

Breaking the Silence: Understanding Young Adults' Hesitancy in Discussing Vulvovaginal Symptoms

Authors:

Yun J¹, Cannon B¹, Kang M¹

¹ General Practice Clinical School, Faculty of Medicine and Health, The University of Sydney

Background:

Vulvovaginal symptoms are common among adolescents and young adults, yet many delay seeking care due to embarrassment, stigma, and discomfort discussing intimate symptoms. Existing research has focused primarily on communication about sexually transmitted infections and contraception, with limited attention to vulvovaginal symptoms. This study explores young adults' experiences, help-seeking behaviours, and communication preferences, and their implications for primary care.

Methods:

A mixed-methods cross-sectional study was conducted with Australian young adults aged 18–24 years who had experienced vulvovaginal symptoms. Participants were recruited via Instagram and completed an anonymous online survey (REDCap), followed by optional 30–45-minute semi-structured interviews conducted via Zoom. Quantitative data were analysed using SPSS and qualitative data were analysed using reflexive thematic analysis.

Results:

Sixty-five participants completed the survey. Initial information-seeking most commonly involved digital sources (48.7%), followed by informal personal networks (35.0%), while relatively few participants first consulted a GP (14.2%); use of formal educational resources was rare (2.0%). Overall, 42 (64.6%) had discussed symptoms with a GP; however, delayed help-seeking was common: 27.7% waited months and 12.3% years, while only 3.1% sought care within days. Participants with vulvovaginal symptoms alone were less likely to delay discussion than those with concurrent menstrual symptoms ($p=0.042$). Among those who consulted a GP, 40.5% reported emotional discomfort and only 7.1% reported that the GP initiated discussion.

Four themes were identified:

- 1) a “silent burden” of distress and uncertainty contributing to delayed help-seeking
- 2) tension between stigma and the need for support, leading to reliance on informal or anonymous sources
- 3) anticipated judgement and fear of examination as barriers to GP care
- 4) trust and proactive, empathetic communication as facilitators of care-seeking.

Conclusion:

Delayed help-seeking is common, with many young adults turning to informal or online sources before care. Proactive, youth-friendly, and empathetic communication may support earlier presentation and improve primary care management.

Disclosure of Interest Statement:

This study was conducted as part of an Academic General Practice Registrar program and received research funding to support research-related costs. No pharmaceutical or commercial industry funding was received.