INDIANA UNIVERSITY
LUDDY SCHOOL OF INFORMATICS, COMPUTING
AND ENGINEERING
DEPARTMENT OF INFORMATICS

HOOSIER HELP: AN IU STUDENT'S DIGITAL GUIDE FOR NAVIGATING PREGNANCY AND PARENTING

Undergraduate Capstone Thesis

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Chapter 1

Introduction

1.1 Background

"Over 2 million college-aged women (ages 18-24) become pregnant each year" [6]. Moreover, "over a quarter (26 percent) of all undergraduate students, or 4.8 million students, are raising dependent children" [1]. Moreover, the Indiana University Division of Student Affairs estimates that "between 10 and 20 students enrolled at the Bloomington campus report being pregnant each academic year" [4].

Annually since 1969, the Centers for Disease Control and Prevention (CDC) collects information regarding legal, induced abortion in the United States for public health purposes such as identifying characteristics of individuals at high risk for unintended pregnancy, determining the success of programs geared towards preventing unintended pregnancy, monitoring clinical practice over time as it relates to abortion, etc. This data collection effort, known as the CDC Abortion Surveillance System, is not a national requirement, states can choose whether or not they participate in a given year, and surveillance reports are published as data becomes available to the CDC. The most recent report available to the public was published in 2016, along with its respective data set compiled by the CDC. Based on their analysis, there were 6,767 reported abortions (legal and induced) performed in Indiana on Indiana residents between the ages of 15 to 44 [2]. Furthermore, in total that year, there were 623,471 legal, induced abortions reported across 48 states and interestingly, a large number of the procedures were performed on women in their twenties [3]. Even while considering the other circumstances for which a pregnancy does not end in live birth – somewhere between 10 and 20 percent of known pregnancies end through miscarriage prior to 12 weeks gestation – the rate of legal, induced abortion is still high in the United States, especially for college-aged individuals.

Further research into pregnancy and parenthood uncovered a study published in 2013 by researchers at the University of California - San Francisco seeking to understand the reasons why individuals choose to obtain an abortion. Conducted using data acquired from a sample of 954 women from 30 different abortion facilities over a two-year period, the study concluded that 40 percent of participants chose abortion due to financial concern, 36 percent due to the timing of their pregnancy, 31 percent due to issues related to their partner, 29 percent due to a need to focus on other children, and 64 percent due to more than one reason [8].

1.2 Scope

The political climate in the United States regarding abortion, societal stigma surrounding pregnancy and parenthood as a young adult, and a lack of information provided about the availability of resources for pregnancy and parenthood on and off campus seems to contribute to a growing population of underserved college students. Such negative consequences of these circumstances include mental health concerns, students' inability to make informed decisions regarding their pregnancy and parenting, ill preparation for emergency and crisis situations, and other deficits which may lead a student to feel as though they must choose between their education and their pregnancy and/or parenthood.

This project seeks to address the underlying reasons for why individuals choose to abort their pregnancies and produce a technical solution that aids in making pregnancy, parenting, and associated experiences more feasible for Indiana University students to accomplish. It should be noted that the intent of this work is not to persuade students to make any particular decision nor to advocate for policy reform of any kind at the university or government level; rather, it seeks to provide students with the available knowledge, tools, and resources necessary to make their own informed decisions and to reduce the information gap which results in a student's sense of being ill-equipped to handle a major life transition.

1.3 Fields of Contribution

Human-Computer Interaction, Mobile and Pervasive Computing, Women's Health, LGBTQ+ Health

1.4 Methods and Aims

By means of secondary data analysis and semi-structured interviews, our primary aims for this project are to challenge existing perceptions on campus related to pregnancy/parenting while attending university, to make these experiences more feasible for IU students to accomplish, to empower IU students to make informed decisions regarding their circumstances and to prepare them for associated challenges. Additionally, this thesis aims to generate campus-wide awareness for diverse and intersectional parenthood experiences and to address the needs of populations within pregnancy and parenthood who are traditionally marginalized, at risk, or underserved. Such experiences include pregnancy and parenthood at the intersection of LGBTQ+ identity, miscarriage, abortion and post-abortive health, etc.

Regarding expected outcomes, we intended to have a live, functional website that informs our target audience (pregnant/parenting undergraduates) about available Bloomington-based resources and those applicable in other nearby areas. Topics addressed on the website include care and resource centers, legal support, mental health, pregnancy loss, birth and postpartum, child care, adoption, emergency and crisis support, financial assistance, housing, community assistance, and LGBTQ+ pregnancy/parenting. Furthermore, we desired to achieve a partnership with a university-sponsored organization or initiative to host and maintain the resource website in future semesters. Moreover, our initial timeline for accomplishing this project was as

follows:

- 1/12/20 to 2/15/20: Thesis Proposal, Independent Research, Resource, Collection and Evaluation
- 2/16/20 to 3/21/20: Website Development, Thesis Progress Form
- 3/22/20 to 4/4/20: Website Trouble-Shooting, Product Report/Evaluation Draft
- 4/5/20 to 4/18/20: Product Report/Evaluation Final Draft, Poster Session Preparation, Thesis Submission Form, Completed Thesis
- 4/22/20: Poster Session @ Luddy SICE Capstone Fair in Franklin Hall

Chapter 2

Development of the Technical Solution

2.1 Process

The following section serves as a summary of our process of information collection, site development and deployment, as well as the associated challenges both academic and personal overcome throughout the duration of our partnership as advisor and thesis candidate:

2.1.1 Research Phase

During the first several weeks of the spring semester, our main focus was collecting information about resources at the local, regional, and national level which might meet a variety of needs faced by pregnant and parenting students. Briefly touched on in our prior discussion of methods and aims, we accomplished this task by thorough internet search and reading, in-person meetings with representatives of both on and off campus organizations, and cold emails and phone calls to various businesses and agencies asking for verification of services listed on their websites. We even attended a few events hosted in Bloomington by organizations who offer relevant services and talked with collegiate student groups to compare our growing repository of information to resource lists they had compiled for their own purposes. To guide our process, upon discovery of a student resource or a source which might later inform our website content or design, we proactively sorted the subject into one of 14 categories: abortion, adoption, birth and postpartum, child care and parenting, care and resource centers, community assistance, emergency and crisis support, financial assistance, housing, insurance, legal support and student advocacy, LGBTQ+ pregnancy and parenting, mental health, and miscarriage. The two biggest challenges faced during the collection process were responsiveness of sources and both societal and personal convictions, perceptions, and biases surrounding the resource categories.

With regard to responsiveness of sources, we at times did not receive a response from organizations we called or emailed or we had to wait extended periods of time to obtain the information we needed to proceed. For example, the extended wait time might be caused by interviewing one source who then refers us to another office because it's determined over the span of the interview that they are unable to

answer a few of the questions. Some of the sources to whom we were referred were associate director and director level representatives of an organization, so scheduling those interviews or obtaining responses over email took a bit of time depending on their schedules and our inquiry. Additionally, on occasion, we called a care or resource center to follow up about resources seen online that might have not been clear to us in wording or contained language such as "other services/items available, contact provider for more information." Our voicemail or message taken by the receptionist would not be returned by the senior leader or medical professional on staff. On the other hand, we called a few centers where the medical provider couldn't confirm resources we inquired about due to not having specialization or experience in that subject area. In order to overcome all of these issues and continue making progress towards our goals, we would simply have to work with the information we are able to get and make a note to ourselves to add in additional information to the research documents if a response was received. A design decision that was made later for the website was to include URLs for each listed resource for users to always be able to find the most up-to-date contact information and reach out to the source if needed. Another decision we made towards the end of the research phase was adjusting our project timeline. Recalculating the time window needed for later tasks and scheduling additional weeks for the research phase accommodated for any remaining interviews that needed to be scheduled and potential follow-up conversations which could take place with the interviewee. Our new timeline shown below reflects the adjustments we made during this phase of the project:

- 1/12/20 to 3/1/20: Thesis Proposal, Independent Research, Resource Collection and Evaluation
- 3/2/20 to 3/22/20: Site Development, Thesis Progress Form, Product Report/Evaluation Drafting
- 3/23/20 to 4/6/20: Website Trouble-Shooting, Product Report/Evaluation Drafting
- 4/7/20 to 4/18/20: Product Report/Evaluation Final Draft, Poster Session Preparation, Thesis Submission Form, Completed Thesis
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Furthermore, our greatest source of challenge during this phase of the process was our own human experiences, as well as the historically controversial nature of our resources and their respective categories. Topics such as abortion, miscarriage, marginalization of minority groups, societal stigma, etc. are highly sensitive areas to navigate as a researcher, let alone as a human being, and even the simple mention of one of these words immediately sparks political, spiritual, and moral conflict within and between people. Whether due to an experience or a set of drawn conclusions, the reaction can be quite extremely visceral for a person. Before entering this project, we acknowledged that the other person has life experiences, convictions, practices, and identities unique to them and so would the beneficiaries of our work. While we may never personally reach an agreement with one another about our convictions, what united us was our firm commitment to, as best as possible, prioritize objectivity of information, fairness in collecting and considering resources, and a

healthy relationship between personal conviction and academic pursuit. Some ways in which we addressed this challenge were talking openly and thoroughly together each week about visceral reactions to resources and information, incorporating discussion about this project into standing mental health care appointments, writing and revising interview questions together that we intended to ask resource providers to ensure we maintain neutrality and respect, and building in breaks throughout the course of work weeks in order to pause, reflect, and practice self-care.

2.1.2 Development Phase

Following the end of our extended research period, based on all of the information collected, we began to consider website structure and design layout. We discussed everything from the number of pages we should have and how information should be organized to the language we should use on each page. Below is an early visualization of the end product annotated with notes based on those early discussions:

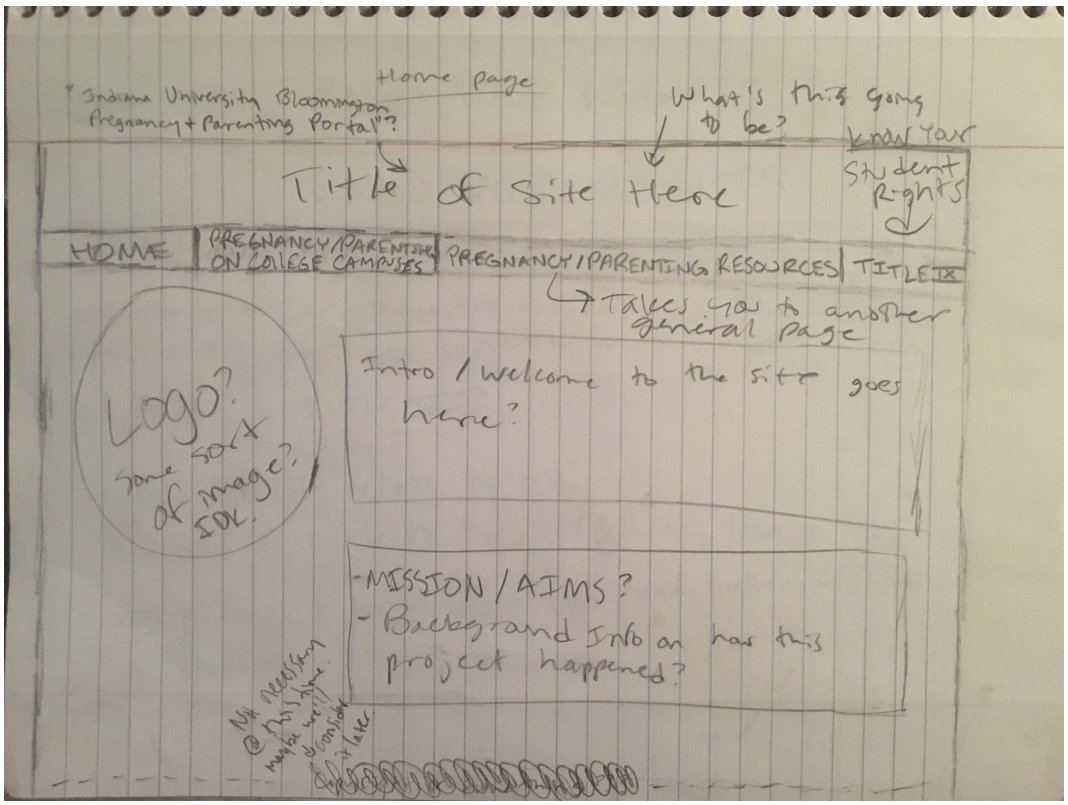


Figure 2.1: Early Home Page Sketch

Source: Natalia Johnson, March 2020

After thinking through the basics like website structure and how the content, we then moved on to creating HTML files for the four pages to serve as the core of the website: Home, About, Resources, and Rights. Originally, we did not plan to have the fourth page, but group discussions between us and other undergraduate researchers leading up to spring break determined a vital need to provide information on Title IX law as it pertains to pregnancy and parenting protections for students. Thus, we allocated additional time during spring break to further research of student rights and come up with a page layout for the information found.

At this point in the semester, a challenge which greatly impacted our work and for which we did not plan accordingly was the COVID-19 outbreak. Per the university's announcement of the upcoming closure of residence halls and other campus services, the urgency to coordinate and complete a cross-country move in a short span of time temporarily halted all application development. As a result, the previously revised timeline completely failed. Once settled again after spring break, in order to make up for the loss of time of an already intensive thesis project, we implemented extended hours of work per week beyond what we originally anticipated and also requested from our department additional time to complete the project. With the extension of time and working hours, as well as open communication and collaboration to address barriers to product success, we were successfully able to complete the project and other supporting tasks before the week of final exams.

Secondly, we encountered during the development phase logistical issues. Regarding logistics, our intention was to independently develop and launch our website as both a solution to the student needs introduced earlier in this report, as well as to generate a functioning prototype we could present to a university-sponsored organization with whom we are interested in forming a partnership. This partnership would provide further guidance for application development and ensure that the website would be well-maintained by another source in subsequent semesters. However, due to the circumstances surrounding COVID-19, we were unable to achieve a partnership with the organization we had in mind. Instead, we decided that the student projects section of Dr. Clawson's research lab website will feature our website for the time being and we will continue independently developing our website, taking note of areas for growth and expansion to make a future partnership with the university possible. These identified areas for future site enhancements are discussed in greater depth in Chapter 3 of this report.

Lastly, other challenges encountered during the development phase include trouble with CSS design and writing content appropriate for a diverse and complex pool of student users. Beyond an introductory course in the Informatics major, coding in CSS is typically not covered again unless the language is part of a design-centered elective course. To overcome loss of familiarity with CSS, we built in time during later weeks of the thesis to get reacquainted with it and practice through a few tutorials. Once reacquainted, we were able to add the working design elements that aligned well with the intended structure and function of the overall website. The level of work we put into understanding CSS was equal to the level of consideration for all audiences in our website content, even when our featured resources and our references were not inclusive. While not the majority of cases, members of the LGBTQ+ community make up a small number of Indiana University students at the Bloomington campus who report being pregnant during an academic year [4]. Pregnancy resources, as well as the societal discussion of pregnancy, are heavily geared toward those who identify as heterosexual (attraction to the opposite sex) and cisgender (gender identity aligns with sex assigned at birth). As a result, pregnant students who fall into different areas of the gender and orientation spectrum are often left with a lack of information, resources, and tools which both address their needs and affirm their identity. Therefore, while it was at times difficult to master due to our natural tendency as human beings to immediately associate a pronoun with a person or an experience, we opted out of using gender-specific language on our website wherever possible to address a greater audience of users. For example,

to describe a someone who is pregnant, we choose to use language such as "pregnant individual" or "pregnant person." Likewise, to describe the significant other of a pregnant person, we choose to use "partner" rather than language such as "boyfriend" or "girlfriend." There were of course instances where we couldn't adjust content to be more gender neutral such as in the case of referencing data or statistics pertaining to pregnancy or parenthood compiled by outside sources; however, it was important to us that where we could practice affirmation, we would.

2.2 Outcome and Deployment

Per our intentions for this project, the outcome of the project yielded a live and functional website called the Indiana University Bloomington Pregnancy and Parenting Portal. Coded using the text editor Brackets and deployed via Google Firebase, our application spans 21 files with 4 being main pages of the site (Home, About Pregnancy and Parenting on a College Campus, Pregnancy and Parenting Resources, and Know Your Rights as a Student), 14 being categorical resource pages, 1 being a PDF attachment for one of the resource pages, and 2 being global function pages (404 Error and CSS design file). Due to our original intention to eventually grant ownership of the website to a division of the university, we opted out of storing product code on an open source platform like GitHub and instead chose to store files privately via Box Cloud Storage until further development plans are determined.

Our design philosophy for this project is best described as functionality and flow. While visual elements and aesthetic are an important contribution to the user experience, we consider it paramount to create an application that prioritizes ease of use, organization and accessibility of information, and convenience of features. Other considerations for choosing a minimal aesthetic are again the future ownership of the product, but also adherence to neutrality and acknowledgement of subject sensitivity. In other words, we did not want to use logos, images, color schemes, etc. that would indicate endorsement of any particular resource or the bias of one source over another, interfere with the user's ability to navigate the site and do so enjoyably, or induce user discomfort or psychological triggers while reading pages discussing already challenging topics like abortion, miscarriage, domestic violence, disability, etc.

With regard to specifics of our functionality and flow, we gave significant thought to the following questions:

1. How can we make finding a piece of information as intuitive as possible?
2. How can we reduce inefficiency and time between user inquiry and user achievement?
3. How can we motivate a sense of confidence and self-efficacy in the user through our design?

To produce intuitiveness of locating information on the website, we chose to create a navigation bar that is uniform across all pages and contains clear, identifiable language in its tabs. For example, a section of our website is dedicated to educating students on Title IX, a set of federal protections put in place to prevent

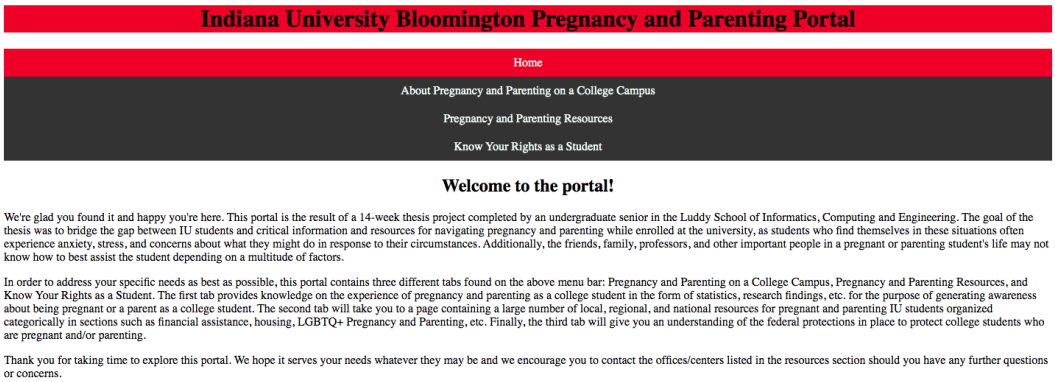


Figure 2.2: Minimal Aesthetic and Visual Elements

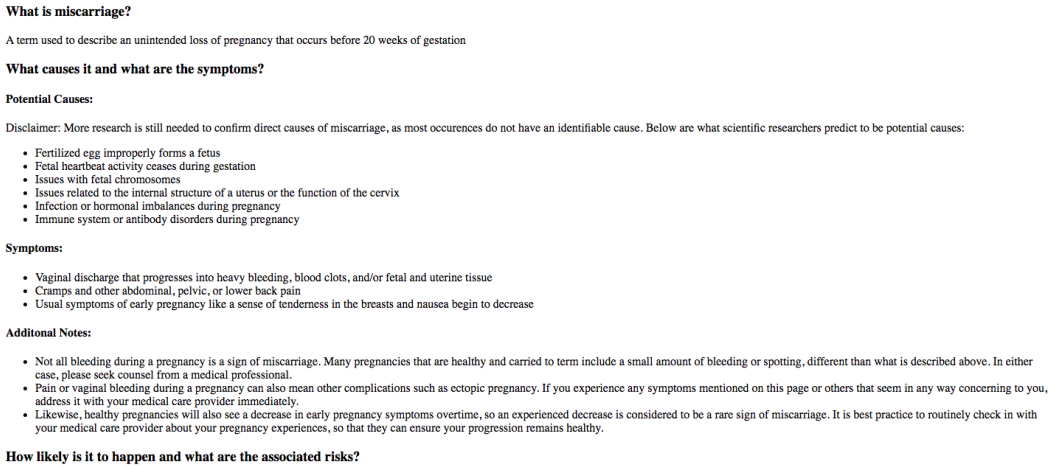
Source: https://iu-pregnancy-parenting-portal.web.app/index.html

discrimination on the basis of sex and gender in government-funded academic programs. Many students may not recognize the term Title IX or they may have heard of the term, but aren't familiar with what it means and entails. Therefore, we opted to use the language "Know Your Rights as a Student" in place of "Title IX" for our label. In addition to the language used in the navigation bar, we were attentive to the organizational format of pages with larger amounts of information than others. Rather than creating big bodies of text, we divided the topic into smaller chunks and wrote section headers into question statements with the text following each header serving as the solution to the question posed in the section header. As an example, on the page about miscarriage, we have section headers such as "What is miscarriage?", "What causes it and what are the symptoms?", and "How likely is it to happen and what are the associated risks?". By incorporating these elements into our design, a user doesn't have to question where information can be found nor does using the website become a hassle or a burden as a result of prolonged searching.

Figure 2.3: Descriptive Language in Page Navigation Bar

Source: https://iu-pregnancy-parenting-portal.web.app/rights.html

Secondly, to reduce inefficiencies and time between user inquiry and user achievement, every link on the website that leads to an outside source is coded to automatically open the next page in a new tab or window depending on the user's browser configuration. In order to illustrate the necessity of this feature, let's say that a student is exploring resources on the Emergency and Crisis Support page of the portal. The student comes across the resource title Safe Haven Baby Boxes and wants to know more about this resource beyond what is shown on the portal. If our portal does not contain the "open in new tab/window" functionality, then the Safe Haven Baby Boxes website will open in the same tab as our portal. In order to go back to our portal, the student will need to click the back arrow on the browser.



What is miscarriage?

A term used to describe an unintended loss of pregnancy that occurs before 20 weeks of gestation

What causes it and what are the symptoms?

Potential Causes:

Disclaimer: More research is still needed to confirm direct causes of miscarriage, as most occurences do not have an identifiable cause. Below are what scientific researchers predict to be potential causes:

- Fertilized egg improperly forms a fetus
- Fetal heartbeat activity ceases during gestation
- Issues with fetal chromosomes
- Issues related to the internal structure of a uterus or the function of the cervix
- Infection or hormonal imbalances during pregnancy
- Immune system or antibody disorders during pregnancy

Symptoms:

- Vaginal discharge that progresses into heavy bleeding, blood clots, and/or fetal and uterine tissue
- Cramps and other abdominal, pelvic, or lower back pain
- Usual symptoms of early pregnancy like a sense of tenderness in the breasts and nausea begin to decrease

Additonal Notes:

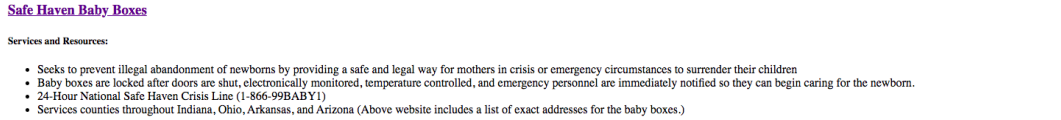
- Not all bleeding during a pregnancy is a sign of miscarriage. Many pregnancies that are healthy and carried to term include a small amount of bleeding or spotting, different than what is described above. In either case, please seek counsel from a medical professional.
- Pain or vaginal bleeding during a pregnancy can also mean other complications such as ectopic pregnancy. If you experience any symptoms mentioned on this page or others that seem in any way concerning to you, address it with your medical care provider immediately.
- Likewise, healthy pregnancies will also see a decrease in early pregnancy symptoms overtime, so an experienced decrease is considered to be a rare sign of miscarriage. It is best practice to routinely check in with your medical care provider about your pregnancy experiences, so that they can ensure your progression remains healthy.

How likely is it to happen and what are the associated risks?

Figure 2.4: Section Headers Written as Questions

Source: https://iu-pregnancy-parenting-portal.web.app/miscarriage.html

Now let's say that the student has clicked on several sections of the Safe Haven Baby Boxes site and wants to go back to our portal. Without the "open in new tab/window" functionality, it will take the student however many times they clicked a section of the Safe Haven Baby Boxes site to click on the back arrow and relocate our portal. This is not only inefficient, but can also become frustrating for students if they're trying to compare resources at the same time, wanting to look at different information across various resource categories at the same time, or simply want to ensure they don't lose track of their place on our portal.



Safe Haven Baby Boxes

Services and Resources:

- Seeks to prevent illegal abandonment of newborns by providing a safe and legal way for mothers in crisis or emergency circumstances to surrender their children
- Baby boxes are locked after doors are shut, electronically monitored, temperature controlled, and emergency personnel are immediately notified so they can begin caring for the newborn.
- 24-Hour National Safe Haven Crisis Line (1-866-99BABY1)
- Services counties throughout Indiana, Ohio, Arkansas, and Arizona (Above website includes a list of exact addresses for the baby boxes.)

Figure 2.5: Safe Haven Baby Boxes Resource

Source: https://iu-pregnancy-parenting-portal.web.app/emergency.html

Figure 2.6: Outside Source Opens in New Browser Tab

Source: https://iu-pregnancy-parenting-portal.web.app/emergency.html

Finally, through our design, we considered how we could encourage confidence and self-efficacy in a user who is using our portal to explore resources and obtain new knowledge. The navigation bar also contains functionality to aid the user in keeping track of which parts of the website they're viewing, as well as to help them know what they're about to click before they commit to clicking. Each of the four main pages are coded to display the tab of the navigation corresponding to

the page in view in a different color than the rest of the tabs. Therefore, if the user is currently viewing the About Pregnancy and Parenting on a College Campus page, then that tab on the navigation bar will appear in crimson instead of charcoal gray, which confirms for the user that the tab they clicked matches the page to which they were taken. Moreover, the navigation bar is coded to have the tabs change to a slightly darker color than the charcoal gray as the user hovers over them with their mouse or touch pad. This functionality allows the user to clearly differentiate between tabs of the same color and know to what page they will be taken before they choose to click a new tab. Combined with the other design considerations highlighted in previous sections above, we ensure that the user can confidently progress through the application and own their pursuit of knowledge without feeling intimidation caused when encountering a new technology.

Figure 2.7: About Pregnancy and Parenting on a College Campus Tab Selected

Source: https://iu-pregnancy-parenting-portal.web.app/about.html

Figure 2.8: Mouse Hovering Over the Know Your Rights Tab

Source: https://iu-pregnancy-parenting-portal.web.app/about.html

Chapter 3

Areas for Growth and Expansion

3.1 Increased Navigation Functionality

The first of four areas of growth we identified after deployment is the need for additional functionality to the navigation bar to further improve the overall user learning experience. As we continue maintenance on the application in preparation for a partnership with a university-sponsored organization, we intend to add a dropdown selection method to the Pregnancy and Parenting Resources tab of the navigation bar. By adding this feature, a user will be able to hover over the Pregnancy and Parenting Resources tab and decide whether they would like to see the full page of resource categories or go directly to a resource category of their choice. For example, during a particular browsing period, say the user only wants to read the page covering LGBTQ+ pregnancy and parenting. The new functionality would allow them to bypass the main page that displays all resource categories and navigate immediately to the LGBTQ+ page from wherever they currently are on the website. Furthermore, let's say that a user reads about their available resources on the Birth and Postpartum page and now they want to learn more about their child care options in the Bloomington area. Instead of having to go back to through the Pregnancy and Parenting Resources page in order to get to the Child Care and Parenting page, they have the option to hover over the Pregnancy and Parenting Resources tab and select the Child Care and Parenting tab.

3.2 Embedding Interactive Content

Secondly, we identified the potential for creating and embedding maps into certain areas of the website as a way to improve ease of access to information and add more variety to the design of the application. In addition to navigation and direction assistance, Google Maps is also designed to allow users to create and share their own maps or embed one specific set of coordinates to be shown on a website. We could utilize this product to create features on our portal such as a small display next to each resource to show its exact location and address without the user having to search an outside website for that information. Even further than this, we could create a large scale map from scratch to identify geographical locations of all of the resources in our portal and their distance relative to other resources. A map like this could be housed on our Home page and has the potential for search capabilities

such as typing or selecting from a filter a zip code or key word to locate various information on the map. By the same token, we could create and embed maps for specific resources rather than for all resources. For example, a resource for which we could consider building a map could be Wellness Rooms for Lactating Parents. At this time, the link provided for this resource takes users to a list of room locations and any instructions surrounding the use or accessibility of each room. As a supplemental tool on our portal, we could take this list of information and use it to create a map so users have a complete visualization of where these rooms are located on campus. Search capability could also be explored for a map like this, especially if a user wants to determine their closest rooms based on their current coordinates.

3.3 Improvement of User Accessibility

Our third identifiable area of growth for this project involves compliance with university policy regarding technological access. Not only does making an application as widely available to an array of users as possible, per the Americans with Disabilities Act (ADA), public universities are legally bound to providing equal access of service to students regardless of ability level and applicable services include university technology. Offices for Civil Rights for both The Department of Justice and the U.S. Department of Education defines accessible to mean "a person with a disability is afforded the opportunity to acquire the same information, engage in the same interactions, and enjoy the same services as a person without a disability in an equally effective and equally integrated manner, with substantially equivalent ease of use" [7]. Thus, as federal and state regulations apply to our web content, we could begin the process of making our portal accessible by revising URL descriptions to be more descriptive to a user. An example of this is trading language like "Click here to learn about child care and parenting resources" to "To learn more about child care options in Bloomington, see Child Care and Parenting." Other guidelines for us to consider to expand the reach of our portal can be found at accessibility.iu.edu on the Creating Accessible Content tab.

3.4 Expansion of Graduate and Faculty Resources

Lastly, our fourth identifiable area of growth entails further research of information and resources and expansion of our scope to address pregnancy response specific to graduate and professional students. Although Title IX protections equally apply to graduate students and universities are legally obligated to protect graduate students who are pregnant and parenting, there are still graduate students nationally who experience Title IX violations that either go unaddressed or students have to take legal action in order to protect their rights. As an example, in 2013, the National Women's Law Center filed a complaint against Logan University, a Missouri-based chiropractic school, on behalf of master's and doctoral candidate Brandi Kostal due to an attendance policy violation that goes against Title IX. Kostal "was not allowed to make up work she missed after her emergency Caesarean delivery" and "returned to her classes 11 days after her delivery, despite a letter from her doctor that said she would be 'incapacitated for recovery' from her delivery date in March until the

beginning of May" [5]. While Logan University eventually agreed in a legal settlement to remove failing grades from Kostal's records, reimburse her tuition fees for the duration of pregnancy and recovery, and revise excused absence policy to include pregnancy and birth, we argue that the legal battle should not have even been necessary in order for Kostal to be excused, as Title IX legislation was passed and federally mandated in 1972 (41 years prior to this incident). Consider the potential financial burden and physical, psychological, and emotional impact on a student who does not receive adequate accommodations during pregnancy/parenthood either because they choose not to address university infraction or because university infractions are delayed in being corrected. Thus, how universities and academic departments respond to pregnancy and parenthood could mean the difference between a graduate student completing their education and obtaining work in their field and the same graduate student dropping out of a program. In further research and development of the Indiana University Bloomington Pregnancy and Parenting Portal, we seek to provide resources geared toward graduate students navigating pregnancy/-parenthood while members of an academic department, as well as faculty and staff of academic institutions to better understand Title IX as it pertains to pregnancy/parenthood and how to create a department environment which supports these major life transitions.

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