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Making sense of evolving health information: Navigating uncertainty in everyday life

by

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ABSTRACT

While evidence-based practice and knowledge translation (or transfer) has garnered much attention, research has not focused on health information as provisional and emergent, and on knowledge translation (KT) as a process of social construction. The challenge of evolving information is magnified within everyday life contexts where informal and formal sources mediate health information. This qualitative study explores the experiences of women as they respond to and make sense of uncertain health information mediated by diverse sources (including health professionals (HPs), media, internet, and intrapersonal and interpersonal sources). A medical case in which evidence is explicitly evolving – health management during the menopause transition – facilitated exploration of information use and personal health management. Using a social constructionist approach and social positioning theory, and semi-structured interviews (narrative and ‘elicitation’ approaches) with information seekers and HPs, this study draws attention to women’s complex information worlds, their engagement with information sources, their independent information seeking and interpretation, the pervasive influence of the internet, the role of intrapersonal sources, and the facilitating roles valued when women gathered information from HPs. Findings highlight the influence of the ‘symptom experience’; women’s desire to align lived experience with perceived ‘normal’ experiences; and notions of responsibility engendered by upheavals in conventional medical knowledge. Data analyses demonstrate: construction of menopause-related information was influenced by women’s construction of evidence as research, material object,
negotiated belief, and lived experience; women positioned themselves as
autonomous, collaborative and/or dependent information seekers and decision-
makers, and positions were influenced by context and perceived quality of
interactions with HPs; a predominant feature of health information behaviour was
complementarity, not competition or displacement; and social contexts were
critical to knowledge construction. Findings raise new considerations related to
KT as an on-going, personal process of social construction, and the contribution
of interdisciplinary research: theory from Library and Information Science
facilitated investigation of information sources and behaviour, positioning theory
brought focus to relational elements, and the Promoting Action on Research
Implementation in Health Services (PARIHS) framework facilitated exploration
of KT as a process shaped by evidence, context and facilitation. The study has
implications for women’s health, health literacy and shared decision-making.