ISSN (Print) : 0974-6846 ISSN (Online) : 0974-5645 DOI : 10.17485/ijst/2015/v8iS1/57433

Impact Factors Relating to Effectiveness of Health Information in Company and Public Services Workers of Urban-Rural City

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Abstract

This study was conducted, based on a specific population group composed of company workers and public services workers residing in one of urban-rural city, to reach relating factors with utilizing health information. This study surveyed 213 company workers and public services workers residing in urban-rural city who were aged more than 20 during the period of February 5th 2007 to February 9th 2007.

Concern on health, utility of health information, challenge thoughts, funny and interesting of health information, experience of using health information, household income were significantly associated with intention to use of health information. In conclusion, we should target and consider to this results for planning projects or program on health information.

Keywords: Company Workers, Health Information, Public Services Workers

1. Introduction

One of most popular concern of people is the health. Health related industry is tremendously growing status, especially mass media deal the health information most importantly. Already health fitness center and various sports are boomed. Concern in health problems was increased from 37% in 1998 to 44% in 2002. In future, it will be more increased rapidly.

According to this trend and situation, people more need on health information. Health information also relatively increased quantitative amount of health information. And the channel of health information are multi-dimensionally widened (eg. internet, SNS, magazine, broadcasting etc.). Aquisition routes of health information were internet 49.3%, friend or neighbor 24.8%, hospital 15.9%, mass media 10% respectively¹.

The related factor of internet using for seek health information were gender (women), age group (30-40 years), higher educational attainment, and lower status of health².

This study was tried to identify a impact factors related the effects of such health-related informations and figure out the population needs, actual contact of health-related informations (e.g. health-related commercials, brochures, magazines, etc.) as well as moreover the population's needs and characteristics of desired health-related informations in the future based on a specific population group composed of company workers and public services workers residing in one of urban-rural city.

Objectives of this study were the investigation on health concern and status, and identification of relating factor with utilizing health information.

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2. Methodology

This study was performed to evaluate the health concern and status, and identification of relating factor with utilizing health information of 213 company workers and public services workers residing in one of urban-rural city from February 5 to February 9, using structured self-assessment questionnaires. A total of 6 companies were selected. Surveys which were carefully made and revised beforehand regarding health-related informations, were distributed to be filled out and were collected for analysis in all 6 companies. The survey was conducted after explaining the purpose of this study and obtaining informed consent.

Questionnaires were surveyed systematically in previous studies and developed. Major question were categorized as follows: general characteristics (gender, age, marital status, household income), challenges feeling and attitude, concern in health, health information (include characteristics of acquisition on health information), health status, utilization of health information (funny and interesting, convenience, utility, and intention to use health information) etc.

The Chi-square test, t-test, and ANOVA were applied to assess the differences between the groups. Factors with p < 0.1 or biological plausibility were selected for regression analysis to identify contributing factors.

3. Findings

3.1 Univariate Analyses

Men and Women among the objects of our survey were 57.5%, and 42.5% respectively. Distribution of score of concern on health by general characteristics and challenge feeling and attitude is shown in Table 1. Higher educational attainment group had significantly greater score on health than lower education attainment group (p<0.01).

Educational attainment and marital status had significantly different variables in experience rate of health information (p<0.01). However, educational attainment and challenge feeling and attitude showed significant difference experience rate of health information in ordinary days (p<0.05) (Table 2).

We analyzed on the component of using health information; funny and interesting, regularity, convenience and utility (Table 3). In dimension of funny and interesting, educational attainment and challenge feeling

Table 1. Score of concern on health of study population by general characteristics and challenge feeling and attitude

Variables	N(%)	Score of concern N(%) on health (mean±SD)*				
Gender						
Men	113(57.5)	3.53 ± 0.846	0.534			
Women	82(42.5)	3.45 ± 0.932				
Age(years)						
39	75(35.4)	3.47 ± 0.935	0.146			
40-49	84(41.5)	3.40 ± 0.880				
50	38(18.4)	3.74 ± 0.878				
Educational attainm	ent					
High school	92(45.3)	3.30 ± 0.861	0.002			
College	100(47.2)	3.69 ± 0.873				
Marital status						
Single	35(17.0)	3.34 ± 0.968	0.336			
Married	155(74.5)	3.55 ± 0.869				
Household income						
High	44(45.0)	3.50 ± 0.902	0.336			
Medium	87(89.0)	3.54 ± 0.833				
Low	24(24.0)	3.96 ± 0.859				
Expenditure on medical care per month						
High	52(24.5)	3.67 ± 0.923	0.820			
Medium	80(38.2)	3.58 ± 0.854				
Low	8(4.2)	3.63 ± 0.744				
Challenge feeling an	d attitude					
High	16(7.5)	3.31 ± 0.704	NA			
Medium	68(32.1)	3.37 ± 0.751				
Low	108(52.8)	3.57 ± 0.959				

^{* 5-}point Likert scale

and attitude were significant different variables (p<0.05). In dimension of regularity, challenge feeling and attitude only was significant different variables (p<0.05). However, we did identify any significant variables (Table 3).

[†] by t-test or one-way ANOVA

Table 2. Status of acquisition of health information by general characteristics, health status, and challenge feeling and attitude, and concern on health

Variables	Experience rate of health information per month	p-value*	Experience rate of health information in common days	p-value*	
Gender					
Men	57(28.8%)	0.756	38(20.3%)	0.613	
Women	43(21.7%)		25(13.4%)		
Age(years)					
39	40(20.1%)	0.707	19(10.1%)	0.438	
10-49	41(20.6%)		31(16.4%)		
50	19(9.5%)		13(6.9%)		
Educational attainme	nt				
High school	37(19.0%)	0.001	24(13.1%)	0.023	
College	63(32.3%)		39(21.3%)		
Marital status					
Single	27(13.9%)	0.008	11(6.0%)	0.875	
Married	72(37.1%)		50(27.2%)		
Household income					
High	27(17.3%)	0.414	12(8.1%)	0.312	
Medium	45(28.8%)		33(22.3%)		
Low	15(9.6%)		11(19.6%)		
Expenditure on medic	cal care per month				
High	33(23.4%)	0.403	19(14.3%)	0.855	
Medium	45(31.9%)		30(22.6%)		
Low	4(2.8%)		2(1.5%)		
Challenge feeling and	attitude				
High	8(4.1%)	0.449	2(1.1%)	0.009	
Medium	29(15.0%)		17(9.3%)		
Low	61(31.6%)		45(24.6%)		

^{*}by chi-square test

3.2 Multiple Regression Analysis

Beta and p-value of contributing factors calculated for factors relating to intention to use of health information are shown in Table 4. Concern on health, utility of health information challenge feeling and attitude, funny and interesting of health information, experience of using health information, household income were significantly associated with intention to use of health information (Table 4).

4. Discussion and Conclusion

The scopes of health information are expanding trend due to socioeconomic development. Recently, more positive healthy behaviuor like physical activity, leisure time activity, and healthy lifestyle are popular in Korean peoples. So health related advertising and information are increasing.

Consumer should investigate new health information for health promotion and disease prevention, and

Table 3. Evaluation on the component of using health information by general characteristics, health status, and challenge feeling and attitude, and concern on health

	Component of using health information							
Variables	Funny and interesting	p-value*	Regularity	p-value*	Convenience	p-value*	Utility	p-value*
Gender								
Men	1.81±0.73	0.447	1.93±0.80	0.769	2.15 ± 0.95	0.367	2.26±0.90	0.579
Women	1.73±0.69		1.96±0.77		2.03 ± 0.94		2.19±0.79	
Age(years)								
39	1.63±0.57	0.163	1.99±0.83	0.836	2.25 ± 0.99	0.197	2.26±0.81	0.935
40-49	1.89±0.86		1.92±0.82		1.98 ± 0.90		2.22±0.90	
50	1.81±0.57		1.92±0.65		2.09 ± 0.91		2.22±0.87	
Educational atta	ainment							
High school	1.90±0.67	0.013	1.87±0.75	0.218	2.10 ± 0.86	0.876	2.32±0.81	0.141
College	1.65±0.77		2.01±0.83		2.12 ± 1.01		2.14±0.87	
Marital status								
Single	1.58±0.55	0.192	1.92±0.73	0.964	2.28 ± 1.09	0.417	2.25±0.87	0.447
Married	1.82±0.75		1.95±0.81		2.06 ± 0.91		2.22±0.85	
Household inco	ome							
High	1.63±0.54	0.082	1.90±0.73	0.149	2.29 ± 1.02	0.360	2.31±0.98	0.496
Medium	1.88 ± 0.84		2.09±0.86		2.09 ± 0.87		2.24±0.81	
Low	1.58±0.50		1.75±0.79		1.96 ± 1.08		2.04±0.93	
Expenditure on	medical care per	r month						
High	1.63±0.56	0.331	1.98 ± 0.84	0.424	2.18 ± 0.98	0.840	2.35±0.72	0.245
Medium	1.82±0.81		2.05±0.86		2.11 ± 0.89		2.11±0.90	
Low	1.67±0.71		1.67±0.71		2.00 ± 0.87		2.00±0.76	
Challenge feelin	ng and attitude							
High	2.07±0.80	0.040	2.00±0.85	0.022	2.47 ± 0.92	0.054	2.79±0.89	NA
Medium	1.89±0.73		2.14±0.88		2.22±0.91		2.56±0.84	
Low	1.68±0.68		1.81±0.67		1.96±0.90		1.98±0.78	

^{*} by t-test or one-way ANOVA

acquisite new technology and skill. These are common characteristics in consumer who oriented to behavioural pattern and explore adequate information.

Cause of non-contact of health-related information is occupied and acknowledge. Measure of gain of information is that internet, TV/Radio program is most common. There are factors that are marriage state, health status, challenge thought affected use intention. In the large, health-related information is wanted that income level, health status, challenge consciousness, health-relate concern, fun of information, utility of life is related. multiple

regression analysis, putting general characteristics (age, sex) and health status, socioeconomic status, education level, health insurance, fun of information, utility of life factors as a dependent variable. As a result of analysis, health information gaining pathway was significantly influenced by lifestyle, age, education levels.

Summarized result of this study, educational attainment and challenge thought were significant variable in acquisition of health information.

Most of previous studies showed women pursue more than men. This result can be from women's

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	В	SE	β	p-value			
Concern on health	-0.215	0.052	-0.280	0.000			
Utility of health information	0.187	0.052	0.254	0.000			
Challenge feeling and attitude	-0.219	0.073	-0.211	0.003			
Funny and interesting of health information	0.178	0.064	0.196	0.006			
Experience of using health information	0.233	0.093	0.175	0.013			
Household income	-0.173	0.086	-0.159	0.047			
Expenditure on medical care per month	-0.024	0.098	-0.020	0.809			
Convenience of health information	0.072	0.051	0.102	0.161			

Table 4. Impact factors relating to intention to use of health Information by regression analysis

preventive health behaviuor, humanitarian view point, and knowledge of health, and responsibility for family members3. However, our result showed no significant difference. It may be due to difference of race and other characteristics.

Consumer who had more knowledge on health information use more health information. More easer get health information will facilitate consumer capacity, and increase market share in healthy food. Thereafter, we can conclude that consumers who get more health information can have high motivation of preventive health.

Concern to health is significant variable in utilization of health information in previous studies. Acquisition on health information is important in determining process for getting health items. It would be deterministic role for attitude formation that effect purchase behaviuor. Thereafter right acquisition of health information will most important in preventive health behaviuor.

The result of intention to use of health Information controlling with various fixed variables, concern on health, utility of health information, challenge feeling and attitude, funny and interesting of health information, experience of using health information, household income were significantly associated factors. This result means important implication on practical utility and funny and interesting of health information.

This study has some limitations. Our study population was in limited person and area of one urban-rural city of Korea. Also, this study has methodological limitation of questionnaire survey. However, it was a preliminary study in the study precludes definitive conclusions on impact factors related the effects of such health-related informations. We would like to recommend exploring this study's objectives for further research.

In conclusion, we should target and consider to concern on health, utility of health information challenge feeling and attitude, funny and interesting of health information, experience of using health information, household income in planning projects or program on health information.

5. Acknowledgement

This work was supported by Konyang University Myunggok Research Fund of 2011

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^{*} household income status; low=1, medium=2, high=3, Expenditure on medical care per month; low=1, medium=2, high=3, Challenge feeling and attitude; low=1, medium=2, high=3