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GENDER DIFFERENCES AND HEALTH-SEEKING BEHAVIOR AMONG UNIVERSITY STUDENTS: A QUANTITATIVE ANALYSIS

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Abstract

Health-seeking behavior is influenced by social, cultural, and psychological factors, with gender being a significant determinant. The main objective of this study is to identify the differences in health-seeking behavior (HSB) between male and female students at the University of Gujrat, Pakistan. Various demographic factors influence health-seeking behavior. The quantitative research approach was used in this study. A sample of 377 students, 182 Males and 195 females, was drawn using a Stratified random sampling technique. The data was collected using a self-structured questionnaire at 0.836 alpha value. Statistical results revealed that females (M=160.72, SD=23.63) scored significantly higher than males (M=155.17, SD=22.54) at the health-seeking behavior scale. The result of the Independent sample t-test indicated a statistically significant difference between genders (t (375) =-2.33, p=.020), with the mean difference of -5.55. These findings suggest that female students are more proactive and responsive in health-seeking behavior than male students. Based on these findings, the study highlights the need for gender-sensitive health interventions and awareness programs to encourage both male and female students to engage in timely and appropriate health-seeking behavior.

Keywords: *Health-Seeking Behavior, Gender Differences,*

University Students.

INTRODUCTION

Health-seeking behavior (HSB) refers to the actions that help the individual to maintain, restore, and improve their health, such as visiting a doctor, taking medication, engaging in physical activities, and seeking emotional support (Shaikh & Hatcher, 2005). Health-seeking behavior is the steps that people adopt when unwell, and face health problems, it also involves self-medication and visiting the doctor (Khadka et al., 2022).

Gender refers to the socially constructed features or characteristics of men and women, such as norms, roles, and relationships of and between groups of women and men. It depends and changes from society to society (WHO, 2025). Gender plays an important role in health; women are more conscious than men about their health. The differences between genders are important to understand, improving healthcare services for everyone (Thompson et al., 2016). Gender plays a crucial role in health because men and women have different experiences and choices for seeking treatment. These are influenced by gender, age, perception of illness, financial constraints, and access to healthcare services (Andersen & Newman, 2005).

Globally, research shows that women usually visit health professionals not only when they are sick but also to prevent illness and to discuss mental health problems. It also explores physical health, dietary habits, use of alternative medicine, and how confident they feel they can handle their health problems (Galdas et al., 2005). Moreover, in 7 countries, females reported more health problems than men. This shows that both gender and country affect students' health and how they seek medical help (Stock et al., 2008).

Female students are more concerned about their health than male students, use mental health services, and look for health information on the internet. It is important to study these differences, especially in Pakistan, where gender roles affect how students take care of their health (Ahmad et al., 2017). Health-seeking behavior depends on different factors such as income, education, and social status, which increase the chances of seeking healthcare in Pakistan (Tanweer ul Islam & Butt, 2022).

STUDY OBJECTIVES

- *To identify gender-based differences in health-seeking behavior among*

university students.

- *To suggest recommendations for improving healthcare accessibility and utilization among university students.*

LITERATURE REVIEW

A study discovered that personal, financial, and social factors influenced the health-seeking behavior of males and females. The findings also showed that females seek medical help earlier, and males delay due to social expectations (Khadka et al., 2022). The findings suggest that some programs for both genders to seek medical and mental health-related treatment on time (Galdas et al., 2005). Long waiting times and finance are the factors to avoid medical treatment (Afolabi et al., 2013). Women face difficulties because they are dependent, have less freedom, and are pressured by society (Basch et al., 2018).

EK (2015) defined that women and men are different in health-seeking behavior. Women are more active, expressive, and health-conscious. The study findings show that men hesitate and are reluctant to visit the doctors due to the expectations attached to men. Female students are more likely to consult a psychiatrist, while male students avoid it due to hesitation and stigma (Umami et al., 2023). Health-seeking behavior affects the student's decision on treatment. Results showed significant gender differences. Women are more likely to search for health information online (Basch, MacLean, Romero, & Ethan, 2018).

Ahmed et al (2017) reported that female students are aware of the health information, use mental health services, and consult the doctor for their health problems. However, the results of the study expressed that male students avoid getting medical help due to shame and lack of recognition (Davies et al., 2000; Eisenberg et al., 2007). The findings suggest that a focus on university health-related programs for both male and female students is needed to understand their health-seeking differences (Tran & Silvestri-Elmore, 2021).

WHO (2003) reported that good nutrition plays a significant role in health-seeking behavior. Likewise, women ate sweets and snacks, and men ate sugary drinks and meat. This revealed the need for gender-related health programs for better health and lifestyle (Alkazemi, 2019). Results showed that females have a healthier and balanced diet than males. These gender difference also affect their health-seeking decision and complete well-being

(Wu, Rose, & Bancroft, 2006).

Hussain, Rashidin, Hafeez, and Mirza (2019) conducted a study in Pakistan to explore the health-related issues. People with higher education have better health status and are conscious about their health (Khan & Hussain, 2020; Liaqat et al.,2025). In Pakistan, health-seeking behavior is affected by the norms attached to gender. Results indicate that education increases the probability of health-seeking care (Anwar et al., 2012). Students who have easy access to health care and those who were in their early years of education were more likely to seek professional help (Wamaani et al., 2023).

Kalankesha et al, (2019) conducted a study at Tabriz University of Medical Science on gender differences and health-seeking behavior of students. A study conducted in South India on medical students in a university found that students faced problems in getting mental healthcare due to stigma, privacy worries, lack of awareness, and financial constraints (Gulliver, Griffiths, & Christensen, 2010; Menon, Sarkar, & Kumar, 2015; Chew & Wei, 2025).

Another study revealed that male university students face several barriers to seeking health care because of societal expectations and personal beliefs (Davies et al., 2000). Females prefer to eat healthy (66.5%) to avoid obesity, while men delay seeking treatment due to financial reasons, wait times are too long, and side effects (Mukooza et al., 2018; Aranha, Lobo, & Patti, 2022; Kadka et al., 2022).

Studies reported that female students had more positive attitudes toward mental illness, while male students were more likely to experience stigma. Results also found that both genders, lack of awareness (34.5%) and stigma (24.3%) were barriers to seeking mental health care (Angermeyer & Dietrich, 2006; Golberstein, Eisenberg, & Gollust, 2008; Teh, King, Watson, & Liu, 2014; Abdullah et al., 2021).

Pham et al. (2020) found that students' attitudes and awareness affect their decision to seek mental health care. Stigma, cultural beliefs, and low awareness stop many from getting help. In addition, the study also found that several students avoid seeking professional help because of fear of stigma and judgment and prefer to either self-medicate or seek help from friends and family (Lauber & Rossler, 2007; Clement, 2015; Hand & Pong,

2015). The research revealed that women generally receive more health services than men, even when differences in health status exist (Bertakis et al., 2000).

METHODOLOGY

RESEARCH DESIGN

The present study used a quantitative, cross-sectional research design to achieve the study's objectives.

SAMPLE

The sample consists of 377 male and female undergraduate students from the Social Sciences, Basic Sciences, Arts, Computing and Information Technology, and Management and Administrative Sciences Departments of the University of Gujrat. A stratified random sampling technique was used to select the sample from the departments.

MEASURES

A self-administered questionnaire was developed for data collection to measure the responses. Reliability was assessed using Cronbach's alpha value. The usual ranges of reliability are between 0 and 10. In this study, Cronbach's alpha reliability for HSB was (a=.836), with good internal consistency.

ETHICAL CONSIDERATIONS OF RESEARCH

The participants were informed about the purpose of the research. They were briefed about ethical considerations while participating in the research. They were requested to fill out the questionnaire honestly, and after completing the questionnaire, they were thanked for their valuable participation.

RESULT AND DISCUSSION

The current study analyzes the data by using a statistical package for social sciences (SPSS-24). Descriptive statistics (frequency distribution, mean, standard deviation) were used to summarize demographic characteristics and health-seeking behavior trends. An independent sample t-test was used to analyze health-seeking differences between the male and female students.

TABLE 1

DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS (N=377)

Variables	*Categories*	*F*	*%*
Gender	*Male*	*182*	*48.3*
	Female	*252*	*51.7*
Age of the Respondents	*17-19*	*94*	*24.9*
	20-22	*237*	*62.8*
	23-25	*38*	*9.8*
	Above 26	*8*	*2.5*
Family Monthly Income	*Less than 50,000*	*28*	*7.4*
	50,000-99,000	*116*	*30.8*
	1,00,000-1,50,000	*137*	*36.3*
	Above 1,50,000	*96*	*25.5*
Family Type	*Nuclear*	*279*	*74.0*
	Joint	*98*	*26.0*
Residential Area	*Rural*	*215*	*57.0*
	Urban	*162*	*43.0*

Table 1 indicates the demographic characteristics of the respondents. Results show that the gender split was almost equal, 51.7% are female and 48.3% are male. In terms of age, most (62.8%) respondents are between the ages of 20 to 22 years. Most (36.1%) of the family occupations have their own business. The majority, 74% of the respondents, belong to a nuclear family. In terms of residential area, 57% of respondents live in rural areas.

Table 2

DESCRIPTIVE STATISTICS OF HEALTH-SEEKING BEHAVIOR BY GENDER

Gender	***N***	***Mean***	***Std. Deviation***	***Std. ErrorMean***

Male	*182*	*155. 17*	*22.54*	*1.67*
Female	*195*	*160.72*	*23.63*	*1.69*

Table 2 indicates that males (n=182) had a mean health-seeking behavior score of M=155.17, SD=22.54, while females (n=195) had a higher mean score of M=160.72, SD=23.63. The standard error of the mean was 1.67 for males and 1.69 for females. These results reveal that females exhibit slightly higher health-seeking behavior than males.

TABLE 3

INDEPENDENT SAMPLE T-TEST FOR HEALTH SEEKING BEHAVIOR BY GENDER

Test	***F***	***P***	***T***	***Df***	***p(2-tailed)***	***Mean Differences***
Equal Variances assumed	*3.436*	*.065*	*-2.33*	*375*	*.020*	*-5.55*
Equal Variances not assumed			*-2.34*	*374.82*	*.020*	*-5.55*

Table 3 results showed a significant difference in health-seeking behavior between males (M=155.17, SD=22.54) and females (M=160.72, SD=23.63), t (375) =-2.33, p=.020. The mean difference was -5.55 (SE=2.38), with a 95% confidence interval ranging from -10.24 to -0.87. These results suggest that females engage in significantly higher health-seeking behavior than males.

DISCUSSION

This study aimed to examine gender differences in the health-seeking behavior of university students. The study reports that male and female students have different health-seeking behavior.

The study presents the frequency and percentage distribution of the respondents' socio-demographic characteristics. The results show that the majority, 51.7% of respondents, are females. 62.8% of respondents are between the ages of 20 to 22 years. 74% of the participants belong to a nuclear family. Studies showed that demographic characteristics such as income, family system, and location affect health-seeking behaviors. Female students have different health-seeking behavior from male students (Ahmed

et al., 2010; Shaikh & Hatcher, 2005).

The findings of this study show significant differences in health-seeking behavior between male and female students. The overall results indicated that male and female participants in this study differ significantly, -5.55, t (375) = -2.33, p = .020. Female students (average score = 160.72, standard deviation = 23.63) had higher health-seeking behavior than male students (average score = 155.17, standard deviation = 22.54). This result is quite similar to a previous study conducted on health-seeking behavior (Chakrabarty, Ray, & Halder, 2010).

Research has constantly shown that Females are more health-conscious and visit the doctor more often than males (Courtenay, 2000; Galdas, Cheater, & Marshall, 2005). Females are more caregivers and give more attention to their health due to their traditional gender role. In contrast, males are reluctant to seek help because of the social expectations that males are strong and not to express their vulnerability about health (Galdas et al., 2005; Mahalik et al., 2007).

LIMITATIONS OF THE STUDY

This study has certain limitations. The research was conducted in only one university due to the shortage of time. The sample of 377 students was respectable, but not generalized to students outside the university and other age groups. The study also does not focus on specific health-seeking behavior.

FUTURE RECOMMENDATIONS

Future studies should be conducted on Male and female students of other universities, areas, and cultural backgrounds. A similar study with a large sample size must be conducted to generalize the results to the whole population. Gender sensitive health related programs are essential for university students for health-seeking behavior. Awareness campaigns should be started to motivate males to seek health treatment. Further research should have focused on gender differences related to health-seeking help, specifically mental health and stigma.

CONCLUSION

This study was conducted to detect the gender difference in health-seeking behavior of university students. There is a significant difference between males and females in health-related behavior. The results showed

that females are more likely to visit a doctor, take steps to prevent illness, and take care of their mental health. Male students mostly postpone the treatment, rely on self-medication. They have to face hurdles in seeking treatment due to finances, a busy schedule, and societal expectations attached to males.

In conclusion, the study shows that female students are more conscious, attentive, and expressive about their health, while male students are generally delayed treatment and use self-medication. The findings proposed that female students have a higher score in health-seeking behavior compared to male students.

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