimacy, respect, and choice. In other words, rapport is built when sexual health is presented as more than just avoiding danger.

Other studies point to models where affirmation is central. Olson et al. (2024) describe a mutual-aid initiative that integrated sexual health resources into the fabric of campus life. Rather than treating access as a private matter, the program normalized it as part of collective wellbeing, signaling to students that their needs were legitimate and expected. Martin et al. (2020) highlight similar dynamics in digital contexts, where co-designed platforms gave students not just information but control, the ability to define questions, set terms, and engage on their own timelines. These interventions suggest that centering agency requires more than lowering barriers; it requires reimagining sexual health as something woven into community and daily life. Muraleetharan and Brault's (2021) study of peer networks offers further evidence. In informal conversations, students often talk about sexuality in ways that include not just risk, but also desire, connection, and intimacy. These exchanges reveal what formal programs miss: that students already seek frameworks where sexual health is tied to affirmation, not fear. For peer

education, the lesson is clear: programs that echo these dynamics by validating pleasure and autonomy are more likely to resonate with lived experience.

Taken together, the literature suggests that centering pleasure and agency isn't simply a corrective to shame but a redefinition of what sex education is for. Peer education can move beyond transmitting facts to cultivating spaces where sexuality is understood as a site of dignity, curiosity, and connection. When framed this way, sexual health becomes not just about preventing harm, but about supporting students in building fuller, freer lives. This is where pleasure activism becomes useful as a framing device. Rather than positioning pleasure as an "extra" once safety is secured, it reframes sexual wellbeing as something that includes both survival and thriving. Harm reduction acknowledges that people will engage in behaviors that carry risk and focuses on minimizing harm without moralizing those choices. Pleasure activism extends this logic by asking not only how people can stay safe, but how they can experience sexuality with dignity, agency, affirmation, and joy (brown, 2019).

Participatory and Relational Framework

Peer education does not succeed solely because information is accurate; it succeeds when the learning relationship feels safe, mutual, and credible. Relational pedagogies emphasize that knowledge is shaped by the conditions under which it is exchanged, trust, respect, and a sense of being taken seriously. bell hooks¹ (1994) argues that liberatory education requires more than content delivery; it depends on classrooms, and other learning spaces, built through care, presence, and mutual recognition. Applied to sexual health education, this framing suggests that the "how" of peer education, the tone, approachability, consent practices, and responsiveness,

¹ bell hooks intentionally did not capitalize her name, emphasizing the importance of her ideas over her personal identity.

matters as much as the “what.” For peer educators, this means training is not only about facts and referrals, but about pedagogical practices that can hold vulnerability without judgement and respond in ways that reduce shame rather than reinforce it.

Participatory frameworks deepen this approach by treating students not merely as recipients of education, but as co-creators of it. adrienne maree brown’s² work, *Emergent Strategy* (2017), emphasizes adaptive, relationship-centered change that emerges through responsiveness to community needs rather than rigid top-down design. In a campus context, this aligns with peer-led models that evolve through listening, making programming flexible enough to reflect what students actually ask, fear, or want. Participatory research in health professional education similarly frames co-design as a legitimate and rigorous method for improving educational practice, especially when the goal is relevance and equity (Paxino et al., 2024). Seen this way, participatory design is not an add-on to peer education; it is a pedagogical practice for building trust and access by allowing students to shape the form education takes.

Finally, relational and participatory frameworks converge in the core problem this literature review identifies, that students may “know” things but still avoid engagement due to shame, fear, and social risk. A relational framework helps explain why anonymity, low-barrier access, and peer credibility matter, not as conveniences, but as conditions for learning. If peer education is to move beyond short-term knowledge gains, it must be designed not only to inform, but to create climates where students can ask questions without bracing for judgement. In this project, participatory and relational theories provide a foundation for redesigning peer education so that sexual health knowledge is delivered through care, consent, and student agency rather than through distance or institutional formality.

² adrienne maree brown intentionally uses lowercase letters in her name, citing aesthetic preference and a critique of capitalization as a practice tied to hierarchy and commodification.

Synthesizing the Literature

The literature that grounds this project points toward a clear conclusion: sexual health education is most effective when it is relational, participatory, and affirming and when peer educators are well trained not only in knowledge of sexual health, but also in emotional components like shame and in participatory pedagogical practices. Peer education consistently demonstrates its capacity to increase knowledge and shift attitudes, but its transformative potential depends on whether students feel safe enough to engage, ask questions, and imagine themselves as deserving of care. Shame, stigma, and fear of judgement remain significant barriers, shaping not only whether students access resources, but how they interpret and apply what they learn. Addressing these barriers requires moving beyond information delivery toward educational practices that center trust, agency, and emotional safety.

Together, this body of scholarship suggests that peer-led sexual health education should be understood not as a static intervention, but as a relational practice shaped by emotional climate, institutional context, and student experience. Research on risk-aware frameworks, shame-sensitive practices, and pleasure-centered pedagogy complicates traditional harm reduction models by emphasizing that education must account for how students feel, not just what they know. When sexual health education centers autonomy and affirmation alongside accurate information, it opens space for students to navigate risk thoughtfully while also recognizing their right to joy, connection, and self-determination.

Rather than positioning peer education solely as a mechanism for prevention, the literature points toward its potential as a site of possibility, one that can support learning through care, trust, and responsiveness to lived realities. While scholars offer compelling critiques and

frameworks, fewer studies examine how these insights are operationalized within campus peer-based organizations, particularly in relation to educator training, space design, and modes of engagement. This gap highlights the need for closer attention to how peer education functions in practice and how it might be reshaped to better align with the relational and affective dimensions identified in the literature. Indeed, it is telling that the last part of my literature review, participatory and relational frameworks, drew from literature outside the domain of sex education. There is an absence of literature that focuses on relational practices and participatory pedagogical practices and how they enable more meaningful engagement not only with sexual health knowledge, but also with shame and pleasure. This gap calls attention to the importance of examining how these frameworks function in practice, particularly within peer-led organizations like Choices, where the conditions for learning are shaped as much by relationships as by information itself.

Pleasure, Risk, and Radical Education: A Theoretical Framework

This project is grounded in the foundational belief that sexual health education is not simply about transferring information, but about equipping students with the tools they need to make informed, autonomous decisions. Having access to information isn't the same as knowing how to use it. Sexual health education must help students move from facts to confident decision-making. Reading facts off a page doesn't guarantee understanding or empowerment. True education means helping students retain, apply, and trust what they learn, not just momentarily absorb disconnected facts. Informed consent—a widely accepted principle in both sexual ethics and broader health contexts—is impossible without access to accurate, meaningful, and inclusive education that focuses on relationships of trust, care and empowerment.

Collectively, this project approaches sexual health education not as the transmission of knowledge, but as a relational process through which students develop the capacity to make informed and self-directed choices.

To make sense of these dynamics, this framework brings together risk, trust, engagement, pleasure, and community care as interconnected components rather than isolated concepts. As illustrated in Figure 3, these elements operate as nested relational conditions, where each layer shapes the possibilities of the next. Risk operates as a foundational condition, trust functions as the core of engagement, and broader layers of pleasure and community care expand the purpose of sexual health education beyond harm reduction.



Figure 3. Theoretical Framework of Relational Sexual Health Education

I align closely with the philosophy behind Risk-Aware, Consensual Kink (RACK), an acronym coined by Gary Switch in 1999 to offer a more realistic framework for negotiating risk in sexual activity. RACK refines traditional “safe sex” messaging by recognizing that risk is unavoidable in all parts of life, including sexual activity. As Race Bannon explains, RACK refines older models like SSC (Safe, Sane, and Consensual) by acknowledging that “everything in life comes with at least a modicum of risk” (Bannon, 2023). Nothing is truly 100% safe, not even everyday activities like crossing the street or driving a car. Much like defensive driving promotes awareness rather than the illusion of total safety, the RACK framework promotes awareness and responsible management of the risks involved not just in kink play, but in all sexual activity. Sexual health education, similarly, shouldn’t be about eliminating risk altogether. Rather, it should be about equipping students with the knowledge and tools they need to navigate their choices thoughtfully, with full awareness of the risks and responsibilities involved. In this framework, risk is not treated as a problem to be eliminated, but as a condition that shapes decision-making across all layers of engagement, as reflected in its position as the foundation of Figure 3.

Building on this understanding of risk, this framework conceptualizes peer education as a relational process rather than a purely informational one. While my formal role as a Choices educator has involved limited direct engagement with students about sexual health, reflecting on the position has deepened my understanding of what peer education requires. Peer educators occupy a unique and sometimes uncomfortable position: they must be accessible as fellow students, but also knowledgeable enough to be trusted guides. This dual position, simultaneously peer and educator, creates a relational dynamic that is central to how students experience sexual health education. As represented in Figure 3, this dynamic places trust at the core of the

framework, highlighting that peer education is not simply informational work, but relational labor shaped by trust, credibility, and vulnerability. Understanding this balance is key to reimagining what Choices can offer.

Within this model, vulnerability and credibility must be held together in order for trust to function effectively. When peer educators don't know an answer, it's important to be honest in the moment while also demonstrating a willingness to seek out reliable information during the conversation if possible. Because Choices maintains confidentiality and doesn't collect personal information, it's not always possible to follow up after a student leaves; therefore, building immediate trust, responding thoughtfully, and offering next steps or resources during the conversation itself are critical. In sexual health education, where fear of judgement or exposure can easily silence students, maintaining that trust requires transparency *and* active support. Students need to know that educators will meet their questions with care, honesty, and a genuine effort to provide helpful information. In this sense, trust operates as a precondition for engagement, shaping whether students feel able to participate at all.

Students engage with sensitive topics like sexual health in deeply personal ways. Many carry cultural, societal, or familiar stigmas around sexuality that make public engagement difficult or intimidating. Education that centers relational trust, rather than performance or perfection, offers students a way to navigate these discomforts without shame. When students feel emotionally safe and respected, they're more likely to engage, ask questions, and absorb information. That kind of safety doesn't come from a one-size-fits-all curriculum, it emerges from context, connection, and care. As shown in Figure 3, engagement isn't neutral; it's shaped by this relational core but is mediated by stigma, visibility, fear, and perceived social risk, which determine whether students move from trust into active participation.

At the same time, I recognize that no matter how many resources Choices offers, it will never be possible to teach everything. Sexual health is too vast, too complex, and too deeply personal for any single organization to cover fully. The goal isn't to provide an all-knowing education, but to offer strong starting points, information that's important to Clark students, and pathways to deeper learning. Choices' role is not to be the ultimate authority on sexual health, but to be a reliable, welcoming access point, especially for students who might not otherwise know where or how to begin. Within this framework, peer education is understood as an entry point into broader processes of learning, rather than a comprehensive source of knowledge, reinforcing its role within the engagement layer of Figure 3.

Expanding beyond engagement, this framework also centers pleasure as a critical dimension of sexual health education, drawing on the work of adrienne maree brown, particularly *Emergent Strategy* and *Pleasure Activism*. brown reminds us that “small is good, small is all” (brown, p. 41) and that meaningful transformation happens through relationships, trust, and attention to small-scale emergent practices. Within this framework, Choices can be understood not just as a resource hub, but as a living community space, a place where relational trust can allow learning to happen in ways that a rigid, formal education often cannot. In *Pleasure Activism* (2019), brown further emphasizes that “pleasure is a measure of freedom” (brown, p. 3). In this model, pleasure functions as a higher-order layer that reframes the purpose of sexual health education, positioning it as central to autonomy and self-determination, rather than secondary to risk. Sexual health education must not only aim to prevent harm but also affirm students' right to pleasure, joy, and self-understanding. A healthy sexual life includes risk management and safety, but it also includes the pursuit of connection, happiness, and autonomy.

Choices must move beyond a harm-reduction model alone and invite students to imagine fuller, freer, more pleasurable relationships with their bodies and with each other.

Many students hesitate to access Choices' services because of fear: fear of being judged, fear of being seen, fear of disclosing something personal. As Megan Mulvey's research suggests, concerns about judgement, exposure, and stigma can make engaging with sexual health resources feel intimidating or risky for students (2025). Choices' bold visibility—tables at club fairs, open conversations, free sex toys at events—plays an important role in challenging stigma and signaling that sexuality does not need to remain hidden or shameful. This visibility matters; it expands what feels socially permissible and invites students to imagine sexual health as something worthy of public attention and collective care. Yet boldness alone cannot meet every student where they are. For some, this high visibility engagement can unintentionally heighten anxiety, particularly for those who are still navigating privacy, uncertainty, or stigma surrounding sex. This tension is also reflected in the visual culture of the space itself. While not tied to a single interaction, Figure 4 shows the kind of bold, highly visible messaging present in the Choices space, illustrating how efforts to challenge stigma can simultaneously heighten awareness of being seen.

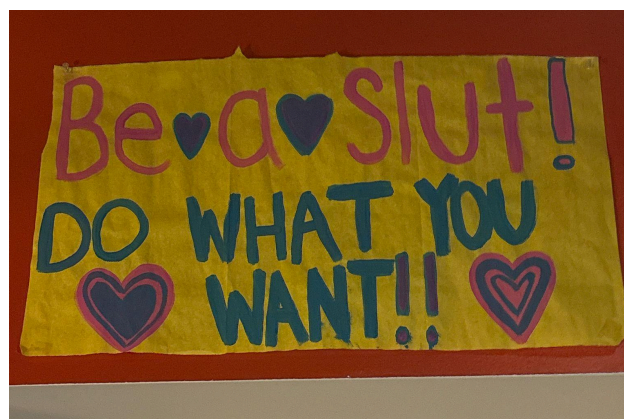


Figure 4. Banner displayed in the Choices space reading, “Be a slut! Do what you want!!”

Modeling care, therefore, requires balancing this boldness with humility. While bold outreach disrupts silence, humility recognizes that readiness varies. Humility appears in quieter forms: offering resources students can access independently, creating low-pressure conversations that allow students to guide disclosure, and designing entry points that don't require public identification with sexual health services. In this sense, peer education must operate along a spectrum of visibility, making sexual health openly discussable while also protecting students' rights to approach learning privately and at their own pace.

When boldness is paired with humility, sexual health education communicates both you are allowed to be seen and you are allowed to remain private, creating the conditions under which genuine trust and learning can occur. Respect and confidentiality are not simply good practices; they're the ethical foundations that allow students to decide how, when, and whether to engage. This balance reflects a broader commitment to community care, which in this project is defined as a collective approach to wellbeing in which responsibility for safety, support, and learning is shared rather than individualized. As the outermost layer in Figure 3, community care situates all other components within a broader ethic of mutual responsibility, where students are not navigating sexual health in isolation, but within a relational environment shaped by attentiveness, accountability, and shared support. Taken together, this framework traces a pathway from risk to relational trust to engagement, and finally to pleasure and community care, illustrating how each layer shapes the conditions under which students engage with sexual health decisions. Risk forms the conditions under which students make decisions, but trust determines whether they engage at all. Engagement is mediated by stigma, visibility, and social risk, while pleasure and community care reframe the purpose of sexual health education beyond harm reduction toward autonomy and collective wellbeing.

As bell hooks writes in *Teaching to Transgress*, “The classroom remains the most radical space of possibility in the academy” (hooks, 1994). Although Choices isn’t a traditional classroom, I believe it has the potential to serve as a radical site of learning, possibility, and liberation. Drawing on Shawn Ginwright’s framework in *The Four Pivots: Reimagining Justice, Reimagining Ourselves*, particularly Pivot Two—“From Transactional to Transformative”—this vision involves moving beyond models of sexual health education centered exclusively on information delivery or risk avoidance toward approaches grounded in relationship, healing, collective wellbeing, and harm reduction. Ginwright argues that transformation emerges not from services alone but from relational presence and meaningful connection, a principle that resonates strongly with peer sexual health education, where trust and belonging shape whether learning can occur at all. Sexual health education at Choices should not only deliver facts, but nurture autonomy, trust, community care, and self-determination. Building a stronger Choices, therefore, means fostering environments grounded in connection and possibility—building a stronger, safer, freer student community where sexual health is not hidden behind stigma but embraced as part of the full, complex experience of being human.

How Better Training + Warmer Access Points Build Trust (And Why That Matters): A

Theory of Change

This praxis project is grounded in a relational theory of change that understands sexual health education, not as a linear transfer of information, but as a process that unfolds through trust, care, and shared vulnerability. Rather than assuming that students fail to engage with sexual health resources because they lack knowledge, this framework recognizes that shame, stigma, and fear of judgement often shape whether information feels accessible or usable in the

first place. Change, therefore, does not begin with more facts alone, but with transforming the emotional and relational conditions under which learning takes place.

Before the Question Comes Trust

At the core of this theory is the belief that connection precedes engagement. When students feel emotionally safe, when their questions are met with curiosity rather than judgement, and when uncertainty is treated as a normal part of learning, they are more likely to seek out information, ask questions, and trust the answers they receive. As adrienne maree brown reminds us, meaningful transformation often requires us to “move at the speed of trust,” recognizing that relationships, not efficiency, set the pace of sustainable change (brown, p. 41). While this idea is often associated with sustained, relationship-based settings, within the Choices model connection operates differently. Because Choices is structured around anonymous, drop-in interactions, trust is not built over time with the same educator, but within the moment of engagement itself. In this context, connection refers not to long-term relationships, but to a felt sense of safety, whether a student’s first interaction is approachable, nonjudgemental, and responsive enough to invite further engagement.

Trust in this context also extends beyond individual interactions to the organization itself. For students to engage, they must trust not only the person they are speaking with, but Choices as a whole, its values, its confidentiality, and its role as a reliable source of support. Peer educators play a key role in building and reinforcing this trust, acting as representatives of the organization in each interaction. Even if a student does not encounter the same educator twice, each interaction contributes to an overall sense of whether Choices is a space that can be trusted. At the same time, the structure of scheduled office hours creates the possibility for repeated

interactions; students may return at the same time or be invited back by an educator, allowing trust to develop across multiple encounters if they choose.

Peer education is uniquely positioned to support this process because it operates through shared social location. However, this potential is only realized when peer educators are supported not just with factual knowledge, but with tools for navigating vulnerability, discomfort, and relational dynamics in real time. This emphasis on relational learning echoes bell hooks' work on engaged pedagogy. Reflecting on the educators who most profoundly shaped her learning, hooks writes that they "made the classroom a space of critical thinking" and transformed the exchange of ideas into "a kind of ecstasy" (hooks, p. 202). For hooks, meaningful learning environments emerge when students feel respected, intellectually challenged, and safe enough to participate fully. These conditions are not incidental; they must be intentionally cultivated. In the context of Choices, this cultivation happens not over extended periods of interaction, but through tone, structure, and accessibility of each individual encounter.

This project assumes that redesigning educator training to explicitly address shame, risk, desire and relational care will increase educators confidence and capacity to respond to student needs. When educators feel prepared to hold difficult or uncertain conversations, and to be honest about what they do and do not know, they are better able to foster trust. hooks further emphasizes that creating such environments requires recognizing that everyone present contributes to the learning dynamic, noting that classrooms become open learning communities when educators genuinely value each person's presence and perspective (hooks, p. 8). That trust, in turn, creates the conditions for meaningful engagement, even in brief or informal interactions. Rather than positioning educators as experts who deliver answers, this model treats them as relational guides who help students navigate information collaboratively and without shame.

Not Everyone Walks Through the Front Door

This theory of change also emphasizes access through multiple entry points. Not all students are ready to engage face-to-face or in visible ways. By incorporating anonymous question submission, digital outreach, and self-directed resources alongside in-person office hours, the project recognizes that accessibility is not one-size-fits-all. These low-barrier pathways allow students to engage at their own pace and comfort level, reducing the social risk often associated with sexual health spaces.

Paulo Freire's critique of the traditional "banking model" of education offers a useful lens here. In this model, knowledge is treated as something deposited into passive learners rather than co-created through experience and dialogue. Freire argues that education must begin from people's lived realities, recognizing learners as unfinished beings who are constantly becoming, rather than passive recipients of information (Freire, p. 84). In this sense, assuming that all students are equally ready or willing to engage in the same way reflects a banking model approach, where participation is expected to look uniform rather than responsive to individual context. When educational spaces assume uniform readiness or comfort, they risk reproducing exclusion rather than expanding access. By contrast, creating multiple entry points aligns with Freire's emphasis on meeting learners where they are, allowing students to engage from their own experiences, comfort levels, and evolving sense of readiness. Multiple entry points acknowledge that students arrive with different experiences, levels of comfort, and relationships to sexual health discourse.

Over time, these quieter forms of engagement can build familiarity and trust, making deeper interaction feel possible rather than intimidating. Sociologist Erving Goffman's work on

stigma further helps explain why such pathways matter. Goffman notes that individuals often manage potentially stigmatized information carefully in social settings, seeking ways to avoid exposure or embarrassment (Goffman, 1963, pp. 51, 65). He explains that people may withhold deeply personal information when it would be inappropriate to share with “mere acquaintances,” as disclosure can feel more intimate than the relationship allows (Goffman, 1963, p. 75). In these situations, individuals often choose “seemliness” over candor, prioritizing social safety over full honesty. In the context of sexual health, asking a question publicly or in a visible setting can carry similar risks, as students may fear being judged for what they do or don’t know. Anonymous or lower-visibility forms of participation can therefore provide students with safer ways to engage with sensitive topics before they feel ready for more public conversations.

Learning With, Not Just Teaching To

Finally, this theory understands change as iterative and participatory, rather than fixed or top-down. By gathering ongoing feedback from students and educators and using that input to refine training, outreach, and resource design, the project treats those most impacted by Choices’ programming as co-creators of its future. This approach reflects Paulo Freire’s concept of dialogic education, which rejects hierarchical knowledge transmission in favor of collaborative inquiry. Freire argues that meaningful learning occurs through dialogue grounded in humility, love, and faith in people’s capacity to think and create together (Freire, 1970, p. 91). Change is not expected to be immediate or uniform. Instead, it emerges through repeated, everyday actions to prioritize care, transparency, and responsiveness within the organization.

While this framework emphasizes relational care, it does not require sustained or visible relationships to be effective. Within the Choices model, relational care and anonymity are not in

tension, but mutually reinforcing. Anonymity and autonomy allow students to engage on their own terms, reducing risk and making initial interaction possible, while relational care shapes the quality of those interactions, ensuring they feel respectful, nonjudgemental, and responsive. In this sense, care is communicated not through long-term relationships, but through the consistency and tone of each encounter, as well as through the broader design of the organization itself.

In this model, impact is not measured solely by increased knowledge or usage of its supplies, but by shifts in how students experience the space, whether they feel welcome, respected, and supported in their curiosity. The ultimate goal is not to eliminate discomfort entirely, but to create an environment where discomfort can be held without shame. By centering relational trust, autonomy, shared knowledge, and participatory design, this project aims to strengthen Choices as a site where sexual health education becomes not just informative, but transformative.

Forms, Feedback, and Reflections: How I Explored Choices

Knowledge is a Conversation (Epistemological Stance)

I believe that understanding sexual health education on campus begins with recognizing that knowledge is socially constructed: it doesn't exist "out there" waiting to be discovered, but emerges through conversation, shared experiences, and collective meaning-making. At the same time, a critical epistemology reminds me that power shapes whose voices get heard—and whose are marginalized—whether through institutional policies or cultural stigmas surrounding sex. For me these perspectives work in concert: I see Choices as a space where knowledge is both

co-created and contested. That means I don't arrive with a predetermined list of protocols or "safest" behaviors; I come ready to learn alongside students and educators, surfacing how various practices feel safe or risky to different people.

Studying the Work While Doing the Work (Methodological Stance)

My methodology is best understood as practitioner inquiry. Rather than positioning myself as an outside evaluator, I approach this project as a reflective practitioner examining my own role within Choices. This inquiry centers on critically analyzing my experiences as a peer educator, the structures that shape this work, and the everyday practices through which students encounter sexual health education. This approach aligns with practitioner inquiry traditions in education, particularly the work of Marilyn Cochran-Smith and Susan Lytle (2009), who describe practitioner inquiry as a process through which educators systematically study their own practice in order to generate knowledge and improve educational environments. Throughout the project, I engage in ongoing reflexivity, interrogating my assumptions and positionality to ensure that my interpretations remain grounded in lived experience and attentive to the power dynamics embedded in peer education spaces.

Implications for Peer Education Practice

I also recognize that peer education is a uniquely vulnerable position, for both the educators and the students they may support. Peer educators must strike a delicate balance: accessible enough to feel relatable and knowledgeable enough to be trusted. That vulnerability isn't a flaw, it's part of what makes this model powerful. Trust must be built in the moment, since Choices doesn't collect information from those who come into the space. Students need to feel

that when they ask a question—especially about something as personal as sexual health—they’ll be met not with judgement, but with curiosity, care, and honesty. Transparency, compassion, and a willingness to seek out answers together are essential, especially when students are navigating uncertainty or vulnerability. These relational practices don’t replace the need for accurate information, they just make it easier for students to access and trust it.

Between the Sip and the Supplies: Situating Choices at Clark University

This project is situated within Choices, Clark University’s student-led sexual health organization. Choices operates as a peer education and resource hub, providing free sexual health supplies, educational programming, and informal support to students. The organization is staffed by undergraduate peer educators and overseen by a student e-board, with faculty and administrative oversight through the university.

Choices’ current structure is rooted in a longer history of student-led reproductive health activism at Clark. In 1970, the Birth Control Information Center (BCIC)—the organization that would later evolve into Choices—was founded by students seeking to provide accessible information and resources in a context where such access was legally and socially restricted. Emerging out of protest and shaped by a commitment to education rather than institutional authority, the BCIC operated as one of the first independently student-run organizations of its kind, offering information, referrals, and peer counseling to both students and the broader Worcester community (Tyler, 2025). This history situates Choices not only as a campus resource, but as part of a longer tradition of student-driven efforts to expand access to sexual health knowledge and care.

Choices' physical space is located in the basement of the University Center, next to the Freudian Sip, a now out-of-use bar. The space is small, dimly lit, and designed primarily for self-directed access rather than facilitated conversations. During office hours, educators staff the room, restock supplies such as condoms, pregnancy tests, and lube, and are available to answer questions if students choose to engage. However, interactions are often brief or silent, with many students entering, taking supplies, and leaving without speaking. Consequently, educators may spend much of their scheduled time without student engagement, often completing unrelated tasks, prompting reflection on whether the current structure of office hours fully supports Choices' mission as an educational space.

In addition to office hours, Choices hosts periodic meetings, themed programming, and collaborations with other student organizations. Choices also maintains an Instagram account, which functions as a key outreach and information-sharing platform. In recent years, institutional policy changes have shaped how Choices operates. As of Fall 2024, the organization is no longer permitted to sell sexual health products; all materials are now distributed for free, and certain items, such as sex toys, are only available through raffles or events. This shift was the result of institutional policy changes that reframed the organization's previous model—purchasing products at low cost and redistributing them affordably—as inappropriate with the university's financial and regulatory structures. What had once functioned as a student-driven system of accessibility and mutual aid was reinterpreted as a liability, reflecting broader institutional discomfort with informal redistribution and student autonomy. These changes have increased accessibility in some respects, while simultaneously limiting how and when students can access certain resources.

Choices educators occupy a unique position within this environment. As fellow students, they are expected to be approachable and relatable; as educators, they are also expected to provide accurate information and appropriate referrals. Training for this role has historically prioritized factual knowledge, resource referrals, and contraception access. Archival records and prior student research suggest that while educators were equipped with accurate information, there was far less formal guidance on navigating vulnerability, stigma, or the relationship dynamics that often shape student interactions around sexual health (Mulvey, 2025). As a result, much of the work of peer education has unfolded informally, shaped by individual educators' comfort levels, institutional constraints, and the emotional climate of the space itself rather than by structured pedagogical support.

Because this project emerges from within Choices, the site is not treated as a neutral backdrop, but as an active context that shapes how sexual health knowledge is accessed, interpreted, and experienced. Understanding the material layout, institutional boundaries, and historical and everyday practices of Choices is essential for interpreting student engagement and for situating the findings of this practitioner inquiry.

From Educator to Evaluator: My Place in the Project

I don't come to this project as an outsider, or even as someone casually involved with Choices. I come to it as a peer educator, someone who works shifts, attends events, and is increasingly embedded in the organization over time. Like many of my fellow educators, I've spent a lot of office hours sitting in a quiet room, unsure what to do when no one comes in. There's no script for what that time should look like, and we're often left figuring it out as we go. Through those hours, and through conversations with other educators, I started wondering:

What's working here? What's missing? And what could Choices be doing differently to actually connect with students? As I begin this Praxis project, I'm stepping into a new role, not just educator, but researcher. I'm reflecting on a space I'm already part of, beginning a process of inquiry aimed at making it more inclusive, more accessible, and more educational. This dual position—as both educator and evaluator—shapes how I approach the work. I'm not simply observing Choices from the outside; I'm asking questions from within, because I truly care about what it could become.

Choices is Clark University's student-led sexual health organization, run by a small group of peer educators. We stock supplies like condoms, dental dams, pregnancy tests, and sex toys. We occasionally hold events, with some of the most popular being Spooky Sexy Bingo (in collaboration with Menstrual Equity Alliance) and the annual drag show. We also sometimes offer STI testing in partnership with local organizations like AIDS Project Worcester. The space itself is tucked away in the basement of the University Center, just next to the Freudian Sip. It's quiet, dimly lit, and honestly a little awkward. Most students come in, avoid eye contact, grab what they need, and leave without saying anything. Some people feel totally at ease there, but many others seem unsure, hesitant, or rushed. There's no right or wrong way to use the space, but it's clear that not everyone feels comfortable in it. I've spent a lot of time thinking about how to make it feel more welcoming, more intuitive, and more supportive, and those questions are part of what led me to this project.

I first joined Choices in the fall of my sophomore year. At the time, the organization felt more functional than connected; there wasn't much of a sense of community among educators beyond the shift overlap or occasional coverage. That began to change in the Spring 2025 semester, when biweekly general meetings were introduced as part of organizational changes led

by the e-board, including initiatives emerging from the praxis project of then-president Megan Mulvey (CYES Class of 2025). These meetings created a consistent space for educators, e-board members, and the Clark community to gather, talk, and build relationships. I've gotten to know more of the team, and the work has started to feel less isolating and more collaborative. Rather than creating relational practice from scratch, my intervention builds upon this existing foundation, extending the relational ethos cultivated in these meetings into educator training, office hours, and student engagement practices. Until recently, Choices was allowed to sell certain sexual health products, such as sex toys, at a reduced cost after purchasing them wholesale. Proceeds were directed as donations to the See You Collective, a student-run mutual aid organization, creating a student-led model of affordable access and resource redistribution. In Fall 2024, however, the university revised its financial policies and determined that this model violated institutional regulations governing student organizations' handling of club funds, ultimately prohibiting the sale of items altogether. As a result, all available products—like condoms, pregnancy tests, and lube—are now distributed for free, and sex toys can only be accessed through raffles or event-based giveaways. While the shift increased accessibility in some ways, it also limited consistent access to certain resources and prompted ongoing discussion among educators and e-board members about what Choices' role should be within newly tightened institutional boundaries. Navigating these changes and witnessing their impact on our community has deepened my engagement with Choices. I was elected to the e-board last year, a role that positions me to contribute more directly to addressing these challenges and shaping the organization's future.

As both an embedded educator and a beginning researcher, I'm not studying Choices from a distance, but in collaboration with peers to envision its next chapter. This project doesn't

aim to evaluate individual educators, but rather to understand, collaboratively, how Choices can better meet the needs of the Clark community. My insider status gives me firsthand insight into the day-to-day dynamics, while my researcher role asks me to step back, listen, and reflect. That dual stance brings a deep sense of care, and an awareness of my own biases, that I will surface and interrogate throughout the research process. I'm not neutral, nor do I want to be: I believe meaningful change comes when those who care most are the ones guiding it.

Building on the insights and groundwork laid by a peer in the previous CYES cohort, Megan Mulvey, deepens my commitment to this work. Megan's praxis research—also centered on student's perceptions of Choices—helped clarify the kinds of questions that matter most: Who feels welcome here? Who doesn't? What barriers are preventing genuine engagement? Our conversations have been a catalyst for many ideas I've pursued, and their willingness to share drafts, data, and reflections has modeled the collaborative spirit I aim to bring to this work. Without Megan's support, I may have never realized how much potential there is in continuing and expanding on this line of inquiry. In honoring their contributions, I'm reminded that this project is not just mine—it's part of a larger, ongoing conversation about peer education, inclusivity, and the future of Choices.

Participants

This study focused on Clark University students and their perceptions of Choices, the student-led sexual health organization on campus. Participants consisted of Clark University students who completed an anonymous online survey examining awareness, experiences, and perceptions of Choices. The survey was distributed during the Fall 2025 semester via campus listservs, social media, flyers, and peer networks. It yielded 54 responses. Because recruitment

occurred through widely accessible but informal channels, participants likely reflected students who were at least somewhat connected to campus communication networks, though not necessarily directly involved with Choices.

Survey participants reflected some, but not all, aspects of Clark's broader student demographics. Institutional data indicates that Clark's undergraduate population skews majority women (approximately 57%) with an average age of around 20, and includes a predominantly white student population (Clark University, 2024-2025).

Within this sample, respondents were disproportionately women (25 participants) and overwhelmingly white (44 participants), suggesting that the survey reflects a more demographically narrow subset of the student body. Sexual orientation varied, though bisexual identity was the most commonly selected (17 participants). A majority of respondents (27 participants) reported being sexually active (excluding self-pleasure). In terms of class standing, seniors made up the largest group (25 participants), followed by smaller but notable representation from first-year students and graduate students (7 participants each). Participants also represented a range of academic disciplines, with the most common majors including psychology (7), biology (7), community, youth, and education studies (5), game design (4), and community development and planning (4), along with additional representation from fields such as studio art, sociology, and English.

Notably, 49 out of the 54 respondents indicated that they had heard of Choices prior to taking the survey. This suggests that the sample largely reflects students who were already aware of the organization, even if they had not directly engaged with it. At the same time, responses included both students who had interacted with Choices and those who had not, allowing for a range of perspectives on accessibility, comfort, and engagement with the organization. Because

the Choices office hours space doesn't collect demographic information from visitors, it is not possible to compare this sample to the broader population of students who access Choices resources.

Because the survey was fully anonymous, no identifying information was collected beyond self-reported demographic categories, and it was not possible to verify participants' prior involvement with Choices beyond what they chose to disclose. The high rate of prior awareness, however, suggests that many respondents were at least somewhat familiar with the organization.

Although the original study design included semi-structured interviews with students and Choices educators, these were not conducted due to time constraints and limited participant response during recruitment. Targeted outreach was conducted with current peer educators; however, despite these efforts, there was insufficient response to move forward with interviews. As a result, this project relied on survey data alongside my own observations and experiences as a Choices educator, which were engaged reflexively rather than treated as formal data.

Participation in the survey was voluntary, and the study design prioritized anonymity, consent, and emotional safety. Given the sensitive nature of sexual health topics, participants were encouraged to engage at their own comfort level. While the sample is not representative of the entire Clark student body, it offers insight into how Choices is experienced by students who are already aware of, or adjacent to, sexual health discourse on campus.

Data Collection: Putting it Out There

Data for this project was collected primarily through the anonymous online survey described above. The survey included a combination of multiple-choice, scaled, and open-ended questions designed to assess students' awareness of, experiences with, and perceptions of

Choices, as well as their comfort engaging with different aspects of the organization. The inclusion of both closed- and open-ended questions allowed for the collection of both quantitative data, such as levels of comfort or familiarity, and qualitative data reflecting students' perspectives, concerns, and experiences in their own words.

In addition to the survey, qualitative data were also gathered through submissions to an anonymous question form shared via the Choices Instagram account. This form invited students to submit sexual health related questions, which were then answered publicly. These submissions provided additional insight into the types of questions students were asking, as well as the topics they may have felt less comfortable raising in face-to-face interactions.

All data were collected in digital forms. Survey responses were exported to a spreadsheet to allow for organization and analysis, including sorting responses by question type and reviewing patterns across demographic categories where available. Open-ended responses and anonymous question submissions were compiled and reviewed alongside one another to create a cohesive qualitative dataset.

Although the original project design included semi-structured interviews with students and Choices educators, these were not conducted due to time constraints and limited participant response during recruitment. As a result, the dataset analyzed in this study consisted of survey responses and anonymous question submissions.

Data Analysis: Pulling Out the Patterns

Data analysis for this project involved both quantitative and qualitative approaches, with an emphasis on identifying patterns in student comfort, access, and engagement with Choices. Analysis began with a review of quantitative survey responses, including multiple-choice and

scaled items, to identify broad trends in awareness, comfort levels, and engagement. These responses were used to establish general patterns in how students engaged with different aspects of Choices and to identify areas where further qualitative exploration was needed.

Qualitative analysis focused on open-ended survey responses and submissions from the Instagram question form. I initially attempted to code each individual response line-by-line; however, this approach proved difficult to sustain and did not effectively capture the broader patterns emerging across the data. As a result, I shifted toward a more iterative, thematic approach. After reading through the data multiple times, I identified recurring themes, patterns, and tensions that appeared across responses.

These themes were then grouped into broader conceptual categories, such as comfort and privacy, awareness and visibility, perceptions of who Choices is for, and gaps in engagement. Within each category, I compiled a few relevant excerpts, including paraphrased responses and brief snippets, with the intention of returning to the raw data to incorporate full direct quotes where appropriate. This process allowed me to move between individual responses and larger patterns, balancing attention to specific student voices with an understanding of collective trends.

Quantitative and qualitative data were analyzed in relation to one another in order to identify patterns across different forms of engagement. Quantitative survey responses were used to identify general trends in comfort levels, while qualitative responses were examined to better understand the experiences and concerns underlying those patterns. This approach allowed for connections to be made between numerical trends and the meanings students attached to them, particularly in relation to comfort, accessibility, and interpersonal interaction.

While the initial coding process was guided by patterns emerging from the data itself, the interpretation of these patterns was informed by the project's theoretical framework. In

particular, themes related to comfort, access, and engagement were later considered in relation to concepts such as relational care, stigma, and accessibility. This allowed for a deeper understanding of not only what patterns appeared in the data, but why they might exist within the context of peer-led sexual health education.

Seen, Said, and Left Unsaid (Findings)

Not Exactly As Planned: Process as Data

This section outlines the process through which this project took shape, including the initial plans, the shifts that occurred along the way, and the reasoning behind those changes. Rather than following a linear path from design to implementation, this project evolved in response to practical constraints, participant engagement, and emerging insights. As a practitioner inquiry, these shifts are not treated as deviations from the project, but as part of the process itself, revealing how knowledge is shaped through doing, adjusting, and reflecting in real time.

From Framework to Practice

This project was guided by the theory of change outlined earlier, which centers relational trust, emotional safety, and accessibility as key conditions for student engagement with sexual health resources. Rather than approaching engagement as a matter of awareness or information alone, this perspective assumes that students' willingness to interact with resources like Choices is shaped by how comfortable, visible, and supported they feel in the process.

In practice, this meant designing the project to focus not only on whether students were aware of Choices, but how they experienced it. The survey and accompanying questions were intentionally structured to explore comfort, hesitation, and perceptions of the space, including moments where students chose not to engage. Attention was given to both visible and more personal forms of participation. This ranged from lower-stakes interactions such as entering the space or attending events, to more direct engagement, such as speaking directly with an educator or picking up a sex toy.

This approach also informed the decision to prioritize anonymous and low-barrier forms of participation. Recognizing that not all students are willing or ready to engage in direct or interpersonal ways, the project sought to create opportunities for students to share their experiences without requiring visibility or disclosure. In this sense, the methods were designed to accommodate different levels of comfort, enabling students to engage without needing to disclose personal information or interact directly.

Rather than measuring solely through participation rates or knowledge outcomes, this project focused on identifying patterns in how students navigated Choices as both a resource and a group on campus. These insights were then used to consider how shifts in training, outreach, and access points might better align with the conditions that make engagement feel possible.

What I Set Out to Do

The initial design of this project included three primary components: an anonymous question form shared via Instagram, an anonymous survey, and semi-structured interviews with students and Choices educators. The Instagram question form was intended to create a low-barrier entry point for students to ask questions about sexual health, while also generating

insight into common concerns and areas of uncertainty. The survey aimed to capture broader patterns in awareness, comfort, and engagement with Choices across the student body.

Interviews were designed to provide deeper, more nuanced understanding of student experiences and educator perspectives, particularly around trust, accessibility, and the limitations of current programming. Together, these methods were intended to offer a multi-layered understanding of how Choices functioned as both a resource and an educational space.

What Actually Happened

While the anonymous survey was successfully distributed and yielded 54 responses, the other components of the project did not unfold as originally planned. The survey ultimately became the most generative source of data, providing a substantial range of responses that allowed for both quantitative patterns and qualitative insight.

The Instagram question form, while conceptually aligned with the project's goals, was implemented later than anticipated, resulting in a smaller dataset. In addition to timing limitations, the nature of the responses themselves became a meaningful finding. Some responses were humorous or intentionally unserious—for example, questions such as “does a baby doll get born if you get pregnant from the strap?” or “do it squirt?”—while others included irrelevant or inappropriate content, such as someone's social security number (which I hope is fake). Rather than dismissing these responses as unusable, they point to how anonymity shapes engagement, creating space not only for genuine questions, but also for humor, boundary-testing, and disengagement. These kinds of responses are not unexpected in anonymous formats. In some cases, they can still function as entry points for education. For example, a question like “do it squirt?” can open up conversations around anatomy, pleasure, and common misconceptions. This

suggests that while anonymity lowers barriers to participation, it does not guarantee consistent or clearly articulated engagement. Instead, it highlights the range of ways students may choose to engage when given low-barrier entry points. Figure 5 shows a selection of responses submitted through the anonymous Instagram question form, illustrating this range of engagement, from sincere curiosity to humor and boundary-testing.

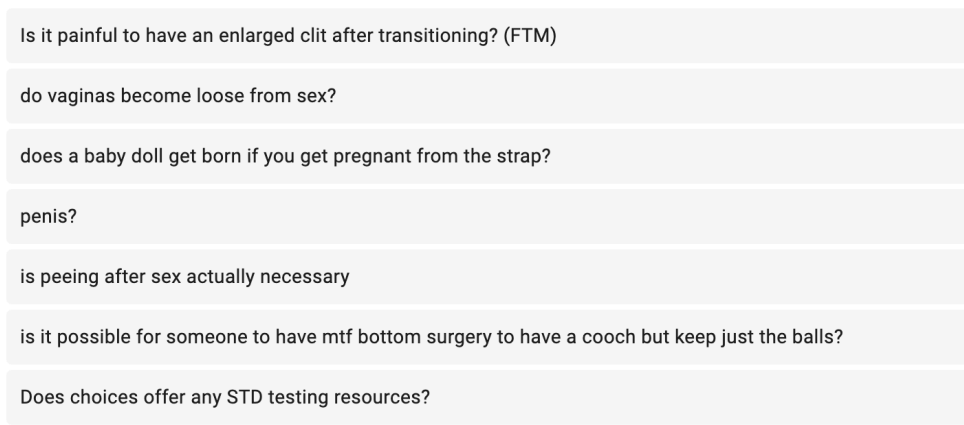


Figure 5. Responses from the Instagram question form

The interview component was not completed due to time constraints and limited participant response. Initial outreach was conducted through the Choices educator group chat; however, there was not sufficient engagement to schedule interviews within the project timeline. Although additional outreach strategies may have been possible, time constraints within the academic timeline ultimately limited further attempts.

What That Shift Made Visible

Although the project did not unfold exactly as planned, the increased reliance on survey data both expanded the breadth of the findings and introduced certain limitations. With 54 responses, the survey provided a substantial dataset, offering insight into a wide range of student experiences, including both those who had engaged with Choices and those who had not. This

breadth made it possible to identify patterns across comfort levels, perceptions of the space, and varying forms of engagement.

At the same time, the absence of interviews limited the depth of the data. While the survey captured a broad range of perspectives, it did not allow for follow-up questions, clarification, or deeper exploration of individual experiences in real time. Interviews would have provided a more nuanced understanding of how participants interpret and navigate their interactions with Choices, particularly in moments of hesitation or discomfort.

The survey format also offered a different kind of insight. Because responses were not given in real time, participants had the opportunity to sit with questions and consider their answers, rather than responding immediately in a potentially more pressured or performative setting. This may allow for more considered or self-aware responses than what might emerge in a live conversation.

The shift away from interviews also prompted a deeper engagement with qualitative survey responses. Open-ended answers offered participants the opportunity to articulate their experiences, concerns, and suggestions in their own words, often revealing nuance within the constraints of a written format.

Rather than treating the absence of interviews solely as a limitation, this shift allowed the project to center patterns of engagement at a broader scale. The data made visible how participants navigate Choices in different ways, from entering the space without interaction, to selectively engaging, to avoiding it altogether. These patterns offered insight into the conditions that shape participation, particularly around visibility, privacy, and interpersonal interaction.

In addition to survey data, this project is also informed by participant observation. As a Choices educator, I occupy an ongoing role within the space, allowing me to observe patterns of

interaction, non-interaction, and everyday engagement as they unfold. These observations include moments that are not always captured through formal data collection, such as students entering without speaking, hesitating before engaging, or choosing to leave without interacting at all. They also include the rhythms of office hours themselves, where long periods of inactivity are punctuated by brief or highly variable interactions. Rather than treating these moments as incidental, they are understood as meaningful data, offering insight into how students navigate visibility, privacy, and interpersonal risk in real time. This perspective provides additional context for interpreting survey responses, particularly in understanding the gap between reported attitudes and observed behavior.

As a practitioner inquiry, this process reinforced the importance of flexibility and responsiveness. The adjustments made throughout the project did not move it away from its original goals, but instead clarified both the possibilities and limitations of different methods of engagement. In this way, the shift in method became part of the findings themselves, highlighting not only what participants shared, but how they were willing, or unwilling, to share it.

Making Meaning from the Data

This section examines the impact of the intervention through survey data collected from Clark University students (n=54) focusing on how students perceive, access, and engage with Choices in practice. The survey was designed to capture not only students' levels of awareness and participation, but also their comfort across different forms of engagement, ranging from low-visibility interactions, such as viewing on social media or attending an event, to more interpersonal experiences, such as speaking with an educator or asking sexual health questions.

Across responses, a clear pattern emerges: while many students describe Choices as a valuable and generally positive resource, their comfort is not consistent across these different modes of engagement. Instead, comfort exists along a spectrum that is closely tied to visibility and interpersonal interaction. Students report the highest levels of comfort with lower-risk, less interpersonal forms of engagement. For example, when asked about entering the Choices space, 17 respondents reported feeling *extremely comfortable* and 12 *somewhat comfortable*, with only 2 indicating any levels of discomfort. Similarly, accessing basic sexual health supplies produced relatively high comfort levels, with 16 respondents reporting being *extremely comfortable* and 12 *somewhat comfortable*.

However, this comfort decreases as engagement becomes more personal or potentially more visible. When asked about speaking with an educator or asking a sexual health question, the number of students reporting discomfort increased, with 6 respondents indicating they felt *somewhat uncomfortable* and 1 *extremely uncomfortable*. This shift becomes even more pronounced in relation to picking up sex toys, where 7 respondents reported being *somewhat uncomfortable* and 4 *extremely uncomfortable*.

Qualitative responses further highlight how this pattern is shaped by concerns related to privacy, social perception, and uncertainty about how interactions within the space might unfold. Some students expressed a desire for more discreet ways to access resources, noting that visibility and fear of being recognized can act as barriers. Others emphasized the role of social networks, suggesting that familiarity, such as having friends involved with Choices, can increase comfort and willingness to engage. At the same time, among the 31 respondents (out of 54 total) who answered the open-ended question the majority (26), expressed positive perceptions of

Choices, describing it as a helpful and necessary resource on campus, particularly for students already comfortable with sexual health discourse.

Taken together, these findings suggest that access alone does not guarantee engagement. Instead, participation is shaped by whether the space feels socially and emotionally safe to move through, conditions that are shaped by educator practices, available resources, and the structure of student interactions within the space.

Comfort, Privacy, and Risk

One of the clearest patterns across survey responses is that students' comfort with Choices is deeply shaped by concerns around privacy and visibility. While many respondents report feeling comfortable entering the space and accessing basic resources, this comfort is not uniform or unconditional. Instead, it is negotiated, dependent on how visible, identifiable, or personally revealing the interaction feels. This suggests that comfort is not a fixed trait, but something that shifts based on the perceived social stakes of engagement.

Although a majority of students expressed high levels of comfort with entering the Choices space and accessing sexual health supplies, this comfort exists alongside a smaller but significant group of students who experience hesitation, neutrality, or discomfort. These neutral responses are particularly important, as they suggest not full comfort, but uncertainty, indicating that some students may not feel at ease even when engaging in relatively low-visible ways. Simply being physically present in the space can carry a degree of social risk. Rather than signaling indifference, these neutral responses point to a lack of clarity about what engagement might entail, reinforcing that uncertainty itself can function as a barrier.

Qualitative responses help explain this tension. For some students, the primary concern is not the resource itself, but the possibility of being seen engaging with it. One respondent described wanting “a more covert way to procure items,” explaining that “rumors spread fast on this campus...i do not want the entire student body to know the ins and outs of my sexual preferences.” This response highlights how engagement with sexual health resources is not only a personal decision, but a social one, shaped by how others might interpret that engagement. In this sense, discomfort is not about lack of need or interest, but about managing how one is perceived within a highly visible social environment.

Other responses reinforce the idea that visibility itself can act as a barrier. One student noted that the space can feel “in your face,” particularly for those who may already feel embarrassed or uncertain about engaging with sexual health resources. “The space” refers to the physical Choices office on campus, where students can access supplies and interact with peer educators. Suggestions such as creating more discreet or contactless ways to access supplies further emphasize the importance of privacy, pointing to a desire for engagement that does not require public identification. This reframes accessibility as not only the availability of resources, but the ability to access them without being socially marked or exposed.

At the same time, discomfort is not only about being seen, but also about how interactions unfold within the space. Some students expressed concern about being approached or having to engage in public-facing conversations about sexual health. One respondent emphasized the need to be “careful when approaching people” during events, noting that not everyone is comfortable discussing sexual topics openly, particularly survivors of sexual violence. Another described the experience as feeling “very all or nothing at times,” suggesting that the space may not always accommodate varying levels of comfort or readiness. These

responses point to a lack of flexibility in how students are able to engage, where participation feels like it may require a level of openness that not all students are prepared for. Together, these responses suggest that discomfort emerges not only from visibility, but from a lack of control over the terms and pacing of interaction.

These findings suggest that comfort is not simply about access, but about control over who sees them, what is revealed, and how interactions unfold. When students feel unable to manage these elements, even low-barrier forms of engagement can become fraught. This helps explain why participation does not always follow availability: the decision to engage is shaped not only by need or interest, but by whether the experience feels socially and emotionally manageable. Comfort, then, operates as a form of risk management, where students are continuously assessing how much of themselves they are willing to expose in order to access resources.

Visibility, Social Dynamics, and Familiarity

While individual concerns around privacy and control shape how students approach Choices, these experiences do not occur in isolation. Survey responses suggest that comfort is also deeply influenced by social dynamics, particularly familiarity, peer networks, and perceptions of who engages with the space.

Across responses, students frequently described learning about Choices through social channels such as friends, word of mouth, or involvement fairs, rather than through formal institutional communication. This pattern highlights the role of peer networks not only in spreading awareness, but in shaping how the organization is perceived. Rather than functioning

solely as a campus resource, Choices operates as a socially embedded space, where engagement is mediated through relationships and informal networks.

This dynamic becomes especially visible when considering how familiarity impacts comfort. When asked who they feel comfortable discussing sexual health with, 29 students selected friends and 25 selected romantic/sexual partners, while no one selected peer educator, and only 13 selected a health professional. Similarly, when asked whether they would feel more comfortable discussing sexual health with someone they know or don't know, a majority indicated a preference for someone familiar. These responses suggest that trust is relational rather than role-based; students are more likely to engage when a sense of personal familiarity is already established.

Qualitative responses reinforce this pattern. One student noted that knowing their friends were engaging with Choices would make them feel more comfortable doing so themselves, while others described learning about the organization through existing social connections. In this way, engagement is not only an individual decision, but a socially influenced one, shaped by who else is perceived to be participating.

At the same time, these dynamics can also contribute to exclusion. Several respondents suggested that Choices may primarily serve students who are already comfortable with sexual health discourse, particularly those who are queer, sexually active, or already engaged in sex-positive spaces. One respondent noted that the organization is "very helpful for sexually active people and people who want to learn about that kind of stuff," while another described it as serving "mostly lgbt ppl," and a third suggested that "non-hetero fem presenting people are served well." These responses point to a perception that the space is more accessible to those who already feel aligned with its openness and framing of sexuality.

Others noted that students from different cultural backgrounds, or those with less prior exposure to sexual health education, may feel less included or less likely to engage. One respondent specifically suggested that those seeking “more information on intersectional identities of race, gender, sexuality, etc.” may not feel fully served by the organization. This suggests that visibility is not neutral; who is seen engaging with the space can shape who feels the space is “for them.”

Together, these findings indicate that comfort is not only shaped by the structure of the space itself, but by the social meanings attached to it. Familiarity can function as a bridge to engagement, making participation feel safer and more approachable. At the same time, a lack of familiarity, or the perception that the space is associated with a particular social group, can reinforce hesitation or distance. As a result, engagement with Choices is not only about navigating personal comfort, but about navigating belonging.

Engagement, Accessibility, and the Limits of Access

Despite high levels of awareness and generally positive perceptions of Choices (49 people reported they knew about Choices), survey responses reveal a noticeable gap between knowing about the organization and actively engaging with it. While many students reported attending events (26), following Choices on social media (29), or visiting the campus space (24), fewer respondents reported engaging in more interpersonal forms of participation such as picking up sex toys (8). This suggests that engagement is not a single action, but a layered process, where students may participate in some ways while avoiding others.

This pattern is further reflected in students’ reported experiences. Many respondents described their interactions with Choices as very positive, often highlighting the accessibility of

resources, the friendliness of educators, and the value of events. For example, one student described Choices as a “safe space,” while another noted that it was “no pressure or anything just space to browse and learn.” However, several students noted that they had limited or no direct interaction with the organization, despite being aware of its presence on campus. One respondent stated, “I’m glad that they exist on campus, but I don’t engage with them,” while another described having “Very little interaction.” This indicates that positive perception alone doesn’t necessarily translate into active or sustained engagement.

Qualitative responses further highlight how students navigate these barriers. Some described engaging with Choices in limited or indirect ways, such as attending occasional events or passively following content, while avoiding more direct interaction. Others expressed interest in engaging more, but indicated that uncertainty or discomfort prevented them from taking that step. For instance, one student explained that they, “don’t know them well enough to make a big judgement either way, but so far nothing has alarmed me. I agree with their mission on campus and wouldn’t be opposed to getting more involved with them in the future,” while another noted that they had not had a lot of interactions. In practice, this reflects a pattern of partial engagement, where students remain at lower levels of involvement rather than progressing toward more interactive forms of participation.

Students also offered suggestions for increasing accessibility that point to a desire for more flexible and varied forms of engagement. Recommendations such as expanding educational programming, improving communication about how to contact educators, or creating more discreet and accessible ways to obtain resources suggest that students are not disengaged, but are instead navigating how and when to participate. One student, for example, suggested that “Online ordering from the space to our clark mail boxes would be awesome for people who feel

uncomfortable purchasing items in person,” while another noted that they would feel more comfortable engaging “if I knew my friends were engaging with it.” Rather than indicating a lack of interest, these responses reframe disengagement as selective participation shaped by available entry points.

Overall, these findings suggest that access alone is not sufficient to produce meaningful engagement. While Choices is widely recognized as a valuable resource, participation is shaped by how accessible, predictable, and personally relevant different forms of engagement feel. Engagement, in this sense, operates as a gradient rather than a binary, where students move between levels of participation based on comfort, familiarity, and perceived risk.

Perception, Scope, and Who Choices Is “For”

Beyond questions of comfort and engagement, survey responses reveal that students hold varied and sometimes conflicting understandings of what Choices is and who it is intended to serve. While many respondents described the organization as a valuable and inclusive resource, others suggested that its messaging, programming, or overall presence may resonate more strongly with certain groups than others. This indicates that engagement is shaped not only by access or comfort, but by whether students perceive the space as relevant to them.

Several students expressed uncertainty about the scope of Choices’ work or their own relationship to it. Some described having very little experience with the organization or not knowing enough to fully evaluate it, while others noted that they were aware of its presence but unsure of how, or whether, it applied to their needs. This suggests that awareness does not necessarily translate into clarity, and that ambiguity around purpose can contribute to distance or disengagement.

At the same time, a number of responses pointed to the perception that Choices primarily serves students who are already comfortable with sexual health discourse. For example, one respondent described the organization as serving “sexually active people and people who want to learn about that kind of stuff,” another wrote, “I think Choices serves white (& American), sexually active...queer (sexuality & gender) people really well.” Another respondent went as far as to say, “it serves well to...perverts and people who are very eager on their sexuality.” Others noted that students who are less experienced, more reserved, or coming from more conservative backgrounds may feel less represented or less likely to engage. In this way, perceptions of who the space is “for” can shape who feels invited to participate.

Some responses also highlighted tensions around how sexual health is framed within the space. One student noted that while supporting sexual expression is important, “sometimes there is a time and place and some people prefer to be more reserved,” suggesting that the current framing may not fully accommodate a range of comfort levels or perspectives. Another respondent similarly emphasized the importance of not “rushing into things,” noting that while sex positivity is valuable, there should also be more emphasis on taking one’s time and navigating readiness. Together, these responses suggest that the tone of the space may be interpreted as encouraging a particular approach to sexuality, which may not align with all students’ experiences or comfort levels.

These responses point to a potential mismatch between the organization’s intentions and how it is experienced by a broader student population, particularly for students who do not identify with dominant narratives of sexual openness or readiness.

At the same time, many students emphasize the importance of Choices’ presence on campus, describing it as a necessary resource and expressing appreciation for its efforts to

provide education, materials, and support. This tension—between valuing the organization and not fully identifying with it—highlights the complexity of engagement, where students may support the mission while still feeling uncertain about their place within it.

Overall, these findings suggest that perception plays a critical role in shaping engagement. Even when resources are available and accessible, students are more likely to participate when they see themselves reflected in the space and its messaging. As a result, engagement is influenced not only by what Choices offers, but by how students interpret what it represents.

These findings not only reveal patterns in how students engage with Choices, but also raise important questions about how these dynamics are produced and sustained. As a Choices educator, I am not separate from these processes, but actively involved in shaping how the organization is experienced by others. The patterns identified across these themes—particularly around comfort, visibility, and perceived fit—invite reflection on how my own practices, assumptions, and approaches to sexual health education may contribute to or challenge these dynamics.

How I've Changed (Practitioner Inquiry)

Building on these findings, I turn inward to examine how my own role within Choices intersects with the dynamics identified in this study. Rather than approaching these patterns as external observations, this process required me to consider how my everyday practices as an educator may shape students' experiences of comfort, visibility, and engagement. In doing so, I reflect on the assumptions I brought into this work, the moments where those assumptions were

challenged, and the ways my understanding of accessibility and peer education has begun to shift as well.

When Assumptions No Longer Hold: Rethinking Accessibility

Entering this project, I understood barriers to engagement primarily as a matter of discomfort with sexual topics or lack of awareness. I believed that increasing openness, normalizing conversation, and making resources visible would naturally lead to greater student engagement.

However, my findings complicated this assumption. Students' hesitations were not simply about discomfort with sexual health, but were shaped by concerns around visibility, social perception, and uncertainty about how interactions would unfold. This challenged my assumption that making the space more open and conversational would necessarily make it more accessible.

Prior to this project, I understood accessibility largely in terms of availability, ensuring that resources were present, visible, and easy to obtain. Through this research, I began to see that accessibility is also about how engagement is structured. Even when resources are available, students may not engage if doing so requires a level of visibility, interaction, or confidence that feels uncomfortable or uncertain. This reframed accessibility as something that must account for variability, where students can engage in ways that feel manageable to them, rather than being expected to engage in a particular way. In practice, this means recognizing that openness is not inherently accessible, and that creating a welcoming space may also require offering options for privacy, distance, and low-pressure interaction. It also led me to think more intentionally about

how different entry points into the space—such as anonymous questions, passive resource access, or low-pressure interactions, can support a wider range of student needs.

Navigating the Limits of Peer Education

Another area of reflection emerged around the scope of what students expect from Choices. While the organization is designed to provide sexual health education, resources, and support, some responses indicated a desire for guidance related to sexual assault and trauma. These expectations extend beyond the training and capacity of peer educators, revealing a tension between what students may need and what the organization is equipped to provide. This challenged my understanding of what it means to be a “supportive” or “safe” space. Prior to this project, I often approached my role with the assumption that being open, informed, and nonjudgemental would allow me to meet most students’ needs. However, these findings made it clear that there are limits to what peer education can, and should, offer.

In reflecting on this tension, I began to reconsider how support is communicated and enacted within Choices. While it is important to create an environment where students feel comfortable asking questions and seeking information, it is equally important to recognize when needs fall outside the scope of peer education. This requires a balance between care and clarity, being responsive and empathetic, while also maintaining appropriate boundaries. Rather than attempting to fill gaps that require professional expertise, this realization highlights the importance of transparency in practice. This includes clearly communicating what Choices can provide, being intentional about how sensitive topics are approached, and ensuring that students are connected to appropriate campus or community resources when needed.

At the same time, this tension reinforces the importance of trauma-informed approaches within peer education. While educators are not counselors, the way interactions are structured, particularly in terms of tone, privacy, and responsiveness, can still significantly impact how safe or supported students feel. This has led me to think more critically about how to acknowledge students' experiences without assuming a role I am not trained to fulfill, and how to create interactions that are both supportive and appropriately bounded.

Holding Critique Alongside Care

Throughout this project, I found myself becoming increasingly critical of Choices as an organization, not the individuals involved, but of its structures, assumptions, and limitations. Engaging deeply with the data required me to look more closely at where the organization falls short, particularly in how it is perceived by students who feel uncertain, excluded, or hesitant to engage. At times, this critical perspective felt uncomfortable. It created a tension between my investment in Choices and my responsibility as a researcher to examine it honestly. I care deeply about the organization and the work it does, and I want it to succeed. At the same time, this project made it difficult to ignore the ways in which Choices does not fully meet the needs of all students.

Rather than viewing this tension as a contradiction, I began to understand it as a necessary part of the research process. Critique, in this context, is not a rejection of the organization, but an expression of care and commitment to its growth. Being able to identify gaps, limitations, and areas for improvement is part of what allows the organization to evolve and become more responsive to the community it serves. This shift also required me to reconsider how I think about effectiveness. Prior to this project, I tended to evaluate Choices

based on what it offered—resources, events, education—assuming that these elements were inherently valuable. However, my findings highlighted that what matters equally is how those offerings are experienced, interpreted, and accessed by students.

This reframing pushed me to move beyond a surface-level understanding of success, toward a more critical and reflective approach that considers both intention and impact. It also reinforced the importance of being open to discomfort, particularly when that discomfort reveals opportunities for change.

Shifting My Practice

As a result of this project, I am beginning to approach my role as an educator with greater intentionality and awareness of how students may experience engagement with Choices. Rather than assuming that openness and conversation are inherently welcoming, I am now more attentive to how visibility, interaction, and tone can shape whether a student feels comfortable participating. This shift has led me to think more carefully about how to create multiple pathways into engagement, rather than relying on a single model of interaction. In practice, this means recognizing that not all students will want to ask questions, engage in conversation, or make their presence known. For some, accessing resources quietly or observing from a distance may be the most comfortable and meaningful form of participation.

This has also changed how I approach interactions during office hours and events. I am more mindful of how and when I initiate conversations, and more aware of the importance of allowing students to set the terms of engagement. Rather than encouraging participation as an end goal, I am beginning to prioritize autonomy, ensuring that students can choose how they engage without pressure or expectation.

At the same time, this project has prompted me to think more critically about how Choices communicates its purpose and scope. Students' uncertainty about what the organization offers, and who it's for, suggests that accessibility is also shaped by clarity and representation. This reinforces the importance of not only what we provide, but how we present it, and whether students are able to see themselves reflected in that presentation.

While I continue to value the commitment to sex positivity and openness, I now better understand that these values must be enacted with greater flexibility. Moving forward, my practice is guided by the recognition that accessibility, comfort, and engagement are not fixed outcomes, but ongoing processes that require responsiveness, adaptability, and care.

From Insight to Intervention

Resource Library

In response to findings that highlighted gaps in accessible, centralized, and low-barrier sexual health information, I developed a resource library intended to support both students and educators. This library compiles a range of materials, including digital educators, books, organizations, and online guides, covering topics such as sexual health, pleasure, identity, relationships, and kink. This selection of resources reflects an intentionally broad and inclusive approach to sexual health education, moving beyond strictly clinical information to include perspectives on pleasure, queerness, and lived experience. Many of the included sources are drawn from social media platforms and community-based educators, recognizing that students often engage with sexual health information in informal, accessible digital spaces rather than through institutional channels.

This intervention responds directly to patterns identified in the data, particularly students' preference for low-visibility, self-directed forms of engagement. By providing a resource that can be accessed independently, the library creates an additional entry point into sexual health education that does not require interpersonal interaction or disclosure. In this way, it aligns with the project's emphasis on autonomy, accessibility, and varied pathways to engagement.

The resource library is intended to function both as a student-facing tool and as a support for educators, who can draw on it during interactions or refer students to it as needed. This helps reduce reliance on real-time knowledge recall and supports more consistent, informed responses across educators.

Importantly, this resource library is designed as an evolving document rather than a fixed or complete collection. While this project includes an initial version, it is intended to continue growing over time, with the potential for additional resources to be added by future educators and members of the Choices community. In this sense, the library reflects the project's broader commitment to participatory design, inviting ongoing contribution, adaptation, and expansion. The full resource library is included in Appendix A


Updated Educator Training

The following slides represent a selection of proposed updates to educator training, designed to reflect the patterns identified in this study. While these examples highlight key areas of change, they are part of a broader effort to redesign training in ways that better align with how students actually engage with Choices. These materials focus on areas where shifts in approach are most needed, particularly in relation to non-linear engagement, educator responsiveness, and access to resources

Engagement Isn't One-Size-Fits-All

Students engage in different ways:

- Entering the space without speaking
- Grabbing resources without talking
- Attending events without participation



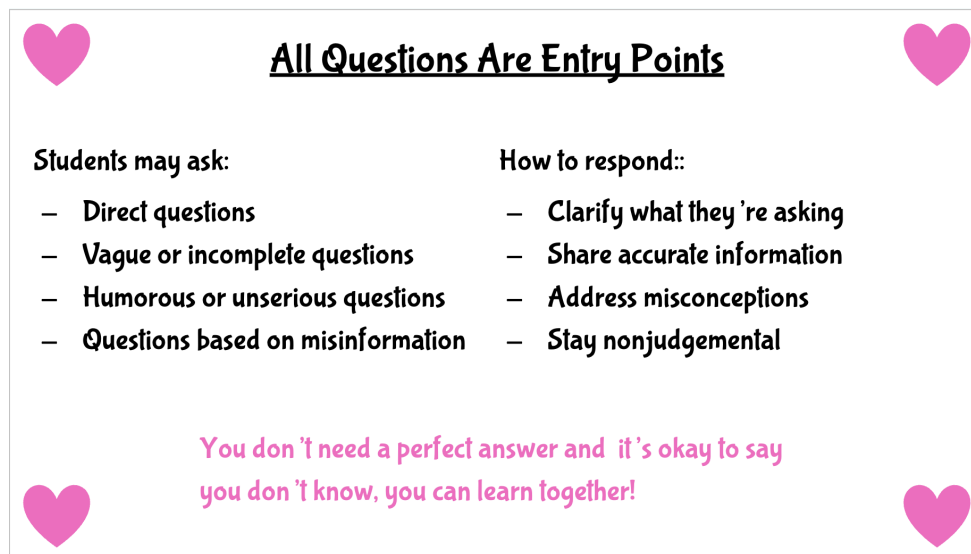
Your role is to create a space where engagement feels possible but isn't required

What this means:

- Silence ≠ disengagement
- Brief interactions still matter
- Observation is a form of participation

Figure 6. Engagement Isn't One-Size-Fits-All

Figure 6 introduces the concept of non-linear engagement, emphasizing that students interact with Choices in a range of ways that do not always involve direct communication. This slide draws directly from survey data and participant observation, where many students reported entering the space, obtaining resources, or attending events without engaging in conversation. By reframing these actions as valid forms of participation, this approach challenges the assumption that engagement must be visible or interpersonal. Instead, it positions the educator's role as creating conditions where engagement feels possible, rather than expected.




All Questions Are Entry Points

Students may ask:	How to respond::
– Direct questions	– Clarify what they're asking
– Vague or incomplete questions	– Share accurate information
– Humorous or unserious questions	– Address misconceptions
– Questions based on misinformation	– Stay nonjudgemental


**You don't need a perfect answer and it's okay to say
you don't know, you can learn together!**

Figure 7. All Questions Are Entry Points

Figure 7 builds on findings from the anonymous Instagram question form, which revealed that student questions often vary in clarity, tone, and intent. By framing all questions, whether humorous, direct, or vague, as entry points for education, this slide shifts the focus from evaluating the quality of a question to responding to the need behind it. This approach reflects the project's emphasis on meeting students where they are and recognizes that engagement may not always take a conventional form. It also encourages educators to approach interactions with flexibility, curiosity, and a nonjudgemental stance.




Practice: Responding to Real Questions



Example Questions:

- Is it normal to masturbate every day?
- Can you get pregnant in a hot tub?
- How does STI testing work?

Let's practice these skills together!



Step 1: Break it down

- What are they *actually* asking?
- What might they be unsure about?
- Is there misinformation present?

Step 2: Respond:

- Clarify the question if needed
- Share accurate information
- Stay nonjudgemental
- Keep it as simple and clear as possible




Figure 8. Practice: Responding to Real Questions

Figure 8 translates these concepts into practice through a structured exercise designed to help educators build confidence in responding to a range of student questions. Drawing on patterns identified in both survey data and anonymous responses, this activity emphasizes process over perfection, guiding educators to break down questions, identify underlying concerns, and respond thoughtfully. By incorporating reflection, the exercise also encourages educators to consider their own comfort levels and areas for growth. In doing so, it supports a more adaptive and responsive approach to peer education that aligns with the variability of student engagement

Together, these training materials reflect a shift from viewing peer education as the delivery of information toward understanding it as a relational and adaptive practice. Rather than assuming that students will engage in direct or predictable ways, this approach prepares educators to navigate a range of interaction styles, including silence, ambiguity, and humor. By emphasizing flexibility, responsiveness, and ongoing learning, these materials aim to better align

educator training with the realities of how students experience and move through the Choices space.

From Insight to Action

These interventions represent a multi-layered approach to rethinking how Choices supports student engagement. Rather than offering a single solution, they respond to the complexity revealed in the data, where engagement is shaped by comfort, visibility, social dynamics, and individual readiness. The resource library and training materials each address different aspects of this dynamic, working collectively to expand how students can access and interact with sexual health education.

The resource library introduces a low-barrier, self-directed entry point, allowing students to engage with information privately and at their own pace. This directly responds to students' need for private forms of interaction, particularly when navigating topics that may feel personal or stigmatized. At the same time, its design as an evolving, participatory document reflects a commitment to ongoing growth, inviting future educators to contribute to and reshape the resources over time.

The training materials translate these insights into practice, offering educators concrete strategies for navigating the realities of student interaction. By emphasizing non-linear engagement, reframing how questions are understood, and encouraging reflective skill-building, these materials shift the role of educator from information provider to responsive guide. This approach not only supports students, but also positions educators as ongoing learners, capable of adapting to different forms of engagement even in moments of uncertainty or limited interaction.

Importantly, these interventions do not attempt to eliminate discomfort or create a universally engaging space. Instead, they acknowledge that hesitation, ambiguity, and selective participation are inherent to how students navigate sexual health in a social environment. In this sense, the goal is not to standardize engagement, but to make space for its variability. By offering multiple pathways into interaction—some visible, some private, some interpersonal, and some self-directed—this approach works to reduce the pressure associated with participation while still supporting access to information and resources.

Ultimately, this project reframes engagement not as a measurable outcome, but as an ongoing process shaped by context, relationships, and perception. The interventions presented here reflect a shift toward designing for that process, rather than attempting to control or predict it. In doing so, they position Choices not simply as a site of resource distribution, but as a space that can evolve in response to the diverse and changing needs of the students it serves.

Not a Final Answer, But a Direction

This project examined how students at Clark University perceive and engage with Choices, a peer sex education organization on campus, with the goal of understanding how educator training and organizational practices can better support student needs. Drawing on survey data, this study explored patterns of comfort, visibility, social dynamics, and engagement, as well as students' perceptions of who the space is for and how it functions. In doing so, the project moved beyond measuring awareness or usage, instead focusing on how students experience the organization in practice and how those experiences shape patterns of participation.

Grounded in a practitioner inquiry approach, this research not only analyzed student responses, but also reflected on my own role as an educator within the organization. This dual perspective allowed for a layered analysis, where student experiences were not treated as separate from the organization, but as outcomes shaped through everyday interactions, educator practices, and structural conditions within Choices. By situating myself within the research, I was able to examine not only what students reported, but by how those patterns might be connected to the ways the space is designed, facilitated, and maintained.

Across findings, it became clear that while Choices is widely recognized as a valuable resource, engagement is uneven and shaped by a range of social and emotional factors. Students do not simply decide whether or not to engage, but instead navigate how, when, and to what extent participation feels manageable. This framing shifts engagement from a question of access to a question of experience, emphasizing that participation is contingent on how students interpret and move through the space.

Limitations

This study is limited by its reliance on a relatively small sample (n=54), compared to Clark's total student population of 3,391 (Common Data Set), which may not fully represent the diversity of student experiences. As a result, these findings should be understood as indicative of patterns rather than comprehensive or universally applicable conclusions. Additionally, the absence of interview data limited the depth of qualitative analysis, as responses were constrained by the format and brevity of survey answers. While the survey captured a range of perspectives, it did not allow for extended dialogue or clarification, which may have limited the nuance of certain insights.

Certain survey questions also produced limited or less applicable data due to their structure or distribution. This highlights the importance of careful survey design, particularly in ensuring that questions are worded clearly and that the questions align with the populations they are intending to capture. Future research could address these limitations by incorporating interviews, focus groups, or iterative survey design to deepen and refine the findings.

Collective Analysis

Taken together, the findings reveal that engagement with Choices is not determined solely by access to resources, but by how students experience the space in relation to visibility, belonging, and control. Comfort operates as a form of social and emotional risk management, where students assess the potential consequences of engaging before deciding how to participate. These assessments are not abstract, but grounded in everyday considerations: who might see them, how their actions might be interpreted, and whether the interaction feels predictable or uncertain.

At the same time, engagement is influenced by social dynamics, including familiarity, peer networks, and perceptions of who typically participates. These factors shape whether students feel a sense of belonging within the space, or whether they perceive it as intended for others. In this way, belonging is not simply about inclusion in theory, but about recognition in practice, whether students can see themselves reflected in the space, its messaging, and the people who occupy it.

These dynamics produce patterns of partial engagement, where students may interact with Choices in limited or indirect ways, such as attending events or accessing supplies, while avoiding more visible or interpersonal forms of participation. Rather than indicating disinterest,

this pattern reflects an active negotiation process, where students engage strategically based on what feels socially and emotionally manageable at a given moment. Engagement, therefore, is not absent, but unevenly distributed across different forms of participation.

Theoretical Implications

These findings contribute to broader understandings of peer education and sexual health engagement by highlighting the relational and socially constructed nature of accessibility. While sexual health education is often framed in terms of information delivery and resource availability, this study demonstrates that access alone does not guarantee participation. Instead, accessibility emerges as something that is continuously produced through interaction, perception, and social context, rather than something that can be achieved through provision alone. In this sense, the findings complicate dominant assumptions in the literature that position accessibility as a matter of availability, suggesting instead that accessibility is contingent on whether individuals feel able to engage within the social and emotional conditions of a space.

Engagement is also shaped by how individuals interpret social environments, manage visibility, and assess potential risks. These processes are deeply embedded in social context, where norms, perceptions, and interpersonal dynamics influence how resources are understood and utilized. This suggests that participation in sexual health education is not only a matter of knowledge or need, but of navigating social meaning: how engagement signals identity, behavior, or belonging within a particular environment. Importantly, this reframes accessibility as inseparable from questions of visibility and privacy, where the ability to engage is tied not only to what is offered, but to how that engagement might be seen, interpreted, or judged by others.

This reframes sexual health education as inherently relational and affective, where trust, perception, and emotional safety play a critical role in shaping participation. However, this project also extends relational frameworks by challenging the assumption that care is most effectively expressed through visible or interpersonal engagement. Instead, the findings suggest that care can also take quieter, less visible forms, including anonymity, indirect participation, and self-directed interaction. In this way, care is not limited to presence or dialogue, but can be embedded in the design of systems that allow individuals to engage without exposure or disclosure.

This shift has important implications for how relational care is conceptualized in the literature. While many frameworks emphasize connection, dialogue, and mutual presence, this project suggests that care must also account for distance, privacy, and autonomy. In contexts shaped by stigma or vulnerability, the ability to remain unseen or anonymous may not represent disengagement, but a necessary condition for participation. This complicates binary distinctions between engagement and non-engagement, suggesting instead that participation can occur across a spectrum that includes both visible and invisible forms of interaction.

It also aligns with theoretical approaches that center care, mutuality, and lived experience, emphasizing that learning does not occur in isolation but within socially mediated environments. At the same time, this project pushes these approaches further by foregrounding the role of anonymity and flexibility as forms of care, rather than as limitations or secondary supports. This suggests that accessibility must be understood not only as the presence of resources, but as the presence of conditions that allow individuals to engage on their own terms.

What these findings ultimately suggest is that accessibility is not a fixed characteristic of a resource or space, but an ongoing relational process shaped by trust, perception, visibility, and

care. This reframing challenges traditional measures of engagement that prioritize visibility or participation, instead calling for greater attention to the conditions under which engagement becomes possible, including forms of participation that may remain partial, indirect, or unseen.

Implications for Practice

The findings and practitioner reflections from this project point to several key areas for improving Choices' accessibility and effectiveness. First, educator training can be expanded to more directly address how students experience visibility, interaction, and uncertainty. This includes developing strategies for engaging students without requiring immediate participation, recognizing signs of hesitation, and responding in ways that prioritize student autonomy rather than interaction as an end goal.

Second, the structure and presentation of resources can be reimagined to provide more flexible entry points into the space. This may include expanding anonymous or low-visibility options, reconsidering how materials are displayed, and designing systems that allow students to access resources without feeling observed or evaluated. Such changes shift the focus from visibility as a form of outreach to privacy as a condition of accessibility.

Third, improving communication about what Choices offers, and what it doesn't, can help address uncertainty and perceived mismatch. Clarifying the organization's scope, particularly in regards to topics such as sexual assault, can reduce confusion while ensuring that students are connected to appropriate forms of support, whether that be at Clark, local resources, or online resources.

Collectively, these findings suggest several key directions for practice:

- 1. Expand and Sustain Low-Barrier Access Points:**

Findings consistently show that students are most comfortable with low-visibility, self-directed forms of engagement. Continuing and expanding these access points—including the anonymous Instagram question form, discreet resource distribution, and independently accessible educational materials—can support students who may not feel comfortable engaging interpersonally. Importantly, the Instagram question form should be maintained not only as a data collection tool, but as an ongoing educational resource. As demonstrated in this project, anonymity invites a wide range of responses, from sincere questions to humor and boundary-testing. Rather than viewing this as a limitation, it can be understood as part of how students engage with sensitive topics. Responding to these questions, even when informal or indirect, creates opportunities for education that meet students where they are.

2. Reimagine Office Hours as Active, Flexible Learning Spaces:

Current office hour structures often position educators in a reactive role, waiting for students to initiate interaction. However, findings and observation suggest that many students enter the space without engaging directly, leaving educators with extended periods of inactivity. Rather than treating this time as unproductive, office hours can be reframed as active learning and engagement periods for educators. This could include responding to anonymous questions, developing materials for future educational programming, researching sexual health topics, or contributing to shared resources such as the resource library. This shift not only ensures that educators remain engaged, but also positions them as ongoing learners, continuously building knowledge and skills regardless of student

interaction. In this way, educator development becomes integrated into the structure of the space itself, rather than dependent on student demand.

3. Strengthen Training Around Relational and Non-Linear Engagement:

Findings highlight that student engagement is often indirect, inconsistent, or non-verbal. As such, training should move beyond a focus on delivering information and instead prepare educators to navigate a range of interaction styles, including silence, hesitation, humor, and partial engagement. This includes recognizing that non-interaction isn't failure, but one form of participation, and that students may engage in ways that are not immediately visible. Training should emphasize flexibility, responsiveness, and the ability to support students without requiring them to engage in a specific way.

4. Broaden Representations of Who Choices Is For:

Survey responses suggest that some students perceive Choices as primarily serving those who are already comfortable with sexual health discourse.

Expanding how the organization presents itself—through outreach, language, and programming—can help ensure that a wider range of students feel included. This includes acknowledging different levels of experience, cultural background, and comfort, and making space for students who may be uncertain, hesitant, or new to sexual health conversations. Choices can better reflect the diversity of student experiences and reduce the perception that engagement requires a particular identity or level of openness.

Overall, these implications, and the recommendations that emerge from them, shift the focus from increasing engagement through visibility and outreach to creating conditions that

support autonomy, flexibility, and varied forms of participation. Rather than encouraging students to engage in a particular way, these changes aim to expand the range of ways engagement can occur.

Significance

This project highlights the importance of moving beyond assumptions about accessibility and engagement in peer-led sexual health education. While organizations like Choices play a critical role in providing resources and information, this study demonstrates that how those resources are experienced is just as important as their availability. By centering student experience, this research shifts the focus from what organizations offer to how those offerings are actually received and navigated.

By examining engagement through the lenses of visibility, belonging, and control, this research offers a more nuanced understanding of how students navigate sexual health spaces. It reveals that engagement is not simply a matter of willingness, but of navigating complex social and emotional conditions. This work contributes to broader conversations about peer education, relational care, and student well-being by emphasizing that accessibility must be actively constructed, not assumed. It suggests that meaningful change requires attention not only to resources, but to the conditions under which those resources become usable.

Ultimately, this project highlights the value of practitioner inquiry in bridging research and practice. By reflecting from within the organization, this work demonstrates how insight, critique, and care can operate together to generate more responsive and effective approaches to student support.

Looking Forward

While this project offers a clearer understanding of how students engage with Choices, it also highlights that this work is ongoing. The patterns identified, around comfort, visibility, belonging, and perception, are not problems to be solved once, but dynamics that must be continually revisited as the organization evolves. Rather than producing a final answer, this research has shifted how I approach the questions themselves. I am no longer asking simply how to increase engagement, but how to create conditions where engagement feels possible for a wider range of students. This requires an ongoing commitment to reflection, adaptation, and responsiveness, both within my own practice and within the organization as a whole.

At the same time, this project has reinforced that change within peer-led spaces is inherently collaborative. The future of Choices is not determined by any single educator or initiative, but by the collective efforts of those involved, educators, e-board members, and students alike. The work of making Choices more accessible is not an endpoint, but a shared and evolving process.

As I move forward in my role, and in whatever comes after, I carry with me a different understanding of what it means to support students in this space. Not all students will engage in the same way, and not all forms of engagement are visible. Recognizing and respecting that variability is not a limitation, but a necessary part of creating a space that is truly responsive to student needs.

Ultimately, this project affirms the importance of remaining attentive to how spaces are experienced, not just how they are designed. This work is inherently collaborative, shaped not only by my work and my reflections, but by the ongoing contributions of educators, e-board members, and students. As Choices continues to grow and change, there is a meaningful

opportunity to build on these insights together, creating a space that evolves alongside the community it serves. The future of this work is therefore not a single outcome, but an ongoing process of learning, reflection, and collective care.

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Appendix

A. Resource Library

This resource library was developed as part of this project to provide accessible, student-centered sexual health information across a range of topics, supporting both independent and low-barrier engagement.

Sexual Health & Education (Digital Educators)

- Goddess Cecilia / Greenest Mermaid
 - Chanel Jaali (Black maternal health focus)
 - Kristin Spooner
 - Erica Smith (EricaSmith.educate)
 - Hauss of Vagina
 - PleasureCentredSexology
 - Shamyra Howard
 - Roots and Boundaries, LLC
 - @sexedprincess
 - @cliterallythebest
 - @pleasureisforpeople
 - @seggstalkradio (IG + podcast)
 - @sexclarified
 - @sexedfiles
 - @queer.asaverb
 - @pleasurescience
 - @annieundone
 - @ageofsexploration
 - @yourexgirlfriendtara
 - @cometalkwithaimee
-

Kink, BDSM, and Alternative Practices

- [Shibari Study \(rope technique repository\)](#)
 - Midori (rope, connection, femdom)
 - Tatyana King
 - The Loving Dominant
-

Queer & Relationship Education

- Kat Stark
 - The Ethical Slut
 - Bi Any Other Name
 - A Queer History of the United States
 - Queers in History
-

Pleasure, Liberation, and Theory

- Pleasure Activism
 - The Womxn Project
 - [Pleasure Pie \(organization\)](#)
-

Books (General Sexual Health, History, Culture)

- The ABCs of LGBT+
 - The Sexual History of London
 - How to Survive a Plague
 - Why Are People Into That?
 - Sex at Dawn
-

Zines, Bookstores, and Alternative Media

- [Coin Operated Press \(zines\)](#)
 - [Queer Haven Books](#)
-

Online Resources & Guides

- [Intersex Variations Glossary](#)
- [Scarleteen \(general sex ed resource\)](#)
- [Scarleteen: “Yes, No, Maybe” guide](#)