

Kunttu K, Huttunen T. **Student Health Survey 2004: a national survey among Finnish university students.** Helsinki: Finnish Student Health Service, Ylioppilaiden terveydenhoitosäätiön tutkimuksia 40, 2005, 251 pp.

Abstract

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The study was carried out among Finnish university students who are entitled to health care services provided by the Finnish Student Health Service (YTHS). The aim of the study was to survey 1) the students' physical, mental and social health, 2) certain key aspects of health behaviour, including smoking, use of alcohol and narcotics, eating habits, physical activity, safety in traffic, and dental care, 3) external factors affecting health and health behaviour, including social relationships and issues pertaining to studies and livelihood 4) health-related attitudes 5) the use of health care services and opinions about their quality. The survey also included special questions related to sexual health and the use of electronic health services. The target group consisted of Finnish undergraduate students aged 18-35 years. The sample was 5,030 students of whom 45,7 % were male and 54,3 % were female. The study material was gathered by means of a postal questionnaire, with three repeat questionnaires. The response rate was 62,7 %. The respondents represented well the study population for all background variables. The results are reported as observed frequencies of the measured variables, which were derived from single questions or series of questions, for gender, age group, duration of studies, study location, and field of studies. Summary in English.

Key words: university students, physical health, mental health, symptoms, sexual health, health behaviour, use of health care services, electronic health services, social relationships, studying

SUMMARY

The survey was carried out among Finnish university students who are entitled to receive health care services provided by the Finnish Student Health Service (FSHS). The aim was to survey 1) the students' physical, mental and social health, 2) certain key aspects of health behaviour, 3) external factors affecting health and health behaviour, including social relationships and issues pertaining to studies and livelihood, 4) health-related attitudes, and 5) the use of health care services and opinions about their quality. The survey also included special questions related to sexual health and the use of electronic health services. The survey was constructed so as to allow, in terms of its core components, comparison with the earlier nationwide health survey among university students, which was carried out in 2000 (Kunttu & Huttunen 2001: Student Health Survey 2000: a national survey among Finnish university students). The target group consisted of Finnish undergraduate university students under 35 years of age. The sample size was 5,030 students, of whom 45.7%



were male. The material was collected by means of a postal questionnaire, with three repeat questionnaires. The response rate was 62.7% (49.2% for males and 74.0% for females). The respondents represented well the study population for all background variables. The results are reported as frequencies of the measured variables, which were derived from single questions or series of questions, and analyzed by gender, age group, duration of studies, study location and field of study. The main results were compared, by percentage shares, with those of the survey conducted in 2000.

Chronic or long-term diseases or disorders diagnosed by a doctor and showing symptoms or requiring treatment within the past 12 months were reported by 66% of male students and 76% of female students. The most frequently reported were visual defects, dental caries and allergic rhinitis, often together with atopic eczema and asthma. Other commonly reported medical conditions included dermatological, otorhinolaryngological or musculoskeletal diseases, wisdom tooth inflammations, lactose intolerance, migraine, depression and, in women, gynaecological disorders. Prescription drugs for various diseases were regularly used by 8% of men and 15% of women. Self-treatment with over-the-counter drugs was practised by 7% of men and 12% of women. Use of natural drugs was common especially among women. Permitted substances enhancing athletic performance were used by 14% of men. The use of any banned doping preparations was very rare.

Two thirds (64%) of female students reported they had suffered from gynaecological complaints during the past six months. Every fifth male student had had problems related with sexual health. One half of women used hormonal contraception, and post-coital contraception had been used by 40% of women. Of all students, 6% had had sexually transmitted chlamydia.

A total of 85% of the respondents assessed their health as being good, and only 2% as poor. As many as 30% of men and 45% of women had experienced different symptoms on a daily or nearly daily basis. The most common of the daily occurring symptoms were skin problems, neck and shoulder disorders, rhinitis or blocked nose, abdominal swelling or gas pains, and sleep disorders. On the basis of measures derived from several symptoms, it was found that 13% of the students suffered from mental disorders on a daily basis, 10% from constitutional symptoms (headache, dizziness, fatigue), and 10% from gastrointestinal symptoms. The most frequently reported of the weekly occurring symptoms was fatigue, which was reported by 30% of the respondents. Six percent (6%) of the respondents slept less than 7 hours per day, and 14% estimated that they rarely or hardly ever slept sufficiently.



According to the results of the GHQ 12 questionnaire, 19% of male students and 30% of female students suffered from mental problems. The most commonly experienced problems included continuous overstrain, a feeling of unhappiness and depression, as well as difficulties in concentrating on the tasks at hand. According to mental health screening, 25% of male students and 34% of female students experienced considerable stress. The screen revealed that stress was most frequently caused by getting a hold of one's studies, public performances, such as presentations, one's mood in general, planning the future, and experiencing one's own strength and capabilities as problematic. Psychological stress was generally considered as the greatest threat to one's own health. Symptoms suggesting eating disorders were reported by every tenth female student.

A total of 68% of male students and 76% of female students were within the range of normal weight. Of women, nearly every tenth was underweight. The proportion of overweight men increased clearly in the age groups above 25 years; in the oldest age group, as many as 44% were overweight. Of the women, 35% considered themselves as being overweight, but only 15% actually exceeded the limit of their ideal BMI. Men tended to consider themselves as being underweight more often than they were in reality.

One quarter of the students exercise for fitness at least four times a week. The proportion of those who do not exercise at all is 8%. The mean time used for fitness exercising was 4.3 hours per week for male students and 3.7 hours per week for female students. For men, the time used for exercising was clearly shorter in older age groups, while in women the change was not so apparent. In all the age groups, women exercise in connection with daily activities more frequently than men, the mean time being 3.4 hours per week for male students and 3.9 hours per week for female students.

Accidental injuries requiring medical attention were reported by 13% of the respondents; most frequently the accidents had taken place during sports activities. Behaviour pertaining to traffic safety was measured by the use of safety devices: 98% used, nearly always, the safety belt in the car, 27% used a reflector and 16% wore a bicycle helmet.

While 17% of the respondents did not have breakfast, 79% had a warm meal at lunch time. Nearly all of the students also have a meal at dinner time. Slightly over one half of the students eat the main meal of the day at a student restaurant. Every tenth (10%) student has a special diet because of a diagnosed disease, allergy or weight issue, and 13 % for other reasons. While 61% of female

students often consider the healthiness of various foodstuffs when shopping, only 40% of male students do so.

Eating habits were examined for the use of fat, salt and sugar, and intake of fibre and calcium. Attempts to adopt healthier dietary habits were reflected in the use of fat and salt: salt is not usually added at the table and 68% of the respondents use light spreads or no spread on bread. One fifth of the students do not drink milk every day, and one half only has 1-2 glasses of milk a day. Fruit, berries and fresh vegetables are not eaten to the recommended extent; less than one half eats these on a daily basis. A total of 90% eat dark (rye) bread every day. Every tenth student eats sweets every day, and 8% had drinks with added sugar.

One half (56%) of male students and as many as 75% of female students brush their teeth twice a day. Dental floss is used by 7% on a daily basis, and occasionally by 40% of male students and 63% of female students. Xylitol products were consumed at least once a day by 38%; however, every tenth student does not use xylitol at all.

Eight percent (8%) of men and 7% of women smoked on a daily basis. One tenth of male students took snuff occasionally or regularly. Every fifth student (22%) had experimented with or used narcotics, in most cases cannabis. For 8% of the students, the cannabis use had continued beyond experimenting or was currently ongoing.

Of all students, 6% were teetotallers. On the basis of the question concerning habitual weekly use of alcohol, the mean consumption of alcohol was 4.1 kg/year for men and 2.0 kg/year for women. In terms of the AUDIT scores, the alcohol consumption was within the safe limits for one half of male students and three quarters of female students. Every fifth male student and 6% of female students had at least six alcohol portions at a time on a weekly basis. Experienced social pressure towards the use of alcohol is rather strong. Fourteen percent (14%) of the students feel that they use more alcohol than they actually would prefer, because of the influence of their friends; less than one half report that there is a non-alcoholic option in parties or social events, and 46% report that having a non-alcoholic drink attracts attention.

The students find it generally rather important to control and regulate health-related factors by means of legislation. Regulation was considered particularly important for smoking in public



facilities, cannabis usage and food additives. The most liberal attitudes were taken towards the legislation concerning the use of alcohol and the use of a bicycle helmet.

Seventy-one percent (71%) of the respondents classified themselves as full-time students. As to the field of study, 68% of the students felt they were in the right field, 23% were insecure of their choice, and 9% thought they were in the wrong field. One third of the students had, during the current academic year, experienced that the workload related with their studies had been too high, either on a continual basis or rather often. Every tenth student reported a contrary experience, in other words, they felt they had too little work to do, either on a continual basis or rather often. While one fifth of the students considered the guidance and counselling received for studies as sufficient, one third found it reasonable or varying, 31% deficient and 17% completely insufficient. The students experienced quite a lot of different types of difficulties in their studies: every third in reading for exams and doing tasks that call for initiative, and one fifth in, among other things, planning their studies. Only rarely were there any difficulties with the teaching staff. Nearly one quarter of the students have not during their study years sought any help, support or advice in their studies from the teachers; most frequently this occurred among the first-year students. Almost all students seek and find support for their studies from their study mates and friends. Family is another important source of support needed for studies. Nearly one third of the students feel they do not belong to any study-related group.

Forty-six percent (46%) of the students live alone in their own household and 35% together with the spouse or partner. While 7.5% of the students have children, 88% would, however, like to have children. The majority of the students have a properly working social support network, but 4% of the students often feel themselves alone and 5% do not meet with friends even once a month. Insufficient dialogical support was reported by 17% of the students. One third of the students do not participate in any organizational activities, but 45% participate at least once a month.

Nearly one fifth of the students had been full-time employed for over six months. One fifth of the students reported they had had regular part-time jobs for more than six months, working 14.5 hours a week on average. For over one half of the students, the work was associated with their field of study. Sixty-four percent (64%) of the students regarded it as necessary to work for a living. Receiving financial support from parents is common. One half of the students reported that their available funds covered living costs well or excellently, but 8% of the students found their living was tight or uncertain.



The use of health services was examined both in terms of service providers and utilization rates during the preceding 12 months. Concerning the use of services provided by the FSHS, slightly over one half of the respondents had visited a nurse, 48% a general practitioner, 42% a dentist, and 5% a psychologist and 4 % a psychiatrist. One third of the respondents had not used the services of any other health care organization but the FSHS. The most frequently reported reasons for using a service other than FSHS services were the following: the student clearly belongs to the scope of another health care organization, has a continuing treatment relationship elsewhere, or needs assistance outside the normal working hours or at a location where there are no FSHS services available. Of the respondents, 12% did not think they had received treatment quickly enough, 9% reported that the FSHS does not offer the desired service, and 5% were not satisfied with the quality of services.

Altogether 47% of male students and 68% of female students had participated or were going to participate in the general health and dental examinations offered by the FSHS to all first-year students. The students were quite satisfied with the services provided by the FSHS, 87% responded that they had got an answer to the issues they had been concerned about, and 89% experienced they had been heard and understood. Of the electronic health services offered by the FSHS, the website was the most popular; it had been visited by one half of the students. Every sixth student (16%) had been in contact with the health care personnel via e-mail, and 12% had used the advisory web services of the FSHS.

The students' own desire to receive assistance in various issues related with health, studies and life management were logical in light of the other results of the survey. Most frequently, the students hoped for assistance in stress management and the control of problems pertaining to studies, but they frequently also desired for assistance concerning dietary issues, ergonomics, physical activities as well as problems in human relations, self-confidence and tension.