

DIGITAL SOCIAL MEDIA IN ACCESSING EVIDENCE-BASED HEALTH INFORMATION

MÍDIAS SOCIAIS DIGITAIS NO ACESSO A INFORMAÇÕES DE SAÚDE BASEADAS EM EVIDÊNCIAS

REDES SOCIALES DIGITALES EN EL ACCESO A INFORMACIÓN DE SALUD BASADA EN EVIDENCIA

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ABSTRACT

Objective: to analyze the access to evidence-based health information in easy language through digital social media with professionals working in the Family Health Strategy before and after educational activity. **Method:** quasi-experimental study of the type before and after, in which the changes related to the search for and access to evidence-based health information by professionals from the Family Health Strategy who participated in educational activities were analyzed. In the data analysis, the generalized version of the McNemar chi-square test was used. **Results:** The results showed that 50% of the participants started to search for evidence-based health information ($p = 0.016$) after participating in the educational activity, with greater use of the internet to search for this information ($p = 0.008$). **Conclusion:** The development of educational activity stimulated and facilitated access to health information in digital media based on evidence, in easy language, contributing to increase the search for qualified and applicable information in the work of the professionals of the Family Health Strategy.

Descriptors: Discovery; Evidence-Based practice; Family health strategy; Health education; Knowledge; Social media.

RESUMO

Objetivo: analisar o acesso a informações de saúde baseadas em evidências em linguagem fácil por meio de mídias sociais digitais junto a profissionais atuantes na Estratégia Saúde da Família antes e após atividade educativa. **Método:** estudo quase-experimental, do tipo antes e depois, em que se analisaram as mudanças relativas à busca e ao acesso a informações de saúde baseadas em evidência por profissionais da Estratégia Saúde da Família que participaram de atividade educativa. Na análise dos dados, utilizou-se a versão generalizada do teste qui-quadrado de McNemar. **Resultados:** os resultados evidenciaram que 50% dos participantes passaram a buscar informações de saúde baseadas em evidências ($p=0,016$)

após a participação na atividade educativa, com maior utilização da internet para a busca dessas informações ($p=0,008$). **Conclusão:** o desenvolvimento de atividade educativa estimulou e facilitou o acesso a informações de saúde nas mídias digitais baseadas em evidências, em linguagem fácil, contribuindo para aumentar a busca por informações qualificadas e aplicáveis no trabalho dos profissionais da Estratégia de Saúde da Família.

Descritores: Descoberta do conhecimento; Educação em saúde; Estratégia Saúde da Família; Mídias sociais; Prática clínica baseada em evidência.

RESUMEN

Objetivo: analizar el acceso a información de salud basada en evidencias en lenguaje fácil a través de las redes sociales digitales con profesionales que trabajan en la Estrategia Salud de la Familia antes y después de la actividad educativa. **Método:** estudio cuasiexperimental del tipo antes y después, en el que se analizaron los cambios relacionados con la búsqueda y acceso a información en salud basada en evidencia por parte de los profesionales de la Estrategia Salud de la Familia que participaron en actividades educativas. En el análisis de los datos se utilizó la versión generalizada de la prueba chi-cuadrado de McNemar. **Resultados:** Los resultados mostraron que el 50% de los participantes comenzaron a buscar información de salud basada en evidencia ($p = 0.016$) luego de participar en la actividad educativa, con mayor uso de internet para buscar esta información ($p = 0.008$). **Conclusión:** El desarrollo de la actividad educativa estimuló y facilitó el acceso a la información en salud en medios digitales basados en evidencia, en lenguaje fácil, contribuyendo a incrementar la búsqueda de información calificada y aplicable en el trabajo de los profesionales de la Estrategia Salud de la Familia.

Descriptor: Descubrimiento del conocimiento; Educación en salud; Estrategia de Salud Familiar Medios de comunicación sociales; Práctica clínica basada en la evidencia.

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INTRODUCTION

The individual's ability to understand and use health information and orient himself to seek scientific knowledge is essential for decision making in planning care and strengthening the quality of life of health system users. The work process based on scientific evidence contributes to health promotion and disease prevention, as well as to the effectiveness and efficiency of health services management¹.

Recently, the pandemic caused by Sars-CoV-2 amplified the search for information and generated the phenomenon characterized as infodemic, recognized as the excess of information produced by unknown sources that make it difficult to access reliable sources. In addition, on social networks, personal information or intentionally false news is spread quickly and often seen in a distorted way and out of context². The amount and quality of information disseminated by various means of communication can compromise the capacity for interpretation and reflection in the construction of knowledge, which should translate into actions that are scientifically based and aware of the health needs of the population³.

The current scenario confirms the importance of using information from reliable sources and, above all, with scientific evidence, allied to the dissemination and popularization of science and technology³, especially for health professionals such as nurses, nursing auxiliaries and technicians, and Community Health Agents (CHAs), who represent 85% of the health team⁴.

Notably, the Family Health Strategy (FHS) has become a privileged space for health education, for health professionals, managers and the population, since it prioritizes and articulates the needs learned in the work process, which is compatible with the precepts of the National Policy of Continuing Education in Health (NPCEH), recognized as a fundamental political-pedagogical strategy for the construction of knowledge, popularization and adoption of Evidence-Based Practices (EBP)⁴.

To this end, digital social media stand out as means of communicating scientific knowledge as internet-based platforms that allow rapid sharing of information and knowledge viable for qualified health education and research⁵. Social media, especially Facebook and WhatsApp, are identified as a useful tool for health education and awareness, as they facilitate individual access to evidence, representing an effective mechanism for dissemination and outreach of information to different health professionals^{6, 7}.

A study focusing on the translation, synthesis, and dissemination of Evidence-Based Health (EBH) information identified that health professionals need accessible and summarized information due to the limited time they have to keep up to date. In addition, health professionals reported that with the information available, they can assist the patient in a differentiated and qualified way⁸.

However, another study, with the objective of mapping sources of EPH information used by clinical nurses, found that most use Google and other web portals due to lack of knowledge about how and where to search for information⁹. Additionally, the search for EBH information with co-workers should be recognized as a result of the lack of time and skills in searching for EBH information.

It is understood that social media can be used to facilitate the access and use of EBH information, thus promoting evidence-based clinical practice, as well as the democratization of

knowledge and information, which are of great relevance to the development and qualification of professional practice in the FHS¹⁰.

This research aimed to analyze the access to information on EBH through digital social media among professionals working in the FHS before and after an educational activity.

METHOD

This is a quasi-experimental, non-randomized study, based on pre- and post-educational activities. The changes regarding the search for access to evidence-based health knowledge and information with FHS professionals were analyzed before and after the provision of scientific evidence texts, following an intra-subject design¹¹.

The study was conducted in a municipality in the interior of the state of São Paulo that has five FHS teams. The inclusion criteria were: health professionals, such as nurses, nursing technicians and CHAs, who were active in the FHS during the research period. Thus, the population was composed of 24 health professionals who agreed to participate in the research, a non-probabilistic purposive sample.

The data collection was conducted in the months of September and December 2018, in three different steps, according to the flowchart below.

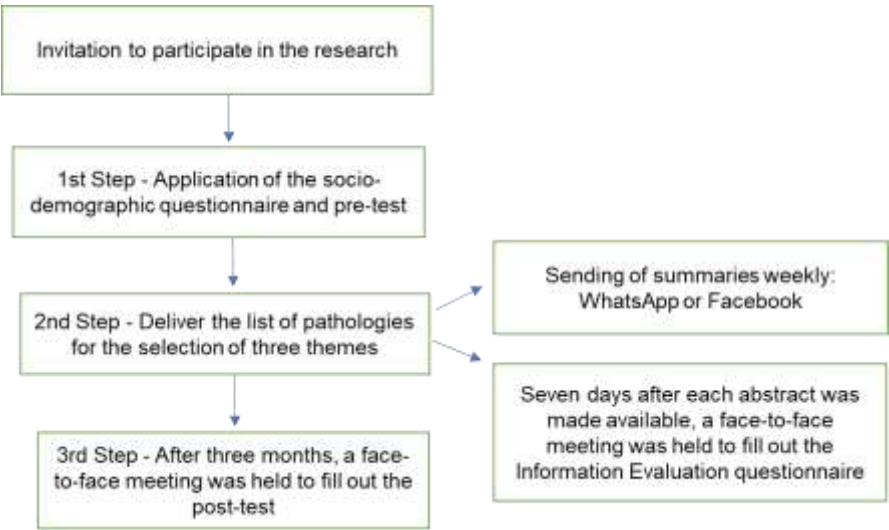


Figure 1. Flowchart with the study steps, 2021.

Source: prepared by the authors.

In the first step, two questionnaires were applied, both self-administered. The first was related to socio-demographic and functional data, means used to update knowledge, Internet use for searching, reading, and use of EBH information. The second questionnaire was the pre-test, which was based on work previously done by the research group, with minor changes to include and meet the objective of this study¹².

In the second step, characterized as a proper search activity, professionals were provided with a list of topics referring to the following pathologies: Stroke; Acquired Immune Deficiency Syndrome (AIDS); breastfeeding; sickle cell anemia; anxiety; asthma; headache; cytomegalovirus; seizure; Chikungunya; dengue; Diabetes Melittus; phimosis; gastroenteritis; influenza; hemorrhoids; mycosis; obesity in children and adolescents; pyelonephritis; scabies; congenital syphilis; Down's Syndrome; heart murmur; suicide, and the Human Papillomavirus

(HPV) vaccine, recognized as themes with great potential to awaken the interest of the FHS professionals. Each professional was asked to choose three topics of greatest interest, as well as the social network in which they would like to receive information, having two options: WhatsApp or Facebook.

The social networks Facebook and WhatsApp were chosen because they are social networks widely used in the Brazilian reality, favoring the achievement of the objective of this research to promote the dissemination of scientific knowledge.

The themes were made available at three different moments. Each week, they chose a theme and, thus, the texts were sent, according to the professional's preference, always on a weekly basis. Thus, the professionals received the themes during three weeks.

The texts that were used provided information regarding the definition and treatment of each pathology and were prepared by the blog "Talk to Dr. Laughter". The blog was chosen because it aims to provide easy-to-understand scientific content for children, adolescents, families, and health professionals. This blog was developed by the research group "Technologies and Information in Health", bringing together professors from the University of São Paulo, the State University of Campinas, and McGill University in Canada (www.drrisadinha.org.br/). It should be noted that the texts were made available in full, without any changes, with the authorization of use¹³.

The contents of the blog were scientifically based summaries, in a language that was easy and accessible to the general population.

After seven days of sharing the content, the researcher held a face-to-face meeting in each unit to fill out the semi-structured Information Evaluation questionnaire to assess the relevance of the information. This questionnaire is available on Dr. Risadinha's blog. This evaluation was performed after the sharing of the contents selected by the professionals, totaling three evaluations.

The third step was carried out three months after the second step in which the post-test was applied (same questions as the pre-test) to evaluate if there was a change regarding the search, access and reading of EBH information.

The collected data were submitted to double validation in the Microsoft Excel® program, version 2019 (Microsoft Co., USA). The variables were coded and categorized to facilitate the analysis and understanding of the results, which were imported into the IBM SPSS Statistics program, version 24.0, for the statistical and descriptive analyses by means of proportions and means. To perform the comparison of change in relation to seeking, accessing, and reading EBS information, the generalized version of McNemar's chi-square test was used. The Null Hypothesis (OH) of the test is that the proportions of the margins in the table are equal at the 5% significance level (α 0.05).

This research was conducted after a favorable opinion from the Research Ethics Committee, Certificate of Submission for Ethical Appreciation (CAAE) No. 90498218.3.0000.5393, and met the requirements of Resolution No. 466, December 12, 2012, and Resolution No. 510, April 2016, of the National Health Council.

RESULTS

The group of study participants was composed of 24 health professionals, three (12.5%) nurses, four (16.7%) nursing technicians, and 17 (70.8%) CHAs. The participants were mostly female (20=83%) and 16 (67%) had no undergraduate degree. The mean age of the participants was 37.7 years, with a minimum age of 22 years and a maximum age of 63 years.

Regarding the professionals with university education (8=100%), it is noted that most of them (5=62,5%) are specialists, and among them, all the nurses have *Lato sensu* post-graduation. From the total, 18 (75%) reported participation in scientific events, citing only lectures, and 16 (67%) indicated participation in permanent or continued education activities. Regarding the participation in commissions or study groups of the institution, 16 (67%) reported participating and 21 (87.5%) reported participating in educational activities offered by the institution.

In the first step of the research, it was possible to identify that all respondents preferred to read information on EBH, however, when asked about the search sites on the Internet, sites such as YouTube, My Health and Google were identified. Thus, it was possible to realize the need for clarification about what is EBH information and the main search tools on the Internet for better application of the survey instrument and conducting the interview.

Thus, after the explanation and exposure of an evidence-based scientific publication by the researcher, the participants were again questioned and five (5= 21%) confirmed reading EBH information, but encountered difficulties due to the technical language (20%) and language of the articles (40%). It is worth noting that no difficulties were reported regarding access to EBH information. The nurse was the most sought after professional to search for scientific information within the FHS (79%). The social media selected to receive the content were Facebook (4%) and WhatsApp (96%).

During the activity, the professionals received the contents of each theme during three weeks, that is, with a seven-day interval between them. In the first week, the topic Stroke was the one most chosen by the professionals; in the second week, Headache, and in the third week, Suicide. It is worth mentioning that the choice and the availability of the contents for the third week occurred on October 8th, i.e., the month following the Yellow September Campaign, a month for suicide prevention.

In the weekly evaluations carried out with the professionals, a semi-structured Information Evaluation questionnaire was applied (descriptive analysis with n and percentage) to estimate the relevance of the information. In it, there were questions and their possible answers. In the question "What do you think of this information?", the user could mark more than one of the following answer options: "This information taught me something new"; "This information confirmed that I do or did the right thing"; "This information reassured me"; "This information reminded me of something I already knew"; "This information encouraged me to learn more about the subject"; "I think there is a problem with this information"; "I don't agree with this information" and "This information can generate negative consequences".

To answer the question "Did you understand the information?", the participant could mark one of the following alternatives: "I understood very well (I understood everything)"; "I understood well"; "I understood poorly"; "I understood very poorly (I did not understand much)". Regarding the question "Is this information relevant?", the participant could mark one of the

following options as an answer: "Very relevant"; "Relevant"; "Not very relevant"; "Not very relevant (did not meet my expectation)". And finally, the participant was asked "Will you use this information?", with the following answer options: "Yes" or "No". The response alternatives that did not get any response from the participants were not tabulated and described.

From the three weekly evaluations made by the participants, it is worth noting the predominance of the answers: "This information taught me something new" (79.16%; 54.16 e 66.66%); "I understood very well" (79.16%; 79.16% e 91.66%); "This information is very relevant" (75%; 70.8% e 91.66%) and all of them expressed the intention to use the information in their care practice (100%; 100% e 100%), as described in table 1.

Table 1 – Evaluation of the content made available. Ribeirão Preto-SP, Brazil, 2019

Variable	Week 1		Week 2		Week 3	
	n	%	n	%	n	%
What do you think about this information?						
This information taught me something new	19	79.16	13	54.16	16	66.66
This information confirmed that I do or did the right thing	5	20.83	7	29.16	1	4.16
This information reminded me of something I already knew	4	16.66	10	41.44	4	16.66
This information encouraged me to learn more about the subject	4	16.66	9	37.5	5	20.83
This information reassured me			2	8.34		
Did you understand this information?						
I Understood Very Well	19	79.16	19	79.16	22	91.66
I understood well	5	20.83	5	20.83	2	8.34
Is this information relevant?						
Very Relevant	18	75	17	70.8	22	91.66
Relevant	6	25	7	29.1	2	8.34
Will you use this information?						
Yes	24	100	24	100	24	100

After three months of making the evidence-based content available, a new meeting was held with the professionals to evaluate change regarding the search for access to and reading of EBH information (Table 2). In this table, it is possible to identify the results of the pre- and post-test described in Table 1.

Table 2. Evaluation of change regarding the search, access and reading of EBH information. Ribeirão Preto- SP, Brazil, 2019

Variable	Before		After		p value
	n	%	n	%	
Reading of evidence-based health information?					0.016
Yes	5	21	12	50	
No	19	79	12	50	
Do you use the Internet to search for evidence-based health information?					0.008
Yes	5	21	13	54.2	
No	19	79	11	45.8	
Places to search for evidence-based information on the Internet					
Scielo	5	50	4	31	
Lilacs	1	10	1	8	
VHL	3	30	3	23	
Google Scholar	1	10	2	15	
Bireme	0	0	3	23	
Google	0	0	3	23	
Blog <i>Fale com o Dr Risadinha</i>	0	0	12	92	
Ministry of Health	0	0	8	8	

* In the variable "place of searching for evidence-based information on the internet", it was not possible to perform the statistical test, due to the absence of response in the pre-test

In the post-test, it was possible to notice the change involving the reading of scientific publications in which 50% of the participants started to search for evidence-based health information (p=0.016). The use of the Internet to search for this information also obtained a statistically significant value (p=0.008) after the activity, with a 33.2% increase in the post-activity moment.

DISCUSSION

The results of this study show that when health professionals are given the opportunity to access information on EBH, there is an improvement in understanding and also recognition of the relevance of the information. Thus, it can be seen that the blog "Talk to Dr. Risadinha" was a tool that sensitized health professionals, since it offers an easily accessible language, especially following international guidelines for dissemination of health information. This evaluation is relevant because it is a determinant of care, since EBH increases the reliability of interventions, which certainly contributes to the transformation of the social and cultural practice of health care¹⁴.

The lessons learned during two years of facing the pandemic of COVID-19 are indisputable, evidencing the relevance of universal and equitable access and also timely information

from EBH to face another epidemic: the infodemic. Such findings confirm the findings found before the beginning of the pandemic of the COVID-19, since they portray low-cost actions that can be adopted by nurses in the micro spaces of health services and that allow the capillarity and the potentialization of awareness and wide adherence to individual and collective prevention measures, which are insistently defended as the most effective alternatives².

The literature reinforces the importance of ensuring the implementation of a professional nursing practice based on the conscious and judicious use of the best and most current scientific research evidence when making managerial and clinical decisions inherent to patient care^{15,16,17}. However, translating knowledge into action in health care in an easy language is still a complex process¹⁸.

The complexity of this process is related mainly to the participants of this study, which is in accordance with the literature, being mostly female, especially in the health area, in which women assume a prominent place, representing more than 65% of the more than six million health professionals¹⁹. Regarding the professional category, most participants were represented by CHAs. This is due to a greater need for these professionals in the composition of the FHS team, a proportion that is confirmed by the minimum number of agents needed in a health team, a number that can be defined according to the population base, demographic, epidemiological, and socioeconomic criteria, which is in line with what was recommended by the National Policy for Primary Care (NPPC)⁷.

The recognition of the duties of the CHAs recommended by the NPPC, such as health promotion activities, prevention of diseases and illnesses, identification and recording of risk situations, as well as the provision of guidance, information, and community mobilization, ratifies the need to acquire knowledge based on health information from scientific evidence for the effective performance of their functions²⁰.

Regarding the characterization and academic background of the nurses, all reported having a specialist degree, which indicates a concern with training. This is important data, considering that this professional must be constantly seeking to acquire new knowledge in order to keep up with the consecutive changes required in the health sector²⁰.

Among the various functions of the nurse, it is important to mention the role of leader and educator to his team, which allows evidencing the relevance of knowledge and information based on scientific evidence to be able to perform his practice with quality and, thus, guide his team in the search for reliable information¹³.

These statements may show the ease of access to the means of research by professionals, since the academic training conferred by higher education and graduate studies can increase the level of scientific knowledge, as well as the proximity to scientific literature, highlighting the need for reading and study to understand situations of professional practice, which was not observed in professionals without academic training²¹.

In this sense, the literature confirms that post-graduation allows nurses a greater understanding of their professional practice, favoring the development of skills that support decision making and enhance the ability to promote a holistic and individualized view of the client's needs²² and also community actions recognized as strategic tools for preventive actions, central not only in times of pandemic, but also in facing other diseases that involve awareness and behavioral changes, such as chronic non-communicable diseases.

The nurse occupies a strategic position to help overcome structural difficulties and enable the democratization and application of EBH information in everyday health work²³. The nurse's attributions, among others, consist in stimulating the team for the best performance of its functions, based on scientific information, providing better practices during the decision making process²⁴.

The results of this research showed that, in the pre-test moment, there was no search for information based on scientific evidence, corroborating the obstacles reported by the participants such as the difficulty in assimilating scientific terminologies and the language, mainly because the studies published are mostly in English. A similar result was found in a survey involving 200 nurses from the Maternal and Child Health Centers and the Faculty of Nursing at the University of Menoufia in Egypt. In that study, barriers were identified as the lack of understanding of the terminology used in research articles, however, the authors went further by referring that other obstacles were pertinent, such as lack of time and the inability to understand statistical terms¹⁷.

The positive impact of facilitating access to EBH information contributes directly to increased awareness and, consequently, professional practice improves in patient care, since scientific knowledge, with a more democratic language, provides a better understanding for professionals and, thus, they feel more comfortable and confident to provide quality health care^{17,25}.

Another survey involving 95 nurses in an Australian hospital identified that professionals do not read EBH information because the articles are difficult to read and understand. However, it suggested that if they were in simpler language, they would be more likely to be used and implemented. These findings highlight the importance of EBH information in language that is accessible to the target audience, without compromising the professional standard of scientific writing²⁷.

In a literature review on the use of validated instruments to assess EBP competencies in health professionals' performance, it was found that health professionals prefer human sources for acquiring information, mainly co-workers²⁶.

A quantitative study conducted with 112 professionals from FHS teams in a city in southern Brazil showed that EBH information was considered an important aspect in decision making for professional practice, but they showed a deficit of knowledge and skills for a practice guided by EBH information. In addition, the factors that hinder EBP by professionals should be highlighted: the great demands of work experienced in the daily life of the FHS, the little knowledge of foreign language, and the lack of support from management²⁸.

Another study conducted with health secretaries from 181 municipalities in a southern Brazilian state identified lack of time and unfamiliarity with scientific language as the main barriers to reading and using scientific information²⁹.

Given this, it is remarkable that the dissemination of EBH information in easy language allows greater understanding of the content and development of knowledge by instigating the search for relevant information for application in professional practice¹⁰. Thus, access to EBH information needs to be facilitated through more accessible sources and languages, and greater availability of adequate infrastructure in healthcare institutions²⁹, such as computers and mobile devices with internet access available to all healthcare professionals.

The wide adoption of EBP requires that health institutions prioritize the strengthening of knowledge and the development of skills by nursing professionals, in a collaborative manner with other health professionals, in order to promote better quality in health care and achieve clinical outcomes with greater effectiveness. In this sense, EBH deserves to be highlighted, as it facilitates the availability and access to this information, allowing the identification and negotiation of common barriers to the implementation of EBH²⁸.

The use of plain language in the dissemination of EBH information allows for immediate comprehension, as it is written in an organized and concise manner, favoring the use of content to meet the reader's needs as defined by The Plain Language Action and Information Network (PLAIN) definition of plain language.

Thus, with the presentation of these results, one realizes the need for educational practices of a scientific and easily accessible nature, involving health professionals. One can notice the changes in relation to the search for access, and the reading of EBH information was only possible from the meetings with discussion spaces. Information alone is not enough, it is through relationships that the human being, in the exercise of his uniqueness, constitutes the plurality imbricated to criticality. The dialectical relationship between social practices and knowledge provides the subject with a critical and creative posture towards the world, stimulating him to see himself as a subject capable of making choices and decisions, which, in fact, contributes to the discovery of knowledge³⁰.

Thus, we highlight the need to adopt the political and pedagogical principles of continuing education in health to promote, in a systematized way, the qualification of health professionals and, consequently, strengthen health care based on consolidated scientific knowledge for empathetic and sensitive actions to social transformation.

CONCLUSION

The analysis of the results allowed us to conclude that the use of social media for the dissemination of scientific knowledge with simple language are excellent tools in the context of the knowledge construction process and training of health professionals in the FHS.

The educational activity was efficient in improving the search for qualified and applicable information in the professionals' work and, because it is low cost, it is a strategic tool for extension and/or EBH actions.

Thus, it is hoped that this study will contribute not only to the appropriation of knowledge, but also to sensitizing researchers and health professionals about the importance of popularizing scientific knowledge.

As a limitation, we emphasize the number of participants and the time of the research, since the study was conducted with only 24 health professionals working in the FHS, which prevents the generalization of the results to other places and areas of activity. The educational activity occurred for a period of three months only, a short interval to assess a change in knowledge and behavior.

The use of social media for the dissemination of scientific knowledge has proven to be a good resource to assist the process of discerning, valuing, and sharing qualified information

as a viable initiative for greater recognition of the contributions of science beyond the boundaries of academia.

CONTRIBUTIONS

We inform that all authors contributed equally in the design of the research project, data collection, analysis and discussion, as well as in the writing and critical review of the content with intellectual contribution and in the approval of the final version of the study.

CONFLICT OF INTERESTS

Nothing to declare.

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