

Building Healthy Social Media for All: Investigating How Different Cultures Seek and Process Health Information

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The percentage of people accessing online health information in the U.S. has created a spike in knowledge that continues to impact personal health outcomes. Three events that have amplified interest in accessing such information have been: (1) Local/national programs promoting healthy life-styles and disease prevention, (2) The effects of increasing immigration to North America, and (3) The passing of the Affordable Care-Act.

Aligning with these factors are health statistics that show African Americans with the highest mortality rate of any racial/ethnic group for all cancers combined—contributing to the lowest life expectancy of any ethnic group. Second, there are 55.2M Spanish speakers in the U.S., of which 20% (7.2M) say their level of English proficiency is fair-to-non-existent. This research is an investigation (in two-parts) into the role of cultural cognitive preferences in the design of online health social media and its potential for improving the health and well-being—with a focus on African-American and Latino populations. This study focuses on the former.

Ten African Americans, ages 40 to 60, participated in phone open-ended interviews to identify their perception of the quality and availability of online health information. The interview consisted of 14 questions and lasted for approximately 15 minutes.

Findings suggest that participants seek health information from a wide array of sources, with a preference for people as the source rather than online, e.g., physicians, health clinics, family and friends, co-workers, campus events, and church. While none of the interviewees answered yes to a question about whether they participated in online health networks, most did have knowledge of the dissemination of health information through social media, which most had experience using. Finally, the most mentioned factor regarding satisfaction with online health information was related to trust and verifying the sources, which most interviewees said they do through their personal physician.