eLiteracy on covid among portuguese women: web-based survey study Teresa Garcia

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Background:

Digital tools are recognized public health tools for literacy. Their effectiveness is relatively unknown - some studies describe 40% of adults with literacy levels below the necessary for optimal use. eLiteracy has been a buzzword during the pandemic, but we still don't understand who benefits from it. This study aims to understand the ability of women to identify and use COVID-19 online information and its link with knowledge and behavior

Methods:

Web-based survey conducted on female adults. Coronavirus eHealth literacy scales measured skills to apply information (CoV-eHEALHS) and COVID-19–related knowledge, conspiracy beliefs, and adherence to protective behaviors (COVID-19 KAPs). Spearman correlation and Kruskal-Wallis tests were used to identify association between CoV-eHEALHS and COVID-19 KAP, and between these and age, income, and level of education

Results:

Higher CoV-eHEALS were seen in higher level of education ($\chi 2=17,03$; p = 0,002), higher knowledge (β = 0,19; p = 0,000), lower conspiracy (β =-0,27; p = 0,000) and higher adherence to protective measures (β =0,24; p = 0,000). Higher knowledge was seen in greater ages (β =0,11; p = 0,000), higher education ($\chi 2=36,40$; p = 0,000) and greater income ($\chi 2=19,96$; p = 0,001). Lower conspiracy was seen in higher education ($\chi 2=31,50$; p = 0,000) and higher income ($\chi 2=9,71$; p = 0,046).

Higher adherence to protective measures had no correlation with socioeconomical factors.

Conclusions:

There was association between higher eHealth literacy and COVID-19 KAP, reinforcing public health stakeholders to invest on disseminating digital information. There were worse results in younger women of lower education and income, suggesting information should be adapted to this population **Key messages:**

- Digitally disseminated information is important because of the association between higher eHealth literacy and knowledge and protective behavior.
- It should be adapted for younger women with lower levels of education and income to maximize results.