Chapter 5
Technology Impact on New Adult Behavior about Health Information

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ABSTRACT

New adults, between 18 and 25 years old, need and want information about health issues. Even though new adults tend to prefer asking people for help, increasingly they access digital resources because of the Internet’s availability, affordability, and anonymity. Health information interests vary by age, gender, social situation, and motivation. Several concerns also impact how new adults access and seek that information. This chapter discusses several issues related to new adult technology use for seeking health information and offers recommendations to insure optimal community education and services to address health information needs of all new adults.

INTRODUCTION

New adults, those millennials between 18 and 25 years old, need and want information about health issues. They are likely to be sexually active, and may be parents; they might also have contracted a sexually-related disease. While increasing numbers live with their parents, the majority have struck out on their own by age 25, and so are more likely to make decisions independently, or seek advice from outside the family. Even though new adults tend to prefer asking people for help, increasingly they access digital resources because of the Internet’s availability, affordability, and anonymity. Health information interests vary by age, gender, social situation, and motivation. Several concerns also impact how new adults access and seek that information. This chapter discusses several issues related to new adult technology use for seeking health information, and offers recommendations to insure optimal community education and services to address health information needs of all new adults.
To investigate this issue, the author reviewed the professional literature available through several database aggregators. Because the advent of social media has expanded the dissemination and interaction with health information, the author limited the review to research published since 2007. The author focused on the population of youth between 18 and 25 years old within the United States. Both intentional information seeking and information receiving (i.e., of information disseminators) behaviors were analyzed.

**NEW ADULT INFORMATION SEEKING BEHAVIORS**

Seeking health information is a normal new adult task, part of the maturation process. Such seeking is part of new adults’ exploration of themselves and the world around them (Agosto & Hughes-Hassell, 2006). The range of health information sought by new adults demonstrates varied needs: illnesses, accidents, chronic conditions, STDs including HIV/AIDS, nutrition, fitness, sexual activity, pregnancy, and mental health issues. The most popular topics deal with sexual health and drugs (Eysenbach, 2008). New adults tend to seek information out of need or fear, such as a personal problem, rather than as a proactive effort to be healthy, such as eating nutritionally (Larsen & Martey, 2011). Nor did they tend to look for pain management advice (Henderson, et al., 2013); it should be noted that those who did seek such information tended to be female risk-takers or self-medicators. As another instance, new adults seldom used online abstinence information, although they were more likely to look for to find contraceptions than younger teens. On the other hand, they would look for information that might avoid “genes as destiny” syndrome or counteract past poor health choices. Some may also seek health information to address some kind of social stigma that is health-based, such as acne (Lariscy, Reber, & Paek, 2011). However, a lack of guaranteed privacy makes new adults wary about accessing LGBT or HIV information (Magee et al., 2012).

Mental health provides an interesting lens for information seeking. A third of new adults experience mental health difficulties, and more than ninety percent of them search for help online because they are more comfortable seeking information anonymously, and many are also technologically comfortable. Such online assistance can lower mental health stigma (Burns, Durkin, & Hons, 2009). Females are more informed and communicative about mental issues, while males feel that they will suffer social stigma if they seek help; the expectation of youthful masculinity is such that males are supposed to deal with programs by themselves (Beamish et al., 2011). Psychological web consulting services are becoming quite popular with new adults because such services provide individualized but somewhat private information, which can be done asynchronously and relatively anonymously (Efstathiou, 2009). Nevertheless, youth are cautious about computerized therapy, so mental health professionals need to learn how to engage new adults effectively online (Stallard, Velleman, & Richardson, 2010). In researching online suicide prevention communities, Greidanus and Everall (2010) discovered that trained crisis interveners provided social support and referrals for offline services. Successful online new adult help-seekers started supporting their traumatized peers online, thus developing an online support community. In another study of online mental health services, Havas et al. (2011) found that new adults wanted a website that targeted them, which included self-tests and anonymous help. Similarly, young men, who are heavy technology users, seek online self-help for mental health problems rather than getting face-to-face professional help, especially if the advice is action-based, focus-