

Media Exposure and Trust in Healthcare Providers on Self-Medication Practices with Pain Relievers Among Middle-Aged to Older Adults

Ian C. Abordo¹; Shella G. Dello²; Raymond M. Salvador³; Akikuh Shaira S. Codizar⁴; Rayyan B. Sanguila⁵; Alyssah N. Ali⁶; Haifa S. Ananggo⁶; Elyn Jay C. Bergado⁷; Minette Gertrudes B. Bucio⁸; John Michael C. Generol⁹

¹PhD, ²RN, MAN, DM, ³RN, MN, ⁴RN

^{1,2,3,4,5,6,7,8,9}School of Nursing, Adventist Medical Center College, Iligan City, Philippines

Publication Date: 2026/05/22

Abstract: This correlational quantitative study examined how media exposure and trust in healthcare providers relate to self-medication practices with pain relievers among middle-aged to older adults in selected barangays of Iligan City. Self-medication is a common health practice within this age group, influenced by both social and environmental factors, making it important to understand its primary influencing factors. The study involved 350 respondents aged 40 years and above from Barangay Bagong Silang, Tibanga, and Santiago. Data were collected using validated self-report questionnaires, including the Media Exposure Scale (MES), Trust in Healthcare Provider Scale (THPS), and Self-Medication Practices Scale (SMPS). The statistical analysis was conducted using IBM SPSS to examine correlations and determine key predictors through regression analysis. Media exposure, particularly media credibility, and trust in healthcare institutions emerged as significant predictors of self-medication practices, while trust in healthcare providers showed only a weak negative association with unsafe practices. These findings emphasize the influential role of media and perceived healthcare trust in shaping self-medication practice, emphasizing the need to promote media literacy and strengthen healthcare communication. Future research should explore additional psychological and contextual factors that may further influence self-medication practices.

Keywords: Media Exposure; Trust in Healthcare Providers; Self-Medication; Pain Relievers; Middle-Aged Adults; Older Adults.

How to Cite: Ian C. Abordo; Shella G. Dello; Raymond M. Salvador; Akikuh Shaira S. Codizar; Rayyan B. Sanguila; Alyssah N. Ali; Haifa S. Ananggo; Elyn Jay C. Bergado; Minette Gertrudes B. Bucio; John Michael C. Generol (2026) Media Exposure and Trust in Healthcare Providers on Self-Medication Practices with Pain Relievers Among Middle-Aged to Older Adults. *International Journal of Innovative Science and Research Technology*, 11(5), 1058-1068. <https://doi.org/10.38124/ijisrt/26may351>

I. INTRODUCTION

Self-medication with pain relievers is influenced by both media exposure and trust in healthcare providers among middle-aged adults. Media, including television, radio, and online advertisements, play a significant role in shaping individuals' medication choices (Ivakhnenko 2024). Trust in healthcare providers is another key factor, as it determines whether individuals seek professional help or resort to self-medication (Darbyshire et al. 2021). Together, these factors continue to drive self-medication practices amid concerns about public health safety (Clark et al. 2024).

Globally, self-medication poses serious risks. Media and economic pressures drive improper medication use, with the World Health Organization (WHO 2024) reporting that nearly half of all medications worldwide are prescribed, dispensed, or marketed incorrectly. Drug-related emergency visits in underdeveloped nations surged by 45% in just five years (Pathan et al. 2024). Additionally, media exposure influences healthcare decisions, often worsening health literacy (Singh 2023). These patterns highlight how self-medication, shaped by media and economic factors, continues to harm public health across demographics (Rathod et al. 2023).

In the Philippines, self-medication is increasingly practiced as individuals seek to control their health decisions and reduce medical costs (Papasin et al. 2021). Studies show that 31% to 66% of the population engage in self-medication (Robredo et al. 2022). Trust in healthcare providers significantly impacts healthcare-seeking behaviors (Bahari et al. 2024), while mistrust often leads to the misuse or underuse of formal medical care, further driving self-medication (Shukla et al. 2025).

The consequences of self-medication are far-reaching. Media exposure has been shown to influence health behaviors, with many individuals relying on television and social media for information on medications (Ephrem et al. 2022). However, this reliance on inaccurate sources contributes to unsafe practices, a trend that was particularly evident during the COVID-19 pandemic (Panda et al. 2023).

On the other hand, trust in healthcare providers has been identified as crucial in encouraging patients to seek professional care, follow medical advice, and avoid unsafe self-medication (Tian et al. 2022; Darden et al. 2024). Stronger trust also leads to improved treatment adherence (Elwood 2023), while demographic differences show that lower-income groups tend to place more trust in healthcare providers than in media sources (Brown-Johnson et al. 2018).

Middle-aged adults demonstrate particularly complex self-medication behaviors, often shaped by work-life balance, stress, and health awareness. For instance, in a study of 400 participants in India, 37.92% of adults aged 31–50 reported engaging in self-medication (Rathod et al. 2023). Similarly, research in Iran revealed that middle-aged individuals were significantly more likely to self-medicate (Shaamekhi et al. 2019). These findings suggest that both personal and external factors influence self-medication practices among this age group.

The interaction between media exposure and trust in healthcare providers further highlights the complexity of self-medication. Misinformation in media shapes public perceptions of medication safety and often worsens health behaviors (Gelder et al. 2019). In contrast, positive healthcare experiences increase trust in providers, who are consistently viewed as the most reliable sources during health crises (Lu et al. 2024).

Despite the growing body of research, significant gaps remain in understanding the intersection of media exposure and healthcare trust in self-medication. While studies emphasize their individual influence, little is known about how these two factors interact to shape behaviors (Amenta et al. 2022). Furthermore, although research has been conducted on self-medication in developing countries, the role of trust in healthcare providers in reducing unsafe practices is still underexplored (Manuela et al. 2024). Addressing these gaps is essential to developing targeted interventions that minimize unsafe self-medication practices among middle-aged adults.

The objective of this study is to determine the relationship between media exposure, trust in healthcare providers, and self-medication practices among middle-aged to older adults in selected barangays of Iligan City. Specifically, it aims to assess the level of media exposure, evaluate trust in healthcare providers, and identify their combined influence on self-medication behaviors. This study was guided by the following research questions:

- What types of media exposure to health-related content are used among middle-aged adults?
- What is the level of trust in healthcare providers among middle-aged adults?
- What are the self-medication practices related to pain relievers among middle-aged adults?
- Is there a significant relationship between media exposure and self-medication behaviors?
- Is there a significant relationship between trust in healthcare providers and self-medication practices?
- How does media exposure and trust in healthcare providers influence self-medication practices among middle-aged adults?

II. LITERATURE REVIEW

➤ *Theoretical Framework*

This study is grounded in Nola Pender's Health Promotion Model (HPM), which explains the multidimensional nature of health-related behaviors and the various factors influencing their practice (Rojas-Torres et al. 2025). The HPM identifies specific variables that determine the likelihood of an individual engaging in health-promoting behavior, including cognitive-perceptual factors, modifying factors, and cues to action (Chinn 2018). In the context of this research, the model offers a structure for examining how media exposure, trust in healthcare providers, and demographic variables shape self-medication practices.

➤ *Definitions, Relevance, and Classification of Self-Medication Practices with Pain Relievers*

Self-medication with over-the-counter (OTC) pain relievers refers to the selection and use of medications without consultation with a healthcare professional. It is commonly defined as the act of obtaining and consuming drugs without medical advice (Prudhivi et al. 2020; Figueiredo et al. 2023). This practice includes relying on personal judgment, prior experience, or non-professional sources when managing symptoms such as pain (Mohamed et al. 2023). As a multidimensional behavior, self-medication is best understood through its definitions, relevance, and classification across populations.

Globally, self-medication has become increasingly prevalent in both developing and developed countries, particularly among middle-aged and older adults in urban settings. In Northern India, 66.4% of adults aged 40–60 reported self-medicating, largely due to time constraints, prior medication experience, and the perception that their conditions were minor (Juneja et al. 2024). Similarly, in Thailand, 75.5% of adults aged 41 and above reported using pain relievers without professional advice, with paracetamol

being the most commonly used drug (Chautrakarn et al. 2021). Comparable patterns were observed in China, where 62.3% of respondents reused old prescriptions or relied on non-professional advice (Liu et al. 2023).

Other regions reported varying prevalence rates, such as 29.1% in Saudi Arabia (Alghamdi et al. 2023), while studies in Indonesia emphasize the widespread use of paracetamol and non-steroidal anti-inflammatory drugs (NSAIDs) due to their accessibility and effectiveness (Sulaturrahma et al. 2024). Overall, self-medication is driven by convenience, accessibility, and the perception of minor illness, with paracetamol and NSAIDs consistently identified as the most commonly used medications.

➤ *Prevalence of Self-Medication*

The prevalence of self-medication increased significantly during the COVID-19 pandemic. Digital behavior analysis using Google Trends showed a rise in pain-related searches across multiple countries, indicating increased public reliance on self-managed care (Szilagyi et al. 2021). In regions with limited healthcare access, healthcare stakeholders also reported a surge in self-medication practices (Nzeribe & Nwagwu 2023). In the Philippines, self-medication remains a major concern, with 88.7% of dermatology outpatients, particularly those aged 35 to 69, reporting the practice (Cruz & Tapaes 2022).

➤ *Factors Influencing Self-Medication with Pain Relievers*

Self-medication is influenced by psychological, social, and economic factors. Psychologically, individuals experiencing anxiety and depression are more likely to self-medicate, as shown in data from the 2020 U.S. National Health Interview Survey (Zhang 2023). Emotional distress often leads individuals to seek immediate symptom relief without professional consultation.

Social influences also play a significant role. Media exposure, interpersonal advice, and cultural norms shape health practices. For instance, 56.8% of respondents in a community survey reported using media as a primary source of information for pain relief (Ephrem et al. 2022). Moreover, social cues and interactions can influence both pain perception and medication decisions (Sharvit & Schweinhardt 2022).

Economic factors further contribute to self-medication practices. Individuals with lower socioeconomic status often rely on more accessible medications, including OTC drugs, due to financial constraints (Atkins & Mukhida 2022). Employment instability has also been associated with decreased opioid use but increased reliance on OTC pain relievers (Musse 2020), highlighting how financial conditions shape treatment choices.

➤ *Risks and Consequences of Self-Medication with OTC Pain Relievers*

Despite its convenience, self-medication carries significant health risks. Prolonged or misuse of OTC pain relievers can lead to adverse drug reactions, drug interactions, and misdiagnosis (Waqar et al. 2023). Common

complications include gastrointestinal bleeding, renal impairment, and other systemic effects associated with NSAID misuse (Doomra & Goyal 2020).

During the COVID-19 pandemic, urgency and fear further increased reliance on self-medication, as reported in a multi-country study across the Arab region (Abdelwahed et al. 2023). Certain medications, such as naproxen sodium, are frequently chosen due to their perceived effectiveness, reinforcing patterns of unsupervised drug use (Weisman et al. 2024).

➤ *Media Influence on Self-Medication Decisions*

The media plays an important role in shaping health practices and perceptions. Individuals increasingly rely on television, social media, and online platforms for health information, which can both inform and mislead decision-making. Studies have shown that the media serves as a primary source of health information for many individuals (Ephrem et al. 2022), while digital platforms became essential for healthcare access during the pandemic (Ji et al. 2024).

In the Philippines, television advertisements were found to significantly influence public awareness of medications (Al Rawwad et al. 2023), while social media enables widespread sharing of health-related experiences (Alhaddad 2018). However, media influence is not uniformly positive, as it may normalize self-medication and present it as a low-risk solution (Alduraibi & Altowayan 2022).

➤ *Frequency and Credibility of Media Exposure*

Frequent exposure to health information through digital platforms has increased reliance on self-medication. Social media, in particular, has become a dominant source of health information, often replacing professional advice (Chen & Wang 2021). However, users may struggle to evaluate the accuracy of such information, relying on peer discussions rather than verified sources (Maliki et al. 2023).

More importantly, the credibility of media sources significantly influences health behaviors. Reliable sources tend to provide accurate information, while misinformation, especially during the COVID-19 pandemic, has contributed to harmful health practices and reduced trust in healthcare providers (Syed & Shinde 2023). Individuals with low health literacy are particularly vulnerable to misinformation, increasing the risk of unsafe practices (Peng & Shen 2024). Exposure to misleading information has been linked to reliance on ineffective treatments and poor health outcomes (Kim & Tandoc 2022).

➤ *Trust in Media Sources in Pain Reliever Information*

Trust is an important factor influencing self-medication behaviors. Higher trust in media sources has been associated with increased likelihood of self-medication, particularly when individuals perceive online information as reliable (Soroya et al. 2023). Furthermore, a systematic review found that age and digital literacy influence how social media affects health behaviors and

self-medication practices (Zollo et al. 2024). Trust in media and health literacy significantly influence self-medication, shaping whether individuals make informed choices or engage in misuse.

➤ *Trust in the Healthcare System*

Trust is a foundational determinant of health behavior, categorized into trust in providers, payers, and institutions.

➤ *Healthcare Providers*

High trust in providers, including nurses, pharmacists, and physicians, promotes open communication and adherence to professional medical advice (Elkefi et al. 2024; ChenMed 2024). Moreover, when individuals trust their “perceived knowledge” or family advice more than clinicians, self-medication rates rise (Fernández-Martínez et al. 2021).

➤ *Healthcare Payers*

Confidence in health financing (e.g., insurance and government programs) influences service utilization. In the Philippines, public trust in PhilHealth was significantly undermined by high-profile fraud scandals involving “ghost patients” and added claims, which total an estimated 154 billion pesos (Philippine Daily Inquirer 2022; Yee et al. 2019). Such distrust can deter individuals from seeking formal care, pushing them toward self-medication practices.

➤ *Healthcare Institutions:*

Trust in Institutions is built through consistent communication and positive personal experiences (Perlis et al 2024; Ross and Gillett et al. 2020). Inconsistent policies, as seen during the COVID-19 pandemic, can weaken this trust, leading to increased stress and a reliance on unofficial information channels (Rotaru et al. 2023; Wong et al. 2021).

➤ *Self-Medication Behavior and Directed Use*

Self-medication is highly prevalent among middle-aged and older adults, particularly those experiencing chronic pain. Many individuals rely on prior experience, family advice, or media information rather than professional consultation (Zheng et al. 2024; de Oliveira et al. 2018). In Macao, 64.3% of older adults reported self-medicating during the pandemic, with media and social networks as primary information sources (Zheng et al. 2024).

Pain relievers such as paracetamol and NSAIDs are the most commonly used medications. Studies in Poland found that 52.5% of adults used paracetamol, while 36.1% used NSAIDs (Karlłowicz-Bodalska et al. 2023). However, knowledge gaps remain significant. Many individuals are unaware of proper dosages and risks, with only 28.2% correctly identifying the safe maximum dose of paracetamol (Petrides et al. 2023).

Frequent and unsupervised use of pain relievers can lead to serious health consequences, including increased risk of falls, organ damage, and chronic complications (Yoshikawa et al. 2024; Krasniqi et al., 2024). These findings highlight the importance of improving health literacy and promoting responsible medication practices.

III. RESEARCH METHODOLOGY

➤ *Research Design*

This study utilized a quantitative correlational design to examine the relationships between media exposure and trust in healthcare providers on self-medication practices with pain relievers among middle-aged to older adults. This design enabled the measurement of associations between variables in a natural, non-manipulative setting, aligning well with the study’s aim to observe and quantify behavioral trends and facilitated broader, statistically measurable patterns across a larger sample population (Creswell 2018).

➤ *Respondents*

The study involved a total of 350 respondents, composed of middle-aged to older adults. Inclusion criteria included individuals aged 40 years and above, residents of the selected barangays, and those who have practiced self-medication with pain relievers within the past six months. Exclusion criteria included individuals who were unable to provide informed consent and incomplete survey responses. Equally distributed across Bagong Silang, Tibanga, and Santiago, with 116 participants from each barangay. A convenience sample technique was used to facilitate the selection of respondents who were readily accessible and willing to participate, thereby ensuring a manageable and systematic collection of data within the study area.

➤ *Instruments of the Study*

All data were gathered using validated closed-ended, self-reported questionnaires rated on a 5-point Likert scale. The Media Exposure Scale (MES) consisted of 30 items divided into four subscales: frequency of media exposure, trust in media sources for pain reliever information, influence of media on self-medication behaviors, and credibility of media sources. The Trust in Healthcare Provider Scale (THPS) consists of 28 items with three subscales: trust in healthcare providers’ advice, trust in healthcare payers, and trust in healthcare institutions. The Self-Medication Practices Scale (SMPS) comprised 17 items categorized into two subscales: self-medication behavior and self-directed pain reliever use.

A pilot test involving 30 respondents was conducted to establish the reliability of the instruments. The Media Exposure Scale (MES) showed mixed reliability results, with Cronbach’s alpha values of 0.66 (frequency of media exposure), which is below the acceptable threshold of 0.70, indicating marginal internal consistency. In contrast, the remaining subscales demonstrated acceptable to strong reliability, including 0.73 (trust in media sources for pain reliever information), 0.81 (influence of media on self-medication behaviors), and 0.86 (credibility of media sources).

The Trust in Healthcare Provider Scale (THPS) demonstrated strong internal consistency across all subscales, with 0.88 (trust in healthcare providers’ advice), 0.81 (trust in healthcare payers), and 0.85 (trust in healthcare institutions). Similarly, the Self-Medication Practices Scale (SMPS) also showed good reliability, with

0.82 (self-medication behavior) and 0.79 (self-directed pain reliever use).

➤ *Procedure*

The researchers collected data over one month. The survey questionnaires, which were screened and approved by the researcher's adviser, were distributed in both printed paper-based format and through Google Forms to accommodate participants, providing flexible options. Consent was first secured from the barangay chairmen before data collection began. Participants were provided with a clear explanation of the study's objectives and were given informed consent forms. A total of 350 valid responses were gathered, 200 collected through Google Forms and 150 through printed questionnaires. After data collection, responses were encoded in Google Sheets for organization and then analyzed using SPSS for statistical testing.

➤ *Data Analysis*

The data collected were analyzed using IBM SPSS Statistics. The first step in analyzing the data involved data cleaning, which included checking for missing responses or participants, ensuring the consistency of entries, and verifying that all items were encoded properly by comparing them to the correct scale. This step was important to ensure that the dataset was free from errors or inconsistencies.

Descriptive statistics were used to summarize the levels of media exposure, trust in healthcare providers, and self-medication practices among the respondents, providing a clear overview of the data distribution. Kendall's Tau was utilized to determine the correlation between variables due to the ordinal nature of the data and the presence of tied responses. This non-parametric test is appropriate when the assumption of normality is not met and provides a reliable measure of association for ranked data. Stepwise linear

regression was used to identify the most significant predictors of self-medication practices. This allows variables to be systematically entered or removed based on statistical significance, to determine which factors contribute most to the outcome variable.

➤ *Ethical Considerations*

The study followed strict ethical guidelines to protect participants and ensure research integrity. Ethical clearance was obtained from the Adventist Medical Center College Ethics Review Committee, and permission was secured from the barangay chairmen of Bagong Silang, Tibanga, and Santiago in Iligan City. Respondents were informed about the study's objectives, procedures, confidentiality, and their right to withdraw at any time. Informed consent was obtained before participation. Furthermore, the research followed strictly with the RA 10173 (the Data Privacy Act), maintaining confidentiality and anonymity by removing personal identifiers and securely storing data, which were used only for research purposes.

IV. RESULTS AND DISCUSSIONS

➤ *Types of Media Exposure to Health-Related Content*

Table 1 presents the results of all factors/subscales yielded mean scores ranging from 2.88 to 3.10, all interpreted as "Sometimes", indicating moderate engagement with media-based health information. Among these, Credibility of Media Sources received the highest rating, while Influence of Media on Decisions ranked lowest. This pattern suggests a cautious engagement with media, where respondents generally view health information as credible but do not heavily rely on it when making decisions. Overall, the media appears to function as an informational filter rather than a primary authority, with professional medical guidance still holding greater influence for most of the sample.

Table 1 Descriptive Statistics of Media Exposure to Health-Related Content (n=350).

Factors/Subscale	m ± SD	Interpretation
S1. Frequency of Media Exposure	2.90 ± 1.04	Sometimes
S2. Trust in Media Sources for Pain-Reliever Information	3.02 ± 1.00	Sometimes
S3. Influence of Media on Self-Medication Decisions	2.88 ± 1.05	Sometimes
S4. Credibility of Media Sources	3.10 ± 1.06	Sometimes

Legend: 4.20 – 5.00 Very (Often), 3.40 – 4.19 (Often), 2.60 – 3.39 (Sometimes), 1.80 – 2.59 (Not that Often), 1.00 – 1.79 (Rarely)

➤ *Level of Trust in Healthcare Providers*

Table 2 presents the results of all factors/subscales, yielding mean scores ranging from 3.49 to 3.78, all interpreted as "Agree", indicating high levels of trust across healthcare-related domains. Trust in Healthcare Providers ranked highest, while Payers received the lowest rating. This shows that while respondents feel confident in the

healthcare professionals treating them, they are less sure about the financial and administrative side of care. While the high trust in healthcare providers is a strong point, the lower trust for payers suggests that insurance and money issues might be the weakest part of the healthcare relationship.

Table 2 Descriptive Statistics of Trusting in Healthcare Providers' Advice (n=350).

Factors/Subscale	m ± SD	Interpretation
S1. Trust in Healthcare Providers	3.78 ± 0.86	Agree
S2. Trust in Healthcare Payers	3.49 ± 0.88	Agree
S3. Trust in Healthcare Institutions	3.64 ± 0.90	Agree

Legend: 4.20 – 5.00 (Strongly Agree), 3.40 – 4.19 (Agree), 2.60 – 3.39 (Neutral), 1.80 – 2.59 (Disagree), 1.00 – 1.79 (Strongly Disagree).

➤ *Level of Self-Medication Practices Related to Pain Relievers*

Table 3 presents that self-medication is a regular habit, with behavior scores at 3.27 ("Sometimes") and pain reliever use at 3.02 ("Twice a day"). These results mean that treating oneself is a normal part of life among the respondents, rather than just something that happens once in

a while. Using pain relievers twice a day is a high frequency that shows many of the respondents are managing long-term pain on their own. This raises concerns about the potential masking of underlying health conditions and emphasizes the risk of prolonged medication use without proper medical guidance.

Table 3 Descriptive Statistics of Self-Medication Practices (n=350).

Factors/Subscale	m ± SD	Interpretation
S1. Level of Self-Medication Behaviors	3.27 ± 1.03	Sometimes
Legend: 4.20 – 5.00 Very (Often), 3.40 – 4.19 (Often), 2.60 – 3.39 (Sometimes), 1.80 – 2.59 (Not that Often), 1.00 – 1.79 (Rarely)		
S2. Level of Self-Medication Directed Pain Reliever Use	3.02 ± 1.37	Twice a day
Legend: 4.20 – 5.00 (As Needed), 1.80 – 2.59 (Once a Day), 3.40 – 4.19 (Thrice a Day), 1.00 – 1.79 (Never), 2.60 – 3.39 (Twice a Day)		

➤ *Significant Relationship Between Media Exposure On Self-medication Practices*

Table 4 presents that trusting the media has the strongest relationship to self-medication (r = .43, p <.01), while just seeing media often has a very small effect (r = .09). This suggests that how respondents believe the

information is more important than how many times they see it. When individuals think the media is honest and correct, they are much more likely to skip a physician's consultation and treat themselves. In simple terms, believing the media gives individuals a "green light" to handle their own medical care without a professional.

Table 4 Correlation Between Media Exposure and Self-Medication Behaviors (n=350).

	Self-Medication Behaviors r (p)	Self-Directed Pain Reliever Use r (p)
Frequency of Media Exposure	.09 (.01)	.10 (.00)
Trust in Media Sources for Pain-Reliever Information	.31 (.00)	.20 (.00)
Influence of Media on Self-Medication Decisions	.25 (.00)	.16 (.00)
Credibility of Media Sources	.43 (.00)	.21 (.00)

➤ *Significant Relationship Between Trust in Healthcare Providers and Self-Medication Practices*

Table 5 presents a positive relationship between trusting healthcare providers or institutions and the choice to self-medicate (r = .28 to .33). The findings show that the more individuals trust the medical system, the more likely they are to treat themselves. This suggests that when individuals feel supported by their healthcare providers, they

feel more confident and capable of handling minor pain on their own. Instead of avoiding healthcare professions, these respondents likely feel they have learned enough from the medical system to manage their own health independently. Meanwhile, trust in insurance or payers did not have a significant relationship with how respondents use their pain relievers.

Table 5 Correlation Between Trust in Healthcare Providers and Self-Medication Behaviors (n=350).

	Self-Medication Behaviors r (p)	Self-Directed Pain Reliever Use r (p)
Trust in Healthcare Providers	.28 (.00)	.10 (.00)
Trust in Healthcare Payers	.29 (.00)	.05 (.14)
Trust in Healthcare Institutions	.33 (.00)	.10 (.00)

➤ *Predictors of Self-Medication Practices Among Middle-Aged to Older Adults*

Table 6 shows that media credibility and trust in healthcare institutions explain 26% of self-medication behavior (R² = 26%). Believing that media is credible is the main reason why people choose to treat themselves (Beta =

.36). For every one-point increase in media credibility, self-medication behavior goes up by 0.31 points. Trust in healthcare institutions also plays a role (Beta = .22), which suggests that when people feel safe in the medical system, they feel more confident to follow media advice and manage their health on their own.

Table 6 Stepwise Linear Regression Predicting Self-Medication Behavior (n = 350).

Predictors	B (Unstandardized)	Beta (Standardized)	t	p Value	Interpretation
Self-Medication Behavior (Constant)					
Credibility of Media Exposure	.31	.36	.92	.00	Highly Significant
Trust in Healthcare Institutions R2 = 26%	.17	.22	.26	.00	Highly Significant

Table 7 shows that media credibility and trust in media sources explain 8.2% of how often people take pain relievers ($R^2 = 8.2\%$). These media factors were the only ones that significantly predicted dosage frequency, while trust in doctors and hospitals had no real impact. This

suggests that while people may listen to doctors for general health, they tend to follow the media when deciding how many pills to take and how often. This is a serious concern because following media advice instead of a professional can lead to taking too much medicine.

Table 7 Stepwise Linear Regression Predicting Self-Directed Pain Reliever Use (n = 350).

Predictors	B (Unstandardized)	Beta (Standardized)	t	p Value	Interpretation
Self-Directed Pain Reliever (Constant)					
Credibility of Media Exposure	.21	.16	.33	.02	Significant
Trust in Media Sources R2 = 8.2%	.20	.15	.24	.02	Significant

The findings of this study revealed a significant correlation between media exposure and self-medication behaviors, particularly through digital platforms like social media and online advertisements. This supports existing evidence that individuals who consume health-related content through media are more likely to self-medicate, especially when media frames over-the-counter pain relievers as safe and convenient options (Ephrem et al. 2022).

as the primary source of action, especially when reinforced by previous experiences with trusted providers (Clark et al. 2024). These results emphasize that trust in healthcare providers does not always discourage self-medication. However, it may foster a false sense of self-sufficiency, where individuals assume their previous medical experiences encourage them to make health decisions without consultation (Dassieu et al. 2021).

Furthermore, the study revealed that higher trust in healthcare providers was associated with a greater tendency to self-medicate. This contrasts with earlier studies suggesting that trust in healthcare professionals reduces self-directed treatment. In the present context, it appears that individuals who trust nurses or physicians may feel more confident in making their own health decisions, such as reusing previously prescribed medications or relying on past medical advice without returning for professional consultation (Baracaldo-Santamaría et al. 2022).

The implication of this study highlights the healthcare practice and health communication strategies in Iligan City. The strong influence of media as a primary source of health information emphasizes the need to strengthen digital health literacy, particularly among middle-aged adults. Interventions should focus not only on improving access to information but also on enhancing individuals' ability to critically evaluate the credibility and accuracy of health content to reduce misinformation-driven self-medication (Wang et al. 2019). Nurses play an important role in this effort by leading community-based education initiatives promoting safe medication practices and informed decision-making (WHO 2022).

Unlike global studies that highlighted the role of health misinformation in promoting self-medication, this study found that participants were relatively skeptical of misleading content. For example, while health misinformation spread widely during the COVID-19 pandemic and encouraged risky self-treatment behaviors in other countries, participants in Iligan City showed more cautious engagement with media and relied less on unverified online sources (Pawar et al. 2023). Media exposure remained one of the factors of self-medication practices, even when trust in healthcare providers was high.

The continued prevalence of self-medication despite high trust in healthcare providers also suggests gaps in healthcare accessibility. Indicating the need for more patient-centered approaches that address barriers such as cost, convenience, and waiting times. Strengthening healthcare delivery through expanded community services and accessible pharmacy support may help reduce reliance on self-medication (Peh et al. 2021; WHO 2021). Furthermore, the interaction between media exposure and institutional trust reflects the complexity of health decision-making. Promoting safer practices requires the widespread dissemination of accurate, evidence-based health information through trusted and commonly used platforms.

This suggests that while individuals respect healthcare professionals, they still depend on the media for management and decision-making. Moreover, media serve

Integrating reliable health content into social media, local broadcasts, and community channels can support better-informed health behaviors (Chou et al. 2025).

This study's strengths include its real-world correlational design and use of validated tools like the Media Exposure Scale and Trust in Healthcare Provider Scale, with pilot testing ensuring data reliability. A diverse participant sample provided relevant insights, and adherence to ethical protocols safeguarded participant welfare. The results support Pender's Health Promotion Model, affirming the study's utility in developing effective health education strategies.

Limitations include the use of convenience sampling and self-reported data, which may affect generalizability. Future studies should employ random sampling for broader representation. Other influential factors, such as income and access to healthcare, were not explored, suggesting a need for expanded analysis. Although one survey section showed lower internal consistency, overall findings remained valid. Improved tool refinement and expanded participant demographics are recommended for future research.

V. CONCLUSION

The media exposure, trust in healthcare providers, and trust in media sources significantly influence the self-medication practices among middle-aged to older adults in Barangay Bagong Silang, Tibanga, and Santiago, Iligan City. Findings show that participants primarily rely on social media for health information, demonstrate moderate trust in media sources, and maintain high trust in healthcare providers, yet still frequently engage in self-medication. Statistical results revealed a weak but significant positive relationship between media exposure and self-medication, with perceived reliability of media sources and trust in healthcare institutions emerging as key predictors. These results answer the research questions by confirming that both media influence and trust factors contribute to self-medication behaviors, particularly in the use of pain relievers such as paracetamol and ibuprofen.

Although these predictors were statistically significant, they account for only a limited portion of the variance, indicating that other factors also influence self-medication practices. Overall, the findings highlight that trust in healthcare providers does not necessarily prevent self-medication but may instead increase individuals' confidence in managing their own health based on previous experiences.

ACKNOWLEDGMENT

“There will be some hard times, and there will be hard moments, but the ending results will be great, so stay strong and just continue to push forward” - Jaemin Na, 2022.

To our research instructor, Dr. Ian C. Abordo, thank you for your unwavering guidance, constructive criticism, and continuous feedback. The challenges and tasks pushed

us to work harder and collaborate as a team. Your insight has not only shaped our understanding of global issues but also contributed significantly to our growth as students and as future nurses.

To our research adviser, Dr. Shella G. Dello, we are sincerely thankful for your consistent support, wise advice, and endless encouragement. You pushed us to pursue this research with determination. Your belief in us kept us going, and your commitment helped drive us toward success.

To our families, who have always supported us through every challenge, thank you for your patience, love, and understanding. Your sacrifices gave us the strength to carry on, and the support has been the force behind our perseverance.

To the participants, thank you for your time, honesty, and cooperation. This research is dedicated to you and your shared experiences. May the challenges lead to greater understanding, improved outcomes, and better care for your generation and beyond.

And finally, to the Almighty Allah/God, our source of wisdom, strength, and clarity, thank You for guiding us throughout this journey. Your signs and grace gave us the courage, humility, and knowledge to complete this work. With heartfelt appreciation, this research is dedicated to all of you.

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