

Table 1. Health-Seeking Behavior among College Students and Young Adults

Author/Year	Purpose	Population/Design	Result/Limitation
1. Afolabi et al., 2013‡	To examine health-seeking behavior of university students, their use of healthcare services in the community and barriers to seeking help at the university health center	1,608 college students Mixed-method study (questionnaire survey followed by focus group interviews)	1) University health center was the last choice for care due to excessive waiting time 2) Cost of care posed the highest health seeking barrier 3) Location was not a barrier
2. Al-Asraj, Habib, & Binahmed, 2013	To assess the health-seeking behavior of Saudi senior nursing students, and to evaluate whether it is influenced by their knowledge of health-related studies	74 senior nursing students Mean age 22.7 ± 2.1 years Cross-sectional design with Structured interview	1) 78.37% of the students stated that only visited the doctor when they felt ill. 2) 95% of the students used medications without prescription. 3) 95.9% of the students believed that nursing and medical courses influences their health behaviors.
3. Burlaka et al., 2014	To gain perspectives on attitudes towards health-seeking behaviors associated with mental health problems of college students	College students (n=40; mean age=20.6 years - focus group) Psychiatrists (n=29; mean age=44.6 quantitative) Sequential mixed design	1) The least utilized mental health services are those provided by psychiatrists. 2) The use of psychological services is a less popular choice among students. 3) Students with mental health problems need two kinds of resources; continued emotional commitment and economic support.
4. Dennis & Hicks, 2006	To conduct a baseline investigation of self-rated health behavior and quality of life among college students	College students (n=514; Ages 18-23 years old, 68% females) Survey design	1) 39.3% first year students did not seek health care related to physical or psychological problems during the academic year compared to 29.9% non-first year students.
5. El Kahi et al., 2012‡†	To assess the health-care-seeking behavior, barriers to accessing care and associated factors in Lebanese college students	College students (n=543; ages 17 to 21) Cross-sectional survey	1) 69.9% sought informal help from family members; 35.7% sought formal health care from a physician or health facility; 57.2% that had psychological issues, 3.3% consulted a health care provider or health facility, 2.1% sought no help, while 76% sought informal help from family or friend (mostly friends). 2) Confidentiality and accessibility were barriers to health seeking
6. Fortuna, Robbins, & Halterman, 2009*	To characterize ambulatory care of young adults	Young adults (n=13,897; ages 20-29) Cross-sectional survey study	1) Young men had lower rates of annual utilization of ambulatory medical care per capita 2) Young men had nearly half the rate of preventive care visits and accessed care less than any other age group 3) Insured young adults had more visits annual visits per capita than those without insurance
7. Han & Pong, 2015	To explore the relationship between cultural contextual variables, demographic characteristics, and willingness to seek mental health services and to examine factors contributing to mental health seeking behaviors in Asian American community college students	Asian American community college students (n=66) Cross-sectional survey study	1) Asian American college students conceptualized mental illness as controllable and personal and preferred self-help and self-control methods for dealing with difficulties. 2) Asians are unlikely to seek help from mental health professionals due to stigma. 3) Participants who identified as being American were more willing to seek mental health services, while participants who identified as being Asian were less willing to seek mental health services. 4) Females are more likely to seek mental health help than their male counterparts
8. Kuuire et al., 2015*	To examine the factors that influence health-care services utilization in a resource poor setting	Randomly selected adults 18 years and older (n=1,137) Cross-sectional survey	1) Individuals who lived 0.5 km to a health facility, had secondary education and traditionalists were less likely to seek treatment in a health facility 2) 35 years or older and rated their health status as fair were more likely to seek treatment in a health facility

9. Lau, Adams, Boscardin, & Irwin, 2014*	To examine young adults' health care utilization and expenditures prior to the affordable care act	Young adults (n=3,768; ages 18-25). Retrospective survey study	<ol style="list-style-type: none"> 1) Partially insured young adults used the ER more often than full-year privately insured young adults and low income young adults had highest ER visits 2) Young adults without a usual source of care were less likely to use health services overall than those with a usual source. 3) Females had significantly higher overall utilization. 4) Minority young adults were less likely to utilize health care overall and incurred lower expenditures compared to Whites.
10. Menon, Sarkar, & Kumar, 2017‡	To compare the self-reported barriers to health-care seeking for mental and physical health services separately between 1st year and final year medical students.	1 st year Medical students (n=119) and final year medical students (n=58). Cross-sectional study	<ol style="list-style-type: none"> 1) There were differences between medical students in the 1st versus final year of medical school regarding self-reported barriers and perceptions. 2) Lack of time, unawareness about where to seek help, cost issues, and fear of future academic jeopardy were more common concerns among 1st year students to the usage of mental health services. 3) Issues of stigma were more commonly reported by final year students for using mental health services
11. Mesidor & Sly, 2014	To investigate the extent to which social-cognitive factors and psychological distress predicted help-seeking intentions for international and African American college students age 18 and above	College students (n=111; 45.9% males) Cross-sectional survey study	<ol style="list-style-type: none"> 1) Perceived behavioral control was the only social cognitive variable that was a significant predictor of intentions to seek mental health services. 2) Perceived behavioral control and psychological distress were positively correlated with help-seeking intentions 3) Students who experienced psychological distress were more likely to seek out mental health services.
12. Sawalha et al., 2017	To study and analyze the health seeking behavior of medical students, determine the prevalence of self-diagnosis and self-treatment behavior among medical students in University of Sharjah and identify the factors influencing medical student behavior	Pre-clinical medical students (n=152) and clinical medical students (n=209). Cross-sectional study	<ol style="list-style-type: none"> 1) Medical education, excessive waiting times, cost, and inaccessible medical services affected student health seeking behaviors. 2) Self-prescription was the most common health seeking behavior. 3) Majority of the students have the tendency to ignore a health problem. 4) Medical education impacted the students' health-seeking behavior.
13. Sultan, Joshua, & Misra, 2017†	To study various types of health information seeking behavior (HISB) among college students and to study the factors affecting students' HISB and sources of health information (HI)	College students (n=200; ages 18-24) Cross-sectional survey study	<ol style="list-style-type: none"> 1) <90% of the students are more likely to actively seek information when they experience health problem. 2) 65% of students often search for detailed information when they encounter health topics in the media. 3) 86% of the students were likely to use family members as primary source of HI.
14. Vaz, Kulkarni, & Ferreira, 2012	To study the health seeking behavior of medical students studying at a Medical College	Medical students (n=281) Cross sectional study	<ol style="list-style-type: none"> 1) Self-investigation and self-treatment is prevalent among the students. 2) Students consulted informally with doctor or intern friends. 3) There was preference for private doctors compared to consultants in college.

Notes: * Health-Seeking Behaviors among Young Adults; ‡ Barriers to Accessing Care among College Students; †Health information Resource Utilization and Its Influence on Health-Seeking Behavior; ER; emergency room;

Table 2. Health Information Resource Utilization and Its Influence on Health-Seeking Behavior

Author/Year	Purpose	Population/Design	Result/Limitation
1. Ahmad, Khan, & Rahman, 2017	To explore the factors that determine the behavior of students seeking health-related information in the virtual world by analyzing the role of perceived ease of usefulness (PEOU), perceived usefulness (PU), self-efficacy (SE) and information quality (IQ) on the intention (IU) of the internet users to seek health-related information	210 college students (males n=95). Above (n=116) and below (n=49) 25 years' old Randomized-controlled trials	1) Except SE, all other factors have a positive relationship with the intention of the users to seek health-related information. 2) PU and IQ significantly encouraged users seeking health-related information over the internet than PEOU.
2. Basch, MacLean, Romera, & Ethan, 2018	To identify and assess the resources college students use when exercising health information seeking behavior and examine perceptions and behaviors regarding adoption of online tools	258 college students Cross-sectional survey study	1) 74% of participants used the Internet for health information. 2) Females were more likely to use the Internet for health information, to consult a health professional and to confirm the health information they receive from a health or medical professional. 3) Non-white students were significantly more likely to use the Internet to find health information
3. Gavvani, Qeisari, & Jafarabadi, 2013	To increase the understanding of the ways that people find health information and to identify how people evaluate the roles of public libraries in providing health information	(n=200; mostly age 21-30) Descriptive study	1) Statistically significant relationship between education level and use of internet for seeking health information and between peoples' age and job and "discussions with other people such as family, relatives or close friends" for meeting health information need. 2) The most common resources for seeking health information were "TV" and "discussions with others."
4. Luo, Yang, Chen, & Chiang, 2018	To investigate the associations among gender, eHealth literacy, and health services utilization	College students (n=489; mean age 21.51 years) Cross-sectional survey study	1) College students with interactive eHealth literacy were more likely to have a higher rate of outpatient care use. 2) College students with critical eHealth literacy were more likely to make full use of health services than those with functional eHealth literacy
5. McBride et al., 2013	To better understand the scope of services, utilization, and staffing of Student Health Services nationally.	College students (n=172; ages 18-24). Cross-sectional survey study	1) Total medical visits per eligible student were higher at private campuses compared to public campuses
6. Moazzam et al., 2018	To determine that students' health seeking behavior using the internet is an important part of making a health decision	University students (n=300; ages 18-44). Cross-sectional survey study	1) Students used internet for their health decision. 2) eHealth literacy influenced by age, gender, degree program, and semester. 3) Demographic and education background do not effect on eHealth literacy
7. Nicoteri & Arnold, 2005	To gather qualitative data to help illuminate the process of the development of health care seeking behaviors in traditional-age undergraduate college students.	Undergraduate college students (n=8; ages 18-23). Qualitative study – focus group	1) Five major themes emerged: needing help or care, expectations, decision making, healthcare accessibility, and future needs. 2) Participants perceive they make their own decisions regarding health care but seek advice from their families when they are ill 3) Participants expected health care on demand.
8. Osei, Agyemang, & Boakye, 2017	To investigate university students' use of the Internet for health purpose	650 university students (mean age 27 years) Cross-sectional study	1) 67.7% of participants use Internet for health purposes

9. Turner & Keller, 2015	To describe the college health surveillance network methodology and present demographic, epidemiologic, and health care utilization trends using 41 months of data from participating universities	Students from 23 universities (n=730,785) Retrospective study	1) Over 800,000 individuals used the health centers; primary care visits (60%), mental health (13%), vaccination (9%), miscellaneous services (31%). 3) The 5 most common specific diagnostic categories were: preventive, respiratory, skin, hair, and nails, infectious non–sexually transmitted infection, and mental health
10. Zhang, 2013	To understand what sources college students use and prefer, and how they evaluate the sources	Undergraduate students (n=20; age 18-24) Qualitative study using interviews	1) Traditional Internet sources as highly important sources for health information 2) Social ties were deemed important. 3) Traditional medial sources (books, newspapers, magazines, and pamphlets) and mass media (TV) received a lower ranking but were still favored. 4) Web 2.0 sources were not favored and were underused. 5) Close to half mentioned the University Health Service as a source. 6) Source accessibility, authoritativeness of the content, trustworthiness, and usability were used as criteria for using the sources.

Table 3. Barriers to Accessing Care among College Students

Author/Year	Purpose	Population/Design	Result/Limitation
1. Ajaegbu & Obochi, 2016	To investigate various health seeking behaviors exhibited by undergraduates in the department of Health Science and Technology	302 college students 162 males (mean age 25 ± 3 years). 140 females Cross-sectional survey study	1) Students utilize community pharmacy, they feel it is cheaper and saves time. 2) Student use herbs because they feel it is more effective than other health helps. 3) Students use health institutions because they believe their symptoms are major and that treatment from this source is more effective.
2. Davies et al., 2000	To identify college men's health concerns, barriers to seeking help, and recommendations to help college men adopt healthier lifestyles	Male college students (n=49) Qualitative study	1) The number one barrier to health-seeking behavior was socialization followed by counseling, lack of time, and feeling invulnerable. 2) Participants were reluctant to use the health center because they believed that the center was staffed by trainees rather than trained medical professionals.
3. Eisenberg et al., 2009	To identify the association between help-seeking behavior and perceived public stigma and people's own stigmatizing attitudes	College students (n=5,555, age ≥ 18 years old) from 13 universities Females (n=3,435) Cross-sectional survey study	1) Perceived public stigma was considerably higher than personal stigma 2) Personal stigma was higher among students the following characteristics: male, younger, Asian, international, more religious, or from a poor family 3) Personal stigma was significantly and negatively associated with measures of help seeking
4. Price et al., 2013	To develop a College Student's Mistrust of Health Care Organizations (CSMHCO) scale and determine the relationship between medical mistrust with the use of a variety of health care services	College students (n=545, ages 19-26) Convenience sample - four groups (n=80)	1) Higher mistrust of health care organizations found to be statistically significantly associated with all 5 measures of underutilization of health services: failure to take medical advice, failure to seek needed medical care, failure to fill a prescription, postponing needed medical care, and failure to keep a follow-up appointment.