Doc on the Tok: How BIPOC College Students Perceive Healthcare Professionals' Social Media Content

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Abstract. 90% of the U.S. population interacts with health information on social media. While access to this information can be important to those who experience financial, geographical, and logistical barriers to receiving medical care, social media is also a source of health-related misinformation and disinformation that can cause/exacerbate serious harm. One of many proposed initiatives to combat medical misinformation online is for healthcare professionals to create their own channels and disseminate health information based on their professional expertise on platforms like TikTok. But how do users, particularly Black, Indigenous, and People of Color (BIPOC) who are more likely to experience harm and neglect in medical settings due to systemic racism in the US, perceive the quality of the information healthcare professionals create? This poster paper is the first step in a larger research project to explore this phenomenon in which we: present a preliminary literature review, identify two gaps, and propose a qualitative study to explore BIPOC college students' perceptions of social media content created by healthcare professionals on popular, short-form video platforms.

Keywords: Social Media, Health Information, Information Quality, Information Behavior

1 Introduction

The proliferation and mass adoption of the internet and information communication technologies (ICTs) have made health information more accessible to a wide variety of the United States population. While users leverage a myriad of ICTs to access and interact with health-related content, 90% of people in the US specifically utilize social media as a source of health information [1]. The availability of health-related content on social media opens an avenue to information seeking and fosters a community space where users can connect with others who share similar health-related experiences. Social media can be particularly beneficial for users from marginalized communities because of the reduction of barriers to information: financial,

transportation, geographical and health insurance. For example, individuals with financial constraints may use social media in place of expensive visits to healthcare providers they cannot afford.

While there are benefits to the availability of health information online, social media's lack of traditional gatekeepers also poses distinct challenges and dangers [7]. Any user with an internet connection and the necessary skills can post health-related advice, regardless of their lack of medical training. The rise of misinformation, disinformation, and health-related conspiracy theories has created a health information landscape on social media platforms that ranges from beneficial to extremely dangerous. Similarly, the proliferation of influencer-generated content comes with an additional set of risks [12, 20]. In many cases, the information shared by influencers may lack scientific evidence or be outright false, potentially misleading followers. Furthermore, influencers often have financial incentives to collaborate with brands and promote products, which may not always align with the best interests or needs of their diverse audience [14, 15]. This can expose users to products that are not suitable for them, potentially compromising their health or financial well-being. In this context, Booth & Trauth refer to health-related content on social media as "high-stakes information" not only because of the range in quality and safety but also because users shape their offline health-related behavior based on what they find online [5]. These health behaviors can be both positive and negative, depending on the safety content and knowledge of the creators generating said content [1,18]. There have been a myriad of interventions proposed to address health mis and disinformation on social media, one of which is healthcare professionals sharing evidence-based information via their own social media accounts. In recent years, many healthcare professionals, including clinicians, physicians, pharmacists, and specialists like dermatologists, gynecologists, and occupational therapists, have increasingly leveraged social media to combat misinformation and spread evidence-based health content [3, 20]. Their participation may help counteract the spread of false health claims and establish a sense of trust and credibility online. By leveraging their expertise, healthcare professionals may contribute to promoting a safer online environment and empower users to make informed decisions about their health. Health content on social media, whether that be from a licensed professional or an influencer, can significantly influence individuals' decisions to take action regarding their health [11, 14, 20].

In particular, many health educators are leveraging platforms such as YouTube, Facebook, Instagram, and TikTok to inform and engage with college students, given this population's high rates of use of social media in general and specific use for health information [1, 4]. College students are of particular interest, given that for many students in a university setting, this marks an important time of transition in which they are beginning to manage their own health and healthcare [2]. While a number of studies advocate for health educators and professionals to reach college students via social media [2], many initiatives to combat mis and disinformation don't account for students who identify as Black, Indigenous, and People of Color (BIPOC) and their experiences with medical racism; many BIPOC students have long reported having their health concerns dismissed, receiving inadequate care, abuse, and neglect, leading to a general mistrust of the healthcare system [29]. As we continue to explore the intersection between people, technology, and medicine, it is important to highlight recent and current examples of racism within the healthcare system. In a research study conducted in 2022, it was found that Black patients were 2.5 times more likely to have at least one negative descriptor

either in the physical note section or the medical history section of their patient portal in comparison to their white counterparts [29]. This (amongst countless others) is an example as to why patients of color may be less inclined to receive medical services, or at the very least, may proceed with fear of their treatment.

This poster presents a preliminary literature review of: 1) the types of health-related content general (non-expert) content creators share via social media, 2) the types of health-related content healthcare professionals' share via social media, and 3) healthcare professionals' & educators' social media health-related content specifically geared towards college students. We then identify several gaps, most notably a lack of research surrounding how BIPOC college students evaluate the quality of health information generated by healthcare professionals. We then outline our preliminary next steps and study design to address this gap. This proposed study has the potential to address a significant gap surrounding information behavior within a "high-stakes" health context, fostering a sense of wisdom and win-win situations in an environment where marginalized communities like BIPOC students' perspectives are largely underrepresented.

2 Literature Review

2.1 General (non-expert) creators & health information on social media

Many social media influencers actively post health-related content, including promotional material or business-oriented health information despite their lack of credentials [23, 25]. Unlike educational content, these types of monetized content can be problematic as they can pose conflicts of interest for influencers seeking financial gain [23]. This is where misinformation and disinformation may emerge, as products can be promoted and mislead consumers who end up purchasing products that are not suitable for them [23] or may not positively impact their health. Influencers can adapt their content to suit the needs of their audience, affecting the decision-making of social media users as the quality of the content can be perceived as 'authentic' [12].

Social media users often perceive the information quality and the emotional appeal of the content through post interactions and inherent personal biases [12, 14, 20, 23]. The influencer's ability to stay relevant to trends and portray their "raw" self creates an element of emotional appeal increasing trust between users and the influencers [20]. Moreover, individuals also "validate information through likes, shares, comments, etc." regardless of the health information's quality [12]. Reviews, comments, and the number of likes can serve as testimonials from peers who have tried certain products and can thereby influence others to follow, playing a role in users' decision-making process. Additionally, users tend to make conclusions based on who is giving the information and their inherent biases, meaning they are more likely to find something credible if it aligns with their beliefs or is posted by a provider who specializes in a relevant field [20].

2.2 Healthcare professionals posting health information content on social media

In an effort to address the risks associated with health misinformation, numerous

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healthcare professionals have adopted social media platforms as a means to disseminate accurate information [12, 13, 14]. Some healthcare professionals participate in "myth-busting" to address common misconceptions surrounding topics like diets and health "hacks," providing users with more accurate information [12], insights into professional practices, and research findings on social platforms such as Twitter [33]. These interactions also open health discussions, fostering a sense of connectivity online between providers and potential patients [19]. Moreover, cosmetic, and aesthetic discussions, as well as those centered on women's health, flourish in these digital spaces, providing expert advice on their respective specialties [6, 13, 25]. On the contrary, healthcare professionals can similarly be incentivized to promote products through promotional partnerships, without disclaimers of whether this product is appropriate for everyone [18]. This creates an especially dangerous environment as users generally trust the information of licensed professionals.

Healthcare professionals who create health-related content on publicly accessible platforms have a broad spectrum of goals and behaviors. There are a multitude of motivations behind the content they produce, including but not limited to combating misinformation, creating a space for public knowledge and discussion, partnering with health campaigns, participating in promotional and advertisements of products, promoting their practices, and conducting research [13, 14, 16, 22].

2.3 Healthcare professionals social media content geared towards college students

While healthcare professionals who create health-related content on social media have a broad spectrum of goals and behaviors, there are numerous efforts in the US for these professionals to leverage social media specifically to reach college students [1, 2, 9, 26]. Extant literature suggests that social media has potential as trusted platform for healthcare professionals to quickly disseminate accurate health information surrounding "important risk management/disease prevention" to college students [2, 24].

On the other hand, some challenge the reliance of social media as the primary channel for sharing health information with students. For example, Prybutok et al. measured how students engaged with Facebook accounts/posts made by their schools. They found only 20% of American colleges/universities had active Facebook accounts, of that 20%, only 13% made regular posts. Reported student engagement was low, with most of the content shared being promotional rather than geared towards their audience. The authors suggest finding different ways for student health centers to share health information unless the institutions planned to rebrand the accounts [23]. Other studies suggest college student engagement with health content ranges. For example, McGowan et al. measured how much weight-loss content posted by "health coaches" college students engaged with, with results rather split. Almost equal portions of a 404 participant study actively engaged with weight loss content, did not engage with the content at all, and were "passively engaged," meaning

students would read the Facebook post but continue to scroll and not engage in any other form. [20]. In examining the role of social media in health information seeking among college students, much of the literature has examined how content online affects offline health-related behavior [17, 31, 33]. Despite a lack of traditional gatekeepers, social media platforms may be a valuable tool for disseminating health information swiftly, giving healthcare professionals a trusted platform to share healthcare content [1, 7, 25, 30].

Prior research has examined health information created by non-experts, influencers, and healthcare professionals, as well as health-related social media campaigns targeting college students. We identified only one study that focused specifically on the information behavior of HBCU (Historically Black College and University) students [6]. We seek to build on this study, as lived experience and oppression relate to individuals' health, sometimes making social media a more common avenue for information-seeking in BIPOC college students [29].

Based on this preliminary review, however, we identify two gaps: 1) how BIPOC college students evaluate the quality of healthcare professionals' content on social media, particularly within the context of systemic medical harm in the US, and 2) An emphasis on how BIPOC college students evaluate short-form video on popular platforms such as TikTok.

3 Proposed Methods

To address the aforementioned gaps in the literature, our research questions are:

RQ1: What kinds of health-related content created by healthcare professionals do BIPOC college students interact with on social media?

RQ2: How do BIPOC college students evaluate the quality of health-related content created by healthcare professionals on social media?

RQ3: How do BIPOC college students evaluate the quality of health-related content created by non-expert content creators?

RQ4: How do BIPOC college students perceive their offline health behavior to be influenced by health-related content they interact with via social media? (Both created by professionals and non-professionals?)

To answer these research questions, we will conduct a qualitative study with two components: 1) a questionnaire, and 2) semi-structured interviews. We will recruit 30 BIPOC college students, ages 18-24, within US-based institutions who have at least one active social media account and have at least seen health-related content on said platform(s). Participants will be recruited via campus flyers and relevant social media groups and accounts.

Our semi-structured interviews will be conducted and audio-recorded via

Zoom for approximately one hour. First, participants will fill out a questionnaire, asking basic demographic questions to analyze any potential trends across age, race, gender, education, and socio-economic status. The questionnaire will also ask about participants' active social media platforms, usage frequency, and exposure to/interaction with health-related content on said platforms (e.g., the TikTok "For You Page"). The questionnaire is designed to address RQ1. The subsequent semi-structured interview questions are designed to address RQs 2-4. This includes open-ended questions surrounding how participants evaluate the quality of health-related content they interact with on social media (generated by both healthcare professionals and non-experts), with a particular focus on short-form video platforms, as well as how their online behavior relates to their offline health decisions. Interviews will be transcribed and analyzed via thematic analysis.

4 Conclusion

This preliminary literature review and proposed study identifies gaps and next steps in developing an understanding of BIPOC college students' information behavior in a high-stakes information context. By employing semi-structured interviews, this proposed study seeks to gain valuable insights into how young adults who are often transitioning to managing their own healthcare for the first time perceive the credibility of health information online generated by both healthcare professionals and non-experts, promoting a win-win environment for informed healthcare decisions. While healthcare professionals disseminating health-related content via social media is often lauded as an important mis and disinformation intervention, this proposed research seeks to center an underrepresented perspective: young adults who often experience systemic abuse, neglect, and poorer health outcomes as a result of systemic medical injustice.

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