

Attending the Health Infodemic: Relationships Between Information Predictors and Health Outcomes.

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Background Information

- People’s interactions with information can impact their future choices in and acceptance of information and impact health outcomes.¹
 - COVID-19 pandemic exemplified harm from misinformation (e.g., vaccination non-adherence, lack of protective measures, unsubstantiated health practices).²
 - Having or not having confidence in information abilities can impact interactions with information and influence health outcomes.³
- People high in intellectual humility:⁴
 - Acknowledge own knowledge limitations and biases
 - Open to other’s knowledge
 - Investigate more when appropriate
 - Invested in learning

Research Question

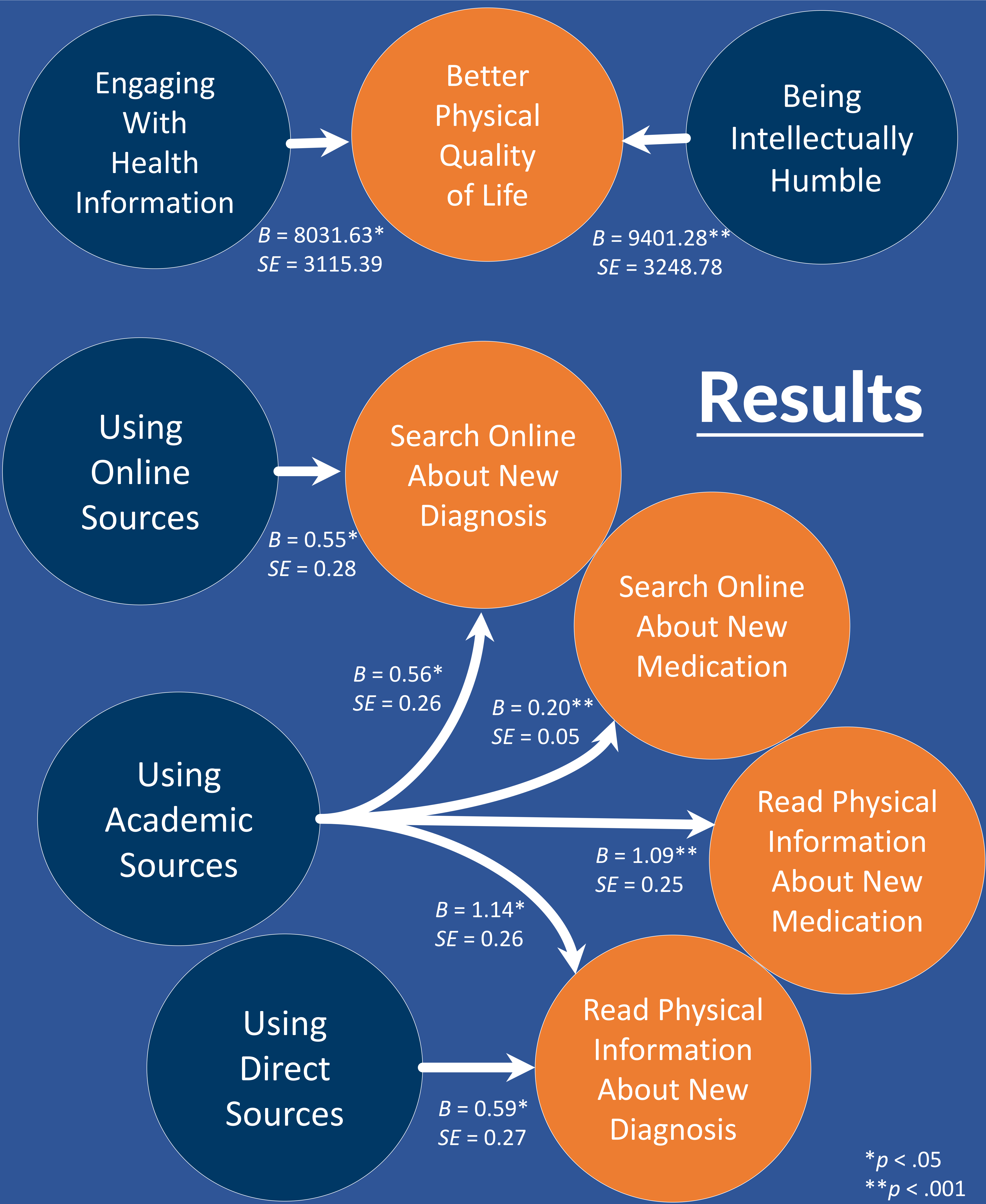
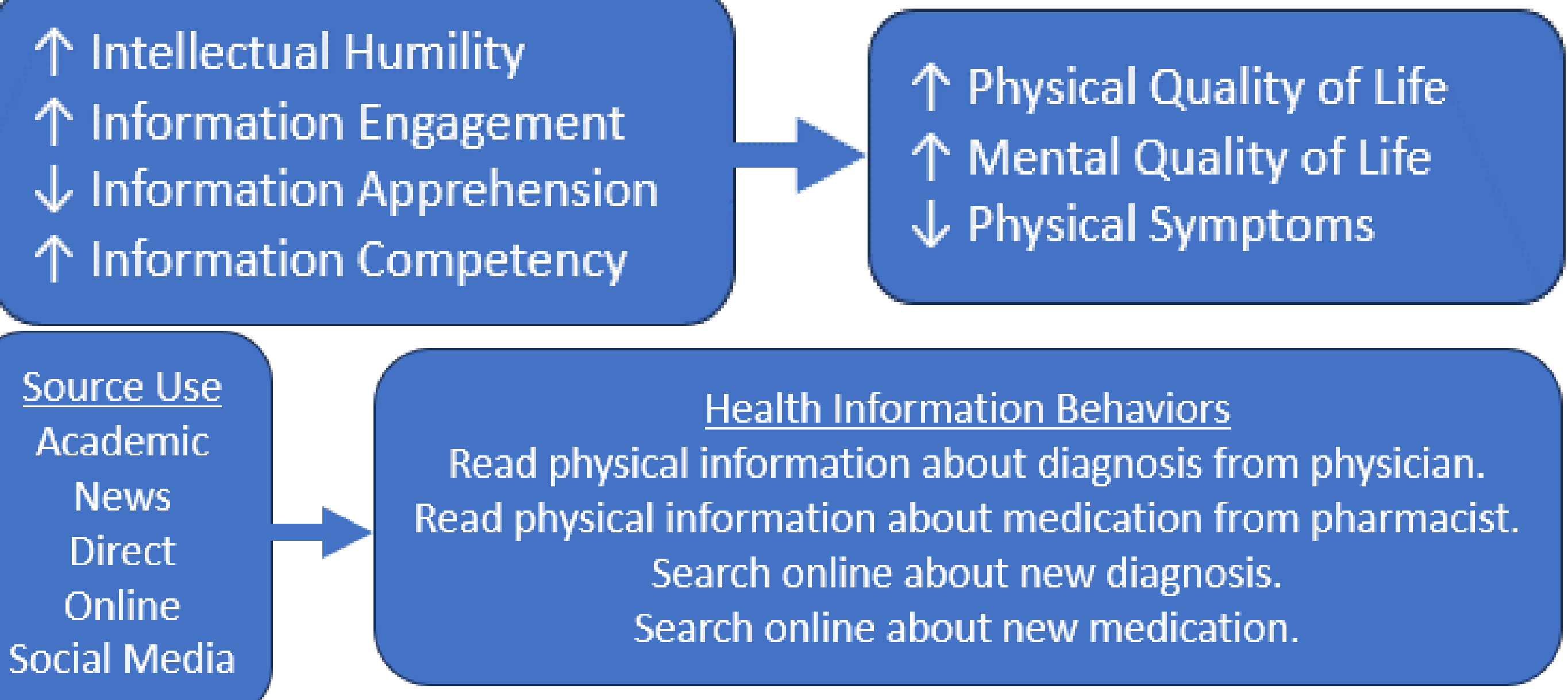
- How do information choices and practices influence health information behaviors and outcomes?

Methods

- Recruited from UTA’s Participant Pool (N= 500).
- Ethnically and racially diverse sample. Primarily females, freshman, and 17-22 years old.
- Self-report questionnaires:
 - Predictors: Comprehensive Intellectual Humility Scale (22 items; $\alpha = .84$)⁵, Information Orientation Scale (2 subscales; 4 items each; $\alpha = .61$ for engagement and $\alpha = .65$ for apprehension)⁶, Information Competency Scale (5 items; $\alpha = .89$)⁷, Source Use
 - Outcomes: MOS SF-36 (36 items)⁸, CHIPS (33 items; $\alpha = .93$)⁹, Health Information Behaviors (reading physical information and searching online)

Hierarchical Multiple Regression Models

- All models included covariates: sex at birth, age, race, indicators of SES, self-esteem, and social desirability.



Discussion

- People’s interactions with health information and their level of intellectual humility are crucial factors influencing physical health outcomes.
- Utilizing reputable (academic) sources influenced engagement in essential health information behaviors, such as seeking information from physicians and pharmacists.
- Participants who did not routinely use direct verbal or written sources were less likely to read physical information about a new diagnosis given to them by a physician.
- Having more experience using online sources predicted searching online about new diagnoses.

Limitations

- Student only population makes generalization difficult.
- Cross-sectional design provides insight but does not assess causality or changes over time.
- Questions on source use were not specific to health information.

Future Directions

- Explore explanatory factors and relationships.
- Assess changes over time with longitudinal design.
- Diversify the sample to increase generalizability.
- Identify subgroups of information users that may be more at risk of developing poor information behaviors and adverse health outcomes.

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* $p < .05$
** $p < .001$