

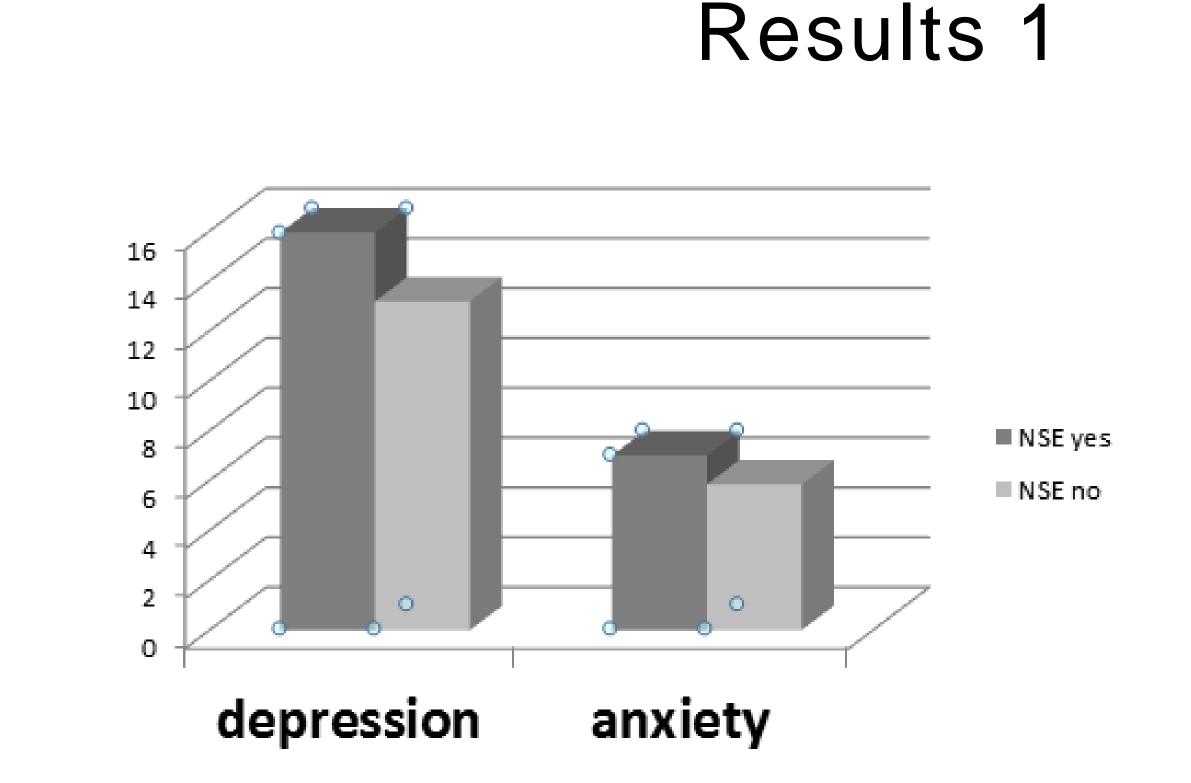
Breaking through the barriers: How do university students with negative sexual experiences seek help

Van der Heijde, CM PhD 1 Kleijweg, JA 1 Vonk P, MD 1 & Meijman, FJ MD, PhD 1,2

1 Department of Research, development and prevention, Student Health Services, University of Amsterdam 2 Department of General Practice & Elderly Care Medicine, VUmc School of Medical Sciences, Amsterdam The Netherlands

Introduction

Negative sexual experiences (NSE), may increase risks for a worse health status and lower levels of academic performance in university students. A substantial part of the students that suffer from these NSE do not seek help, probably caused by different forms of stigma. In this study we test for health and academic performance differences between students with and without NSE and we test the model that (the attitude towards) seeking help is effected by anticipated stigma¹ (if others would know about the NSE), self-stigma about seeking help² (f.i. feeling weak when seeking help) and student culture stigma³



Methods

From the Student Health Check⁴, students are compared on Depression and Anxiety (

estimated study pace with analysis of variance (at the p<.05 level). All analyses are also checked for confounders with hierarchical regression analyses (gender, age and study phase).

A subset of respondents that reported NSE (N=172), completed an additional questionnaire. Structural equation modeling with the AMOS 18.0 program is used to test our model.



Sample

Dutch University Students N=4072 Mean age =22.59 Std.Dev= 4.39 Gender (34% male; 67% female)

self estimated

study pace

study pace

estimated by

others

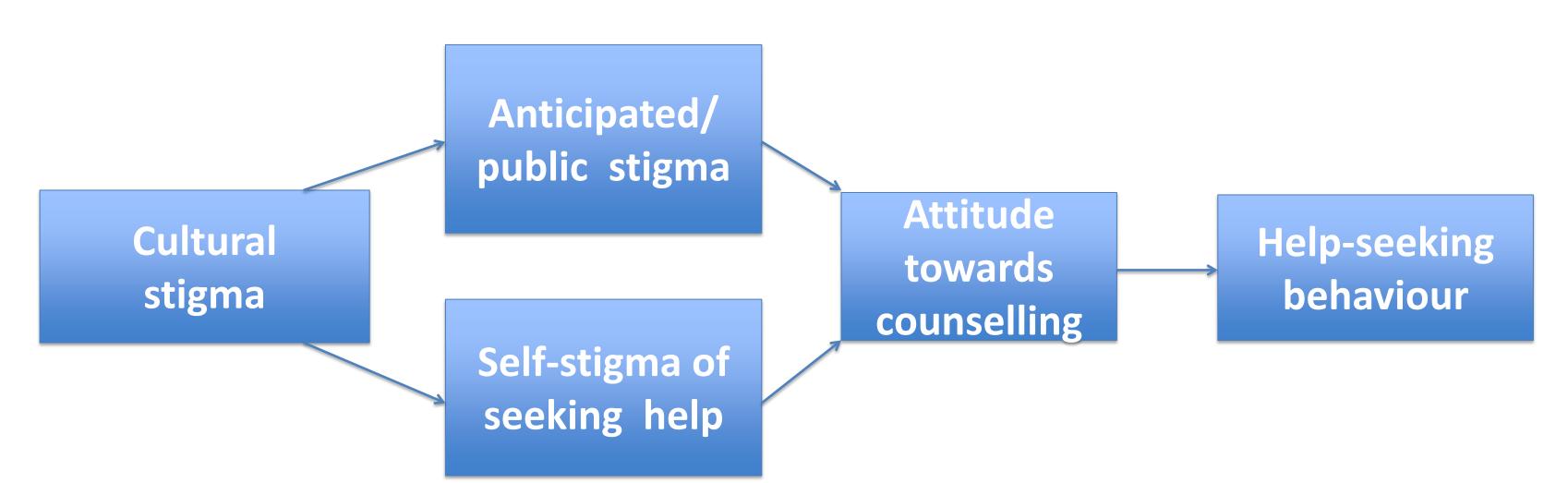
Reported Negative Sexual Experiences (NSE)= 15% (5% of the male population; 21 % of the female population)

Reported traumatization of NSE= 7% (3% of the male population; 9% of the female population)

Students with NSE scored significantly higher on depression [F(1, 4067)=155.47, p=.000] and anxiety [F(1, 4067)=114.08, p=.000] and significantly lower on self-estimated study pace [F(1, 3688) = 24.83, p=.000] and study pace estimated by others [F(1, 3692) = 5.84, p=.016].

Results 2

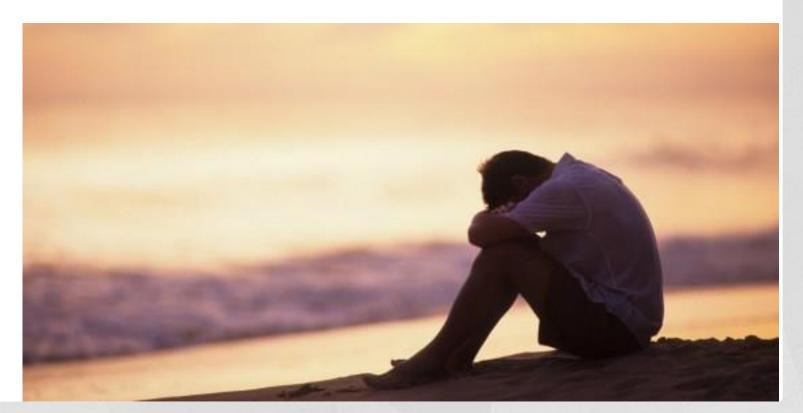
The model of stigmata was an acceptable fit to the data, $\chi 2(24) = 54.92$, p=.01, $\chi 2/df = 1.66$, CFI=.86, RMSEA=.06.



Discussion

Depression, anxiety and (self-estimated) lower levels of academic performance are related to NSE. The attitude towards seeking help for NSE is related to different forms of (student culture) stigma¹²³. An important recommendation is that this knowledge needs to be used by (health) professionals within higher educational institutions, in referring students with NSE to effective treatment.

Future studies need to focus on practical solutions.



Messages

Message 1

Students with NSE may suffer a worse health status and lower levels of academic performance

Message 2

Student culture has a role in predicting stigmata for help seeking for students that suffer from NSE.

References

- 1. Quinn DM, Chaudoir SR. Living with a concealable stigmatized identity: the impact of anticipated stigma, centrality, salience and cultural stigma on psychological distress and health. J Pers Soc Psychol. 2009;97:634---651.
- 2. Vogel DL, Wade NG, Hackler AH. Perceived public stigma and the willingness to seek counseling: the mediating roles of self---stigma and attitudes towards counseling. Journal of Personality and Social Psychology. 2007;97:634---651.
- 3. Verouden NW, Vonk P, Meijman FJ. Context guides illness---identity: a qualitative analysis of Dutch university students' non-help-seeking-behavior. Int J Adolesc Med Health. 2010;22:307-320.
- 4. Van der Heijde CM, Vonk P, Meijman, F.J (2015). Self-regulation for the promotion of student health. Traffic lights: the development of a tailored web-based instrument providing immediate personalized feedback. *Health Psychol and Behav Med*, 3(1), 169-189.