



Information Seeking Behaviour of Elderly Persons in a Pandemic: Lessons from a Developing Country

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Abstract

Historically, pandemics have been notorious for their adverse effects on humans. One of the foremost steps in dealing with these adverse effects is timely access to adequate and reliable information on the pandemic. There is overwhelming evidence that ties information-seeking behaviour with access to relevant and timely information. Yet, there are sketchy studies on the information-seeking behaviour and access to relevant information on the COVID-19 pandemic. The situation is much more alarming when older persons, who are more susceptible to the virus are brought into perspective, especially those in developing countries. Undeniably, there is a significant gap between the health support systems in developing countries and that of developed countries. This creates a corresponding discrepancy between health information-seeking behaviour among these countries. This study examined the effect of the information-seeking behaviour of older persons on the confidence of surviving the pandemic in a developing country. The study adopted a quantitative approach. The purposive sampling technique was used to sample 100 respondents for the study. Descriptive statistics, Pearson's Correlation and multiple regression were used to analyze the data. The findings of the study revealed that there is a significant relationship between older persons' need for information and confidence in surviving the pandemic. The findings of the study also found that there is a significant relationship between an older person's source of information and confidence in surviving the pandemic. In addition, the findings of the study showed that there is a significant relationship between older person's information validation and confidence in surviving the pandemic. The study therefore recommended that there is a need for government and other related agencies to ensure that older people are equipped with the necessary information on the COVID-19 pandemic.

Keywords: Information-Seeking Behaviour, Pandemic, COVID-19, Pearson's Correlation.

Introduction

Research has indicated that information is critical to the survival of humanity. This is even more critical as far as health information is concerned. Health information help reduce anxiety associated with a particular health problem (Ellis, Mullan, Worsley & Pai, 2012). Again, research has indicated that having authentic news about a challenging situation helps to significantly reduce the anxiety associated with that particular challenge. According to Medlock,

Eslami, Askari, Arts, Sent, De Rooij and Abu-Hanna (2015), having information on health-related issues empower people to have control and confidence about their health issues. It also helps to in improving the quality of health care as well as ensure the continuity of health care. Health information also creates a situation whereby people with health problems can involve themselves fully in decision-making about their health and this create the opportunity for them to seek healthcare (Raj, Sharma, Singh & Goel, 2015).

In this regard, scholars have put in an effort in carrying out studies trying to understand the reasons why people seek information, how they seek information and the factors influencing their information-seeking behaviour (Fasola & Olabode, 2013).

According to Case and Given (2016), for people to be able to properly carry out their day-to-day activities, there is a need for them to seek for the appropriate information to enable make strategic decisions. These decisions are mostly centered on family, business, career, health and people's lives in general. This suggests that people must strive to get information that will enhance their activities in one way or the other (Gudeta, Lemma & Ndemo, 2021). Since people come from different backgrounds, they most often have different ways of seeking for information and this determines the kind of behaviour they will exhibit when seeking the information. In this regard, Kakai, Ikoja-Odong and Kigongo-Bukenya (2004) defined information-seeking behavior as "an individual's way and manner of sourcing and gathering information for personal use, knowledge updating and development." Information-seeking behaviour is "an individual's way and manner of gathering information for personal use and updating knowledge."

Since a similar catastrophe was experienced in 1918, the whole world is experiencing another very serious pandemic caused by "severe acute respiratory syndrome coronavirus-2" (SARS-CoV-2) (Spinelli & Pellino, 2020). The name for this pandemic is commonly known as COVID-19. The first city to experience this pandemic was Wuhan which is in the Hubei province in China. On the 11th of March 2020, World Health Organization declared COVID-19 a global pandemic that triggered global anxiety in different aspects of life. By six months down the line, (i.e September 2020) the world had suffered about 1,016,080 confirmed deaths and over 34,061,139 confirmed cases of the pandemic (John Hopkins University, 2020). Most governments across the world took steps to institute the highest degree of preparedness and adopt strategic methods of containing the spread of the pandemic (Ruetzler, Szarpak, Filipiak, Ladny & Smereka, 2020). Some of the measures adopted by governments to contain the spread include; wide-scale COVID-19 awareness campaigns, quarantine protocols, the mandatory wearing of nose masks and lockdown measures. Hence, measures like the closure of schools, workplaces, restaurants, beaches, etc. critically restricted access to information on the pandemic from diverse sources (McCarthy, Potts & Fisher, 2021)). Most people were

relying on traditional and social media for most information on the pandemic. In uncertainty, people were constantly getting updates about the pandemic on electronic and social media for health management. The kind of news the people are mostly exposed to has a direct implication on the people's actions concerning their health. Authorities are therefore raising concerns on how to investigate multiple information emanating from social media and other electronic media to reduce the risk of peddling false news about the pandemic.

The COVID-19 pandemic has impacted negatively on the global economy. The pandemic affected all the age groups. However, older people were more affected as compared to other age groups. This resulted in world bodies such as World Health Organisation (WHO) adopting strategies to provide people with information on the COVID-19 pandemic to help them change their behaviour (Nicola, Sohrabi, Mathew, Kerwan, Al-Jabir, Griffin & Agha, 2020). Most of the information also tried to demystify the misconceptions held by numerous people across the globe. This was because, it was realized that most of the misinformation about the pandemic has the potential to influence people in a negative light which could have dire consequences on their lives if appropriate authorities failed to counter the disinformation (Galhardi, Freire, Minayo & Fagundes, 2020). According to Van Der Linden, Roozenbeek & Compton (2020), the news of the COVID-19 pandemic was spreading faster than the virus itself which necessitated that people be provided with the necessary information to avoid contracting the virus.

According to Superio, Anderson, Oducado, Luceño, Palcullo and Bendalian (2021), due to the dangerous nature of the COVID-19 pandemic, people began searching for information about the pandemic. This became a global situation and the pandemic managed to find its way to almost every country. People wanted to want information on how they could fight the pandemic (Vrdelja, Vrbovšek, Klopčič, Dadaczynski & Okan, 2021). Moscadelli, Albora, Biamonte, Giorgetti, Innocenzio, Paoli and Bonaccorsi (2020) were of the view that news from authentic sources helped to reduce people's concerns and anxiety, especially, when people were fed with a lot of fake news about the pandemic. This is because fake news was one of the sources that created fear and panic among the populace in both developing and developed countries. Hartley and Vu (2020) also were of the view that people getting thorough information about the COVID-19 pandemic helped many people

to observe WHO and country-specific protocols to prevent themselves from contracting the coronavirus disease.

However, Kostagiolas, Tsiligros, Theodorou, Tentolouris and Niakas (2020) were of the view that how people seek information is equally important as the information itself. According to Boyce, Harun, Prybutok and Prybutok (2021), how people went about searching for COVID-19 pandemic information was important. This is because adopting appropriate behaviour to search for information is critical in getting and using the information. Health information-seeking behaviour has been described as searching, finding and using information related to diseases (Schoenherr & Thomson, 2020). In relation, Kim and Park (2013) defined health information-seeking behaviour as "seeking meaningful information from different sources for better awareness and health literacy promotion to managing one's health." Soleymani, M. R., Esmailzadeh, M., Taghipour & Ashrafi-rizi (2021) were of the view that many factors affect people's information-seeking behaviour. For instance, they indicated that factors such as the environment and people's demographic characteristics may affect their information-seeking behaviour. Studies on information seeking have revealed that most people search for information about their health using diverse situations and adopting several forms of information resources. In doing, this they normally encounter several obstacles and problems.

The Problem

The COVID-19 pandemic which was first reported in Wuhan in China surprised the globe due to how the virus spread to almost every corner of the globe. The pandemic resulted in many deaths, especially, among older people. This created much fear and panic across the globe due to the rate at which the pandemic continues to claim the lives of many. According to Igbinovia, Okuonghae and Adebayo (2020), a lot of fake news began springing from different quarters. Some of the fake news claim that the COVID-19 pandemic did not exist. The pandemic has claimed the life of many. People of different age groups have not been spared by the pandemic as deaths have been reported across all age groups. It has been reported that the COVID-19 pandemic has resulted in more death in adults as compared to the other age groups. The pandemic has claimed more than 480,000 of those who have reached 65 years and above (CNN Health, 2021). This is an indication that the deaths

reported among older people is highly significant.

The COVID-19 pandemic arrived in Ghana in March 2020 where two cases were reported through the Ministry of Health. The situation escalated which gave rise to the government adopting restriction measures to prevent the virus from spreading further. Currently, in Ghana, COVID-19 cases is reported to be over 129,592 cases and the number of COVID-19 deaths stands at 1,169 (Ministry of Health, 2021). According to Brooke and Jackson (2020), with the number of reported COVID-19 deaths, the death among older people are high as compared to younger persons. To support the above assertion Lloyd-Sherlock, Ebrahim, Geffen and McKee (2020) also indicated that the risks of COVID-19 deaths increase with age and most of the deaths happened among persons older than 60, particularly among people who are suffering from chronic diseases such as cardiovascular disease. Research has also indicated that older people in developing countries with low income mostly have inadequate knowledge about the benefits of seeking health information (Agyemang-Duah, Arthur-Holmes, Peprah, Adei, & Peprah, 2020). This behaviour is likely to be compound in this era of COVID-19. This study therefore, seeks to examine the health information-seeking behaviour of older persons in the COVID-19 era in the context of a developing country. Accordingly, the objective of the study is to examine the relationship between health information-seeking behaviour of older persons and confidence in surviving COVID-19 in a developing country context.

Literature Review

Health Information Seeking Behavior

People usually have specific information needs concerning their areas of interest and background such as social, health, political and academic backgrounds. It is therefore very important to know the background from which the user is seeking the information (Jacobs, Amuta & Jeon, 2017). Limited information to the user in areas like health can increase the stress level of the user whilst timely and accurate information can help such users reduce their level of anxiety (Tong, Raynor & Aslani, 2014)). Mostly, individual interests and needs lead to seeking health information from different sources (Lwoga and Mosha 2103). Sometimes the interest in filling the information gap motivates the level of information needs among health professionals. The two scenarios which trigger the information needs of an individual include gathering facts about the illness, protection, prevention, risk, and treatment which are

termed “cognitive needs” on one hand and on the other hand, to address the emotional needs of the disease which is termed as “affective needs” (Wilson, 1999). There is an increasing demand for health information among different backgrounds of people such as health professionals, patients, caregivers, parents and medical students (Kassim, 2021). Sources like diagnosis, treatments, hospital visits were among the information needs of patients and health professionals across the globe (Baumann, Jaks, Robin, Juvalta & Dratva, 2020).

According to another study, information on issues like feeding schemes, medication, financial support are very essential to caregivers of orphans and vulnerable children in Namibia (Mnubi-Mchombu & Ocholla, 2011). Sometimes due to difficulties such as lack of understanding, satisfaction and remembrance of health information received by patients and caregivers from health professionals, they tend to seek their information to adapt to the health situation (Jayasundara, 2021). Seeking the information from the right source is often difficult. This mostly leads to patients resort to elsewhere to meet their information needs when they know the health professionals cannot meet their information needs. To make an informed decision about diseases, medication, and prevention, one of the most important things to do is to seek health information. Health information-seeking behaviour also consists of getting useful information from varied sources to promote awareness and health literacy in the management of an individual’s health (Oriogu, Subair, & Oriogu-Ogbuiyi, 2017). According to Wilson (2000), psychological, demographic, environmental and resource-oriented factors are very critical in information-seeking behaviour. He therefore classifies information-seeking behaviour into active and inactive-seeking behaviours. Factors including style, credibility, usefulness and recommendation are very essential in the channel selection of health information (Onawe, C., & Okocha, 2019).

Information Sources during Crises

Most people perceive the risk involved in the case of severe and critical cases and they also predict dangerous behaviours through self-efficacy and social norms (Gutteling and Vries, 2017). According to Vigso and Oden (2016), in case an individual is threatened by a dangerous situation, the first thing they will do is to find out or do an information search about what happened and also find out whether any of their family and friends are not in any form of danger. Under crucial circumstances, an individual’s method

of information searching is influenced by factors such as media credibility, access and cost. Although the information provided by most media channels can promote preventive behaviours regarding COVID-19, meanwhile people are exhibiting serious concerns about information sourced from social media (Zhao & Zhang, 2017). However, most studies confirmed that people were using social media channels such as Telegram and Twitter as a medium for health information seeking on COVID-19 crisis than other media channels (Zhao, Fan, Basnyat & Hu, 2020). According to the findings of most studies, when people get access to credible, reliable and accurate health information, it helps to better their care capabilities and even positively affects their children, families, friends, neighbours, and the local communities (Ghazavi-Khorasgani, Ashrafi-Rizi, Mokarian & Afshar, 2018).

There are three main sources where health information can be sourced. These include controllable information sources (brochures, booklets, CDs and institutional websites), non-controllable information sources (external sources such as family members, media as well as colleagues) and partly controllable information sources such as newspapers publications, magazines and web-based sources (Veloutsou et al., 2005). Among the sources mentioned, research conducted in Tanzania mentioned that sources like radio, brochures, word of mouth from family and friends and television were very dominant (Veloutsou et al., 2005). This implies that among all the sources people rely on alternative sources of health information which include personal networks, traditional media and health care providers.

In times of health emergencies like COVID-19, effective communication is very important because the decisions people make about their health mostly depend on their perception of the health situation (Slovic, 1987). According to Lindell and Perry, (2012), the protective action decision model explained how peoples’ responses to disasters and hazards are influenced by external cues. They further explained that the model indicates how external cues like information sources affect people’s perception of threats and greatly influence people’s preventive behaviours. Another study that agrees very well with the model also indicates that vaccine uptake or information behaviour positively relates to information search when sources like health professionals and official sources of health information become the primary source of information sources but not when sources like family, friends, television, radio become the

primary sources of information to the user (Walter et al., 2012). This model therefore reflects the situation of the COVID-19 pandemic. Therefore with the increased exposure to media channels like television and radio, people manifested increased awareness and emotional reactions such as anxiety and worries about the COVID-19 pandemic (Dong and Zheng, 2020). These emotional reactions may end up triggering behaviour responses. Most studies found that there is a positive relationship between COVID-19 risk perception and protective health behaviour engagement (Bruine de Bruin & Bennett, 2020; Czaja et al., 2009; Dryhurst et al., 2020). A study also posited that protective health behaviours are mostly promoted by certain kinds of communication styles like detailed information with positive educational messages (Dai et al., 2020). Therefore these studies altogether have made it clear that accessing information is very important during times of pandemic.

In recent years, due to the ever-growing nature of technology, many people rely on the internet when it comes to information seeking because it is easier and faster to access information as compared to print media. Some more parents and caregivers are seeking information on the internet than oral medical advice from health professionals (Plantin and Daneback, 2009). Internet is the most vital source of health information in the South-Eastern USA (Reavley and John, 2011). According to AlGhamdi and Mousa (2012), health information is mostly based on the internet source which is mainly used by patients, parents and healthcare professionals. Most information on the internet is updated daily and therefore very current and unlike print media, it is faster and more convenient. This has reduced the difficulties in accessing health information resources. According to Mnubi-Mchombu and Ocholla (2011), in Namibia, the main sources of health information include the internet, mass media and print media. Therefore the most important sources of health information are the internet, mass media, family and friends and brochures.

However, one threat about information seeking is the numerous information circulating on social media which may negatively affect the mental health of older people and lead many people to embark on too many precaution measures or too few ones (Cuello-Garcia et al., 2020; Garrett, 2020; Schroyer, 2020). This situation even becomes more critical when the source of information becomes very limited reducing the diversity of the information content. Different

sources of information on the same issue may create different perspectives and different levels of detail (Czaja et al., 2009). Certain sources for information like social media are negatively related with protective health behaviour on COVID-19 and have a positive relationship with COVID-19 conspiracy beliefs, whilst other information from mainstream media like the broadcast media showed a positive relationship with protective health behaviour and a negative relationship with COVID-19 conspiracy beliefs.

Barriers to Information-Seeking Behaviour

Many users find it difficult to identify the sources of health information. Many library users lack the requisite skills in retrieving health information. Some of the information seekers do not even know how to use the information retrieval tools (Chung et al., 2011). Most users find it difficult to access health information from the library (Wald et al. 2007). According to Anker et al. (2011), there are certain challenges confronting information-seeking behaviour which include lack of time, access and skills for health information searching from the web as well as lack of commitment on the side of some library staff to assist users in identifying and retrieving information.

Hypotheses of the Study

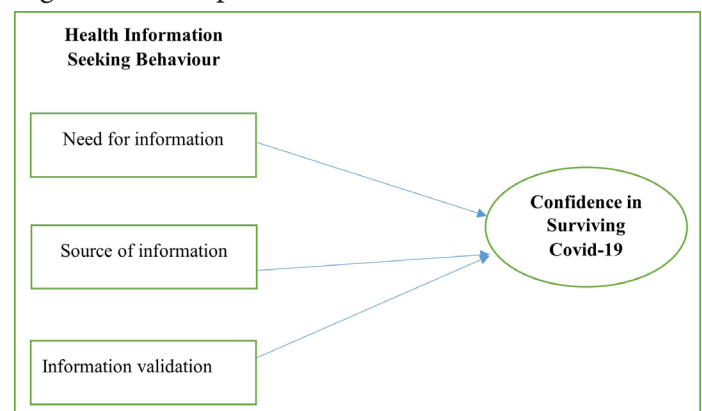
Based on the objectives of the study and the reviewed literature, the following hypotheses were formulated.

H1: Older persons' need for information has a significant relationship with confidence in surviving COVID-19.

H2: Older persons' source of information has a significant relationship with confidence in surviving COVID-19.

H3: Older persons' information validation has a significant relationship with confidence in surviving COVID-19.

Figure 1: Conceptual Framework



Methodology

A paradigm is a set of beliefs, values and techniques that form the fundamental philosophical assumptions which define what 'valid' research is and the appropriate methods that can be applied in the research (Myers & Avison, 2002). A research paradigm can also be defined as "a set of fundamental assumptions and beliefs as to how the world is perceived which then serves as a thinking framework that guides the behaviour of the researcher" (Jonker & Pennink, 2010, pg. 25). The positivism paradigm was adopted for this study. This is based on the philosophical assumptions that seek to establish the causes of a particular outcome. Again, positivism breaks down a phenomenon into segments which helps researchers to test study objectives. The positivism paradigm was also chosen because the study adopts a quantitative approach to analyzing data. Another justification for the study is that the researcher adopted questionnaires for data collection. According to Cresswell (2013) quantitative approach is considered to be a more objective approach to research and therefore its adoption for the current study will be appropriate to analyze quantitative data.

Population and Sample

The population of the study is made up of persons in the University of Ghana who are 60 years and above. Marczyk, DeMatteo and Festinger (2010: pg. 18) defined the population of a study as "all individuals of interest to a research". In this study, the individuals of interest were older persons, specifically, those 60 years and above. In all, the purposive sampling technique was used to select 100 older persons for the study. However, 130 questionnaires were distributed with which 100 completed filled questionnaires representing a response rate of 76.9%.

Data Collection Procedure and Ethical Consideration

Survey questionnaires were sent to respondents physically and through their emails. The adoption of the two approaches was because due to the busy schedule of people, locating all of them physically was not possible. Again, due to the COVID-19 pandemic, some of the respondents wanted to prevent themselves from contracting the virus and were not ready to accept the questionnaires physically. Hence, the adoption of both approaches. The purpose of the study was well explained to the respondents before questionnaires were delivered to them. Participants' privacy and confidentiality were also assured, hence,

the questionnaire was structured in such a way that their names were not solicited.

Measures

The structure of the questionnaire was in such a way that the first part contained the demographics of the respondents. Age, gender, marital status, level of education and employment status. The second part of the questionnaire contained information on health information-seeking behaviour. This variable had three sub-constructs which were: Need for information; Source of information, and information validation. The third part contained items on the confidence of surviving COVID-19.

Data Analysis

Data were analyzed using descriptive statistics, specifically frequencies and percentages. In addition, multiple regression and Pearson's Correlations with the aid of Statistical Package for Social Sciences software version 22.0 were used to analyze the hypothetical relationships. Results were represented in tables and charts.

Presentation of Results

Demographic characteristics of the Respondents
The demographic characteristics of the respondents were analyzed and this included, gender, age, marital status, academic qualification and employment status. This is shown in Table 1. The results indicated that most of the respondents were males (73%) as compared to females (27%). This perhaps suggests a male-dominated working environment. The results further suggested that the majority of the respondents feel in the 60 – 69 age group (96%). With regards to marital status, the results indicated that most of the respondents were married. This is not surprising because married is regarded as important in African cultures. The results also indicated that the majority of the respondents had a PhD (74%). This may be because the setting is an academic community and most of the respondents may be faculty members. In addition, the results indicated that the majority of the respondents were employed (77%) while 13% were self-employed.

Table 1. Demographic Characteristics of the Respondents

Detail	Frequency	Percentage (%)
Gender		
Male	73	73.0
Female	27	27.0
Age		
60-69	86	96.0
71-79	4	4.0
80 and above	-	
Marital Status		
Married	92	92.0
Single	8	8.0
Academic Qualification		
SSSCE/WASSCE	-	
Diploma	-	
Degree	7	7.0
Masters	18	18.0
PhD	73	74.0
Employment Status		
Employed	77	86.0
Self-employed	13	14.0

Pearson's Correlation

Table 2 shows the correlation matrix representing the linear relationship that exists among the variables under study. Specifically, the results indicated the correlation matrix between Need for Information, Source of Information, Information Validation (independent variables) and Confidence in Surviving COVID-19. The correlation results showed that all the

independent variables (Need for Information, Source of Information and Information Validation) positively correlate with the dependent variable (Confidence in Surviving COVID-19). With regards to the control variables, gender, age and marital status correlated with Confidence in Surviving COVID-19. However, academic qualification and employment status failed to correlate with Confidence in Surviving COVID-19.

Test of Hypothesised Relationships

Relationship between CSR dimension and Perceived CSR Awareness

This section presents the results of the hypothesised relationships of the study variables. The relationships were analysed based on the objectives of the study. The hypothesis formulated for the study were as follows:

H1: Older persons' need for information has a significant relationship with confidence in surviving COVID-19.

H2: Older persons' source of information has a significant relationship with confidence in surviving COVID-19.

H3: Older persons' information validation has a significant relationship with confidence in surviving COVID-19.

From Table 3, multiple regression was used to test the relationship between Need for Information, Source of Information, Information Validation (independent variables) and Confidence in Surviving COVID-19. The results were presented in two steps. In the first model, control variables (Gender, Age, Marital Status, Academic Qualification and Employment Status) were

Table 2. Pearson's Correlation Matrix of the Study's Variables

	1	2	3	4	5	6	7	8	9
1 Confidence of Surv.	1								
2 Need for Inform.	.34**	1							
3 Source of Inform.	.8**	.42**	1						
4 Information Validate	.52**	.47**	.67**	1					
5 Gender	.26*	.03	-.07	-.04	1				
6 Age	.19*	.10	.16**	.07	.00	1			
7 Marital Status	.22*	.03	-.04	-.04	-.02	.05	1		
8 Acad. Qualification	0.08	.10	.07	.03	.04	-.06		1	
9 Employment Status	0.11	.03	.12	.00	.07	.10	.02	.88	1

Source: Field Survey (2021)

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Table 3. The Results of Multiple Regression Analysis for the Relationship between Health Information Seeking Behaviour and Confidence to Survive COVID-19.

Predictors	Model 1		Model 2	
	TP		TP	
	B	T	B	T
Gender	0.40***	3.38	0.39***	3.41
Age	0.26*	2.87	0.28*	2.96
Marital Status	0.29**	2.30	0.31**	2.38
Academic Qualification	-0.02	-0.24	-0.00	-0.08
Employment Status	-0.11	-1.61	-0.18	-1.48
Need for Information			0.37**	2.00
Source of Information			0.42***	4.10
Information Validation			0.39**	3.52
R	0.19		0.65	
R ²	0.17		0.63	
R ² adj.	0.06		0.51	
ΔR^2	0.17		0.42	
F	12.49***		26.52***	

Dependent variables: Confidence in Surviving COVID-19; *** $p < .001$, ** $p < .01$, * $p < .05$

entered against Confidence in Surviving COVID-19 (dependent variable) and the results showed that model was significant [$\Delta R^2 = .174$, $\Delta F(3,96) = 12.49$, $p < .001$]. The individual results showed that there is a significant positive relationship between gender and Confidence in Surviving COVID-19 ($\beta = .40$, $p < .001$). The results also showed that there is a significant positive relationship between age and Confidence in Surviving COVID-19 ($\beta = .26$, $p < .05$). The results further showed that there is a significant positive relationship between marital status and Confidence in Surviving COVID-19 ($\beta = .29$, $p < .01$).

In the second step, Need for Information, Source of Information and Information Validation (independent variables) were entered against Confidence in Surviving COVID-19. The results indicated that the independent variables explained 42% of the variance in Confidence in Surviving COVID-19 [$\Delta R^2 = .420$, $\Delta F(4,209) = 26.52$, $p < .001$]. With regards to individual relationships, it was revealed that there is a significant positive relationship between the Need for Information and Confidence in Surviving COVID-19 ($\beta = .21$, $p < .05$). The results of the study further showed that there is a significant relationship between Source of Information and Confidence in Surviving COVID-19 ($\beta = .42$, $p < .001$). The results further showed that a significant positive relationship exists between Information Validation and Confidence

in Surviving COVID-19.

Discussion of Findings

The study sought to find out the relationship between health information-seeking behaviour and confidence in surviving the COVID-19 pandemic. In line with this, the hypotheses formulated were: H1: Older persons' need for information has a significant relationship with confidence in surviving COVID-19. H2: Older persons' source of information has a significant relationship with confidence in surviving COVID-19. H3: Older persons' information validation has a significant relationship with confidence in surviving COVID-19.

The results indicated that hypothesis one which states that an older person's need for information has a significant relationship with confidence in surviving COVID-19 was significant. This finding is supported by the findings of Procianoy et al. (2020) who also believed that the need for information on the COVID-19 pandemic is critical for people to survive the disease. The finding is also in line with the findings of Vrdelja et al. (2021) who also observed that information on COVID-19 help people to be cautious and take preventive measures against the pandemic. Again, hypothesis two which stated that older persons' source of information has a significant relationship with confidence in surviving the COVID-19 pandemic

was also a signification. This finding of the study is in line with the findings of Olaimat et al. (2020) who view that sources which people seek for the COVID-19 pandemic are critical for avoiding contracting the virus. The finding of the study is also supported by Ali et al. (2020) who indicated that COVID-19 information sources strongly affect the beliefs and knowledge of individuals which further determine whether they will believe in the existence of the pandemic or not. In addition, hypothesis three which states that an older person's information validation has a significant relationship with confidence in surviving COVID-19 was also significant. This finding is supported by the findings of Igbinovia et al. (2020) who revealed that validation of information received on the COVID-19 pandemic ensures that people develop positive attitudes to tackle the pandemic. The finding also shares the views of Ignacio et al (2020) who indicated that the failure to validate the information received on the COVID-19 pandemic put people at risk.

The findings of this study suggest that the health information-seeking behaviour of older persons is critical for surviving the COVID19 pandemic. This is particularly so in three vital areas namely: the need for information, source of information and validation of information. This further implies that when older people realize the need to seek information, it helps them to risk their lives by ensuring that they utilize the information to avoid contracting the virus. Again, findings also suggest that older people seeking information from the right source helps to avoid fake news on the pandemic. This is because they can differentiate between fake sources and genuine sources and therefore can save themselves from endangering their lives. In this regard, the source of the information alone might not be enough to save one's self from the deadly COVID-19 pandemic but older people have to also ensure that they validate the information they get on the pandemic. Validation of information is also important because the information people receive mostly influences their beliefs.

Conclusion

The effect of the COVID-19 pandemic is pervasive and since its arrival has affected many people. The pandemic has affected people of all ages. However, older people stand riskier of contracting COVID-19 as compared to other age groups. This implies that there should be measures put in place to mitigate the effect of the pandemic on older persons. First, there is the need for the government and other related agencies such as

the Ministry of Health to ensure that older persons are provided with the right information on the pandemic. This can be achieved by the authorities establishing a database containing the details of older people. Having their details will make it easier to send them the right information on COVID-19. Also, the government through the Ministry of health must strengthen the healthcare infrastructure. Through the improvement of healthcare facilities, older people could get reliable information on the pandemic and this will prevent the situation where they will seek information from unreliable sources. Government must also provide training programmes for media outlets to help them churn out genuine information on the pandemic. As part of measures to curb fake news sources, policies must be put in place to punish offenders to serve as a deterrent to others.

In as much as the findings of the study will contribute to humanity, they come without limitation. For instance, the current study adopted a qualitative approach for the study. This means that certain detailed information and experiences could be missed and therefore, future research could adopt a qualitative or mixed-method approach to replicate the study. Another limitation of this study is that the study could not explore the challenges of health information-seeking behaviour and therefore, future research may consider exploring this aspect.

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