

Health Information Behaviours: insights informing health literacy interventions and practices

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70 years of Information Science
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Information Behaviour research at Strathclyde

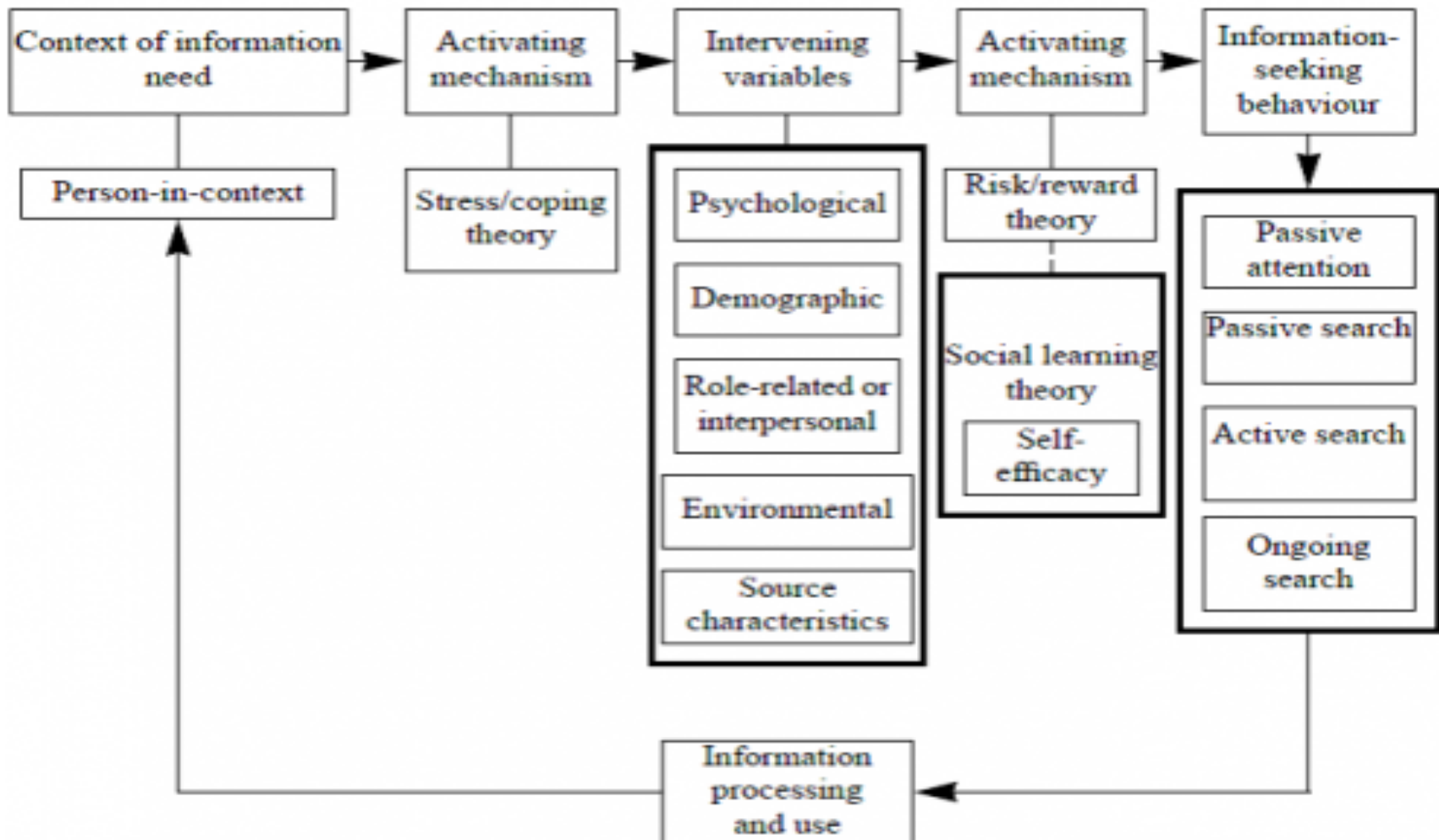
- An international iSchool and the largest and leading Information Behaviour research group in the UK.
- Our interdisciplinary information science research group (iLab) investigates arising socio-techno phenomena and evolving information behaviours.
- In pursuit of a literate and informed society, much of our work is societal in nature and focused on disadvantaged and/or disengaged groups, seeking to better understand behaviours to inform future public information policy and interventions.
- We are working collaboratively with a number of partners including the NHS, Public Libraries, and the third sector.
- Current projects include a major 2.5 year ESRC funded study into the information behaviours of young first time mothers.

Information Behaviour

Information seeking is a conscious effort to acquire information in response to a need or gap in your knowledge. Information behaviour encompasses information seeking as well as the totality of the other unintentional or passive behaviours (such as glimpsing or encouraging information), as well as purposive behaviours that do not involve seeking, such as actively avoiding information.

(Case, 2007, p. 5)

Example Model: Wilson (1996)



Some Key Concepts

- Until we recognise a knowledge gap/sense uncertainty – we are not motivated to search.
- Information needs evolve: visceral; conscious; formalised; compromised (Taylor, 1962).
- Information seeking is active and intentional but info also passively received.
- Strong preference for face-to-face interpersonal information sources.
- Info seeking not always rationale, decision oriented, or valued.
- Information can increase rather than decrease anxiety.
- Variable barriers to knowledge acquisition include: attitudes, beliefs, values, knowledge, family socialisation, community identity and socialisation, stigma, fear, ethnic stratification, media use and exposure, literacy.

Example: Cancer patients

Matthews et.al. (2002)

- Mathew et al (2002) in a study of African American cancer patients observed cultural and socio economic barriers, including:
 - limited knowledge and misinformation about cancer
 - mistrust of the medical community
 - privacy concerns
 - religious beliefs
 - fear
 - stigma associated with seeking help.

Key concept: Information Poverty

- Affluence and education can make a great difference in both the sources of information available to people and their inclination to pay attention to that information.
- Chatman (1996, p197) argues that when hindered from seeking information:
 - “...we engage in self-protective behaviours to keep others from sensing our need. These behaviours are meant to hide our true crisis in an effort to appear normal and to exhibit acceptable coping behaviours”.
- Chatman (1996) describes a person unwilling or unable to solve an info. need as living in an impoverished (small) information world.

secrecy – deception – risk taking – situational relevance

Study 1: Adolescents NEET

Buchanan, & Tuckerman (2016)

- 954,000 young people aged 16-24 in the UK (13.1% of all young people) are NEET (UK Office for National Statistics, 2014).
- NEET youth more than twice as likely as their peers to be prescribed antidepressants (Princes Trust, 2014). Other health issues widely reported.
- 36 NEET youth observed attending drop-in support groups, and 19 taking part in interviews and a focus group. 6 support workers also interviewed.
- Majority exhibited non-motivated and **passive** information behaviours, and a **dependency** upon support workers when seeking and processing information.
- Significant literacy issues (reading, computer, and information) evident.
- **Abandonment** common.
- At one observed session a nurse practitioner brought an educational game for the young people to play. Majority **did not participate** with one voluntarily stating that he could not play because he could not read. Engagement of others brief and largely cursory.

Young People NEET

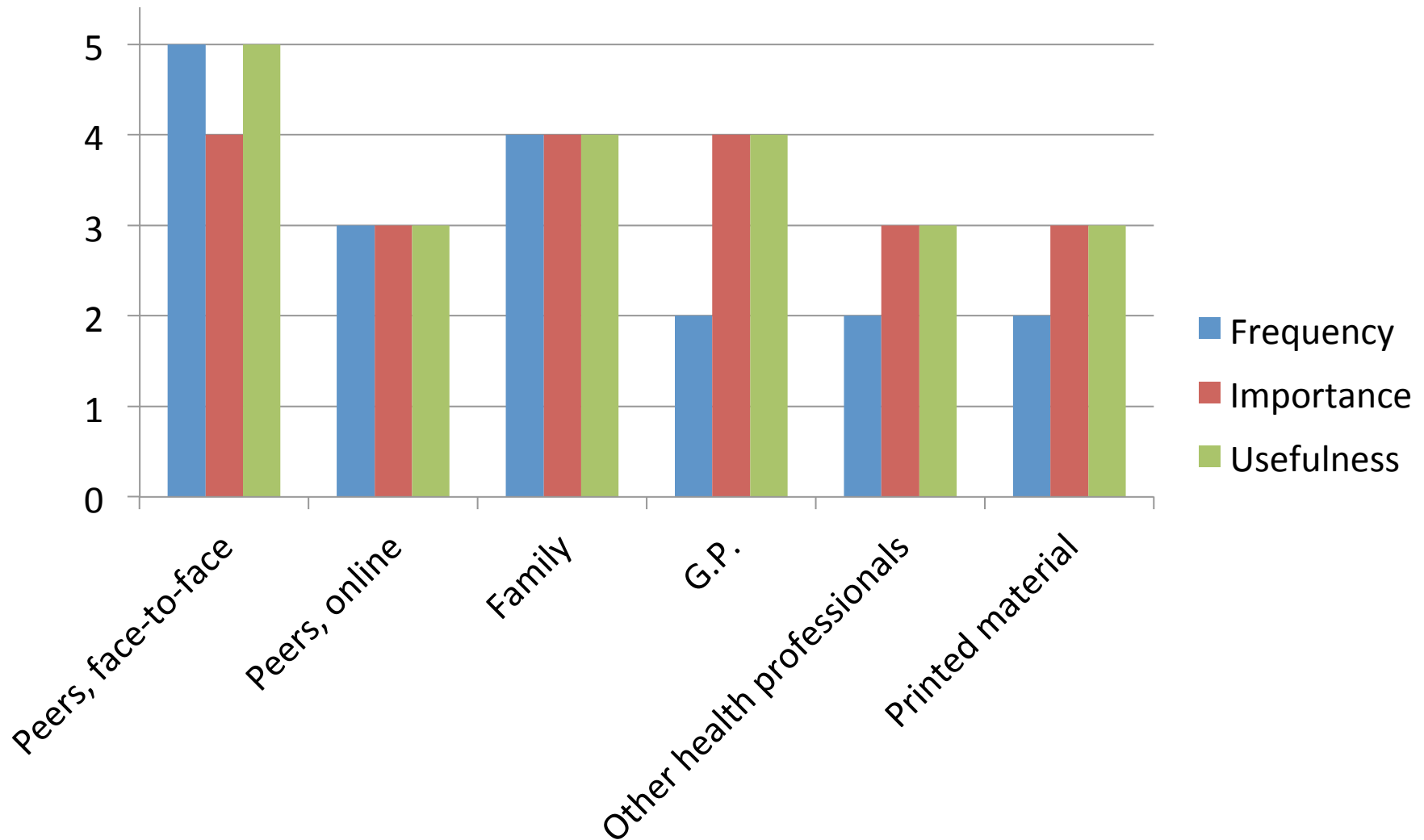
- During interviews 40% stated that they experienced no difficulties looking for information, with a further 27% declining to comment.
- 33% recounted difficulties variously attributed to literacy issues, difficulties in articulating questions, and unmet information needs.
- That barriers were not identified or recounted by 67% of participants is significant, and suggests **self-protective behaviours**.
- Support worker comments reinforced our observations that the vast majority experienced problems, and added to identified barriers: home life, isolation, institutional problems, literacy and access issues, motivation, and social skills.
- The Princes Trust (2014) reports that 74% of NEETs stated that they **would not ask for help** even when struggling to cope, and that 72% **felt that they had no one to confide in** regardless.

Study 2: first-time mothers

Louden, Buchanan, & Ruthven, I. (2016)

- 22 first-time mothers observed attending a drop-in support group, with follow-on group interviews. Educated older (avg. 29) demographic.
- Information needs during the first year of their infant's lives **multiple, interrelated**, and at times **difficult to distinguish from one another**.
- Majority report seeking information or advice from other mothers and family first, and in relation, a **preference for face-to-face interactions**.
- **Experiential advice** valued.
- Mothers report a **"little & often"** approach to using websites.
- Online forums used to meet needs unmet offline, and when seeking broader experience or opinion from other mothers – but fear of **"judgement"** often led to concealment of needs.
- Healthcare professionals (HPs) considered important and useful, but not used very frequently. Several mothers uneasy asking HPs for "too much" or "certain" pieces of information, worrying that they would be viewed as over-protective. Again, judgement an issue.

First-time mothers: info seeking preferences



First-time mothers

- Mothers identified four main barriers to information seeking: lack of time and opportunity; conflicting information from different sources; requiring information about potentially contentious or sensitive topics; and lack of engagement with peers.
- Support workers identified further barriers: isolation; ‘territorial’ barriers; ‘psychological’ barriers; and lack of Internet access in impoverished circumstances.
- Notable absence of young mothers in groups.
- Ongoing research with young first time mothers from areas of multiple deprivation uncovers further issues including:
 - Low literacy
 - Low Confidence
 - Stigma
 - Fear
 - Practical access
 - Comprehension
 - a critical dependence on information intermediaries...

Study 3: Information Intermediaries

Buchanan, Jardine, & Ruthven (2017)

- Interviews and focus groups with 52 support workers providing frontline support to young first time mothers (YFTM) from areas of multiple deprivation.
- YFTM and their babies a **high health risk group**: infant mortality rates 60% higher than those for older women (DfES, 2006), and babies are at greater risk of poor nutrition and childcare (e.g. Rowlands, 2010), and impaired development (UNICEF, 2007). Stress and anxiety also heightened (Da Costa et al, 1999) with YFTM 3X more likely to experience post-natal depression (DfES, 2006).
- Mothers have **multiple, interrelated**, and at times **competing** information needs, not always apparent or revealed, and often **difficult to separate** in sensitive and/or traumatic situations.
- Intermediaries a key source of information in themselves, and play a key role in **linking** YFTM to other sources of information, and addressing conflicting information.
- Many YFTM **unlikely to seek information without mediator support**, particularly from formal external sources, due to issues of confidence and self-esteem compounded by issues of literacy and practical access.

Information Intermediaries

Buchanan, Jardine, & Ruthven (2017)

Intermediaries play a key role in:



Requiring:

a continuous and trusting relationship ✓

tailored and personalised information ✓

incremental cycles involving walkthrough,
demonstration, and repetition ✓

Conclusion

- Persistent barriers to information access and use are societally divisive and as yet not fully understood, particularly amongst disadvantaged groups.
- There are complex access and internalised behavioural factors to consider, the former influenced by digital divide and literacy issues, the latter by social structures and norms.
- Many dependent upon intermediary support, with limited evidence of proactive transitions to independent information seeking, nor of basic literacy issues being explicitly addressed.
- One 'size' information provision does not fit all.
- Understanding Information Behaviours informs *tailored* information policy and practice:

What? to provide
to *Who?*
and *How?*



References

- Buchanan, S., Jardine, C., & Ruthven, I. (2017) Information behaviours in dependent circumstances and the role of information intermediaries. *In preparation*.
- Buchanan, S., Tuckerman, L. (2016) The Information Behaviours of Disadvantaged and Disengaged Adolescents. *Journal of Documentation*, 72 (3), pp.527-548.
- Loudon, K., Buchanan, S., & Ruthven, I. (2016) "The everyday life information seeking behaviours of first-time mothers", *Journal of Documentation*, Vol. 72 Iss: 1, pp.24 – 46
- Matthews, A.K., Sellergren, S.A., Manfredi, C., and Williams, M. (2002) Factors influencing medical information seeking among African American cancer patients. *Journal of Health Communication* 7, pp.205-219.

Further information

- For more information on our on-going information behaviour research, please visit our research group pages at:
<http://www.ilab.cis.strath.ac.uk/index.html>
- Information on our ongoing research involving young first time mothers is available on the project pages at:
<http://yftm.cis.strath.ac.uk/>
- If you wish to explore collaborative research opportunities and knowledge exchange, please contact our Head of Information Science research, Dr Steven Buchanan at:
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