First author,	General Internet use	Health-related Internet	use	
year				
	Prevalence	Prevalence	Purpose	Characteristics (Associated factors and perceptions)
Manganello et al, 2016 [1]	 28% use a computer daily 77% use a computer a few times a week 37% did not have Internet access at home 		 7% use Internet often for health information 14% use Internet to get a question answered 	 Associated factors: youth with low health literacy less likely to prefer general Internet use and more likely to need help understanding health information obtained on their own (low health literacy group [65%] > adequate health literacy group [35%]) 43%: Internet is the most helpful in providing health information among different media sources 58%: able to understand the health information they get from the Internet and media sources 33%: Internet is sometimes accurate 24%: Internet is usually or often accurate (those with low health literacy rated Internet more accurate than those with high health literacy)
Johnson et al, 2015 [2]	-	 91.9% more than 5 min/day for health related Internet use (HRIU) 69.4% more than 30 min/day for HRIU 36.6% more than 1 hour/day for HRIU 	 Information on exercise (87.3%), nutrition (83.6%), and other health topics not related to arthritis (70.1%), mental health issues (50.7%), puberty (43.2%), sexual health (42.5%), drug use (27.6%), bullying (23.9%), and tobacco use (20.1%) Instant messaging or chatting with same disease (85.0%) Online forum (94.0%) 	 Associated factors: low psychosocial quality of life 74.5%% prefer online support group to in-person support groups 91% interested in using a website that is just for teens with arthritis

			Building personal profiles and networking		
			(87.3%)		
Wetterlin et	-	-	• Information (symptoms [52.4%], treatment	•	Likelihood of visiting Web-based mental health
al, 2014 [3]			options [47.4%], Web-based questionnaires or		resources during a difficult time in life: 82.9%
			assessment tests [23.8%], prevalence rates		information-based website with mainly text, 76.8%
			[17.3%], peer support [13.1%], and other [2.5%])		social media websites
			• Seeking help for their feelings	•	Likelihood of contacting human within a Web-based
					mental health resource: 83.9% online professional (eg,
					therapist or coach)
				•	87.7% reported that online privacy is very important
				•	10.9% accessed to the recommended websites
				•	10.6% used social media (eg, Facebook and MySpace)
					for help seeking with problems such as anxiety or
					depression
				•	Important features: description of interventions and
					treatments, evidence-based information, local
					resources, self-guided Web-based interventions, self-
					help information and tools, quizzes and tools to help
					asses mode and behavior, pictures and videos to help
					explain topics
Fergie et al,	-	-	Information (including psychosocial health	•	Perceived disadvantage of health content online:
2013 [4]			information by peers)		likelihood of unreliable information
			• Support (connecting and creating supportive	•	Perceived advantages for health-related content
			communities on particular health issues)		online: relatable user-generated content (experiential
					knowledge), anonymity, diverse views
				•	Different strategies are used to evaluating factual and
					social media websites
Henderson et	• 82.8%=1-4	-	Information (eg, sports injuries, medical	•	13.3% = HRIU related to pain management
al, 2013 [5]	hours/day		information, flu strains, chronic illness, general	•	Facilitator: gender (girls > boys)

						health, asthma, sexual health, and fitness	•	No association related to coping skills or pain
						infections; 13.3%)		frequency
Nordfeldt et	•	10-11 years:	-		•	Information	•	A majority of the participants had never visited the
al, 2013 [6]		about 30			•	Communicating and support (finding friends,		demonstrated websites before
		min/day				including healthy youth	•	Aspects of security: expressed importance of
	•	14-15 years:			•	Writing and sharing with others		impression, checking who's behind the website,
		several						sharing information cautiously (value with integrity
		hours/day						and anonymity)
	•	16-17 years,					•	Updating new value (current, recent events), facts
		boys: less than 1						(verifiable information), and eye-catching design to the
		hour/day						sites is important
	•	16-17 years,					•	Plainness (clear content and layout) is important
		girls: several					•	Prefer open access sites
		hours/day						
Neumark et al,	•	97% of Jews:	•	52.1%=reported	•	Information (most popular topic for search: both	•	On average, 1 hour per week more online than those
2013 [7]		home access		having sought		gender-fitness or exercise (67-81%); Girls-diet		who did not seek health information online
	•	89% of Arabs:		online health		or nutrition or eating disorder, sexual function or	•	Likelihood of HRIU: Arab students (63%), Jews (48%)
		home access		information in the		menstruation or sexuality; Boys-contraception or	•	Trust in online health information: high 15%, moderate
	•	Jewish: spent		past year		pregnancy, alcohol or cigarettes or drugs)		68.2%, low 16.8%)
		17.9 hours/week					•	Perceived Internet skill levels: high 37%, moderate
	•	Arab: 14.8						36.9%, low 26.1%
		hours/week					•	Associated factors: grade (high school > middle
								school); level of trust in online health information,
								level of Internet skills, having discussed health or
								medical issues with a health care provider (HCP) in the
								past year, school performance, having consumed
								alcohol in the past year, and self-assessed health (in
								Arab students: those who rated their health as average
								are more likely to have HRIU than those in good
								health; No association with parental education)

							•	Reasons for not seeking online health information:
								preference to receive information from a health
								professional, lack of interest, lack of trust, insufficient
								English proficiency, lack of time and privacy, limited
								access, expense, and insufficient Internet skills
Stephens et al,	•	64% daily users	•	8% (use Internet	•	Information	•	Main sources of information: HCPs (84%), peers
2013 [8]	•	26% once or		for orthodontic-				(66%), parents (60%), leaflets (64%), Internet (8%)
		twice a week		related			•	Preferences for sources of information: orthodontist
	•	92% use for		information)				(84%), family (12%), general dentist (10%), digital
		homework	•	3% had seen a				versatile disc (10%), and readings leaflets (10%)
	•	76% use for		phone app about				
		social		orthodontics				
		networking						
Gaskin et al,	•	97% at least			•	Information	•	90% believe access to health information on a website
2012 [9]		once a month						is useful
	•	87% weekly use					•	Want access to medications (92%), immunizations
	•	65% most						(90%), and sexually transmitted infections (STIs)
		common means						testing results (80%)
		to use Internet is					•	Would share information with doctors (100%), parents
		personal						(52%), or significant others (4%)
		computer or					•	85% have no concerns about the privacy of their health
		laptops						information online on password-protected sites
	•	42% access by					•	No association relayed to race
		cell phones or						
		other mobile						
		devices						
Magee et al,	-		•	75% online	•	Information about STIs or human	•	Associated factor: fear about being infected with STIs
2012 [10]				searches for sexual		immunodeficiency virus (HIV; 72%), preventive		or HIV
				health information		practices to reduce the risk of transmission of STIs		
				as common activity		(34%), specific agencies and locations for		

			obtaining sexual health testing and/or treatment	• Prefer websites that offer comprehensive sexual health
			(22%), condoms or dental dams (19%), mechanics	information (include preventive care, emotional and
			of sexual behaviors or pleasure (13%),	relationship elements)
			relationship advice (13%), etc	• Reasons for not accessing sexual health information
				online: a sense of low personal relevance or disinterest
				(31%), fear of stigma (19%), mistrust of online
				information (16%)
				• Suggestions to improve online information: website
				content, technical details, social connection, and
				lesbian, gay, bisexual, and transgender-specific
				suggestions
Ghaddar et a	ıl, -	• 81% had checked	• Information	• 56% heard of Medline Plus (Facilitator: enrolled on
2012 [11]		health information		campuses promoting careers in the health care field,
		online		11th graders >9th or 10th, exposure to a health course,
		• 71% very likely to		higher use of HRIU, need an interpreter to
		search the Internet		communicate between a family member and an HCP
		for information on		• Associated factors for higher electronic health literacy
		health		level: exposure to a health course, online health
		• 59% sought health		information seeking, exposure to MedlinePlus, parents'
		information for		need for interpreter to communicate with HCPs, upper
		family's health		grade, financial status higher health-related self-
		online		efficacy, and ethnicity (non-Hispanic)
Selkie et al,	• 96.6% maintain	-	Information (Topics interested in: pregnancy	• Want sexual health education to be easily accessible,
2011 [12]	a personal social		prevention, sexually transmitted infection, and	understandable, and user-friendly
	networking site		relationships)	• Want sexual health resources to be trustworthy,
	(SNS) profile			credible, and confidential
	(SNS) profile (93.1%			credible, and confidentialWant information offered in a nonthreatening way
	(SNS) profile (93.1% Facebook,			credible, and confidentialWant information offered in a nonthreatening wayUse different sources (HCPs or youth) depending on
	(SNS) profile (93.1% Facebook, 89.7% MySpace,			 credible, and confidential Want information offered in a nonthreatening way Use different sources (HCPs or youth) depending on topic

	MyYearboo	k,		•	• Want more information on in-person resources and
	Tagged, and				local clinics
	Bebo)				
Barman-	• 54.4% daily	user •	40.7% ever looked	• Information (61%: general health information,	• Associated factors: daily Internet use, personal Internet
Adhikari et al,			online for sex	47%: information about HIV or other STIs, 40%:	access, receive email forwards about health-related
2011 [13]			information	information about sex or sexuality, 23% locate	information, connected with parents (more likely to
		•	47.3% ever looked	HIV testing services	seek HIV or STI information, HIV testing information,
			online for HIV or		sex information, and general health information).
			STI information		• Associated factors: gender (males > females: sexual
		•	23.3% ever looked		information), race or ethnicity (AA <ca), frequency="" of<="" td=""></ca),>
			online for HIV		HRIU; involvement in online social sites; personal
			testing information		Internet access (more likely to seek HIV or STI
					information)
Mustanski et	• 77% daily u	ser •	100% ever used	• Information (finding sexual health information	• Associated factors: race or ethnicity (whites use
al, 2011 [14]	• 15% at most	t	the Internet to find	online: HIV or acquired immunodeficiency	Internet more often generally and for health-related
	multiweek		health information	syndrome [AIDS]-88%, prevention, skills, and	purpose than blacks and Latinos after controlling for
	Internet use	•	88% used the	sexual health needs for men who have sex with	age and education) and gender (controlling for age,
			Internet to find	men [MSM]),	education, and ethnicity, gay and bisexual)
			HIV or STI-related	• Support: minority identity development and self-	• men reported significantly more frequent Internet use
			information	acceptance (connecting to the gay community),	for general use and health-related purpose)
				sexual behavior with partners met online (facilitate	• Strategies to determine the accuracy of the
				safer sex discussion and screening)	information: website "WebMD," cross checking across
					multiple websites and information provided on
					university of government website perceived as reliable
Rushing et al,	• 73% 30 or n	nore •	76% used the	• Information (diet, nutrition, exercise, or fitness	• Associated factors: gender (female > male); age (16-18
2011 [15]	min per day	(of	Internet to get	[50%]; specific illnesses or medical conditions	years > 13-15 years)
	which 25%	1-2	information on a	[47%; drugs or alcohol [42%]; sexual health,	• Want a health and wellness website that contains a
	hours of use	/day)	health topic	sexually transmitted diseases [STDs] or HIV	broad spectrum of topics such as physical fitness and
	• 75% daily u	sers •	40% searched	[32%]; depression, anxiety, stress, or suicide	exercise (57%), drug and alcohol use (50%), nutrition
			online for a sexual	[32%])	(46%), stress (42%), and traditional methods of
1	1	1			

	•	50% home		health topic in the				American Indian (AI) or American native (AN) healing
		access		past				(30%)
	•	47% school					•	Prefer accessing websites on sexual health information
	•	36% mobile						that contain broad spectrum of topic relevant to youth
	•	SNS: having						(ie, current events, health and wellness, social-
		profiles: My						relational issues, and academic topics) compared with
		Space or						those that only cover information on sexual health
		Facebook					•	Pictures, videos, interactive "ask the experts"
		[87%])						components, music or audio are attractive multimedia
								design features, and AI or AN relevant graphics,
								symbols, and designs are most comfortable features on
								health and wellness Web pages
Buhi et al,	•	88.2% use	•	65% Internet is the	•	Information (topics that they have used the	•	35.5% sexual information from a physician
2009 [16]		"several times a		predominant		Internet for: STI including HIV (70.6%), male or	•	32.4% sexual information from relatives
		day"		source for seeking		female genital (58.8%), preventing pregnancy	•	32.4% sexual information from friends
				health-related		(52.9%), contraceptives (50%), normal sexual	•	63% reassured they could make appropriate health care
				information		behavior (44.1%), abortion (44.1%), prescription		decisions
			•	Topics for HRIU:		drugs and sexual health (41.2%), alcohol and/or	•	48.1% relieved or comforted by the information online
				sexual health		illicit drug use and sexual health (41.2%), drug-	•	44.4% confused by the information
				education (76.5%);		facilitated rape (38.2%), and sexual as sault and/or	•	33.3% eager to share the information
				specific diseases or		rape (35.3%))	•	29.6% confident in raising new questions or concerns
				medical problems			•	25.9% frustrated by lack of information or inability to
				(73.5%); medical				find information needed
				treatments or			•	18.5% overwhelmed by the amount of the information
				procedures			•	51.9% never or hardly ever check the date of the last
				(73.5%); diet,				update or review by a medical professional
				nutrition, vitamin,			•	Search engines: Google (94.1%), Yahoo, and Ask
				or nutritional			•	26.5% followed "sponsored link"
				supplements	ł		•	79.3% followed the first three search results
				(70.6%);	ł			
				depression,				

		anxiety, stress, or		•	Most challenging search topic identified as locational
		mental health			information for specific local clinics
		issues (64.7%);		•	Wikipedia: source of credible sexual health
		environmental			information
		health hazards			
		(55.9%); problems			
		with drugs or			
		alcohol (47.1%);			
		experimental			
		treatments or			
		medicines (47.1%);			
		alternative			
		treatments or			
		medicine (47.1%);			
		particular doctor or			
		hospital (44.1%);			
		and Medicare or			
		Medicaid (20.6%)			
Tercyak et al,	• High level of			•	Moderate level of willingness to engage in electronic
2009 [17]	access to				health (eHealth) promotion
	technology			•	<20% showed no willingness to engage in any eHealth
	(>95%)				promotion activity
				•	Multiple behavioral risk factors (smoking, physical
					activity, sun protection, and depression) associated
					with willingness to use technology for health
					promotion
				•	No association between access to technology and
					willingness for eHealth literacy engagement
Ybarra et al,	-	-	• Information (related to health and disease, HIV or	•	Associated factors: age (15-18 years > 12-14 years)
2008 [18]			AIDS, and sexual health)		

				•	Sources of health information: parents or other adults
					(81%), Internet (38%)
				•	When asked if the Internet was free to use, HIV or
					AIDS (66%), alcohol and drug issues (24%), and
					depression and suicide (16%) would be searched
Nwagwu,	• 73.1%=ever		• Information (topics included STD, HIV or AIDS,	•	Associated factors: Inschool or out of school (In-school
2007 [19]	used the Internet		diet or nutrition, fitness or exercise, sexual		youth are more capable of finding information online)
	(Home access: in		activities, pregnancy, drug abuse, and sexual	•	Main source of health information for in-school girls:
	school (43.9%),		abuse)		parents (66.2%) and teachers (56.2%)
	out of school			•	Main source of health information for out-of-school
	(5.6%)				girls: friends (63.1%) and the Internet (55.2%)
				•	More out-of-school than in-school girls use the Internet
					to obtain information about their reproductive health
				•	Main reasons for HRIU: privacy, relative information,
					unrestricted access, lack of alternatives, variety of
					information, and ease of access
Abbreviations	: AIDS, acquired immu	unodeficiency syndrome;	; d, day; HIV, human immunodeficiency virus; HRIU,	heal	th-related Internet use; hr, hour; hrs, hours; LGBT,
lesbian, gay, t	bisexual, and transgende	r; min, minutes; mo, mo	nth; r/t, related to; MSM, men who have sex with men; S	SNS	, social networking sites; STD, sexually transmitted
disease; STI,	sexually transmitted info	ections; wk, week; yrs, y	ears.		

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