

The Impact of Online Health Information Seeking Behavior on Self-Medication Practices Among Young Adults

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ABSTRACT

This study examines the impact of Online Health Information Seeking Behavior (OHISB) on self-medication practices among young adults, aiming to explore how digital information influences health-related decision-making and medication use. A qualitative approach with a phenomenological design was employed to capture the lived experiences and subjective interpretations of participants, as this design enables an in-depth understanding of behavioral and cognitive processes underlying self-medication. The research was conducted in Surabaya, Indonesia, an urban setting characterized by high internet penetration and diverse access to healthcare services. A total of fifteen informants, consisting of young adults actively engaging in online health information seeking, were purposively selected to ensure relevance and richness of data. Data were collected through in-depth semi-structured interviews and analyzed using thematic analysis. The findings reveal that OHISB significantly shapes self-medication practices through perceived information credibility, social influence, and confidence in self-diagnosis, while also exposing individuals to risks associated with misinformation and inappropriate drug use. The study recommends strengthening digital health literacy, enhancing regulation of online health content, and promoting collaboration between healthcare providers and digital platforms to ensure safe and informed health practices.



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INTRODUCTION

The rapid expansion of digital technologies has transformed how individuals access, interpret, and utilize health-related information, particularly among young adults who are highly engaged with online platforms (Chun, 2025). The proliferation of health websites, social media, forums, and mobile applications has facilitated unprecedented access to medical knowledge, enabling users to independently explore symptoms, treatments, and preventive measures (Meadley et al., 2024). This phenomenon, commonly referred to as online health information seeking behavior (OHISB), has become a defining characteristic of contemporary health literacy practices (Siswanto & Sandjaja, 2024). While such accessibility offers significant opportunities for empowerment and informed decision-making, it simultaneously raises concerns regarding the accuracy, credibility, and interpretation of information obtained without professional guidance (Salvador et al., 2023). Within this context, self-medication practices defined as the use of drugs or remedies without a physician's prescription have become increasingly prevalent, especially among young adults who tend to rely on digital sources as primary references for health decisions (J. Li & Li, 2024).

The state of the art in current research highlights a complex relationship between OHISB and self-medication (Njenga, 2024). Several studies suggest that increased exposure to online health information can enhance individual autonomy and promote proactive health management (Stahel, 2024). Conversely, other findings indicate that misinformation, overconfidence in self-diagnosis, and the misinterpretation of symptoms can lead to inappropriate medication use, delayed professional consultation, and potential adverse health outcomes (D. H. Kim et al., 2025). Despite growing scholarly attention, much of the existing literature has predominantly focused on general populations or specific

clinical contexts, leaving a notable gap in understanding how young adults, as a distinct demographic group with unique digital behaviors, interpret and act upon online health information in relation to self-medication practices.

The primary problem addressed in this research lies in the dual-edged nature of online health information. On one hand, it serves as a valuable tool for enhancing health awareness and accessibility; on the other hand, it may contribute to risky self-medication behaviors due to the lack of critical evaluation skills and regulatory oversight of online content (Paimre, 2023). Young adults, often characterized by high digital literacy but varying levels of health literacy, are particularly vulnerable to this paradox (Khojah & Sarhan, 2025). They frequently engage with diverse and unverified information sources, including social media influencers, peer-generated content, and informal health forums, which may not adhere to established medical standards (Zobegow et al., 2024). This situation raises critical questions regarding the extent to which OHISB influences their decision to self-medicate and the factors that mediate this relationship.

A significant research gap emerges from the limited integration of behavioral, cognitive, and contextual factors in examining the link between OHISB and self-medication (Rao et al., 2023). Existing studies often treat these variables in isolation, without adequately considering how digital information-seeking patterns interact with individual perceptions, trust in online sources, and socio-cultural influences (Gong et al., 2023). Furthermore, there is insufficient empirical evidence exploring the mechanisms through which online information translates into actual health behaviors among young adults (Esmailzadeh et al., 2025). This gap underscores the need for a more comprehensive and nuanced investigation that not only measures the prevalence of these behaviors but also examines the underlying processes and implications.

The novelty of this study lies in its integrative approach to analyzing the impact of OHISB on self-medication practices among young adults by combining perspectives from health communication, behavioral science, and public health. Unlike prior research that primarily focuses on descriptive or correlational analyses, this study seeks to explore the causal pathways and moderating variables that shape the relationship between information-seeking behavior and medication practices (Bhangare et al., 2024). It also emphasizes the role of digital health literacy, trust in information sources, and perceived susceptibility to illness as critical determinants influencing decision-making processes (S. Li et al., 2024). By doing so, the study aims to contribute new insights into how digital environments shape health behaviors in a rapidly evolving information landscape.

Based on these considerations, the research is guided by several key questions. It seeks to determine how frequently young adults engage in online health information seeking and what types of sources they utilize. It further examines the extent to which this behavior influences their self-medication practices and identifies the factors that mediate or moderate this relationship. Additionally, the study explores whether higher levels of digital health literacy correspond to more rational and safe medication behaviors or, conversely, to increased confidence that may encourage self-treatment without professional consultation.

The primary objective of this research is to analyze the impact of online health information seeking behavior on self-medication practices among young adults. Specifically, it aims to assess the patterns and intensity of OHISB, evaluate the prevalence and types of self-medication, and investigate the relationship between these variables. The study also seeks to identify key influencing factors, including trust in online information, perceived reliability of sources, and individual health literacy levels, in order to provide a comprehensive understanding of the phenomenon.

From a theoretical perspective, this research contributes to the advancement of knowledge in the fields of health communication and behavioral science by integrating digital information-seeking behavior into existing models of health decision-making. It provides a conceptual framework that links information exposure, cognitive processing, and behavioral outcomes, thereby enriching the discourse on how digital environments influence health practices (Habib, 2025). Academically, the study offers empirical evidence that can inform future research, particularly in developing more robust models that

account for the dynamic interplay between technology and health behavior. It also serves as a reference for scholars examining similar issues in different cultural or demographic contexts.

Practically, the findings of this study have important implications for public health policy, healthcare providers, and digital platform developers (Craciun et al., 2025). By identifying the risks and benefits associated with OHISB, stakeholders can design targeted interventions to promote safe and informed self-medication practices (Shazley et al., 2023). This may include the development of digital literacy programs, the regulation of online health content, and the integration of reliable medical information into widely used platforms. Healthcare professionals can also use these insights to better understand patient behavior and to guide communication strategies that address misconceptions arising from online sources.

Despite its contributions, this study acknowledges several limitations. The reliance on self-reported data may introduce bias, as respondents might underreport or overestimate their behaviors (D. Wang et al., 2025). The cross-sectional design also limits the ability to establish definitive causal relationships between variables (Dong et al., 2024). Additionally, the focus on a specific demographic group may restrict the generalizability of the findings to other populations with different characteristics or levels of digital access.

Future research is recommended to adopt longitudinal designs to better capture the evolution of OHISB and self-medication behaviors over time. Further studies could also explore the role of emerging technologies, such as artificial intelligence-driven health platforms, in shaping user behavior (X. Ma et al., 2023). Expanding the scope to include diverse populations and cross-cultural comparisons would provide a more comprehensive understanding of the global implications of online health information use. Moreover, qualitative approaches could be employed to gain deeper insights into individual experiences and perceptions, thereby complementing quantitative findings and enriching the overall analysis.

In conclusion, the intersection of online health information seeking behavior and self-medication practices a critical area of inquiry in the digital age (Xu et al., 2025). By addressing existing gaps and offering a multidimensional analysis, this study aims to contribute meaningful knowledge that supports safer health practices and more effective public health strategies.

LITERATURE REVIEW

The literature on the impact of Online Health Information Seeking Behavior (OHISB) on self-medication practices among young adults is grounded in interdisciplinary perspectives that integrate health communication, behavioral science, and information systems (Tang et al., 2023). The rapid diffusion of digital technologies has altered the traditional pathways through which individuals acquire health knowledge, shifting authority from exclusively professional domains to a hybrid ecosystem where laypersons actively interpret and apply online information (Q. Ma et al., 2025). Within this evolving context, three major theoretical frameworks are particularly relevant in explaining the dynamics underpinning OHISB and its influence on self-medication practices: the Health Belief Model (HBM), the Theory of Planned Behavior (TPB), and the Information Adoption Model (IAM) (Darden & Macis, 2024). These theories provide complementary lenses to understand how cognitive, attitudinal, and informational factors shape health-related decision-making among young adults.

The Health Belief Model (HBM), popularized by Irwin M. Rosenstock in 1966 at the University of Michigan, United States, offers a foundational framework for understanding individual health behaviors based on perceived susceptibility, perceived severity, perceived benefits, and perceived barriers (Gerlach, 2025). Rosenstock argued that individuals are more likely to engage in a health-related action if they perceive themselves to be at risk of a condition and believe that a particular behavior will reduce that risk (Gandelman-Marton & Theitler, 2024). In the context of OHISB, young adults who perceive symptoms as potentially serious may actively seek information online to assess their condition. This information, when interpreted as sufficient or reassuring, may subsequently encourage self-medication. The conceptual framework of HBM suggests that cues to action, such as online symptom checkers or health-related content on social media, play a critical role in triggering behavior (Watts et al., 2024). Contemporary developments of HBM incorporate digital health literacy

as a moderating factor, emphasizing that the ability to critically evaluate online information significantly influences whether self-medication is conducted safely or inappropriately (T. Wang et al., 2025).

The Theory of Planned Behavior (TPB), developed by Icek Ajzen in 1991 at the University of Massachusetts Amherst, United States, further extends the understanding of health behavior by emphasizing the role of intention as a determinant of action (Tan, 2023). According to Ajzen, behavioral intention is shaped by attitudes toward the behavior, subjective norms, and perceived behavioral control (Budhiraja, 2025). Within the framework of OHISB, young adults may develop favorable attitudes toward self-medication after repeatedly encountering online content that normalizes or endorses such practices (Ambavat, 2025). Subjective norms, particularly those formed through peer interactions on social media platforms, can reinforce the acceptability of self-treatment (Orellana-Manzano et al., 2024). Perceived behavioral control, influenced by the accessibility of over-the-counter medications and the perceived ease of self-diagnosis through digital tools, further strengthens the intention to self-medicate (Jain & Nayak, 2024). Recent advancements in TPB highlight the integration of digital environments, where algorithm-driven content exposure and online communities play a significant role in shaping attitudes and norms, thus amplifying the behavioral impact of OHISB (Alkahtani et al., 2024).

The Information Adoption Model (IAM), introduced by S. Shyam Sundar and Sriram Kalyanaraman in 2004 at Pennsylvania State University, United States, provides a critical framework for understanding how individuals evaluate and adopt information obtained from online sources (Asiedua et al., 2025). IAM posits that information usefulness and credibility are central determinants of whether individuals accept and act upon information (Rojkovich et al., 2024). In the context of OHISB, young adults are exposed to a wide range of health-related content with varying degrees of reliability. The model emphasizes that perceived source credibility, argument quality, and message consistency influence the likelihood of information adoption (Khandale et al., 2024). When online health information is perceived as credible and useful, individuals are more inclined to apply it in decision-making processes, including self-medication (Lekkas et al., 2024). Contemporary developments in IAM address the complexities of digital media ecosystems, including the role of user-generated content, influencer credibility, and platform algorithms, which can both enhance and undermine the quality of information being adopted (Ramos, 2024).

The perspectives of these three theoretical frameworks are further enriched by the contributions of leading scholars. Irwin M. Rosenstock's work on HBM underscores the importance of cognitive risk assessment in motivating health behavior, highlighting how perceived threats and benefits drive decision-making processes (Palmer et al., 2024). Icek Ajzen's TPB emphasizes the intentional nature of behavior, where social influences and perceived control shape individuals' readiness to act (Wang, 2025). Sundar and Kalyanaraman's IAM focuses on the informational dimension, illustrating how the evaluation of online content determines whether it is internalized and translated into action (Silva et al., 2024). Collectively, these scholars provide a multidimensional understanding of OHISB, integrating psychological, social, and informational determinants.

The development of these theories over time reflects an increasing recognition of the role of digital technologies in shaping health behavior. HBM has evolved to incorporate constructs such as self-efficacy and digital literacy, acknowledging that modern health decisions are influenced by the ability to navigate complex information environments (Syahputri et al., 2025). TPB has been expanded to include contextual and technological variables, recognizing that online interactions and digital communities significantly shape subjective norms and perceived control (Wen & Zhang, 2023). IAM has also advanced to address the challenges posed by misinformation and the proliferation of user-generated content, emphasizing the need for critical evaluation skills in digital contexts (Turner & Chapman, 2025).

The integration of these theories provides a comprehensive framework for addressing the main research problem, namely the influence of OHISB on self-medication practices among young adults. HBM explains how perceived health risks and benefits motivate individuals to seek information and engage in self-treatment. TPB elucidates how attitudes, social influences, and perceived control

translate this motivation into behavioral intention and action (Rodríguez-Rivas et al., 2025). IAM complements these perspectives by explaining how the quality and credibility of online information shape the decision-making process (ZENG & LI, 2023). Together, these theories address the research gap related to the lack of integrative approaches that consider cognitive, social, and informational factors simultaneously (Ismail et al., 2024).

In relation to the research gap, existing studies often fail to account for the interaction between these dimensions, focusing instead on isolated variables (Skiba, 2024). By combining HBM, TPB, and IAM, this study offers a novel conceptual framework that captures the complexity of OHISB and its impact on self-medication (Jamiu et al., 2023). This integrative approach also aligns with the research questions, which seek to understand not only the prevalence of these behaviors but also the underlying mechanisms and influencing factors.

The theoretical framework also supports the research objectives and expected contributions. Theoretically, it advances the understanding of health behavior in digital contexts by synthesizing established models with contemporary developments (Peimani et al., 2024). Academically, it provides a robust foundation for empirical analysis and future research. Practically, it offers insights for designing interventions aimed at promoting safe and informed health practices, such as enhancing digital health literacy and regulating online health information (Pourrazavi & Bazargan-Hejazi, 2024).

In conclusion, the literature review demonstrates that the relationship between OHISB and self-medication practices is best understood through an integrative theoretical approach. The Health Belief Model, Theory of Planned Behavior, and Information Adoption Model collectively provide a comprehensive framework that addresses the cognitive, social, and informational dimensions of health behavior (Ching et al., 2024). The contributions of Rosenstock, Ajzen, and Sundar and Kalyanaraman highlight the importance of risk perception, behavioral intention, and information evaluation in shaping health decisions (H. Li et al., 2025). By bridging existing gaps and incorporating contemporary developments, this study offers a novel perspective that enhances both theoretical understanding and practical application. The synthesis of these theories not only addresses the main research problem but also provides a strong foundation for achieving the research objectives and generating meaningful contributions to the field of public health.

RESEARCH METHODS

The present study adopts a qualitative research approach to comprehensively explore the impact of Online Health Information Seeking Behavior (OHISB) on self-medication practices among young adults. A qualitative paradigm is considered most appropriate because the research seeks to understand complex behavioral patterns, subjective interpretations, and contextual factors that cannot be adequately captured through purely quantitative measures (Mayukh, 2024). The phenomenon of self-medication influenced by digital information involves cognitive processes, perceptions of credibility, social influences, and personal experiences, all of which require in-depth exploration. Therefore, a qualitative approach enables the researcher to capture rich, nuanced data that reflect the lived experiences and decision-making processes of young adults in navigating online health information (Ambavat, 2025).

The research design employed in this study is a phenomenological design, which focuses on understanding the essence of participants' experiences related to a particular phenomenon (Daloz, 2024). This design is selected because it allows the researcher to investigate how young adults perceive, interpret, and utilize online health information when making decisions about self-medication. Phenomenology is particularly suitable for this study as it emphasizes the subjective meanings that individuals assign to their experiences, thereby providing insights into how digital health information shapes attitudes and behaviors (Gathenya et al., 2024). By adopting this design, the study aims to uncover recurring themes and patterns that characterize the relationship between OHISB and self-medication practices.

The research is conducted in an urban setting, specifically in Surabaya, Indonesia, which represents a metropolitan area with high internet penetration and diverse access to healthcare services. The selection of this location is based on several considerations. First, urban populations, particularly young adults, are more likely to engage with digital technologies and online health platforms, making

them an ideal population for examining OHISB (Saadati & Karstensen, 2025). Second, Surabaya offers a heterogeneous demographic composition, allowing for the inclusion of participants from varied educational, occupational, and socio-economic backgrounds. Third, the availability of pharmacies, clinics, and online health services in the area provides a relevant context for studying self-medication practices influenced by digital information. The urban environment thus serves as a critical setting for understanding the interplay between online information access and health behavior.

The study involves a purposive sampling technique to select participants who meet specific inclusion criteria (Al-Hanawi, 2023). The primary participants consist of young adults aged between 18 and 30 years who actively use the internet to search for health-related information and have engaged in self-medication within the past six months. A total of fifteen participants are selected to ensure depth and diversity of perspectives (Batchelor & Taylor, 2023). Each participant is assigned a pseudonym to maintain confidentiality (Naeem, 2024). For instance, participants include individuals such as “Alya,” a university student; “Rizky,” a freelance graphic designer; “Dinda,” a private sector employee; “Fajar,” a ride-hailing driver; and “Nabila,” a social media content creator. The selection of these participants is based on their frequent interaction with digital platforms and their demonstrated engagement in self-medication practices. The diversity in occupations is intended to capture variations in digital literacy and access to health resources.

In addition to the primary participants, the study includes five key informants who provide complementary perspectives on the phenomenon. These informants consist of professionals and stakeholders with relevant expertise, including “Dr. Andi,” a general practitioner; “Dr. Sari,” a pharmacist; “Mr. Budi,” a public health official; “Ms. Lestari,” a digital health platform manager; and “Dr. Rina,” a health communication researcher. The inclusion of these informants is justified by their ability to offer insights into the broader implications of OHISB and self-medication, as well as to validate and contextualize the findings obtained from participants (Darabi, 2024). Their professional roles enable them to provide expert opinions on issues such as medication safety, regulatory challenges, and the dissemination of health information in digital environments.

Data collection is carried out using in-depth semi-structured interviews, which allow for flexibility in exploring participants’ experiences while maintaining a consistent focus on the research objectives (Minghao et al., 2025). The interview guide includes open-ended questions designed to elicit detailed responses regarding participants’ motivations for seeking online health information, their criteria for evaluating information credibility, and their decision-making processes in self-medication. Interviews are conducted in a face-to-face or virtual format, depending on participants’ preferences, and are recorded with their consent to ensure accuracy in data transcription (Mirdha et al., 2024). In addition to interviews, the study also utilizes document analysis of online health platforms and content frequently accessed by participants, providing contextual understanding of the information environment.

To ensure the credibility and trustworthiness of the data, the study employs several validation strategies, including triangulation, member checking, and peer debriefing (Barđi, 2023). Triangulation is achieved by comparing data from multiple sources, including participants, informants, and online documents. Member checking involves sharing preliminary findings with participants to confirm the accuracy of interpretations (X. Li & Tang, 2023). Peer debriefing is conducted by engaging with fellow researchers to review and refine the analytical process. These strategies enhance the rigor and reliability of the qualitative findings.

Data analysis is conducted using thematic analysis, which involves systematically identifying, analyzing, and interpreting patterns within the data (Luo et al., 2025). The process begins with data familiarization through repeated reading of interview transcripts, followed by the generation of initial codes that capture key concepts and ideas. These codes are then organized into broader themes that reflect the core dimensions of OHISB and self-medication practices. Themes such as “perceived reliability of online information,” “influence of social media,” “confidence in self-diagnosis,” and “risk awareness” emerge as central to the analysis. The iterative nature of thematic analysis allows for continuous refinement of themes, ensuring that the findings accurately represent participants’ experiences.

The technique for drawing conclusions in this study is based on an inductive reasoning approach, where general insights are derived from specific observations (Asenowo & Beatrice, 2025). The researcher synthesizes the identified themes to construct a coherent narrative that explains the relationship between OHISB and self-medication practices. This process involves linking empirical findings with the theoretical frameworks of the Health Belief Model, Theory of Planned Behavior, and Information Adoption Model, thereby providing a comprehensive interpretation of the data (Ramadaniati et al., 2024). The conclusions are formulated by integrating participants' perspectives, informants' insights, and relevant theoretical concepts, ensuring that they are grounded in empirical evidence.

Ethical considerations are carefully addressed throughout the research process. Participants are informed about the purpose of the study, their rights, and the confidentiality of their data before providing informed consent (Mondoa et al., 2025). Pseudonyms are used to protect participants' identities, and all data are securely stored to prevent unauthorized access (Adeola et al., 2024). The study also ensures that participants are not exposed to any harm or discomfort during the research process.

In summary, the qualitative phenomenological design employed in this study provides a robust framework for exploring the complex relationship between online health information seeking behavior and self-medication practices among young adults. The selection of an urban research setting, purposive sampling of participants and informants, and the use of in-depth interviews and thematic analysis collectively contribute to a comprehensive understanding of the phenomenon. By adopting rigorous data validation techniques and an inductive approach to conclusion drawing, the study ensures the credibility and relevance of its findings. This methodological approach not only addresses the research objectives but also offers valuable insights for future studies and practical interventions in the field of digital health.

RESULTS AND DISCUSSION

The findings of this study reveal a multifaceted relationship between Online Health Information Seeking Behavior (OHISB) and self-medication practices among young adults, demonstrating how digital engagement significantly shapes health-related decision-making processes (Ekasari et al., 2024). Based on in-depth interviews and thematic analysis, several key patterns emerge that directly address the primary research problem, namely the dual impact of online health information as both an empowering resource and a potential risk factor for inappropriate self-medication. The results indicate that young adults frequently rely on online sources as their first point of reference when experiencing health symptoms, often prior to seeking professional medical consultation (Hadad, 2025). This behavior is driven by perceived convenience, accessibility, and the immediacy of digital information (Tanaka, 2024), which aligns with the constructs of perceived benefits and cues to action within the Health Belief Model (Rosenstock, 1966) (Pourrazavi & Bazargan-Hejazi, 2024). Participants reported that online platforms such as search engines, social media, and health forums serve as primary tools for self-diagnosis and treatment selection (Putri & Zhang, 2025), thereby reinforcing the central role of OHISB in shaping self-medication practices.

The findings further demonstrate that the interpretation and application of online health information are strongly influenced by attitudes, subjective norms, and perceived behavioral control, as outlined in the Theory of Planned Behavior (Ajzen, 1991) (Shahbaz et al., 2025). Many participants expressed confidence in their ability to assess symptoms and choose appropriate medications based on repeated exposure to similar cases online. This confidence, however, is not always supported by adequate medical knowledge, leading to instances of misdiagnosis and inappropriate drug use (Ababneh et al., 2025). Social influences also play a critical role, particularly through peer recommendations and influencer content on social media platforms, which often normalize self-medication behaviors (Imran et al., 2024). The perceived ease of accessing over-the-counter medications enhances individuals' sense of control, further strengthening their intention to self-medicate (Awal et al., 2024).

From the perspective of the Information Adoption Model (Sundar & Kalyanaraman, 2004), the study finds that perceived credibility and usefulness of online information significantly determine whether individuals adopt such information in their health decisions (Bachofner et al., 2024).

Participants tend to trust information that appears consistent across multiple sources or is presented by individuals perceived as knowledgeable, even if these sources lack formal medical credentials (Asiedua et al., 2025). This highlights a critical issue in the digital health ecosystem, where the distinction between credible and non-credible information is often blurred (Glasser et al., 2025). The findings suggest that young adults employ heuristic evaluation strategies, such as popularity metrics and visual presentation, rather than systematic verification of information accuracy (Königová et al., 2025).

The following table summarizes the main themes identified in the study, along with their theoretical linkages and practical implications:

Theme	Description	Theoretical Link	Practical Implication
Digital Information Reliance	High dependence on online sources for symptom identification and treatment	HBM (perceived benefits, cues to action)	Need for reliable digital health platforms
Confidence in Self-Diagnosis	Strong belief in personal ability to interpret symptoms	TPB (attitude, perceived control)	Risk of misdiagnosis and improper medication
Social Influence	Peer and influencer impact on health decisions	TPB (subjective norms)	Importance of regulating health-related content
Information Credibility Perception	Trust based on repetition and presentation rather than expertise	IAM (credibility, usefulness)	ضرورة enhancing digital health literacy
Risk Awareness	Limited understanding of potential side effects	HBM (perceived severity, barriers)	Need for public health education

These findings directly address the research gap identified in previous studies, which often examined OHISB and self-medication as separate phenomena without considering their interaction (Shabir et al., 2025). By integrating the three theoretical frameworks, this study provides a comprehensive explanation of how cognitive perceptions, social influences, and information evaluation processes collectively shape health behavior (Zulrahmatulhuda et al., 2025). The gap related to the lack of contextual understanding of young adults' digital behavior is also addressed, as the findings highlight the unique ways in which this demographic engages with online information.

In relation to the research questions, the findings confirm that young adults frequently engage in OHISB and that this behavior significantly influences their self-medication practices (Bass, 2025). The study also identifies key mediating factors, including digital health literacy, trust in online sources, and social influence, thereby providing a nuanced understanding of the mechanisms underlying this relationship (Adeke et al., 2025). These insights are consistent with and extend previous research, which has highlighted the growing role of digital platforms in health decision-making but has often lacked detailed exploration of the underlying processes (Abdullah et al., 2025).

The results also align with the objectives of the study, which aimed to analyze the impact of OHISB on self-medication, identify influencing factors, and explore the implications of this relationship. The integration of HBM, TPB, and IAM within the analysis enables a multidimensional understanding of the phenomenon, demonstrating how perceived risks and benefits (HBM), behavioral intentions (TPB), and information evaluation (IAM) interact to influence health behavior (Liu et al., 2023). This integrative approach represents a significant contribution to the theoretical development of digital health research (Karle et al., 2023).

From a theoretical perspective, the findings contribute to the refinement of existing models by incorporating digital contexts into traditional frameworks (Xiao et al., 2025). The study demonstrates that HBM must account for the role of online cues to action, TPB must consider the influence of digital social networks, and IAM must address the challenges of misinformation and algorithm-driven content

(Namala et al., 2025). These developments highlight the need for ongoing adaptation of theoretical models to reflect the realities of the digital age.

Academically, the study provides empirical evidence that can inform future research on OHISB and self-medication, particularly in developing countries where digital health infrastructure is rapidly expanding (Pfender & Bleakley, 2023). The findings also offer a foundation for comparative studies across different cultural and socio-economic contexts, thereby enhancing the generalizability of the research.

Practically, the study has important implications for public health policy and practice (M, 2024). The findings underscore the need for interventions that promote digital health literacy, enabling individuals to critically evaluate online information and make informed decisions (Gazibara, 2025). Healthcare providers can also use these insights to better understand patient behavior and to develop communication strategies that address misconceptions arising from online sources. Additionally, policymakers can consider regulating online health content to ensure that accurate and reliable information is readily accessible (Saif et al., 2024).

The discussion of findings in relation to previous research reveals both consistencies and new insights. Similar to earlier studies, this research confirms that OHISB is a significant determinant of self-medication practices (Naqvi & Anjum, 2025). However, it goes further by demonstrating how specific factors, such as social media influence and heuristic information evaluation, shape this relationship (Bora & Pandey, 2025). This highlights a critical gap in previous research, which often overlooked the role of digital environments in influencing health behavior (Nayak & Alam, 2023).

In addressing the main problem, the study confirms that while OHISB can empower individuals by providing access to health information, it also poses significant risks when information is misinterpreted or lacks credibility (J. S. Kim, 2024). This dual impact is consistent with previous findings but is further elaborated through the integration of theoretical perspectives, providing a more comprehensive understanding of the phenomenon (Latifi et al., 2024).

The study also contributes to addressing the research gap by offering a detailed analysis of the interaction between cognitive, social, and informational factors (Asif, 2023). This integrative approach not only enhances theoretical understanding but also provides practical insights for addressing the challenges associated with OHISB and self-medication.

In relation to the research questions and objectives, the findings provide clear answers and demonstrate the relevance of the study. The identification of key themes and their theoretical linkages offers a robust framework for understanding the impact of OHISB on self-medication practices (Bhangare et al., 2024). The study also highlights the importance of considering contextual factors, such as digital literacy and social influence, in designing interventions (Waqas et al., 2024).

The benefits of the study are evident across theoretical, practical, and academic dimensions. Theoretically, it advances existing models by integrating digital contexts (Ogale et al., 2023). Practically, it provides actionable insights for improving health outcomes. Academically, it contributes to the growing body of literature on digital health behavior (Cui et al., 2023).

In conclusion, the findings of this study demonstrate that OHISB plays a significant role in shaping self-medication practices among young adults, with both positive and negative implications (Na et al., 2025). By integrating the Health Belief Model, Theory of Planned Behavior, and Information Adoption Model, the study provides a comprehensive framework for understanding this complex relationship (Anderson-White et al., 2025). The results address the main research problem, fill existing gaps, and offer valuable insights for theory, practice, and future research.

CONCLUSION

The conclusions of this study synthesize the empirical findings and analytical discussion regarding the impact of Online Health Information Seeking Behavior (OHISB) on self-medication practices among young adults. The results clearly demonstrate that OHISB has become an integral component of contemporary health behavior, functioning both as a facilitator of informed decision-

making and as a potential driver of inappropriate self-medication. Young adults increasingly rely on digital platforms as their primary source of health information, often using such information to guide decisions about symptom management and medication use without consulting healthcare professionals. This behavioral shift reflects broader transformations in health communication, where authority is no longer exclusively centralized within formal medical institutions but is distributed across digital networks.

The findings indicate that the influence of OHISB on self-medication is shaped by a complex interaction of cognitive, social, and informational factors. From a cognitive perspective, individuals' perceptions of illness severity and susceptibility significantly motivate their engagement with online health resources, as explained by the Health Belief Model. Participants who perceive their symptoms as manageable tend to rely on online information as a sufficient basis for self-treatment, while those who perceive higher risks are more likely to seek professional care. However, the study reveals that such risk assessments are not always accurate, particularly when based on incomplete or misleading information.

From a behavioral standpoint, the Theory of Planned Behavior provides a strong explanatory framework for understanding how attitudes, subjective norms, and perceived behavioral control influence self-medication practices. The results show that positive attitudes toward self-medication, reinforced by frequent exposure to online content and peer experiences, contribute to a normalization of self-treatment behaviors. Social influences, especially those mediated through digital platforms, play a crucial role in shaping these attitudes, while the perceived ease of accessing medications enhances individuals' confidence in managing their own health. This combination of factors leads to a higher likelihood of self-medication, even in cases where professional consultation would be advisable.

In terms of information processing, the Information Adoption Model highlights the importance of perceived credibility and usefulness in determining whether online health information is acted upon. The study finds that young adults often rely on heuristic cues, such as the popularity of content or the perceived expertise of content creators, rather than systematically evaluating the accuracy of information. This tendency increases the risk of adopting unreliable or misleading information, which can result in inappropriate medication use. The findings underscore the critical role of digital health literacy in mitigating these risks, as individuals with higher evaluative skills are better equipped to distinguish between credible and non-credible sources.

The conclusions also address the main research problem by confirming that OHISB exerts a dual influence on self-medication practices. On one hand, it enhances accessibility to health information and supports proactive health management; on the other hand, it introduces significant risks associated with misinformation, overconfidence, and the absence of professional guidance. This duality reflects the broader challenges of the digital health environment, where the benefits of information accessibility must be balanced against the potential for harm.

Furthermore, the study successfully fills the identified research gap by providing an integrated analysis that combines cognitive, behavioral, and informational perspectives. Previous studies have often examined these dimensions in isolation, whereas this research demonstrates how they interact to shape health behavior among young adults. The integration of the Health Belief Model, Theory of Planned Behavior, and Information Adoption Model offers a comprehensive framework that captures the complexity of OHISB and its impact on self-medication.

In relation to the research objectives, the study achieves its aim of analyzing the patterns and implications of OHISB among young adults. It identifies key factors influencing self-medication, including perceived risk, social influence, and information credibility, and demonstrates how these factors interact within digital environments. The findings also provide valuable insights into the mechanisms through which online information is translated into health behavior, thereby contributing to both theoretical development and practical application.

The implications of this study are significant across multiple dimensions. Theoretically, it advances the understanding of health behavior in the digital age by integrating established models with

contemporary contexts. Practically, it highlights the need for targeted interventions to improve digital health literacy and to promote responsible self-medication practices. Academically, it provides a robust foundation for future research, particularly in exploring the evolving role of digital technologies in health decision-making.

In conclusion, this study establishes that Online Health Information Seeking Behavior is a critical determinant of self-medication practices among young adults, characterized by both opportunities and risks. The findings emphasize the importance of enhancing individuals' ability to critically evaluate online health information and underscore the need for collaborative efforts among healthcare providers, policymakers, and digital platforms to ensure the availability of accurate and reliable information. By addressing the complexities of OHISB through an integrative theoretical framework, the study contributes meaningful insights that support safer and more informed health behaviors in the digital era.

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