Original Research Article

Online Health-Seeking Behavior Among Elderly in Nueva Ecija, Philippines

.

ABSTRACT

Aim:
The rising use of digital platforms for health information has influenced how elderly adults interpret symptoms and make health-related decisions. Understanding these behaviors is essential to support safe and informed health engagement among aging populations. This study examined the online health-seeking behavior of elderly adults in Nueva Ecija, focusing on how digital platforms are used for symptom interpretation, disease information, and personal health decision-making.

Methodology:
A descriptive qualitative research design was utilized. Data were collected from elderly adults who actively engage with online health information for self-care or health-related decisions. Data were analyzed thematically to identify perceived benefits, challenges, and behavioral patterns associated with digital health use.

Results:
Findings revealed that online platforms were predominantly used to search for symptoms, medications, and disease-related information. Convenience, immediacy, and cost-savings were identified as major benefits. However, participants also expressed concerns regarding the credibility of online sources, misinformation, and difficulties interpreting complex health information. Online health resources influenced certain decisions such as self-care and delayed medical consultation, but did not fully replace professional healthcare advice.

Conclusion:
Elderly adults are increasingly engaging with digital health platforms for initial health assessment. While online health information supports autonomy and accessibility, it also introduces risks related to misinterpretation and misinformation. Digital health literacy interventions tailored for elderly populations are necessary to ensure safe and informed use of online health resources.

Keywords: Digital Health, Digital Literacy, Elderly Adults, Health Information Seeking, Online Platforms, Qualitative Research

1. INTRODUCTION

The increasing integration of digital technologies into health information systems has transformed how individuals seek, evaluate, and apply health-related information. Online platforms such as search engines, health websites, and social media have become common sources for symptom interpretation and disease-related information. Older adults are emerging as a growing subset of digital health users, reflecting broader global shifts toward technology-assisted health engagement among aging populations (Wong et al., 2020). This trend has been observed in various health systems where digital platforms supplement clinical consultations and chronic disease management.

In Southeast Asian and Philippine settings, internet access and digital health initiatives continue to expand, yet digital literacy and health literacy disparities remain evident among elderly populations. Filipino older adults encounter barriers related to digital access, trust in online sources, and technical navigation skills that influence how they interpret and utilize online health information (Alfonso et al., 2021; Rivera & Bernardo, 2021). These contextual conditions suggest that while digital health environments provide new opportunities for information access, they may also reinforce health inequities if elderly users lack adequate support.

Theoretical perspectives provide further insight into online health-seeking behaviors among older adults. The eHealth Literacy Model conceptualizes effective digital health engagement as requiring the ability to locate, evaluate, and apply electronic health information (Norman & Skinner, 2006). Similarly, health information seeking has been described as an adaptive strategy for reducing uncertainty and supporting decision-making in health contexts (Lambert & Loiselle, 2007). Together, these frameworks suggest that elderly engagement with online health information is shaped not only by motivation and informational needs but also by digital skills, credibility assessment, and broader sociocultural context.

Although studies have examined digital health engagement among general adult populations, fewer have focused specifically on elderly adults within Southeast Asia, where digital literacy, health care access, and health-seeking behaviors vary widely. Localized research examining elderly online health-seeking behavior remains limited in the Philippines, particularly within provincial settings. This gap restricts the ability of health institutions and policymakers to design interventions tailored to the needs of older adults. The present study addresses this gap by examining how elderly adults in Nueva Ecija use online platforms to access health information, the perceived benefits and challenges of such practices, and how online information influences health-related decisions.

2. MATERIAL AND METHODS

Study Design

A descriptive qualitative research design was employed to examine how elderly adults engage with online health information and how such engagement influences their health-related decisions. This design was appropriate for capturing contextual meanings, experiential patterns, and behavioral processes associated with digital health-seeking among older adults.

Setting

The study was conducted in Nueva Ecija, a province in Central Luzon, Philippines, characterized by increasing digital connectivity and expanding internet availability among urban and peri-urban communities. The setting was selected due to the presence of elderly populations with varying levels of digital exposure and health care utilization.

Participants and Sampling

Participants consisted of elderly adults who reported using the internet to search for health-related information. Eligibility criteria included: (1) aged 60 years or older, (2) residing in Nueva Ecija, and (3) having used digital platforms (e.g., search engines, social media, health websites) for symptom checking, disease information, medication inquiries, or health decision-making within the past year. Purposive sampling was utilized to ensure inclusion of participants with direct experiential engagement in digital health-seeking. Sample size was determined based on data saturation, which was reached when additional interviews no longer generated new themes.

Data Collection Procedure

Data were gathered through semi-structured interviews, allowing for flexible probing while maintaining consistency across core content areas. Interviews included questions about online health information use, perceived benefits, perceived risks, interpretive challenges, and decision-making processes. Interviews were conducted in participants' homes or community settings to support comfort and naturalistic recall. All interviews were audio-recorded with consent and subsequently transcribed verbatim for analysis.

Data Analysis

Thematic analysis was used to interpret the qualitative data. Transcripts were reviewed iteratively to identify initial codes, which were subsequently clustered into broader categories and themes. Coding was performed manually to preserve contextual nuances in participants' narratives. Themes were refined through cross-checking to ensure internal consistency and conceptual clarity. Representative quotations were selected to support thematic interpretation.

Ethical Considerations

The study adhered to ethical principles of autonomy, beneficence, and confidentiality. Participants were informed about the purpose of the study, voluntary nature of participation, and their right to withdraw at any time without consequences. Written informed consent was obtained from all participants. Personal identifiers were removed from transcripts and stored separately to maintain privacy.

Trustworthiness of Data

Trustworthiness was established using Lincoln and Guba's criteria of credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985). Credibility was enhanced through prolonged engagement with participants, repeated transcript review, and clarification during interviews. Transferability was supported by providing contextual descriptions of participants and research settings. Dependability was maintained through consistent documentation of data collection and analysis procedures. Confirmability was addressed by grounding interpretations in participant narratives and maintaining an audit trail of analytic decisions.

3. RESULTS AND DISCUSSION

Analysis of interview data yielded three major themes that characterize how elderly adults engaged with online health information: (1) Online Symptom Interpretation as Preliminary Assessment, (2) Digital Information as a Facilitator of Autonomy and Convenience, and (3) Navigating Credibility and Risk in Online Health-Seeking. These findings are interpreted in relation to prior literature and contextual factors.

Figure 1. Conceptual Framework

Note: This visual representation was generated using an AI-assisted tool for visualization and layout purposes only. All themes, findings, and interpretations are based exclusively on the authors' qualitative analysis of the data.

The visual representation presents a concise overview of how elderly adults engage with online health information and how this engagement influences their health-related decision-making. Online platforms such as Google, health websites, and social media are shown as the primary entry points through which participants seek health information. This process gives rise to three interrelated themes: online symptom interpretation as a preliminary assessment, digital information as a facilitator of autonomy and convenience, and navigating credibility and risk in online health-seeking. Together, these themes illustrate how elderly adults use online resources to check symptoms, assess severity, save time and costs, and prepare for medical consultations, while also facing challenges related to misinformation, conflicting information, and complex medical terminology. The figure highlights that online health information serves as a supplementary tool rather than a substitute for professional healthcare, with its impact shaped by digital health literacy, access to technology, trust in online sources, and sociocultural context.

Theme 1: Online Symptom Interpretation as Preliminary Assessment

Participants described using online platforms such as Google and health websites to investigate unfamiliar symptoms and possible conditions. Online information functioned as a preliminary assessment mechanism that helped participants assess symptom severity and decide whether to monitor, self-manage, or consult a health professional. Similar findings have been reported in other settings, where older adults increasingly rely on online information as a first-line triage tool for health concerns (Xie et al., 2020). Digital symptom checking has also been associated with reduced uncertainty and improved preparation for clinical consultation (Baumgartner et al., 2021).

The use of online resources as a complementary adjunct to professional care aligns with previous research documenting digital integration in chronic disease management and health monitoring among elderly populations in high-income countries (Wong et al., 2020). Digital health literacy and access have been identified as significant enabling factors in this process (Zhao et al., 2022). In the present study, participants emphasized that online information did not replace medical consultation but helped them determine whether a consultation was warranted, consistent with qualitative evidence that older adults engage in pragmatic digital health-seeking (Seifert & Cotten, 2020).

Theme 2: Digital Information as a Facilitator of Autonomy and Convenience

Participants highlighted convenience, immediacy, and cost-savings as advantages of using online health information. Online platforms eliminated the need for transportation and reduced financial burdens associated with frequent clinical visits. This supports studies showing that digital health resources promote informational autonomy and support self-management among older adults (Anker et al., 2019; Choi, 2020). For elderly individuals with chronic conditions or mobility limitations, digital engagement may enhance access to health information and contribute to proactive health behaviors (Hsu et al., 2022).

In the Philippine context, limited availability of health services and variation in health-seeking costs make digital resources particularly attractive to elderly users (Alfonso et al., 2021). Participants also reported that online information allowed them to prepare for consultations, formulate questions, and better understand physician recommendations, reflecting literature indicating that digital health engagement can enhance patient-provider communication and shared decision-making (Pappas et al., 2019).

Theme 3: Navigating Credibility and Risk in Online Health-Seeking

Despite perceived benefits, participants expressed concerns about misinformation, conflicting search results, and medical terminology that was difficult to interpret. These concerns are consistent with research demonstrating that older adults may struggle to evaluate the credibility of online medical content, particularly in the context of low digital health literacy (Hsu et al., 2022). Exposure to misleading or sensationalized online information has been associated with increased anxiety, unnecessary self-medication, and delayed healthcare utilization among elderly users (Swire-Thompson & Lazer, 2020; Vraga & Bode, 2021).

This pattern aligns with the eHealth Literacy Model, which emphasizes that effective digital health engagement requires locating, understanding, and appraising electronic health information (Norman & Skinner, 2006). Additionally, health information seeking has been theorized as a coping strategy to reduce uncertainty and support decision-making (Lambert & Loiselle, 2007). In the present study, these strategies were evident but constrained by challenges in credibility assessment. Research in Singapore and OECD countries similarly

notes that elderly adults rely on heuristic cues such as familiarity, layout, and source reputation to judge reliability (Rodrigues et al., 2022), a pattern compounded in low- and middle-income contexts where institutional labeling is less visible.

These findings intersect with broader public health concerns about misinformation exposure among older adults during the COVID-19 pandemic, which highlighted vulnerability to misleading online health claims (Hernández-García & Giménez-Júlvez, 2020). In the Philippines, gaps in digital health literacy and variable trust in online sources shape how elderly adults interpret health information and make health decisions (Rivera & Bernardo, 2021). Such dynamics indicate that digital health environments may have both empowering and risk-inducing effects depending on user competencies and contextual supports.

Overall, findings indicate that elderly adults engage with online health information in pragmatic and purposeful ways that support symptom appraisal, decision planning, and self-management. Digital platforms function as a supplementary pathway rather than a substitute for professional care, reinforcing global trends toward digitally mediated aging and health engagement. However, limitations in digital health literacy and source credibility evaluation pose potential risks that require attention from healthcare providers and public health institutions.

Conclusions

This study demonstrates that elderly adults engage with online health information as a practical strategy for symptom interpretation, decision support, and health management. Online platforms functioned as an initial assessment layer that enabled participants to make sense of unfamiliar symptoms and evaluate the need for professional consultation. Digital health information also supported autonomy and convenience by reducing time, transportation, and financial barriers commonly associated with healthcare access among older populations. However, these benefits were tempered by concerns regarding credibility, misinformation, and interpretive difficulty, indicating that digital health literacy remains an important mediator of safe and effective online health-seeking.

Overall, online health information did not replace clinical consultation but instead complemented existing healthcare pathways by shaping perceptions, promoting self-management, and influencing the timing and nature of care-seeking decisions. These findings underscore the need to strengthen digital health literacy initiatives for elderly adults and to promote the visibility of credible health information sources to mitigate risks associated with misinformation and misinterpretation. As digital health environments continue to expand, supporting elderly users' capacity to navigate online health information will remain essential for improving health decision-making and equitable access to health resources.

Implications for Practice and Public Health

The findings highlight the need to integrate digital health literacy support into health systems serving elderly populations. Healthcare providers may enhance patient safety by guiding older adults in identifying credible online health information, interpreting symptom-related content, and determining the need for clinical consultation. Primary care settings, senior centers, and community clinics are effective venues for structured digital health literacy interventions, particularly for older adults with chronic conditions or mobility limitations.

At the public health level, expanding access to reliable digital health resources aligns with global priorities for digital health system strengthening. The World Health Organization emphasizes that digital health interventions must be accompanied by capacity-building to ensure equitable benefit among vulnerable populations. Similarly, international assessments by the OECD underline that aging populations are strategic beneficiaries of digital health transformation due to high healthcare utilization and informational needs. In the Philippine context, strengthening digital health literacy is consistent with the Philippine eHealth Strategic Framework, which prioritizes digital health expansion and health information accessibility.

Digital health literacy initiatives for older adults may include community-based digital navigation training, simplified online health interfaces, family or caregiver involvement, and targeted communication strategies designed to reduce exposure to misinformation. Tailoring digital health strategies for older adults may also improve shared decision-making, symptom monitoring, chronic disease management, and overall health system efficiency. As digital health ecosystems continue to expand, supporting elderly users' ability to safely and effectively engage with online health information will remain an important strategy for improving health outcomes and promoting equitable access to health resources.

COMPETING INTERESTS

The authors declare that they have no financial or personal relationships with other individuals or organizations that could inappropriately influence or bias reported in this manuscript.

CONSENT

Not applicable.

ETHICAL APPROVAL

During the period of data collection, no formal institutional review board was available for community-based non-clinical survey studies in the locality. Nonetheless, the study adhered to ethical standards involving human participants, including voluntary participation, informed consent, confidentiality, and anonymity of responses. No personally identifiable information was collected and participation posed minimal risk.

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