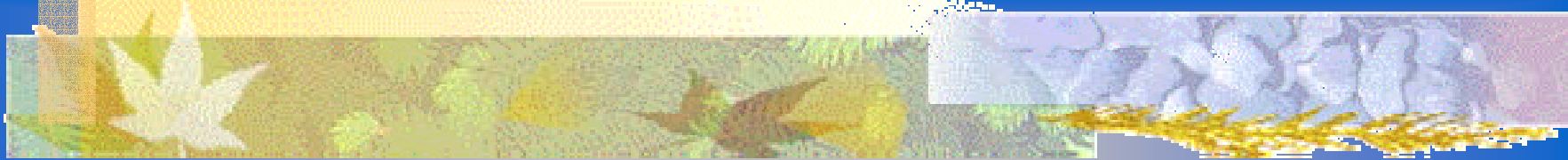


Factors Influencing Help-Seeking Behaviors for Abuse and Other Women's Health Issues in Hawaii



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A decorative header strip at the top of the slide features a collage of nature-related images: a green plant on the left, a bird in flight in the center, and a close-up of purple flowers on the right.

Introduction

- ❖ Disparities in women's health
 - ❖ Greater utilization of services than men
 - ❖ More interested and informed about health
 - ❖ Yet, receive *less* preventive care
 - ❖ Fewer evaluations
 - ❖ Given less explanation
- ❖ Sensitivity of women's health concerns



Priority Health Issues

- ❖ Violence against women as public health issue
 - ❖ Physical abuse
 - ❖ Sexual assault
 - ❖ Emotional abuse
- ❖ Provide a context for examining violence
- ❖ Other priority health issues with physical, psychological and social consequences
 - ❖ Osteoporosis
 - ❖ Breast cancer
 - ❖ Sexually transmitted disease
 - ❖ Substance abuse
 - ❖ Depression



Understanding Help-Seeking

- ❖ Delay in seeking medical treatment
 - ❖ Demographic characteristics
 - ❖ Decision-making
 - ❖ problem identification
 - ❖ provider evaluation
- ❖ Models of health behavior
 - ❖ Health belief model
 - ❖ State of readiness
 - ❖ Perceived benefit weighted against perceived costs



Understanding Help-Seeking (Cont.)

- ❖ Social learning and social cognitive theories
 - ❖ Self-efficacy
 - ❖ Outcome expectation
- ❖ Theories of reasoned action and planned behavior
 - ❖ Attitudes toward behavior
 - ❖ Perceptions of norms
- ❖ Theory of triadic influence
 - ❖ Broader cultural context
 - ❖ Situational variables



Conceptual Model

❖ Demographic characteristics

- ❖ Age
- ❖ Ethnicity
- ❖ Relationship status
- ❖ Children
- ❖ Socioeconomic status

❖ Problem recognition

- ❖ Definition
- ❖ Knowledge of condition
- ❖ Importance

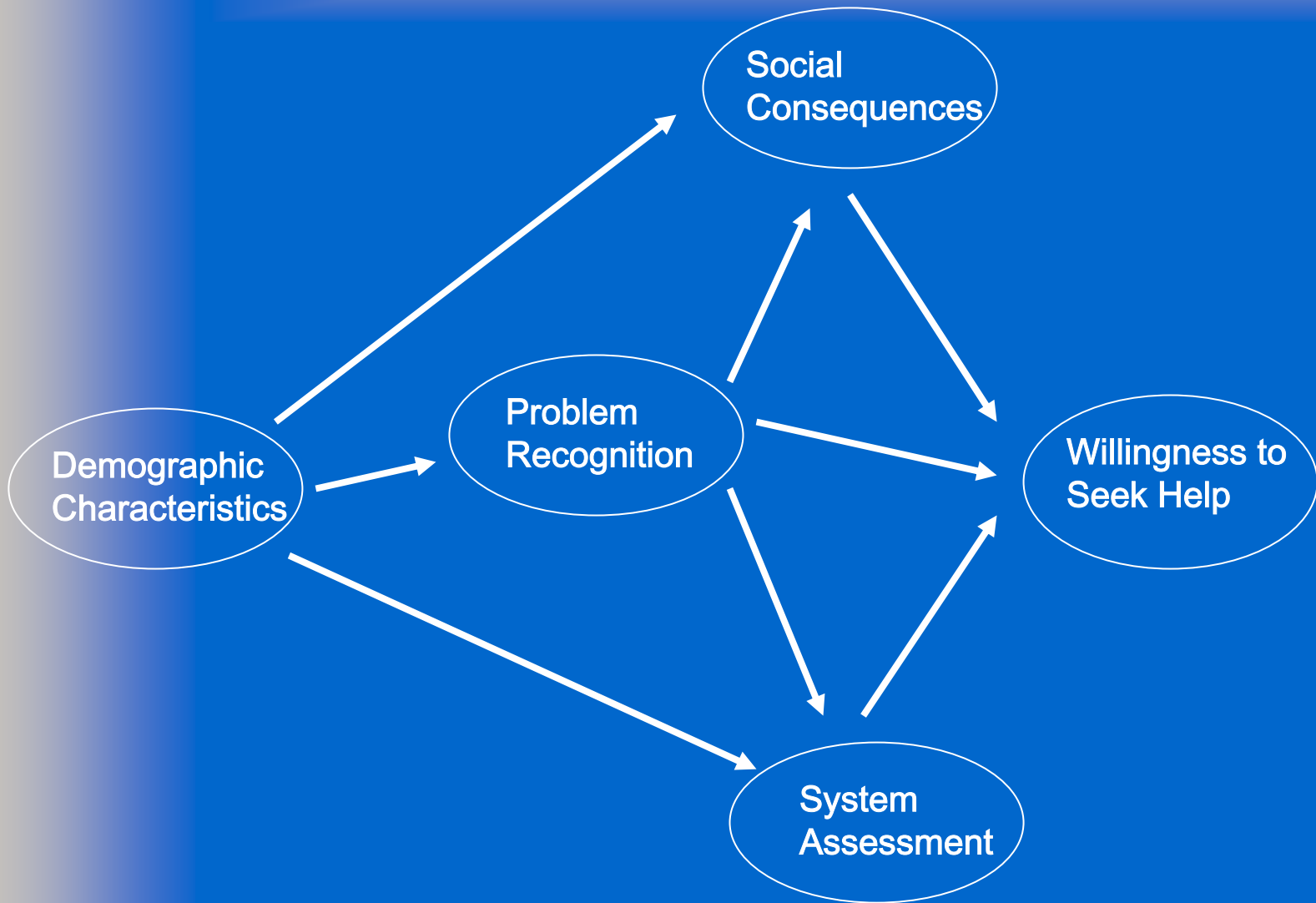
❖ System assessment

- ❖ Logistics
- ❖ Competence

❖ Social consequences

- ❖ Burden
- ❖ Fear
- ❖ Sigma

❖ Health issue variability



Physical Health

Mental Health

Violence Against Women



Methods

- ❖ Cross-sectional survey of 332 women on Oahu
- ❖ Conducted at shopping centers with Longs Drugs on Sundays in October-December, 1999
- ❖ Cluster sampling
 - ❖ Kalihi
 - ❖ Kaneohe
 - ❖ Hawaii Kai
 - ❖ Manoa
 - ❖ Mililani
 - ❖ Moiliili
 - ❖ Salt Lake
 - ❖ Waianae



Hypotheses

- ❖ Willingness varies by way of help seeking and by issue
 - ❖ Bring Up < Discuss
 - ❖ Violence < Mental Health < Physical Health
- ❖ The number of barriers encountered (problem recognition, system assessment and social consequences) varies by issue
 - ❖ Violence > Mental Health > Physical Health
- ❖ Demographic characteristics influence barriers which in turn influence willingness to seek help



Instrument

- ❖ Items on willingness to seek help, problem recognition, system assessment, and social consequences using 5-point scale
- ❖ Same questions asked for each of eight women's health issues
- ❖ Demographic characteristics categorical



Analysis

- ❖ Chi square used to compare sites by demographic characteristics
- ❖ Multimethod multitrait analyses to assess for differences in ways of help-seeking by health issue
- ❖ Confirmatory factor analyses done on barriers
- ❖ Structural equation modeling to examine application of conceptual model

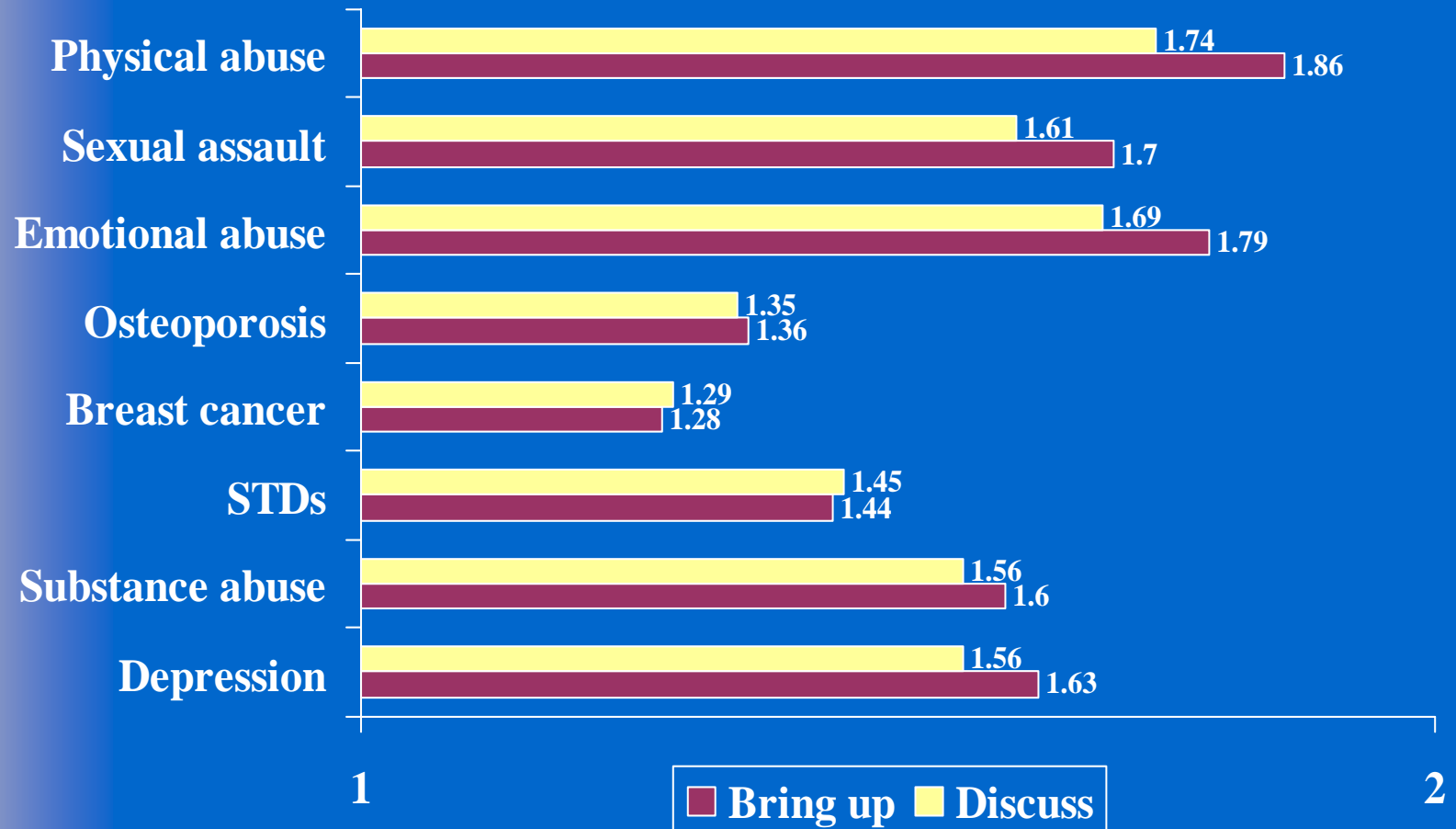


Sample Description

- ❖ Overall 82% of women approached participated
 - ❖ Low of 65% in Kalihi
 - ❖ High of 90% in Mililani
- ❖ Basically representative of communities selected
- ❖ Overall prevalence rates ranged by issue
 - ❖ High of 36% for depression
 - ❖ Low of 3% for breast cancer
 - ❖ Violence against women
 - ❖ 26% for emotional abuse
 - ❖ 15% for physical abuse
 - ❖ 13% for sexual assault

Willingness to Seek Help

Higher Score = Less Willing





Willingness to Seek Help

- ❖ **Varies by issue**
 - ❖ Less willing to seek help for violence (physical abuse, emotional abuse, and sexual assault) than mental health (depression and substance abuse)
 - ❖ Less willing to seek help for mental health than physical health (sexually transmitted diseases, osteoporosis, and breast cancer)
- ❖ **Varies by way**
 - ❖ Less willing to bring up than to discuss

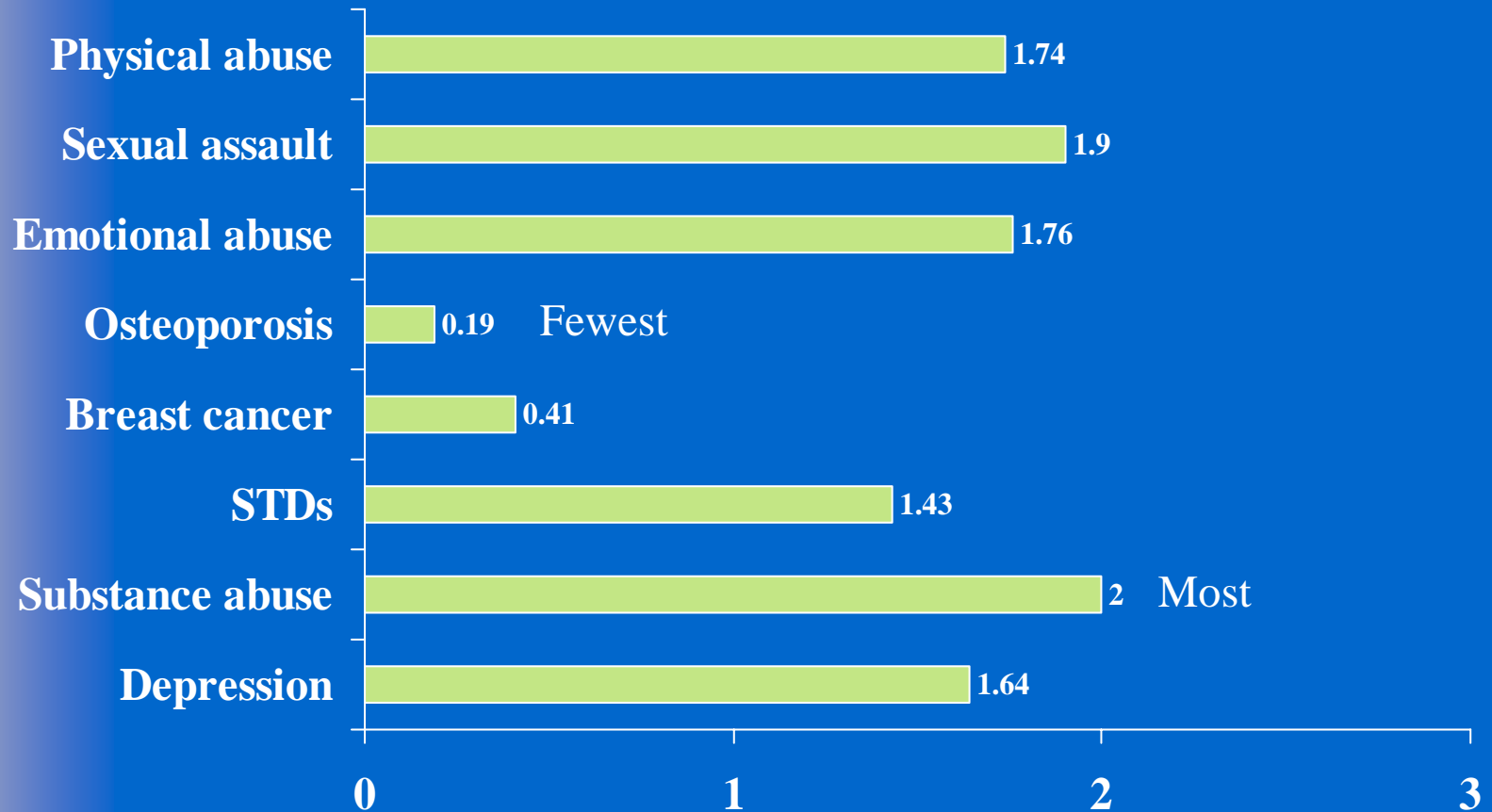
Barriers to Help Seeking: Social Consequences

Higher Score = More Barriers



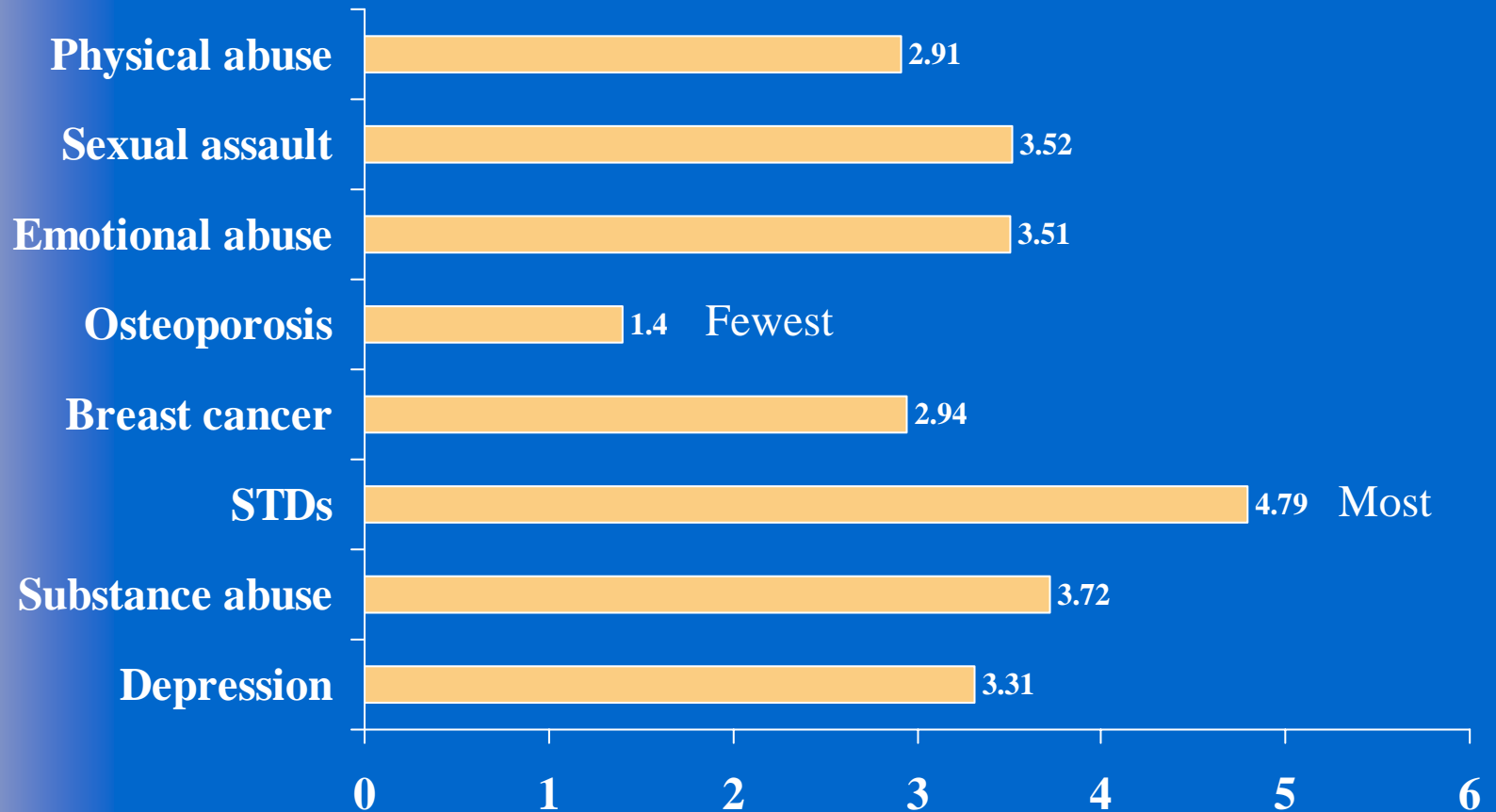
Barriers to Help Seeking: Problem Recognition

Higher Score = More Barriers



Barriers to Help Seeking: System Assessment

Higher Score = More Barriers





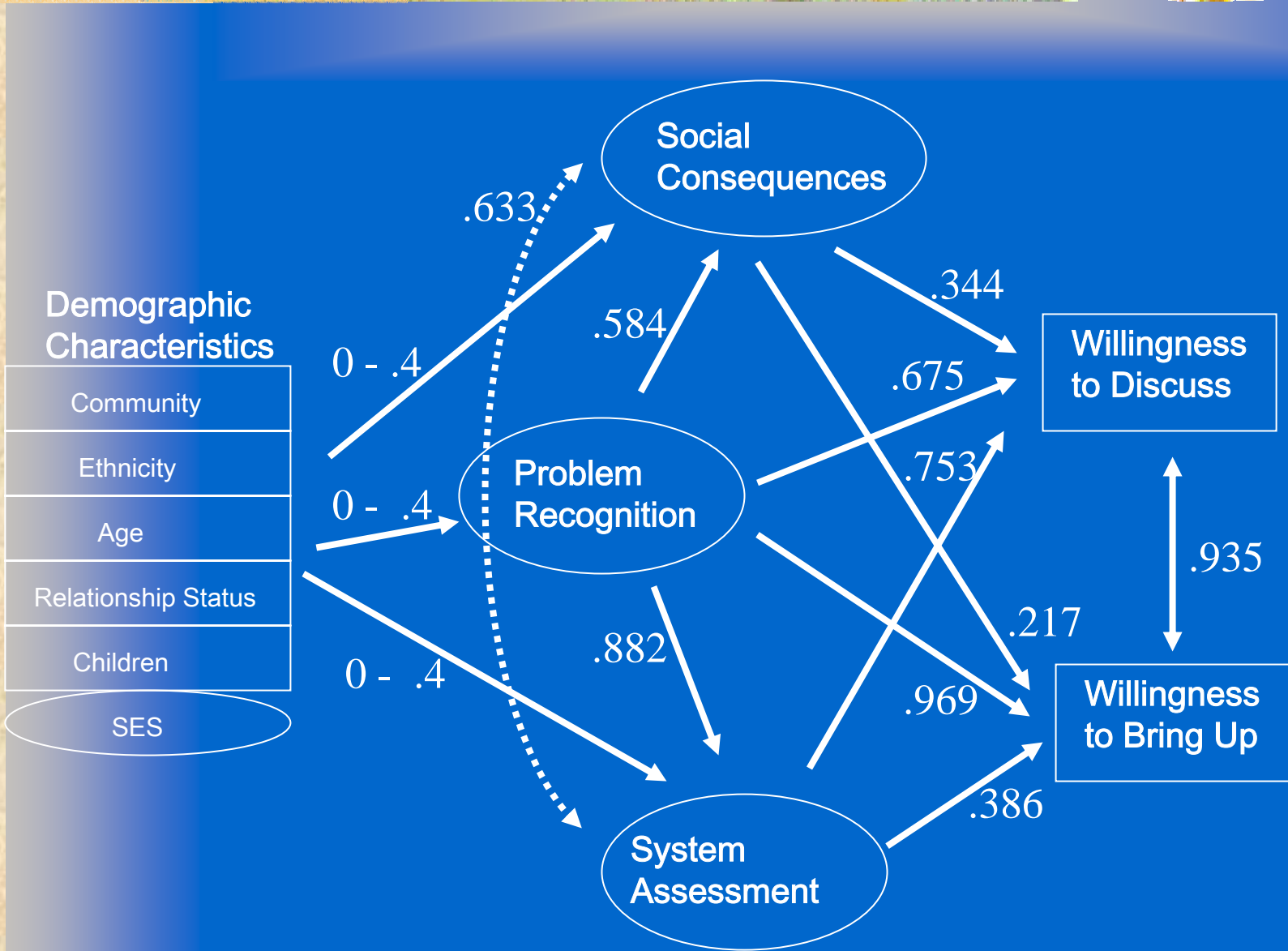
Barriers to Help Seeking

❖ Varies by issue

- ❖ Violence against women not have the greatest number of barriers
- ❖ Most barriers for substance abuse and sexually transmitted disease
- ❖ Fewest for osteoporosis and breast cancer

❖ Varies by type

- ❖ Measuring different domains
- ❖ Social consequences different from problem recognition and system barriers
- ❖ System barriers different from social consequences



- Physical Health**
 - Osteoporosis
 - Breast Cancer
 - Sexually Transmitted Disease
- Mental Health**
 - Substance Abuse
 - Depression
- Violence Against Women**
 - Physical Abuse
 - Sexual Assault
 - Emotional Abuse



Conceptual Model

- ❖ Relatively good fit
- ❖ Varies by issue
 - ❖ Issues related
- ❖ Varies by way of help-seeking
 - ❖ Ways related
- ❖ System assessment most influential for discussing issue
- ❖ Problem identification most influential for bringing up issue
- ❖ Demographics less important, exceptions
 - ❖ Age
 - ❖ Education



Implications

- ❖ Help seeking highly influenced by social milieu
- ❖ Community-wide approaches promising
 - ❖ Behavior change models
 - ❖ Improve problem recognition
 - ❖ Alleviate social consequences
- ❖ Provider interventions
 - ❖ Psychosocial training
 - ❖ Counseling integrated into care
- ❖ Legislative action
 - ❖ Violence prevention
 - ❖ Gender equity



Limitations

- ❖ Sample over educated
 - ❖ Illiteracy
 - ❖ English as a second language
- ❖ Under-reporting uncertainties
- ❖ Not “close” fit
 - ❖ Missing data issues



Research Directions

- ❖ Expansion of problem recognition
 - ❖ Symptom recognition
 - ❖ Self-risk assessment
 - ❖ Definitions of health issues
- ❖ Examination of risk groups
 - ❖ Dissertation focus on likeliness of help seeking
 - ❖ Future analyses focus on proportion that were unwilling to seek help



Mahalo

- ❖ Dr. Gigliola Baruffi
- ❖ Frank Parrish
- ❖ Dr. Kathryn Braun
- ❖ Dr. Satoru Izutsu
- ❖ Dr. Ron Johnson
- ❖ Dr. Jack McArdle
- ❖ Women sharing experiences

❖ Data Collectors

- ❖ Kim Birnie
- ❖ Dr. Robin Brandt
- ❖ Martha Burke
- ❖ Dr. Bonnie Christensen
- ❖ Dr. Jeanne Edman
- ❖ JoAnn Goebert
- ❖ Dr. Earl Hishinuma
- ❖ Michelle Horton
- ❖ Suzanne Loomis
- ❖ Mig Parrish
- ❖ Rosaanna Nazworthy