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The Impact of Health Misinformation on Social Media on Young People's Health

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ABSTRACT

This study aims to examine the impact of health misinformation circulated through social media platforms on the health behavior of young people. In the present digital era, social media platforms such as YouTube, Instagram, and Facebook have become major sources of health-related information for young individuals. However, the absence of medical verification and the increasing influence of social media influencers often result in the spread of misleading and harmful health advice. The findings reveal that social media plays a significant role in shaping health decisions among young people, often leading to unsafe health practices such as consuming or using harmful substances for weight loss, disease treatment, etc. The study highlights the urgent need for digital health literacy and stricter regulation of health-related content on social media.

Keywords: *Health misinformation, Social media, Young people, Influencers, Digital health literacy and Public health*

I. INTRODUCTION

Young people today live in a highly digitalized environment where social media plays a central role in their daily lives. The transition from adolescence to adulthood is a crucial phase during which individuals develop habits related to health, lifestyle, and self-care. During this period, young people increasingly turn to social media platforms for information, including health advice related weight loss, fitness, skincare, mental health, and disease prevention.

Social media platform allow rapid dissemination of information without adequate fact-checking or professional validation. Influencers and content creators often share health-related advice without medical qualifications, which may mislead young audiences. In India, the situation is particularly concerning as young people constitute a large proportion of social media users. Exposure to misleading content such as unsafe diet practices, consumption of toxic substances, usage of chemical based beauty products and unverified remedies can result in serious health

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consequences.

In recent times, several incidents have highlighted the dangerous consequences of unverified health advice circulated on social media platforms. A widely discussed case involved a young college student who reportedly consumed borax for weight loss after watching a YouTube video that promoted it as a health remedy, the video lacked essential information regarding dosage, eligibility, risks, or medical supervision and was shared without any form of professional or medical verification. This incident illustrates how persuasive online content can encourage young viewers to adopt hazardous practices without understanding the potential consequences. Such cases reflect a broader pattern in which social media influencers, driven by visibility and engagement rather than accountability, promote health-related claim that are scientifically inaccurate or incomplete. The absence or clear disclaimers, expert validation, and regulatory oversight allows misleading content to circulate freely, often framed as "natural", "quick", or "miracle" solutions. Young people, who may lack sufficient health literacy or critical evaluation skills, are particularly vulnerable to accepting and acting upon such advice.

These developments underscore the urgent need to examine how health misinformation on social media affects young people's decision-making and behavior. Understanding the mechanisms through which misleading health content gains credibility, the extent to which it influences health choices, and leave the level of awareness regarding associated risks is essential for designing effective interventions. Addressing this issue is not only important for individual health outcomes but also for safeguarding public health in an increasingly digital society.

The rise of short-form content such as reels, shorts, and viral videos has further intensified the spread of health-related misinformation. Algorithms on social media platforms prioritize engagement over accuracy, often amplifying sensational, simplified, or exaggerated health claims. As a result, misleading health advice frequently reaches large audience within a short period, making correction difficult once misinformation becomes viral. This environment creates a serious challenge for young users who may mistake popularity for credibility.

Another critical concerns is the blurring of boundaries between personal experience and professional medical advice on social media. Many content creators present anecdotal success stories as universally applicable solutions, ignoring individual health conditions, age, and medical history. Such over generalization can lead young people to adopt unsuitable or dangerous practices, particularly when scientific explanations are replaces with emotional storytelling and visual persuasion.

In the Indian context, regulatory mechanisms to monitor and control health misinformation on

social media remain limited. While traditional media is subject to ethical standards and accountability, digital platforms often lack strict enforcement for health-related content. This gap allows unqualified individuals to disseminate advice that may contradict established medical guidelines, increasing the risk of self-medication and delayed professional consultation among young people.

Furthermore, the easy accessibility of health information online has altered help-seeking behavior. Instead of consulting healthcare professionals, many young people rely on social media as a first source of diagnosis and treatment. This shift raises concerns about informed decision-making, risk awareness, and long-term health outcomes. Examining these platforms is essential to understand how misinformation influences health choices and to identify strategies that promote responsible consumption of online health information.

Health misinformation on social media creates confusion and poses risks to public health. The influence of visual appealing videos and persuasive narratives often overrides scientific evidences, making young people vulnerable to harmful practices. Therefore, understanding the impact of health misinformation on social media is essential to protect the health and well-being of the younger generation.

A. Review of Literature

AL-Zaman (2021) investigated COVID-19 related fake news circulated on Indian social media platforms and found that health misinformation was widespread during the pandemic. The study revealed that misleading content related to treatments, prevention methods, and remedies created public confusion and to inappropriate health behaviours. It also highlighted the role of rapid sharing and lack of source verification in amplifying misinformation among social media. The expansion of digital communication technologies has significantly altered the landscape of public health information. Over the past decade, scholars have observed a shift from institution-controlled health communication toward user-generated and algorithm-driven content. Unlike traditional health education channels, social media platforms allow individuals without medical training to disseminate advice to broad audiences. This transformation has created both opportunities for awareness and risks related to misinformation.

Pandey et al. (2023) examined exposure to fake news among Indian social media users. Their study found that fake or misleading information circulates widely across platforms like WhatsApp and Facebook, and that many users rely on this information due to lack of media literacy, highlighting the need for improved digital literacy among young people. Academic research consistently highlights the scale of health misinformation circulating online. Studies

analyzing social media content during health crises have found that inaccurate claims about treatments, preventive measures, and alternative remedies can spread rapidly, often outpacing corrections from health authorities. The speed of digital sharing, combined with emotionally engaging content, increases the likelihood that misleading posts will gain visibility and influence public perception.

Sankaranarayanan K.B, et al (2023) stated that research is focused on social media literacy and misinformation awareness among youth in Coimbatore city. It showed that higher media literacy reduces vulnerability to fake news and hightlighted the importance of educational interventions to equip young people to distinguish true from false information online. Youth populations are frequently identified as particularly vulnerable within this digital environment. Adolescents and young adults are among the most active users of social networking platforms, where they encounter a mixture of professional advice, peer opinions, and influencer-generated content. Developmental research suggests that this age group is in a formative stage of identity construction and social comparison, which may increase sensitivity to messages about body image, fitness, and health trends. Consequently, young users may adopt behaviors promoted online without thoroughly evaluating their credibility.

Dr.E.Indira, et al (2023) stated that, their study examined the characteristics and effects of health misinformation spread through social media among users. It found that misleading online health content influence people's health beliefs and behaviours and highlighted the need for digital policy and interventions to counteract misinformation. Scholars have also examined the psychological mechanisms underlying misinformation acceptance. Research indicates that perceived credibility, social proof (such as high follower counts), and visual presentation significantly affect whether users trust online health advice. When information is presented by charismatic or seemingly knowledgeable figures, individuals may rely on heuristic cues rather than critically assessing the evidence. This pattern has been observed particularly in relation to dietary supplements, weight-loss regimens, and fitness challenges.

Md Ali Jinna (2024) explored social media misinformation and public trust in India, identifying health misinformation as a major contributor to declining trust in institutions and highlighting the importance of targeted digital literacy and regulation. Another central theme in the literature concerns digital and media literacy. Researchers argue that the ability to assess source reliability, interpret scientific claims, and recognize biased or exaggerated content is essential in combating misinformation. Empirical studies suggest that individuals with stronger critical evaluation skills are less likely to believe or share false health claims. Educational programs designed to enhance media literacy have demonstrated potential in reducing susceptibility to

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misleading digital content.

Dr.Rajeev Sijariya et al (2025) reviewed the effect of social media misinformation on mental health during the COVID-19 period in India, showing that misinformation worsened psychological distress, illustrating broader health impacts beyond physical symptoms. Beyond behavioral consequences, health misinformation has been linked to broader psychological and societal impacts. Continuous exposure to alarming or contradictory health messages can contribute to anxiety, confusion, and mistrust in medical institutions. During public health emergencies, misinformation has been shown to undermine compliance with safety guidelines and erode confidence in official recommendations. These outcomes highlight the interconnected relationship between digital information ecosystems and public health stability.

Kavita Devi, et al (2025) reviewed social media misinformation with case studies (including Indian contexts), highlighting how algorithmic amplification and influencer spread contribute to rapid dissemination of inaccurate health information. Technological design factors also play a role in the spread of misinformation. Algorithms that prioritize engagement tend to amplify content that evokes strong emotional reactions, which may include sensational or controversial health claims. Scholars argue that without improved moderation systems and transparent content policies, digital platforms may unintentionally facilitate the dissemination of inaccurate information.

B. Research Gap

Although several studies have examined health misinformation on social media, there are notable gaps. Most existing research focuses on identifying misinformation rather than analyzing its direct impact on young people's health behavior. There is limited research that explores how and why young people trust and act upon misleading health content. Furthermore, many studies concentrate on specific topics such as vaccination, while broader health issues like diet, weight loss, and mental health remain under-researched. This study aims to bridge these gaps by examining the real-life impact of health misinformation on social media among young people and to bring the stricter regulation of health-related content on social media.

C. Statement of the Problem

Social media has become a powerful medium influencing young people's health decisions. The lack of regulation and medical verification of health-related content often leads to the spread of misinformation. Young people tent to follow influencers blindly, resulting in unsafe health practices such as consuming toxic substances or following extreme diets. This study seeks to analyze the problems caused by health misinformation on social media and its impact on young

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people's health. The lack of strict regulation and influencers often share unverified health advice without accountability, posting serious risks to young people' health. This highlight the urgent need for stronger regulatory mechanisms to monitor, verify, and control health misinformation on social media platforms.

D. Objectives

1. To study the influence of social media influencers on young people's health decisions.
2. To identify the health risks faced by young people due to misinformation.
3. To examine the need for stricter regulation of health-related content online.

E. Methodology

The research relies on both primary and secondary sources of data to ensure a comprehensive and balances analysis. Primary data is collected through a structured questionnaire designed to assess exposure to health-related content, trust in social media sources, and resulting health behaviours. Data were collected from 50 respondents who actively use social platforms such as YouTube, Instagram, and Facebook. The collected data is analyzed using percentage analysis and simple statistical tools to identify trends and patterns. Secondary data were collected from academic journals, reports, and published articles related to health misinformation and social media.

II. Results and Discussion

Table-1: Respondents personal information:

Particulars	Options	Respondents	%
Age	17-19	41	83.8
	19-21	4	8.2
	21-22	5	8.25
	Total	50	100
	BA	7	14
	BBA	18	36
	BCA	20	40
	B.COM	5	10

Course	Total	50	100
Year	1st year	12	24
	2nd year	9	18
	3rd year	10	20
	4th year	12	24
	5th year	7	14
	Total	50	100

Source: Primary data

Interpretation:

According to this table the majority of respondents (83.8%) are aged between 17–19 years, indicating that the study mainly represents late adolescents. Only a small percentage fall within the 19–21 and 21–22 age groups. In terms of academic background, most participants belong to BCA (40%) and BBA (36%) courses, followed by BA (14%) and B.Com (10%), showing that students from professional streams form a large portion of the sample. The distribution across academic years is relatively balanced, with slightly higher representation from 1st and 4th year students (24% each). Overall, the data suggest that the respondents are predominantly young undergraduate students, a group that is likely to be active users of social media and therefore relevant to the study on health misinformation.

Table-2: Young people's trust in social media health advice

Particulars	Excellent		Good		Poor	
	N	%	N	%	N	%
Trust in social media influencers for health advice	6	12	21	42	23	46
Confidence in applying online health advice	7	14	21	42	22	44
Ability to differentiate true and false health information	5	10	19	38	26	52
Risk awareness while following online health advice	8	16	20	40	22	44
Accuracy of health information on social media	6	12	20	40	24	48

Total	50	100	50	100	50	100

Source: Primary data

Interpretation:

This table results that 23 respondents (46%) rated their trust in social media influencers for health advice as poor, while 21 respondents (42%) rated it as good and only 6 (12%) rated it as excellent, indicating that negative perceptions outweigh strong trust. Similarly, 22 respondents (44%) reported poor confidence in applying online health advice, compared to 21 (42%) who reported good confidence and 7 (14%) who reported excellent confidence. A majority of 26 respondents (52%) stated that their ability to differentiate between true and false health information is poor, while 19 (38%) rated it as good and only 5 (10%) as excellent, highlighting difficulty in identifying misinformation. Regarding risk awareness, 22 respondents (44%) rated it as poor, 20 (40%) as good, and 8 (16%) as excellent. Finally, 24 respondents (48%) believed the accuracy of health information on social media is poor, compared to 20 (40%) who rated it as good and 6 (12%) as excellent. Overall, the number of votes shows that more respondents selected "Poor" than "Excellent" in most categories, indicating low trust and limited confidence in social media health information.

Table-3: Satisfaction levels toward online health contents

Particulars	Very Satisfied		Neutral		Dis Satisfied	
	N	%	N	%	N	%
Satisfaction with influencer-provided health advice	6	12	18	36	26	52
Satisfaction with medical verification on social media	5	10	16	32	29	58
Satisfaction after following online health advice	7	14	18	36	25	50
Satisfaction with risk warnings in online health content	4	8	16	32	30	60
Satisfaction with honesty of social media creators about health risks	6	12	16	32	28	56
Satisfaction of health content matches real medical advice	4	8	17	34	29	58

Total	50	100	50	100	50	100

Source: Primary data

Interpretation:

This table results that, a majority of respondents express dissatisfaction with various aspects of online health content. Regarding satisfaction with influencer-provided health advice, 26 respondents (52%) reported being dissatisfied, compared to 18 (36%) who felt neutral and only 6 (12%) who were very satisfied. Similarly, satisfaction with medical verification on social media is low, with 29 respondents (58%) dissatisfied, 16 (32%) neutral, and just 5 (10%) very satisfied. After following online health advice, 25 respondents (50%) expressed dissatisfaction, 18 (36%) remained neutral, and only 7 (14%) were very satisfied, suggesting that outcomes may not meet expectations. Satisfaction with risk warnings in online health content is particularly low, as 30 respondents (60%) reported dissatisfaction, 16 (32%) were neutral, and only 4 (8%) were very satisfied. Concerning the honesty of social media creators about health risks, 28 respondents (56%) were dissatisfied, while 16 (32%) were neutral and 6 (12%) very satisfied. Lastly, when asked whether health content matches real medical advice, 29 respondents (58%) expressed dissatisfaction, 17 (34%) were neutral, and only 4 (8%) were very satisfied. Overall, based on the number of votes, dissatisfaction outweighs satisfaction across all categories, indicating that most respondents are not fully confident in the reliability, transparency, and medical accuracy of online health content.

Table-4: Influence of social media health misinformation

Particulars	Very High		High		Low	
	N	%	N	%	N	%
Extent to which young people follow online health trends blindly	21	42	15	30	13	26
Perceived health risks due to misinformation	13	26	15	30	22	44
Influence of influencers on health behavior	16	32	17	34	17	34
Influence on trying unverified health remedies	14	28	11	22	25	50

Overall impact of health misinformation on young people's health	15	30	17	34	18	36
Total	50	100	50	100	50	100

Source: Primary data

Interpretation:

The findings of this table indicate that a significant number of respondents perceive social media health misinformation as having a noticeable influence. Regarding the extent to which young people follow online health trends blindly, 21 respondents (42%) rated the influence as very high and 15 (30%) as high, while 13 (26%) considered it low, indicating that a majority believe blind following is common. In terms of perceived health risks due to misinformation, 13 respondents (26%) selected very high and 15 (30%) high, but a larger group of 22 (44%) rated it low, suggesting mixed opinions about the seriousness of risks. When examining the influence of influencers on health behavior, 16 respondents (32%) rated it very high and 17 (34%) high, compared to 17 (34%) low, showing that many acknowledge influencers' strong impact. For trying unverified health remedies, 14 respondents (28%) indicated very high influence and 11 (22%) high, whereas 25 (50%) reported low influence, meaning half of the respondents believe such influence is limited. Finally, concerning the overall impact of health misinformation on young people's health, 15 respondents (30%) rated it very high and 17 (34%) high, while 18 (36%) rated it low. Overall, based on the number of votes, the data reveal that a considerable proportion of respondents recognize a high or very high influence of social media health misinformation, particularly in shaping behavior and encouraging blind following of trends, although opinions remain divided in some areas.

III. FINDINGS

1. Social media is the main and most frequently used source of health information among young people.
2. Social media influencers have a significant impact on youths' health attitudes and decision-making.
3. A notable number of respondents reported experiencing negative or adverse health effects after following online health advice.
4. Awareness about the need for medical or expert verification of online health information is relatively low among respondents.

5. Many respondents demonstrate only a moderate ability to differentiate between accurate and misleading health information.

IV. LIMITATIONS OF THE STUDY

The results of this qualitative research study cannot be generalized because of the small sample size. Research was conducted within a specific geographical and, limiting broader applicability. Data were collected through self-reported questionnaires, which may be affected by response bias. The study relies on respondent's perceptions and experiences, which may not always reflect actual health outcomes. Rapid changes in social media algorithms and content trends may affect the relevance of findings over time. The study does not examine platform-specific differences in misinformation exposure. Due to these constraints, the findings cannot be generalized to all young people and should be interpreted with caution.

V. SUGGESTIONS

Social media platforms should mandate medical or expert verification for health related content. Digital health literacy programs should be introduces in educational institutions to help young people critically evaluate online health information. Clear regulatory guidelines should be enforced for influencers promotion health products or advice. Young people should be encouraged to consult qualified healthcare professionals before adopting online health recommendations. Warning and disclaimers should be prominently displays on unverified health content. Collaboration between public health authorities and social media platforms should be strengthened to curb misinformation.

VI. CONCLUSION

The study concludes that health misinformation social media poses significant risks to young people's health by strongly influencing their health-related decisions in the absence of proper medical verification. The prominent role on influencers, low awareness of expert validation, and moderate ability to identify misleading content contribute to unsafe health practices. These findings emphasize the urgent need for improved digital health literacy, stricter regulation of online health content, and greater accountability of social media platforms to protect young people from the harmful effects of health misinformation.

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