


Research Paper



Uncovering the impact of social media disseminated misinformation on public health: a study of the effects of false and misleading information on social media on consumer health behaviours and decision making

Ms. Nishtha Sachdev¹, Dr. Rubaid Ashfaq^{2*} 

¹Amity School of Communication, Amity University India.

^{2*}Associate Professor, Amity School of Communication, Amity University India.

Article Info

Article History:

Received: 25 April 2023

Revised: 30 June 2023

Accepted: 08 July 2023

Published: 22 August 2023

Keywords:

Social Media

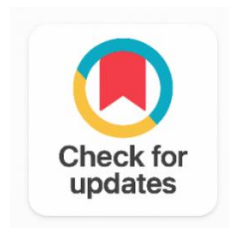
Disseminated Misinformation

Consumer Health Behaviors

Health Literacy

Risk Perception

Online Communication



ABSTRACT

Background: Human beings are inquisitive creatures who are always looking for new information everywhere they go, and from everyone they meet. In the current tech savvy scenario, we seek information from various Social Media platforms. There is significant proclivity in the way information reaches the audience the speed at which it reaches the audience. Social media is a very powerful medium of spreading any kind of information, but not all information is right and useful for the audience. Sometimes the information shared on social media can be misleading and have negative impacts on the course of life of the audience which is consuming it. In adverse situations the information available on public health can either be a boon or curse for the audience.

Objective: The objective of this study is to understand the impact social media disseminated misinformation has on the decision making of people, further uncovering the impact it has on their health.

Results: The data will be collected by conducting a survey with the audience that spends a significant amount of their day on social media platforms. Data will also be collected by reading various papers on misinformation regarding public health.

Conclusions: The study will aid in understanding if the impact of misinformation on public health is positive or negative and in which proportion.

Corresponding Author:

Dr. Rubaid Ashfaq

Associate Professor, Amity School of Communication, Amity University India.

Email: rubaidashfaq@gmail.com

Copyright © 2023 The Author(s). This is an open access article distributed under the Creative Commons Attribution License, (<http://creativecommons.org/licenses/by/4.0/>) which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

1. INTRODUCTION

Evolution has taught us one very important thing and that is the importance of knowledge and learning new things on a daily basis. The learning happens by getting information through different sources. The sources could be our friends, family, teachers, books, websites, blogs and social media platforms. As humans we are eager to learn every bit of news that is happening around us and then pass it on to our near and dear ones without giving it a second thought. This passing on of unsolicited information and advice can create adverse situations in someone else's life. The practice of disseminating misinformation evolved with humans too – from passing on misinformation verbally to sending it forward through social media multiplied its effect on the way people see their lives and try adapting to the forwarded misinformation.

There are various Social Media platforms which provide information on all fields of life and Public Health is one of them. People are blindly following the information available on this topic, which is not a very sensible thing to do. With the increasing use of the internet and media to communicate our thoughts and ideas to people we must learn to have a sense of judgement while consuming media. In a day we come across numerous posts, articles, blogs and videos which provide us information on everything including public health. We need Media literacy in order to educate ourselves about where to get this information from and what to take seriously and what should be shared with other people. We must have the capability to understand the difference between misleading information and facts. Media Literacy will help us evaluate the sources we use to consume the information and then educate us about which ones to trust when it comes to our health.

Specialists and wellbeing experts are among those best positioned to invalidate falsehood and direct clients to data sources that are proof based. Countermeasures incorporate mindfulness lobbies for patients and medical services experts, stages with proof-based information, the consideration of logical proof in wellbeing related content in broad communications, and endeavors to further develop media and wellbeing proficiency. "Advancing and spreading reliable wellbeing data is pivotal for legislatures, wellbeing specialists, analysts, and clinicians to offset bogus or misdirecting wellbeing data scattered in web-based entertainment," the dissertation states. It features that virtual entertainment channels can likewise be utilized to counter bogus or deluding data, however that further examinations might be expected to assess the best arrangement for such effort and to figure out which channels turn out best for various populaces, geological settings, and social settings.

1.1. Objectives of the Study

The objective of this study is to:

- Understand the impact social media disseminated misinformation has on the decision making of people.
- Uncovering the impact of these decisions on their health.

2. RELATED WORK

2.1. Misinformation & Fake News

Nowadays, concerns regarding health misinformation defined as misleading information that is purposefully, accidentally, or erroneously spread usually center on anti-vaccine material. This is significant because there has been a correlation between rising anti-vaccine beliefs and a rise in measles outbreaks in the US. As they should, social media sites like Facebook, Instagram, YouTube, and Pinterest are taking action to stop the propagation of anti-vaccine content on their networks.

However, there are other forms of false information that we come across frequently. You have probably seen advertising for miracle treatments, game-changing dietary supplements, or quick weight loss plans if you watch television or use social media. These misleading and unconfirmed cases can impact our day-to-day choices and can adversely affect the general's wellbeing. [1] examined the fake news and misinformation which leads to deception.

Deception can be intense or ongoing. A case that eating only meat will prompt fast weight reduction is intense since it tends to be handily rectified by wellbeing specialists sharing realities in actuality. Conversely, ongoing deception is generally connected to individual or social convictions or standards and is in this manner harder to cure in any event, when there is information running against the norm. The thought processes in sharing deception fluctuate. Some offer misleading substance without monitoring its incorrectness. Others purposefully course bogus substance to confound, misdirect, or for monetary benefit. Also, others feel that it is their commitment to share this substance since they genuinely accept the proof is off-base and their feelings or stories are a significant disclosure that will save others [2].

2.2. Public Health

Perceiving that deception can adversely affect the general's wellbeing is a certain something. Tending to and restricting the effect of falsehood is trying for some reasons. As far as one might be concerned, studies propose that bogus data spreads more rapidly than truth via virtual entertainment stages. Also, the manner in which falsehood or bits of hearsay spread via online entertainment shifts by subject. For instance, entertainers producing falsehood on diet and exercise, could vary from those spreading against immunization messages. The spread of hostile to immunization content is supported by bots and savages, while significant patrons of diet and exercise deception could incorporate organizations, superstars, and web-based entertainment powerhouses. [3], [4] suggested that another justification for why restricting deception content is testing is that cases are not generally unequivocally expressed however the data is introduced in a manner that permits people to reach dangerous determinations [5].

There are numerous fad diets available on the social media platforms which promise people of curing their illnesses in an easy way which is attractive to the audience [6]. This method is then shared with someone who might use and take it seriously but there is no guaranteed cure and there are no facts supporting the theory [7]. The recommendations attract the audience, and they adapt these major lifestyle changes without giving it a thought [8].

There are exercises being shown by the influencers on social media which the audience follows regardless of the fact that what their body allows and what is better for their bodies. The audience does not keep their injuries in mind before following such exercises and this leads to major harm [9], [10].

This is simpler for particular kinds of wellbeing falsehood, (for example, hostile to antibody messages) than others. [11] conducted a study on the sorts of falsehood that push conduct changes with commitments of further developed wellbeing could require master like a nutritionist's-assessment. These substances are typically somewhat precise (e.g., beetroots have medical advantages) however the outlining and asserts are off base (e.g., beetroots can fix a wide range of joint torment and irritation).

While tech organizations, social researchers, and general wellbeing authorities are looking for answers for address the spread of against immunization messages via online entertainment stages, we should contemplate the possible effects of different sorts of falsehood that impact day to day wellbeing choices. We don't need our sisters, girls, and moms to accept that embedding jade eggs into their vaginas will fix hormonal issues.

2.3. Infodemic

This term Infodemic was coined during the Pandemic so that people would stop spreading false information about the COVID 19 flu and misleading the crowd and creating havoc amongst the masses. Conducted a study to assess the parameters of disseminating information on health. There were rumors being spread about the vaccine causing major health issues and rumors were being spread to such extent that people were holding riots against doctors and nurses who were just trying to be helpful. The Government was being blamed and false information was the root cause of all the mis happenings. The dissemination of misinformation lead to the masses avoiding the vaccine and attacking the health providers. It creates turmoil and chance taking ways of behaving that can hurt wellbeing. It additionally prompts doubt in wellbeing specialists and subverts the general wellbeing reaction. Infodemic the executives are the methodical utilization of hazard and proof-based examination and ways to deal with deal

with deal with deal with the infodemic and diminish its effect on wellbeing ways of behaving during wellbeing crises.

Infodemic the board intends to empower great wellbeing rehearses through 4 kinds of exercises:

- Paying attention to local area concerns and questions
- Advancing comprehension of chance and wellbeing master guidance
- Building flexibility to falsehood
- Connecting with and engaging networks to make a positive move.

2.4. Population's Need of Information on Public Health-During a Health Emergency

The Coronavirus pandemic has featured the horde ways individuals look for and get wellbeing data, whether from the radio, papers, their nearby neighbor, their local area wellbeing laborer, or progressively, on the screens of the telephones in their pockets. The pandemic's going with infodemic, a staggering of data, including mis-and disinformation following a wellbeing crisis, has overpowered people, networks, and wellbeing frameworks. Conducted a study on excess of data, or data over-burden, can prompt individuals to have data evasion, for example, attempting to keep away from the news or switching off cautions on their telephones. This affects how they get data, and getting dependable, precise data to them turns out to be more difficult when individuals limit the wellsprings of data they counsel. This applies to both wellbeing laborers and people. In this manner, tuning in and understanding those data needs and ways of behaving is basic for mounting a successful crisis reaction. This new truth of how data is provided food and served by calculations via online entertainment and web takes care of for people and how they counsel various sources implies more adaptable methodologies are expected to all the more likely screen and comprehend the data climate individuals and networks live in. Repeating different kinds of feedback that go neglected across time and topography can make favorable places for falsehood. For instance, discussions about general wellbeing and social estimates presented in one nation could influence talk in another country. Worries about immunization aftereffects could be commandeered and fictionalized to spread sincerely upsetting falsehood about antibodies hurting weak individuals. Examined stories of worry that were left neglected in networks frequently would reemerge during Coronavirus. Different kinds of feedback about wellbeing, particularly about arising wellbeing subjects that element agitated science is genuine, however in the event that they are not completely tended to, less solid sources will make up for the shortfall. This makes wellbeing data and deception unique in relation to different kinds of falsehood that were talked about before the pandemic in areas of decisions and environmental change.

Consequently, a methodical way to deal with checking infodemics and creating infodemic bits of knowledge that are reproducible, and proof based are required. While observing discussions and the data climate on wellbeing subjects, individuals will communicate questions, concerns, disarray, and stories that can educate the entire regarding the crisis reaction, consequently working on the probability of populace acknowledgment and adherence to wellbeing direction, medicines, diagnostics and general wellbeing and social measures. Infodemic experiences proposals might incorporate explaining befuddling wellbeing direction, further developing assistance conveyance, further developing gamble correspondence, extending local area commitment, or reinforcing wellbeing laborer limit.

Today, WHO's prepared infodemic administrators, north of 1,300 from more than 142 nations, have extended how they might interpret the complicated data climate and what it means for wellbeing frameworks and wellbeing crisis reactions. Over 95% of Part States detailed following wellbeing falsehood and it keeps on being quite difficult for different episodes and crises. The learnings from these encounters are that we really want to more readily locate among on the web and disconnected information sources to make an extensive image of how a populace's inquiries, concerns, data voids, stories and circling mis-and disinformation influence their insights, perspectives, and conduct. [12] studied about expanding on this experience and in wide meeting from working infodemic supervisors across UN organizations and worldwide general wellbeing accomplices, impending direction on coordinating different datasets in examining and understanding infodemics in unambiguous populaces and settings will be distributed in a manual by WHO and accomplices [13].

From the absolute first infodemiology gathering and the first WHO worldwide infodemic director stages of preparation in quite a while, of morals have been examined while leading social tuning in and infodemic the board exercises. In mid-2023, WHO met a morals board on morals of social tuning in and infodemic the executives, with impending direction for wellbeing specialists that leading social tuning in and infodemic bits of knowledge age, planning and carrying out infodemic the executives mediations, and building general wellbeing frameworks to elevate strength to wellbeing deception [14].

3. METHODOLOGY

Research Philosophy is characterized as the various advances that are trailed by a scientist to lead a broad essential or optional exploration in view of the topic of a specific on-field or offfield research. In this examination approach different apparatuses, information assortment technique, number of respondents, goals of this exploration [15].

The essential information was collected or assembled through an overview with a designed or normalized survey. This integrates assembling direct information by asking the respondents straightforwardly/talking inquiries. The essential work was done utilizing exploratory and unmistakable examinations. The accentuation is on acquiring experience and commonality for later examination or when issues are at a primer examination level. A survey was made to get a total thought on the impacts and validity of media revealing and struggle detailing. The respondent's comments gives the unmistakable thought of their perspectives about the equivalent. The study was made web based, utilizing comfort examining, and connect was shipped off respondents. I tended to the respondents through email, web-based entertainment and WhatsApp [16], [17].

- **Research Tools:** For this research, tool used was questionnaire that was built to carry out the research. A survey had been carried out on the users of Delhi, Noida, Jamshedpur and Bangalore.
- **Research Design:** A descriptive and experimental design research has been used for conducting this research.
- **Number of Participants:** Data has been collected from 150 respondents who were contacted over WHATSAPP using google form.
- **Data Collection:** The data for this research was collected in two ways:
 - 1) Primary Data: It is based on the observations gathered from the survey.
 - 2) Secondary Data: This information is collected from the research papers, website, journals, blogs, news articles.
- **Data Collection & Interpretation:**

Table 1. Internet Information Usage for Wellbeing Among Respondents

Table 1	
Do you use Information on the internet for your Wellbeing?	Response
Yes	88.70%
No	11.30%

The majority i.e., 88.70% is using the internet to seek information regarding their health which shows only some of the population is careful and vigilant about the information on wellbeing [18]. The repercussions of deception via web-based entertainment incorporate such adverse consequences as an expansion in mistaken understanding of logical information, assessment polarization, raising trepidation and frenzy or diminished admittance to medical services.

Table 2. Consumer Perceptions of Lifestyle Changes Influenced by Social Media Information

Table 2	
Consumers tend to adapt Major lifestyle changes after getting information on Social Media?	Response

Agree	78.98%
Disagree	21.02%

The survey conducted shows that consumers tend to adapt to lifestyle changes through social media that get help from reliable sources. 78.98% of respondents choose to adapt lifestyle changes by getting information on social media. Only 21.02% of respondents disagree with adapting major lifestyle changes through social media disseminated information [19], [20].

The expanded spread of wellbeing related falsehood in a wellbeing crisis is advanced quickly by simple admittance to online substance, especially on cell phones. During emergencies, for example, irresistible illness episodes and catastrophes, the overproduction of information from different sources, the nature of the data and the speed at which new data is spread make social and wellbeing related influences [21], [22].

Table 3. Awareness of Government Regulations on Influencer Advertising of Supplements on Social Media

Table 3	
The Government has banned Influencers from Advertising any Supplements on Social Media without Proper & Valid Certificates. Are you aware about this?	Response
Yes	46.56%
No	53.44%

The survey shows that the audience is unaware about government regulations regarding the social media promotion of products without valid certificates. There are only 46.56% people who are aware of this fact. The creators found that web-based entertainment have been proliferating low quality wellbeing related data during pandemics, philanthropic emergencies, and wellbeing crises at a rising rate. They note, such spreading of inconsistent proof on wellbeing subjects enhances immunization aversion and advances doubtful medicines.

Table 4. Public Opinion on Government Regulation of Influencer-Endorsed Supplement Advertising.

Table 4	
Do you think the above action is a Right step or Not?	Response
Right	89.97%
Wrong	10.13%

The survey's results show that people support the government's regulation regarding the influencer marketing. 89.97% of respondents are in favor of this [23]. The efficient survey found that individuals feel mental, social, political as well as financial pain because of misdirecting and bogus wellbeing related content via virtual entertainment during pandemics, wellbeing crises and helpful emergencies.

Table 5. Respondents' Awareness of the Term "Infodemic"

Table 5	
Are you aware of the term Infodemic?	Response
Yes	46.98%
No	53.02%

The term infodemic is lesser known to the audience. The survey shows that the only 46.98% of the respondents are aware of this term and what it actually means. In any case, not all impacts of online entertainment have been negated during the Coronavirus pandemic. Eight audits announced positive results, and a few found that few online entertainment stages created fundamentally further developed

information and mindfulness, higher consistence with wellbeing proposals, and more sure wellbeing related ways of behaving among clients contrasted with exemplary data spread models.

Table 6. Respondents' Views on Uncritical Sharing of Health Information

Table 6	
Do You think the audience that shares health related information without giving any thought to it?	Response
Always	68.79%
Sometimes	21.59%
Never	9.62%

The survey shows that 68.79% of the respondents forward or share health related information without giving it a second thought. Only 9.62% of respondents give some time and thought before forwarding health related misinformation [24]. The dissertation recognizes the job of virtual entertainment in emergency correspondence and the board during wellbeing crises yet focuses to the need to counter the development of deception on these stages. Neighborhood, public and global endeavors are expected, as well as extra exploration.

Table 7. Audience Attraction to Free Recommendations and Consultations on Social

Table 7	
Do free recommendations and consultations on Social Media Platforms attract the Audience?	Response
Yes	87.06%
No	12.94%

The survey shows that 87.06% of the respondents are attracted to free recommendations and consultations available on social media. A very low proportion of respondents do not prefer it. Future examination ought to explore the adequacy and security of PC driven remedial and interventional measures against wellbeing falsehood, disinformation and phony news and designer ways of sharing wellbeing related content via virtual entertainment stages without contorted informing [25].

Table 8. Perceived Impact of Social Media Health Information on Adverse Public Health Outcomes

Table 8	
Does this increase the Adverse effects on Public Health?	Response
Yes	92.84%
No	7.16%

92.84% of respondents agree to the fact that these free consultations and recommendations lead to adverse effects on the public health. The expanded spread of wellbeing related falsehood in a wellbeing crisis is advanced quickly by simple admittance to online substance, particularly on cell phones. During emergencies, for example, irresistible illness episodes and catastrophes, the overproduction of information from different sources, the nature of the data and the speed at which new data is spread make social and wellbeing related influences.

Table 9. Respondents' Perceptions of the Reliability of Health-Related Shortcuts

Table 9	
Do you think short cuts are reliable when it comes to health?	Response
Yes	29.87%
No	70.13%

The survey suggests that only 29.87% of respondents rely on shortcuts when it comes to their health and nutrition. 70.13% respondents are more conscious and are not reliable on shortcuts [26].

Table 10. Preferred Sources of Health Recommendations Among Respondents

Table 10	
Do you prefer Government provided websites for health recommendations or Social media Platforms?	Response
Government provided websites	25.47%
Social Media Platforms	64.98%
Both	9.55%

The survey shows that 64.98% of respondents prefer social media platforms over government provided websites for information on health [27]. The creators found that web-based entertainment have been proliferating low quality wellbeing related data during pandemics, philanthropic emergencies, and wellbeing crises at a rising rate [28]. They note, such spreading of inconsistent proof on wellbeing subjects enhances immunization aversion and advances doubtful medicines [29].

Table 11. Respondents' Opinions on the Necessity of Media Literacy for All Individuals

Table 11	
Is media literacy mandatory for everyone?	Response
Yes	84.69%
No	15.31%

The majority of the respondents agree that media literacy is a must for everyone. 84.69% of respondents agree with educating the audience on media. The dissertation recognizes the job of virtual entertainment in emergency correspondence and the board during wellbeing crises yet focuses to the need to counter the development of deception on these stages. Neighborhood, public and global endeavors are expected, as well as extra exploration [30].

4. CONCLUSION

People these days are getting ignorant towards making conscious decisions and everyone is working on Herd Mentality which is adversely affecting their wellbeing. The study shows that everyone is looking for shortcuts to make their lives better. Smart work is an intelligent way of doing things, but shortcuts often lead to problems. The influencers on Instagram have become role models for the audience and they tend to imitate every possible habit of these influencers in order to look like them. The solution to people blindly absorbing and imitating information is media literacy. And this has to be started from an early age as there is no control over the dissemination of information and the sharing of the same. There are numerous fad diets available on the social media platforms which promise people of curing their illnesses in an easy way which is attractive to the audience. This method is then shared with someone who might use and take it seriously but there is no guaranteed cure and there are no facts supporting the theory. The recommendations attract the audience and they adapt these major lifestyle changes without giving it a thought.

There are exercises being shown by the influencers on social media which the audience follows regardless of the fact that what their body allows and what is better for their bodies. The audience does not keep their injuries in mind before following such exercises and this leads to major harm.

There were rumors being spread about the vaccine causing major health issues and rumors were being spread to such extent that people were holding riots against doctors and nurses who were just trying to be helpful. The Government was being blamed and false information was the root cause of all the mis happenings. The dissemination of misinformation lead to the masses avoiding the vaccine and attacking the health providers. Evolution has taught us one very important thing and that is the importance of

knowledge and learning new things on a daily basis. The learning happens by getting information through different sources. The sources could be our friends, family, teachers, books, websites, blogs and social media platforms. As humans we are eager to learn every bit of news that is happening around us and then pass it on to our near and dear ones without giving it a second thought. This passing on of unsolicited information and advice can create adverse situations in someone else's life. The practice of disseminating misinformation evolved with humans too – from passing on misinformation verbally to sending it forward through social media multiplied its effect on the way people see their lives and try adapting to the forwarded misinformation. There are various Social Media platforms which provide information on all fields of life and Public Health is one of them. People are blindly following the information available on this topic, which is not a very sensible thing to do. For the majority of Twitter's set of experiences, its newsfeed was direct: The application showed tweets backward sequential request.

Last year, the organization's designing group uncovered how its ongoing calculation functions. Likewise with Facebook and YouTube, Twitter currently depends on a profound learning calculation that has figured out how to focus on satisfied with more noteworthy earlier commitment. By searching through Twitter's information, the calculation has instructed itself that Twitter clients are bound to keep close by on the off chance that they see content that has proactively gotten a ton of retweets and makes reference to, contrasted and content that has less.

Acknowledgment

The authors have no specific acknowledgments to make for this research.

Funding Information

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Author Contributions Statement

Name of Author	C	M	So	Va	Fo	I	R	D	O	E	Vi	Su	P	Fu
Ms. Nishtha Sachdev	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓
Dr. Rubaid Ashfaq	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	

C : Conceptualization

M : Methodology

So : Software

Va : Validation

Fo : Formal analysis

I : Investigation

R : Resources

D : Data Curation

O : Writing - Original Draft

E : Writing - Review & Editing

Vi : Visualization

Su : Supervision

P : Project administration

Fu : Funding acquisition

Conflict of Interest Statement

The authors declare that there are no conflicts of interest regarding the publication of this paper.

Informed Consent

All participants were informed about the purpose of the study, and their voluntary consent was obtained prior to data collection.

Ethical Approval

Not Applicable.

Data Availability

The data that support the findings of this study are available from the corresponding author upon reasonable request.




REFERENCES

- [1] S. Elhajjar and F. Ouaida, 'Use of social media in healthcare', *Health Marketing Quarterly*, vol. 39, no. 2, pp. 173-190, 2022. doi.org/10.1080/07359683.2021.2017389
- [2] Ali, A., Magdy, W., & Vogel, S. (2013, July). A tool for monitoring and analyzing healthcare tweets. In HSD workshop, SIGIR 2013.
- [3] M. Al-Samydai, A. Al-Kholaifeh, and A. Samydai, 'The impact of social media in improving patient's mental image towards healthcare provided by private hospitals', *Indian J Public Health Res Dev*, vol. 10, no. 2, pp. 491-540, 2019. doi.org/10.5958/0976-5506.2019.00339.5
- [4] A. R. Alsughayr, 'Social media in healthcare: uses, risks, and barriers', *Saudi Journal of Medicine and Medical Sciences*, vol. 3, no. 2, 2015. doi.org/10.4103/1658-631X.156405
- [5] K. Anitha, 'Social media data analysis: Rough set theory based innovative approach', in *Intelligence of Things: AI-IoT Based Critical-Applications and Innovations*, Cham: Springer International Publishing, 2021, pp. 209-226. doi.org/10.1007/978-3-030-82800-4_9
- [6] L. Antonucci, Third international conference on Data Science & Social Research. 2020.
- [7] G. Appel, L. Grewal, R. Hadi, and A. T. Stephen, 'The future of social media in marketing', *Journal of the Academy of Marketing Science*, vol. 48, no. 1, pp. 79-95, 2020. doi.org/10.1007/s11747-019-00695-1
- [8] R. Ashfaq, 'Study and analysis of 5G enabling technologies, their feasibility and the development of the internet of things', in *Intelligence of Things: AI-IoT Based Critical-Applications and Innovations*, Cham: Springer International Publishing, 2021, pp. 101-143. doi.org/10.1007/978-3-030-82800-4_5
- [9] R. Ashfaq, 'Caste System and Indian Media: A Complex Relationship', *Culture and Communication (JMCC)*, vol. 3, no. 02, pp. 1-6, 2023. doi.org/10.55529/jmcc.32.1.6
- [10] R. Ashfaq and Z. Nabi, 'Media Literacy and Learning: Conceptual Contribution in the Field of Media Education', *International Journal of Instructional Technology and Educational Studies*, vol. 3, no. 4, pp. 1-11, 2022. doi.org/10.21608/ihites.2021.107738.1082
- [11] C. Boyer, 'Social media for healthcare makes sense', *Frontiers of health services management*, vol. 28, pp. 35-40, 2011. doi.org/10.1097/01974520-201110000-00006
- [12] Calloway, J., & Reach, C. S. (2011). *Social media management tools*. GPSolo, 28, 54.
- [13] K. Courtney, 'The use of social media in healthcare: organizational, clinical, and patient perspectives', *Enabling health and healthcare through ICT: available, tailored and closer*, vol. 183, 2013.
- [14] D. R. Ashfaq, M. Z. Nabi, and D. Rohit, 'Artificial Intelligence and the Indian media industry: The future is now', *Journal of Artificial Intelligence, Machine Learning and Neural Network*, no. 26, pp. 24-31, Nov. 2022. doi.org/10.55529/jaimlenn.26.24.31
- [15] D. R. Ashfaq, 'Social behaviours in Virtual Reality', *Journal of Social Responsibility, Tourism and Hospitality*, no. 25, pp. 12-16, Sept. 2022. doi.org/10.55529/jsrth.25.12.16
- [16] D. R. Ashfaq, 'Caste system and Indian media: A complex relationship', Feb-Mar 2023, no. 32, pp. 1-6, Mar. 2023. doi.org/10.55529/jmcc.32.1.6
- [17] K. Ahuja and I. Bala, 'Role of Artificial Intelligence and IoT in Next Generation Education System', in *Intelligence of Things: AI-IoT Based Critical-Applications and Innovations*, F. Al-Turjman, A. Nayyar, A. Devi, and P. K. Shukla, Eds Cham: Springer, 2021. doi.org/10.1007/978-3-030-82800-4_8
- [18] V. Gamache-Oleary and G. Grant, 'Social media in healthcare', in *Proceedings of the 50th Hawaii international conference on system sciences*, 2017. doi.org/10.24251/HICSS.2017.456
- [19] A. Garg and A. K. Singh, 'Applications of internet of things (IoT) in green computing', in *Intelligence of Things: AI-IoT Based Critical-Applications and Innovations*, Cham: Springer International Publishing, 2021, pp. 1-34. doi.org/10.1007/978-3-030-82800-4_1
- [20] A. M. Kaplan, 'Social media, the digital revolution, and the business of media', *International Journal on Media Management*, vol. 17, no. 4, pp. 197-199, 2015. doi.org/10.1080/14241277.2015.1120014
- [21] A. Kotov, 'Social Media Analytics for Healthcare', *Healthcare data analytics*, vol. 1, pp. 309-340, 2015.

- [22] K. M. Lambert, P. Barry, and G. Stokes, 'Risk management and legal issues with the use of social media in the healthcare setting', *Journal of Healthcare Risk Management*, vol. 31, no. 4, pp. 41-47, 2012. doi.org/10.1002/jhrm.20103
- [23] L. Malita, 'Social media time management tools and tips', *Procedia computer science*, vol. 3, pp. 747-753, 2011. doi.org/10.1016/j.procs.2010.12.123
- [24] B. S. McGowan, M. Wasko, B. S. Vartabedian, R. S. Miller, D. D. Freiherr, and M. Abdolrasulnia, 'Understanding the factors that influence the adoption and meaningful use of social media by physicians to share medical information', *Journal of medical Internet research*, vol. 14, no. 5, 2012. doi.org/10.2196/jmir.2138
- [25] A. R. Miller and C. Tucker, 'Active social media management: the case of health care', *Information Systems Research*, vol. 24, no. 1, pp. 52-70, 2013. doi.org/10.1287/isre.1120.0466
- [26] R. E. Montalvo, 'Social media management', *International Journal of Management & Information Systems (IJMIS)*, vol. 15, no. 3, pp. 91-96, 2011. doi.org/10.19030/ijmis.v15i3.4645
- [27] B. L. Neiger et al., 'Use of social media in health promotion: purposes, key performance indicators, and evaluation metrics. *Health promotion practice*', vol. 13, pp. 159-164, 2012. doi.org/10.1177/1524839911433467
- [28] M. L. Ranney and N. Genes, 'Social media and healthcare quality improvement: a nascent field', *BMJ Quality & Safety*, vol. 25, no. 6, pp. 389-391, 2016. doi.org/10.1136/bmjqs-2015-004827
- [29] J. Sharp, 'Brand awareness and engagement: a case study in healthcare social media. *Frontiers of health services management*', vol. 28, pp. 29-33, 2011. doi.org/10.1097/01974520-201110000-00005
- [30] Taprial, V., & Kanwar, P. (2012). *Understanding social media*. Bookboon

How to Cite: Ms. Nishtha Sachdev, Dr. Rubaid Ashfaq. (2023). Uncovering the impact of social media disseminated misinformation on public health: a study of the effects of false and misleading information on social media on consumer health behaviours and decision making. *Journal Healthcare Treatment Development (JHTD)*, 3(2), 42-52. <https://doi.org/10.55529/jhtd.34.43.55>

BIOGRAPHIES OF AUTHORS

	<p>Ms. Nishtha Sachdev, is a scholar who is affiliated to the Amity School of Communication, Amity University, India. In her academic trajectory she mostly leans toward media studies, digital communication, social media research, and the wider societal impact that happens when online information keeps moving around. She has also contributed to research that looks into how social media shapes public attitudes, including areas like health communication and media literacy. From her perspective, the goal is to grasp the changing tie between digital platforms and audience behavior, and in particular how misinformation, in present day communication spaces, creates new implications.</p>
	<p>Dr. Rubaid Ashfaq , is an Associate Professor at the Amity School of Communication, Amity University, India. He brings a great deal of experience in both teaching and research, and his expertise goes across mass communication, digital media, health communication, media effects, and strategic communication. He has published academic work around social media, public opinion, misinformation and communication practices, especially in the digital age context. Dr. Ashfaq is also engaged in academic research and mentorship, helping move communication studies forward through interdisciplinary efforts, that are socially connected and practically relevant. Email: rubaidashfaq@gmail.com</p>