

Barriers to Preventive Healthcare Among College Students: A Mini-Review of the Literature

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Keywords

Preventive healthcare • College students • Barriers • Health literacy

Summary

Preventive healthcare is vital for promoting the long-term health of individuals. College students often underutilize such services associated with preventive healthcare in spite of increased autonomy and health risks that can emerge during early adulthood. This demographic of students represents a transitional population with increasing independence and unique health needs. Despite this, they exhibit persistently low engagement in preventive health services. This literature review synthesizes evidence on barriers to preventive care access and utilization

among college students in the United States and similar high-income settings. Common barriers include lack of knowledge, perceived invulnerability, healthcare avoidance behaviors, cost and insurance gaps, confidentiality concerns, and systemic access issues. Understanding these multi-faceted barriers is essential to designing targeted interventions at individual, institutional, and policy levels that improve preventive care engagement and long-term health outcomes among these emerging adults.

Introduction

Preventive healthcare is foundational to long-term health outcomes. Among key aspects of preventive healthcare, immunizations, screenings, counseling, and health risk assessments, are recommended for young adults to reduce disease incidence and promote lifelong health [1]. However, college students exhibit suboptimal engagement with preventive services, posing challenges to both individual and public health. Unlike pediatric or older adult populations, young adults face unique transitional barriers during their college years that influence care utilization. Despite this, many young adults, particularly college students, underutilize preventive services even when accessible through campus clinics. Transitional independence, health behaviors, and evolving risk profiles position college students as a critical target for preventive care initiatives. Evidence shows that college students disproportionately seek care for acute symptoms while largely ignoring preventive services [1]. This review synthesizes recent PubMed-indexed studies to elucidate barriers affecting preventive healthcare access and uptake among college students.

Methods

This review synthesizes evidence from peer-reviewed PubMed-indexed studies on barriers to preventive healthcare utilization among college students and young adults. Key search terms included “college

students,” “healthcare-seeking behavior,” “preventive services,” and “barriers to care.” Several peer-reviewed journals were analyzed. However, the themes included in the comprehensive review [1] which examined 28 quantitative and qualitative studies describing healthcare-seeking behaviors and barriers among college populations, remains a primary anchoring focus on this review, but it does not encompass the totality of the comprehensiveness of it.

Results

This review identifies several recurring themes related to barriers to preventive healthcare utilization among college students across included studies. These barriers can be categorized into structural/logistical, psychosocial/perceptual, informational, and institutional factors. Across studies, preventive healthcare utilization among college students was consistently low. Structural barriers were frequently reported, including cost, insurance limitations, and time constraints. Even among insured students, out-of-pocket costs and lack of understanding regarding coverage reduced utilization [2]. Time limitations due to academic and work obligations were also cited as key barriers to services such as vaccinations and routine screenings [3]. Psychosocial barriers were also prominent. Many students demonstrated perceived invulnerability to health risks, reducing motivation to seek preventive care [1]. Fear of procedures, potential diagnoses, and stigma, particularly related to mental

health, further discouraged engagement [3, 6]. Health literacy and awareness gaps were consistently identified across studies. Students with limited knowledge of available services or preventive guidelines were significantly less likely to engage in care [4, 5, 8]. Male students and non-health majors were particularly affected by these gaps. Institutional and provider-level factors also influenced utilization. Lack of provider recommendation was associated with reduced uptake of services such as HPV vaccination [5]. Additionally, variability in screening practices across campus health centers contributed to inconsistent access to preventive care [9]. Overall, these results highlight the primary barriers identified across studies and set the stage for a more detailed exploration of how they influence healthcare utilization among college students.

Conceptual Framework: Healthcare-Seeking Behavior

Preventive health behaviors among college students are conceptualized within broader healthcare-seeking models, including individual, system, and environmental determinants. Key themes influencing healthcare-seeking behaviors, including barriers to accessing care and health information utilization among college students and young adults (18–39 years) were identified [1]. While these models are not exclusive to preventive services, they provide a foundation for understanding barriers that impede preventive care utilization. A review found that although most students experience significant health risks (e.g., stress, sexual activity, poor diet, substance use), only a minority utilize preventive services [1]. Of enrolled students, only approximately 32% accessed campus health services annually, and only about 15.6% of those visits were for preventive care [1]. Lack of access and awareness, cost, and fear were all aspects that contributed to reduced preventive healthcare engagement. There were several barriers that were identified as precluding this population from taking advantage of preventive healthcare.

Structural and Logistical Barriers

COST AND INSURANCE COVERAGE

Insurance status is closely tied to preventive care uptake among young adults. A national survey found that young adults with health insurance were significantly more likely to receive basic preventive services than uninsured peers, yet even insured students underuse services as recommended [2]. Cost remains a barrier even for insured students due to copayments, out-of-pocket expenses, and confusion about coverage scope.

TIME CONSTRAINTS AND CONVENIENCE

Time constraints are a significant barrier to preventive

healthcare. College students often have full schedules that include academics, extracurricular activities, and work. Research on influenza vaccination uptake found that students cited limited time and convenience as reasons for not obtaining vaccines, reflecting challenges in integrating preventive care into busy academic schedules [3]. Clinic hours or appointment requirements can often conflict with academic or work responsibilities. Constraints such as these can also impact other preventive services, compounding barriers.

ACCESS AND AWARENESS OF SERVICES

Poor awareness of available preventive services is another barrier. In reproductive health studies, knowledge of available services was critical. Students lacking such knowledge were less likely to engage in care, particularly male students [4]. Similarly, research on HPV vaccination shows that not knowing where to obtain the vaccine and the absence of proactive provider recommendation impede uptake among college students [5]. Preventive services are not readily available and accessible to this demographic.

Psychosocial and Perceptual Barriers

PERCEIVED VULNERABILITY AND RISK

College students have been exposed to environments that shape their healthcare experiences. Avoidance of healthcare settings due to negative past experiences or underlying cognitive patterns can hinder preventive care seeking. Additionally, they often believe they are invulnerable to health risks, which reduces perceived need for preventive services. This perceived invulnerability is documented in healthcare-seeking literature, where students delay care because health concerns are not viewed as serious [1]. An inaccurate perception of vulnerability and risk can also influence the engagement in preventive health services.

FEAR AND STIGMA

Fear related to preventive procedures and health outcomes can deter students. Influenza vaccine studies reported fear of side effects and negative attitudes toward vaccination as obstacles to uptake [3]. Additionally, stigma, particularly around mental health services, limits engagement with prevention-oriented counseling or screening, with students identifying stigma and discomfort as significant barriers [6]. Research suggests that early maladaptive schemas and fears of institutional betrayal contribute to avoidance behaviors that deter students from routine check-ups and preventive screening [7]. Stigmas associated with preventive care, as well as fear of engaging in associated services, can lead to reduced prevention services engagement.

SOCIAL INFLUENCES AND NORMS

In addition to stigmas, negative social influence

from peers or lack of support structures also affects preventive health behavior. In vaccine adoption contexts, negative peer influence contributed to reduced uptake, demonstrating how social norms can discourage preventive actions [3]. Social influence as well as socially constructed norms of that demographic do not necessarily facilitate preventive healthcare actions.

HEALTH LITERACY AND KNOWLEDGE GAPS

Knowledge gaps regarding available services and the importance of preventive care contribute to low utilization. Health literacy, including knowledge of disease prevention and screening guidelines, plays a critical role in preventive care engagement. Many students are unaware that routine screenings and checkups can be accessed through campus health centers or covered by insurance, reinforcing reliance on acute care only [1]. This lack of awareness extends to cancer screenings. A study on colorectal cancer screening among university students found knowledge gaps about cancer risk factors and screening methods, particularly outside medical education tracks, contributing to low screening uptake [8]. Similarly, reproductive health research identified that limited knowledge of available services correlates with lower preventive care engagement, especially among male students [4]. The informational access that knowledge and health literacy afford could be potential means to an end for engaging college age students in preventive health services.

Institutional and Provider-Level Barriers

LACK OF PROVIDER RECOMMENDATION

Provider engagement is a known facilitator of preventive care. Yet, the absence of active recommendation from a provider can undermine uptake. College-aged students reported that lack of clinician recommendation significantly reduced HPV vaccination engagement, highlighting missed opportunities for preventive counseling in campus health settings [5]. Providers, especially those who operate at the university and campus health settings, are uniquely positioned to help drive an increase in preventive healthcare.

VARIABILITY IN SCREENING PRACTICES

Practice variation in college health centers also affects preventive care delivery. Some screenings, such as for intimate partner violence, obesity, and eating disorders, occur less consistently than others, reflecting institutional differences that may create uneven access to comprehensive preventive services [9]. Industry standards and guidelines can influence practice variation, leading to an impact of the utilization of preventive services. There is an opportunity to standardize such practices in an effort to increase preventive healthcare.

Discussion

Barriers to preventive healthcare among college students manifest at multiple levels: individual (time, perceptions, knowledge), interpersonal (social influence, stigma), and systemic (service awareness, provider engagement). These barriers intersect and amplify one another. For example, low health literacy may exacerbate perceptions of invulnerability, while structural service constraints compound knowledge gaps. Psychological factors such as perceived invulnerability and healthcare avoidance intersect with systemic barriers such as insurance gaps and cost. Knowledge deficits amplify these barriers, as students often lack awareness of available preventive services or underestimate their importance. The literature highlights a multifaceted set of limitations to preventive healthcare among college students.

Interventions tailored to student populations should address these multi-level barriers. Such interventions must be holistic, addressing behavioral, practical, and systemic challenges. Educational campaigns integrated into orientation and campus life can correct misconceptions about care access and confidentiality. Policy interventions (*e.g.*, expanded student coverage under parental insurance, subsidy programs) may mitigate financial barriers. Embedding preventive services into routine campus activities, such as wellness fairs or academic coursework, can normalize and facilitate engagement. Additional strategies may include extended clinic hours, targeted health education to improve literacy and risk perception, proactive provider recommendations, and stigma reduction campaigns to normalize preventive care. Technology, such as mobile scheduling platforms and digital reminders, could also mitigate logistical barriers. Such interventions and tools could serve to help reduce deterrents.

Conclusion

College students underutilize preventive healthcare services due to a complex interplay of personal, economic, and systemic barriers. Improving preventive healthcare engagement among college students requires understanding the diverse barriers that deter service utilization. Structural constraints, psychosocial perceptions, knowledge gaps, and variability in provider practices collectively hinder preventive care uptake. Increased health education, improved insurance accessibility, and targeted intervention to combat stigma and avoidance are critical to improving preventive care usage. Recognizing these barriers in young adult populations will not only improve individual health outcomes but also strengthen long-term health engagement as students transition into full adulthood. Addressing these deterrents through coordinated institutional policies, student-centered health promotion, and evidence-based interventions is essential to optimize preventive health outcomes during this pivotal stage.

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Authors' contributions

CH solely conceived and designed the manuscript, conducted the research, analyzed and interpreted data, and wrote the manuscript.

References

- [1] Tran DT, Silvestri-Elmore A. Healthcare-seeking behaviours in college students and young adults: a review. *J Res Nurs* 2021;26:320-38. <https://doi.org/10.1177/1744987120951594>
- [2] Luquis RR, Kensinger WS. Perceptions of Health Care and Access to Preventive Services Among Young Adults. *J Community Health* 2017;42:1204-12. <https://doi.org/10.1007/s10900-017-0371-2>
- [3] Su Z, Chen YT. College students' influenza vaccination adoption: Self-reported barriers and facilitators. *J Am Coll Health* 2023;71:522-27. <https://doi.org/10.1080/07448481.2021.1898401>
- [4] Bersamin M, Fisher DA, Marcell AV, Finan LJ. Reproductive Health Services: Barriers to Use Among College Students. *J Community Health* 2017;42:155-9. <https://doi.org/10.1007/s10900-016-0242-2>
- [5] McLendon L, Puckett J, Green C, James J, Head KJ, Yun Lee H, Young Pierce J, Beasley M, Daniel CL. Factors associated with HPV vaccination initiation among United States college students. *Hum Vaccin Immunother* 2021;17:1033-43. <https://doi.org/10.1080/21645515.2020>
- [6] Hunt J, Eisenberg D. Mental health problems and help-seeking behavior among college students. *J Adolesc Health* 2010;46:3-10. <https://doi.org/10.1016/j.jadohealth.2009.08.008>
- [7] Rastegar PJ, Langhinrichsen-Rohling J. Understanding College Students' Healthcare Avoidance: From Early Maladaptive Schemas, through Healthcare Institutional Betrayal and Betrayal Trauma Appraisal of Worst Healthcare Experiences. *Healthcare (Basel)* 2024;12:1126. <https://doi.org/10.3390/healthcare12111126>
- [8] Abdelmaksoud Abdelmonsef Ahmed H, Saad Albagawi B, Hamed AboZayed A, Yousef A, M Marzouk M, Naif Alenezi I, A Almowafy A, Ali Ahmed Shiba H. A cross-sectional study on colorectal cancer screening knowledge and barriers among university students. *BMC Public Health* 2025;25:1871. <https://doi.org/10.1186/s12889-025-22510-z>
- [9] Sutherland MA, Hutchinson MK, Si B, Ding Y, Liebermann E, Connolly SL, Saint-Eloi Cadely H, Hayes JF, Mueller SD. Health screenings in college health centers: Variations in practice. *J Am Coll Health* 2025;73:3031-38. <https://doi.org/10.1080/07448481.2024.2361307>

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