Who Shapes Health Opinion Now?

Emerging Media, Consumer Trust, and the Future of Health Communications

Insights from a national survey conducted by Syneos Health Communications in partnership with The Harris Poll

Syneos Health Communications

Why We Studied the New Health Information Environment

The sources patients turn to for health information are multiplying, the voices they trust are shifting and the line between credible expertise and persuasive storytelling is blurring.

For biopharma communications leaders, the implications are profound. If health opinion is increasingly formed outside the channels your organization has historically invested in, how do you ensure your messages reach the right audiences, in ways that are understandable and compel action?

To answer that question, Syneos Health® Communications partnered with The Harris Poll to conduct a proprietary study of emerging media's impact on health information, trust and behavior.

About the study

Conducted in March 2026

1,510

U.S. consumers

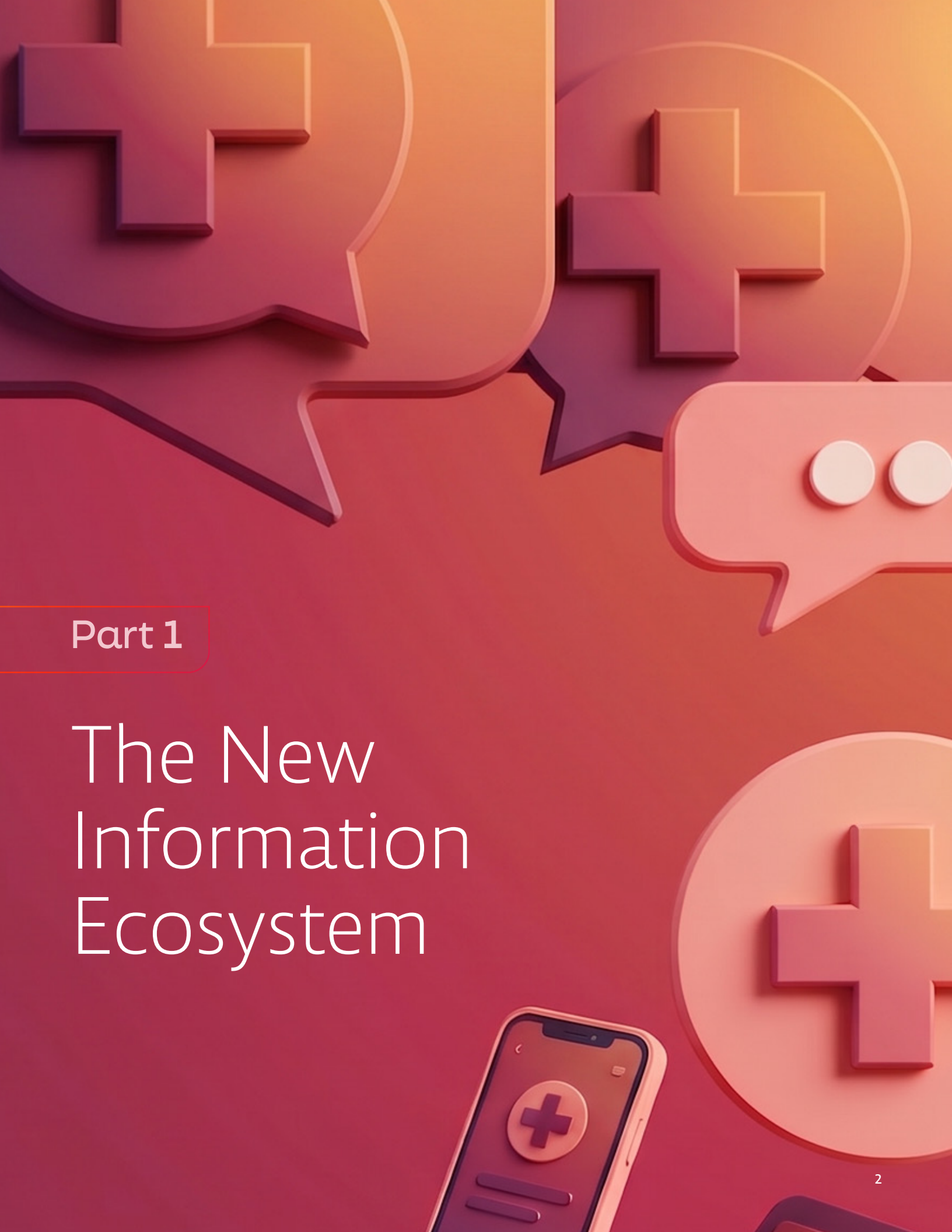
200

primary care physicians (PCPs)

Our goal: to understand how the information ecosystem is evolving, who is shaping health opinion today and what it means for the future of healthcare communications.

For this study, "emerging media" was defined as social and digital/online channels including social media, video content, podcasts, independent digital newsletters, and discussion sites, which deliver informational and news content — distinct from traditional news sources like TV news, newspapers, and established news websites.

What we found challenges conventional assumptions about what makes someone influential, how trust is earned, and what biopharma organizations must do differently to communicate effectively in this new landscape.



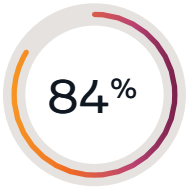
Part 1

The New Information Ecosystem

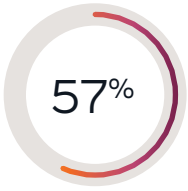
Emerging media is now mainstream

The use of emerging media is often framed as a young-person phenomenon. But the data suggests something much broader: emerging media is now mainstream.

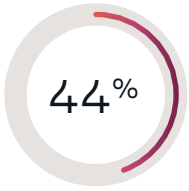
The scale is significant:



of consumers use emerging media for news and information weekly or more

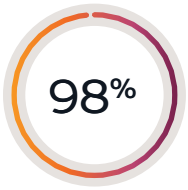


Use it daily

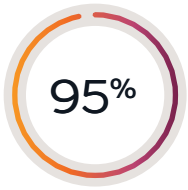


say emerging media is their main source of news

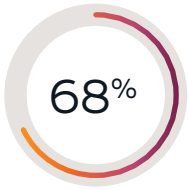
Younger generations lead the shift:



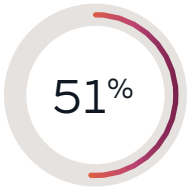
of Gen Z use emerging media for news and information weekly or more



of Millennials use emerging media for news and information weekly or more

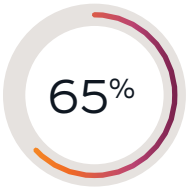


of Gen Z use social/ video platforms as their main source of news

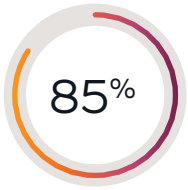


of Millennials use social/ video platforms as their main source of news

But older audiences are participating too:



of Boomers+ use emerging media for news and information weekly or more



of Boomers+ still rely on traditional platforms as their main source of news

The data shows that audiences are forming awareness, opinions, and trust through very different systems of discovery and validation.

For healthcare organizations, this means media strategy can no longer be built around a single assumed pathway to awareness. The same message may need to travel through traditional media, emerging media, HCPs, creators, local voices, and peer networks, each playing a different role in how the information is received and believed.

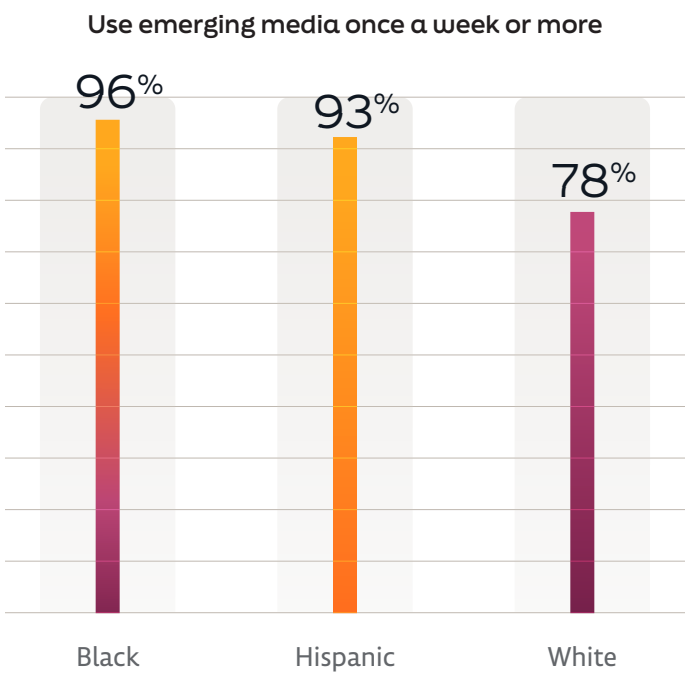
Health Influence is Increasingly Happening in Channels That Were Not Built for Healthcare Communication.

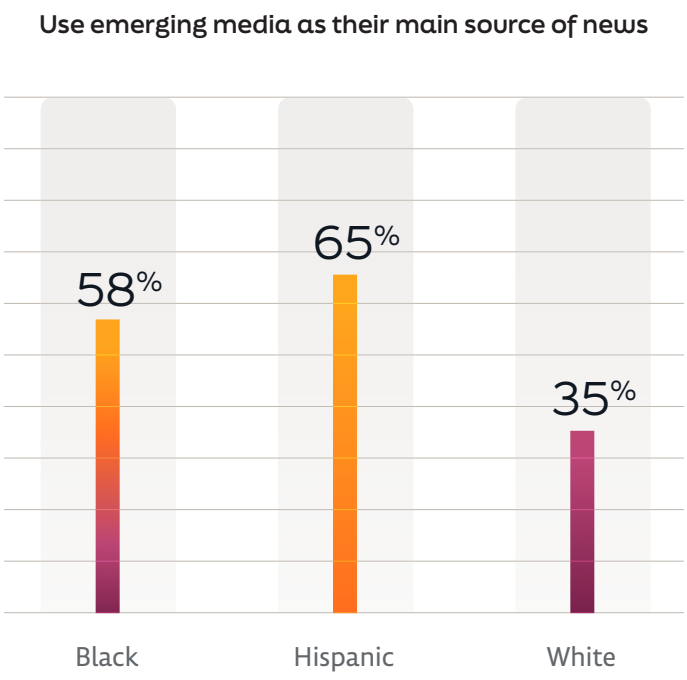
Consumers are encountering health-related information on platforms designed for other purposes — entertainment, community, speed, personality, and shareability. Social and video platforms reward immediacy and personal connection. Online communities elevate lived experience and peer validation. Podcasts and newsletters create intimacy, depth, and a sense of independence from conventional wisdom. AI tools are increasingly mediating how people summarize, search for, and make sense of information.

As a result, healthcare organizations are now communicating inside environments where institutional authority does not automatically confer trust. Information must earn attention, relevance, and credibility in formats that people recognize, value, and want to engage with.

Usage varies significantly across racial and ethnic groups

Race/Ethnicity differences:





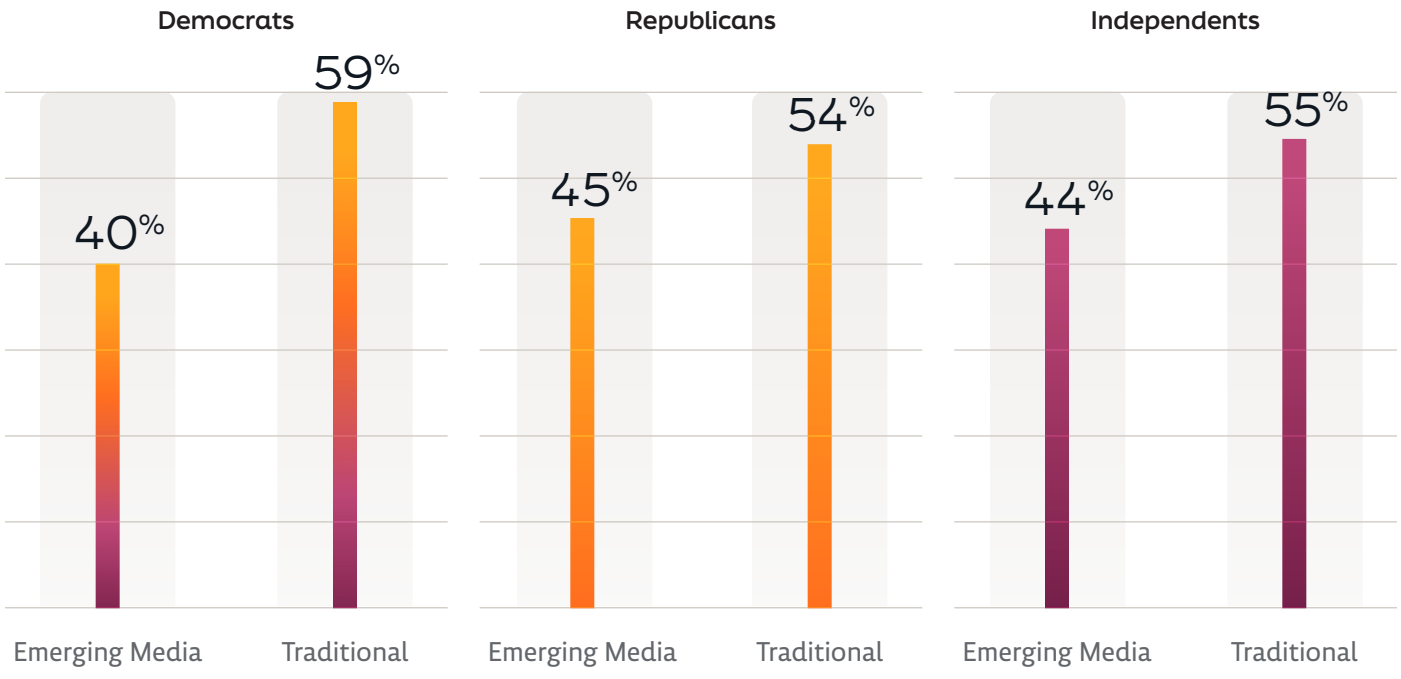
These differences suggest that emerging media is tied to culture, community, identity, access, and perceptions of whether traditional sources reflect lived experience and are biased. This has major implications for how healthcare communicators think about segmentation, audience engagement, and campaign design.

Demographic-based segmentation still matters, but it is no longer enough. We need to understand not just who our audiences are, but how they consume information, which sources they trust, what cultural context shapes their interpretation, and who influences them within their communities.

Political differences in usage are narrower than expected

Political affiliation is often assumed to define media behavior. But our findings suggest the reality is more nuanced.

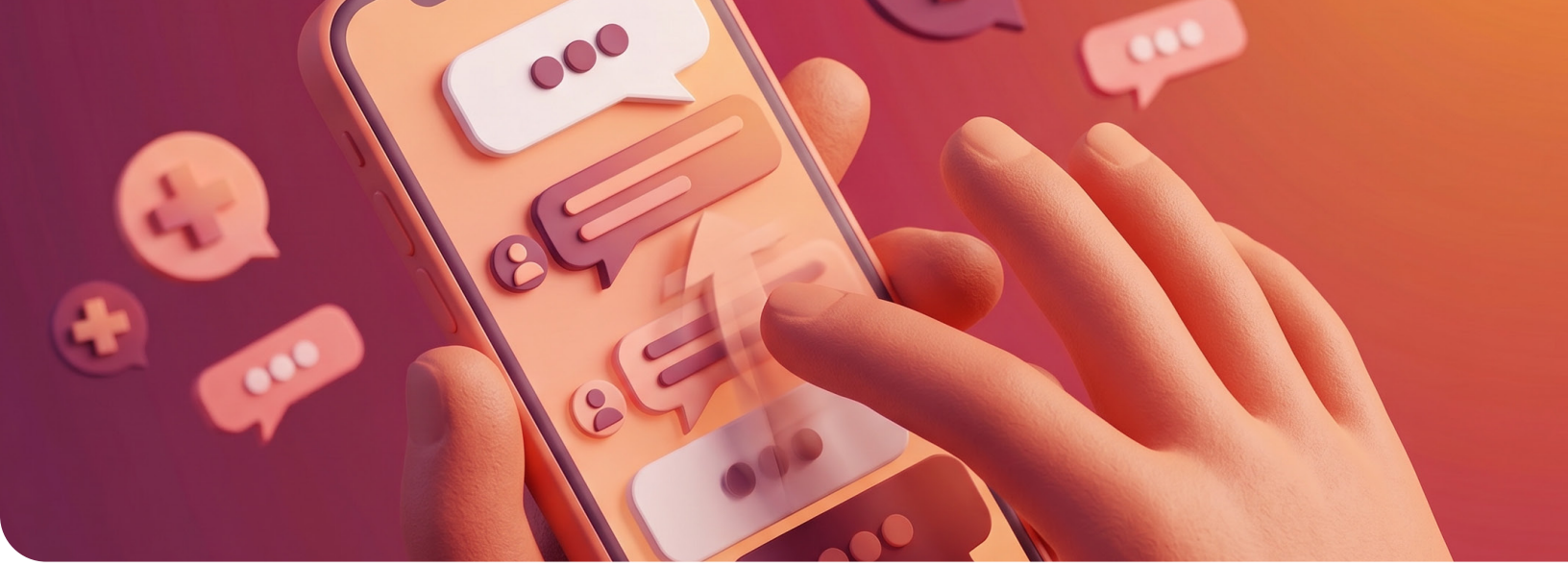
When asked about their main source of news:



Broadly, there is less difference in how people obtain information than many might expect. The bigger differences are in how people interpret, trust, and engage with information once they encounter it.

Part 2

The Rise of Interpretive Influence



People rely on influencers to interpret news and information

One of the most important findings in the research is that consumers rely on influencers to help them make sense of the world.

Consumers say influencers:

- 92% help them better understand current events
- 91% provide "common sense" perspectives
- 73% challenge authority and the status quo
- 56% are more likely to tell the truth

The content they receive reinforces this interpretive role:

- 79% breaking news
- 69% opinions or takes
- 66% summaries of current events
- 45% lived experience or personal stories

Influence increasingly happens through interpretation. People are not simply asking, "What happened?" They are asking, "What does it mean?" "Why should I care?" "How does this fit with what I already believe?" "Who can explain it in a way that feels right to me?"

This creates a new strategic mandate: choosing influencers must acknowledge their interpretive value — their ability to explain, contextualize, humanize, and responsibly translate health information.

Common sense" is now competing with science

One of the most strategically important findings in the survey is that "common sense" is a preferred frame for understanding news and information.

Consumers are gravitating toward intuitive framing:

61% prefer news that uses "common sense" over data and science

Segments over-indexing on agreement (>61%):

- 66% Millennials
- 65% Gen Z
- 77% Black
- 71% Hispanic
- 70% Republicans

HCPs are seeing the downstream effects:

93% are concerned that patients prioritize personality over evidence

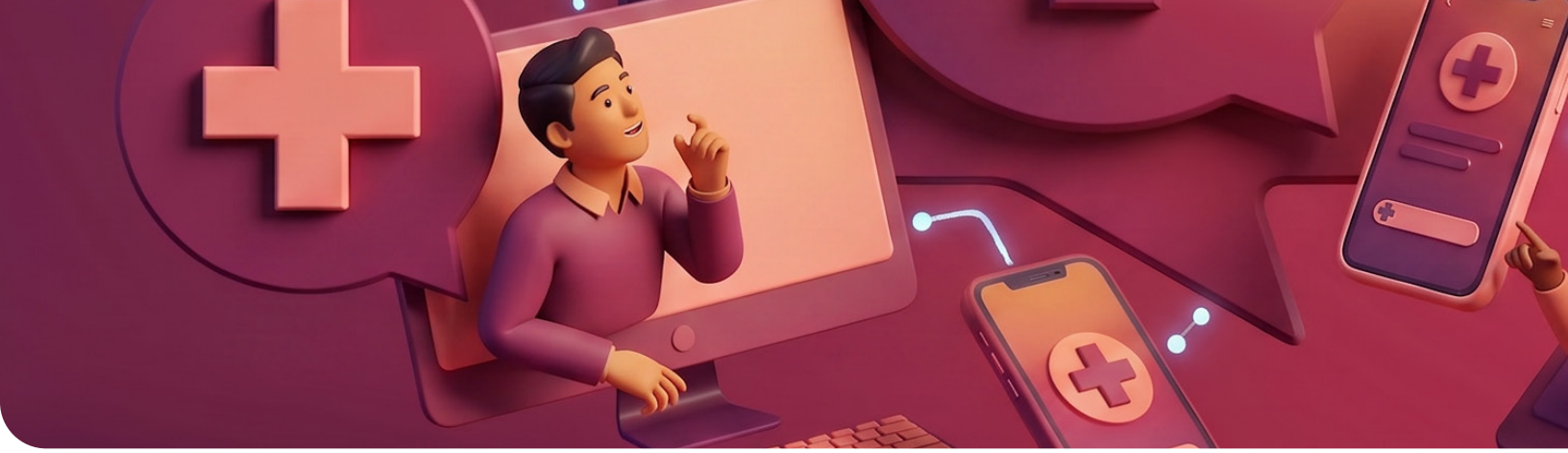
95% say emerging media blurs opinion and evidence

This does not mean consumers are rejecting science. It means that information must resonate within the knowledge frameworks and ways people view the world.

For biopharma, the mandate is to move beyond simply presenting evidence. Scientific communication must be framed through the questions, beliefs, values, and lived experiences of the audiences it is meant to reach. That requires more rigorous message testing, not only to confirm comprehension, but to understand whether messages feel credible, relevant, intuitive, and actionable across different audience groups

Part 3

Fragmentation of Trust



People are influenced by channels they don't fully trust

One of the most striking findings from our research is the disconnect between usage and trust. Consumers are heavily influenced by channels and voices they do not fully trust, and they continue to trust sources that may no longer hold primary influence.

Usage/influence:

73%

often or sometimes use emerging media for health information

54%

often or sometimes use social/ video platforms for health information

Trust:

Consumers

84%

of consumers trust HCPs somewhat or a lot

49%

trust news influencers somewhat or a lot

HCPs

10%

of PCPs trust news influencers somewhat or a lot

16%

of PCPs trust social platforms somewhat or a lot

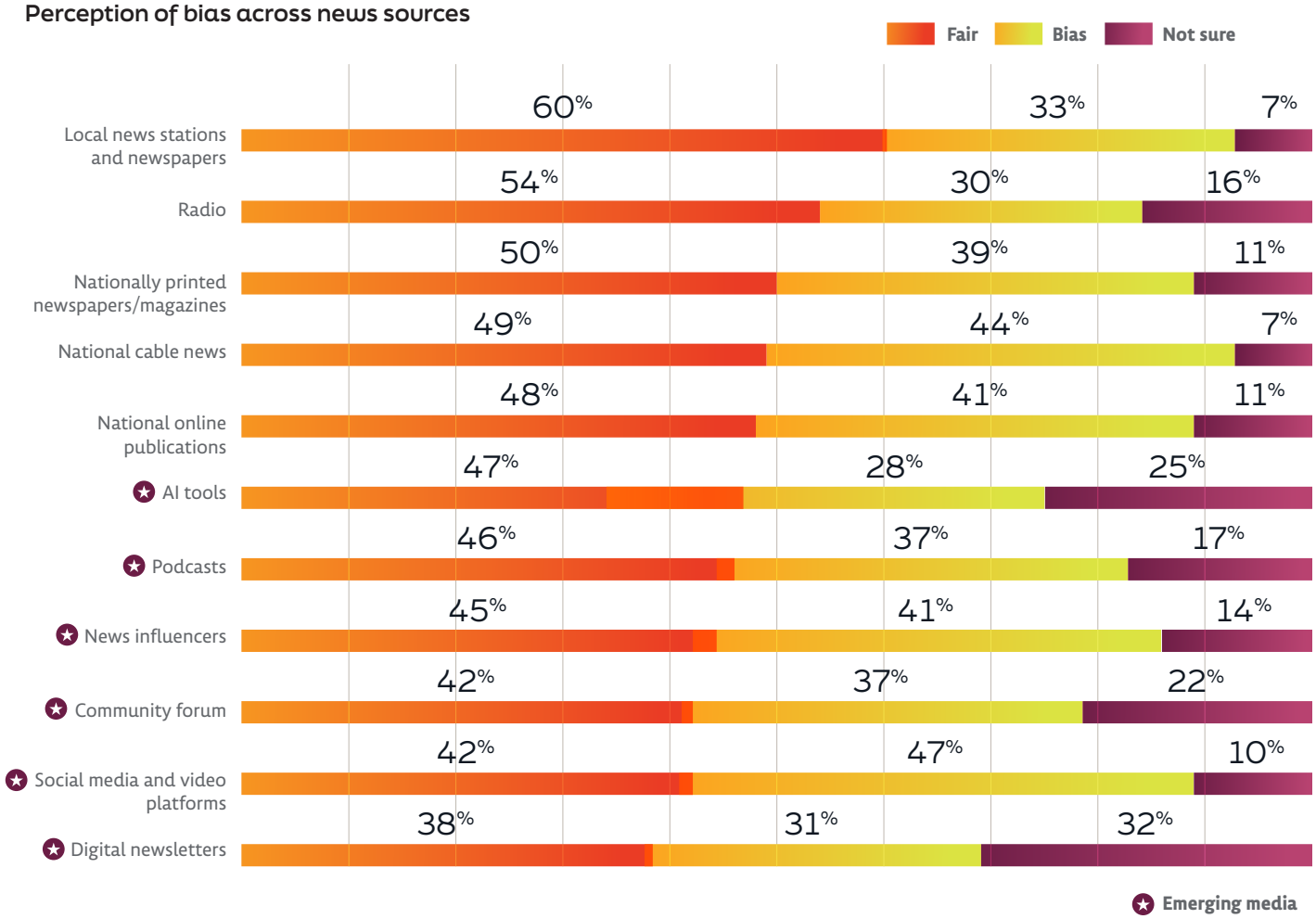
The old model assumed that trust in credible sources would naturally translate into influence. Our data suggest a more complex reality: high usage does not equal high trust, and high trust does not guarantee influence. This paradox has significant implications for how biopharma organizations allocate communications resources and design influence strategies.

The strategic opportunity is twofold: increase the influence of trusted voices and increase the credibility of influential channels. That means helping trusted experts and HCPs show up in more accessible, resonant ways, while ensuring the creators, communities, and platforms shaping opinion are equipped with accurate, responsible, and useful health information.

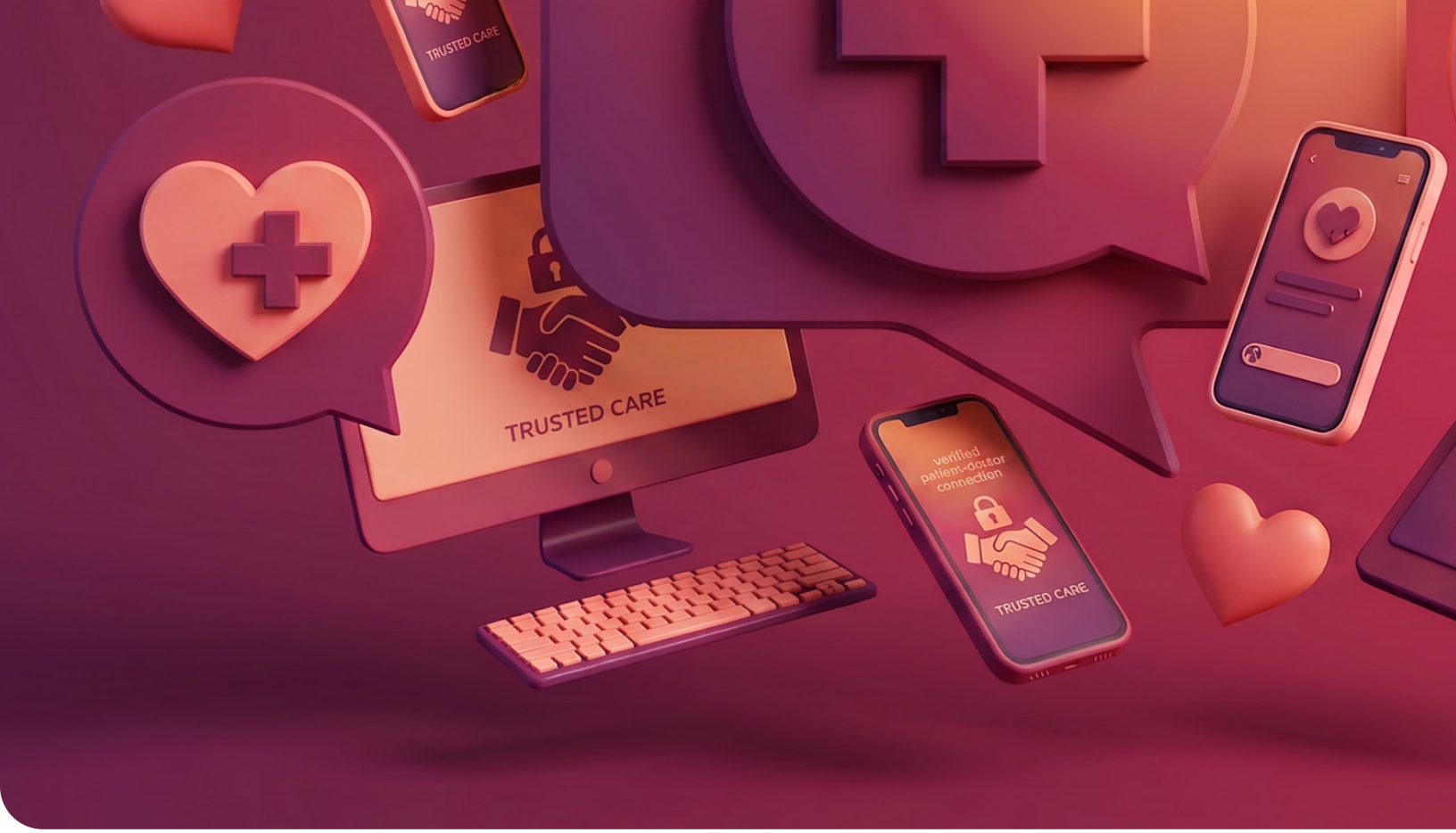
Traditional media still retains credibility but bias across all channels is assumed

Even as consumers embrace emerging media, traditional media continues to play an important role in credibility and validation.

Perception of bias across news sources



Traditional media is not obsolete. It remains important for credibility, legitimacy, and validation — but it no longer fully shapes health opinion.



Local trust is an untapped opportunity

Trust increasingly favors proximity, familiarity, and perceived relevance.

Consumers report higher trust in local sources:

75% trust local health agencies somewhat or a lot

67% trust local news somewhat or a lot

Compared with national sources:

66% trust federal agencies somewhat or a lot

61% trust national news somewhat or a lot

As national institutions face skepticism, and national media becomes more polarized, local voices may become increasingly important.

For biopharma, building trust locally creates a path to reputation-building that national narratives often miss. Companies may be perceived primarily as large multinational institutions, but their credibility can be strengthened by making their local impact visible through jobs, economic contribution, health system partnerships, community investment, and public health impact.

Part 4

Health Behavior Is Changing

Emerging media influences real-world health behavior

After exposure to health information from emerging media sources, consumers report taking meaningful action

51% looked up more information

28% purchased products/ services

41% discussed with others

34% became more confident in opinions

35% shared the content

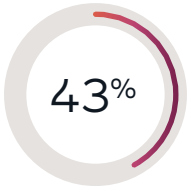
25% changed opinion

Among Millennials, the effect is especially pronounced: they are the most likely to feel more confident about their opinion (40%) or changed their mind (33%) by emerging media sources.

Patients arrive at the clinic with information and opinions shaped by emerging media

Consumers

Consumers do not necessarily see online health information as a barrier to care.

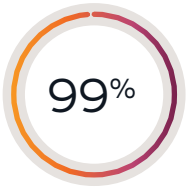


of consumers say health information shared online makes conversations with healthcare providers more productive.

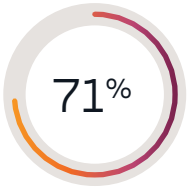
For many patients, emerging media may feel like preparation: a way to ask better questions, compare experiences, or make sense of complex health issues before an appointment.

HCPS

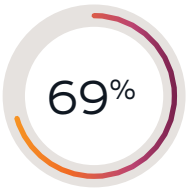
Physicians experience the same phenomenon differently.



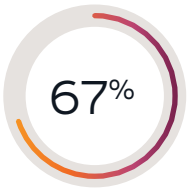
say patients bring in emerging media information



spend more time correcting misinformation



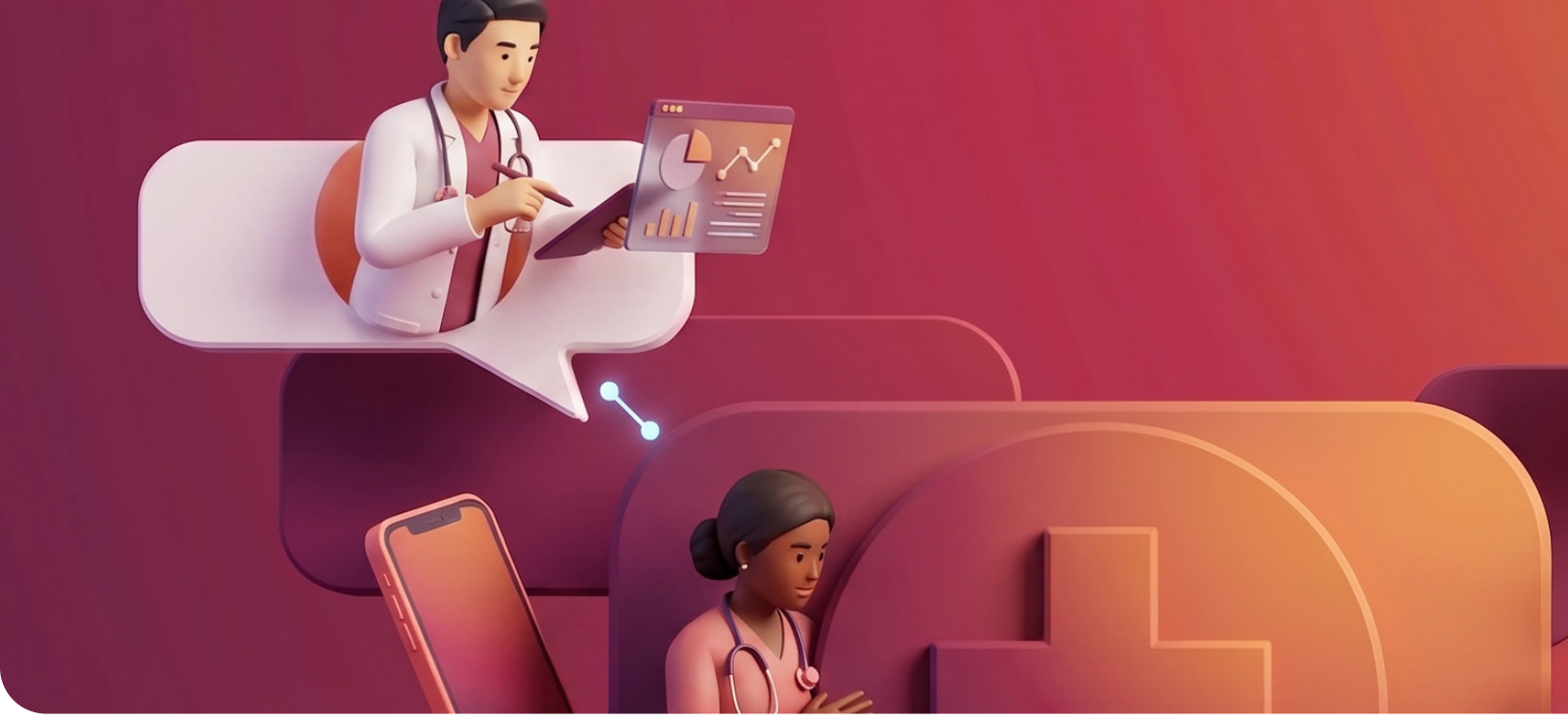
spend more time explaining



say patient adherence decreases

This tension is one of the most important findings in the research. Consumers may view online health information as empowering. Physicians often experience it as a clinical communication burden.

That creates a new role for healthcare communications: helping credible information reach people before beliefs harden, and helping PCPs navigate the questions, skepticism, and narratives patients bring to the clinical encounter.



HCPs also use emerging media, but are more skeptical

Physicians are not outside the emerging media ecosystem. 79% of HCPs use it for news/information — but with much higher skepticism.

Skepticism

95%

say emerging media blurs opinion and evidence

93%

are more skeptical of health information shared by non-HCP influencers than traditional media

Trust

57%

say they use social media to learn from other HCPs

97%

trust other HCPs at least somewhat

This points to an important opportunity: strengthening credible HCP-to-HCP and HCP-to-patient communication inside digital environments. That includes digital opinion leaders, physician education, peer-to-peer content, and trusted clinical voices who can translate evidence in accessible ways.

Misinformation is now a core clinical burden

PCPs are under immense pressure in the clinic to correct misinformation.

PCP impact:

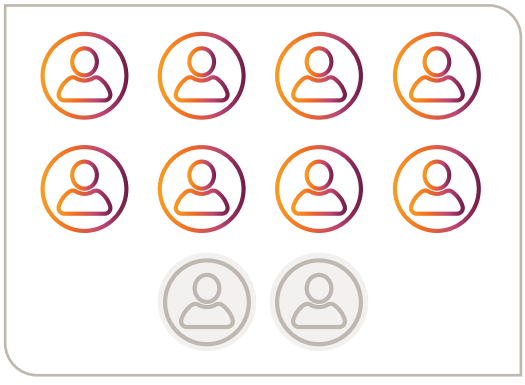
90% say emerging media impacts daily work

71% correct misinformation

69% spend more time explaining

57% spend more time discussing credibility

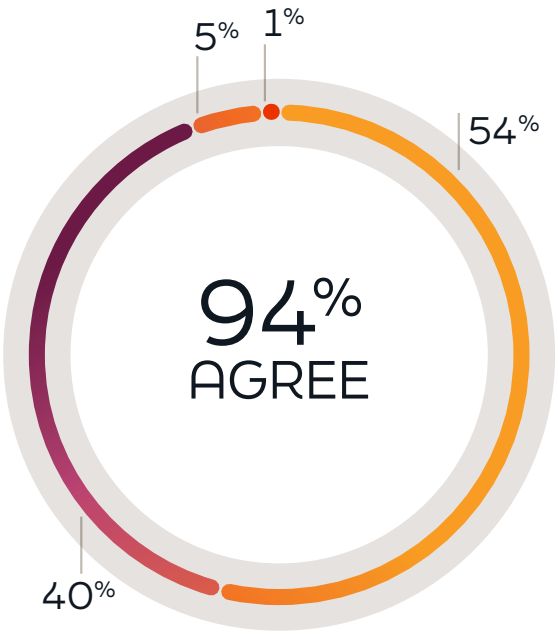
They feel they bear a responsibility to address the problem



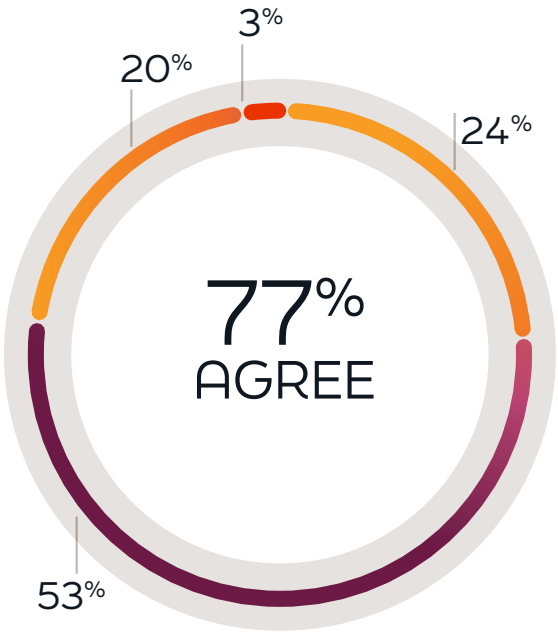
8 in 10

PCPs agree — including more than 1 in 3 who strongly agree — that they bear a responsibility to counter misinformation on emerging media

HCPs worry their patients' health will suffer if they trust emerging media over medical professionals



I am worried that my patients' health will suffer if they trust emerging media over trained medical professionals



I am already seeing patients' health suffer because they chose to follow the advice from emerging media — over medical experts like myself

Strongly Agree | Some what agree | Somewhat disagree | Strongly disagree

For biopharma and healthcare organizations, this raises a strategic question: how can communications help reduce the misinformation burden before it reaches the exam room?

This could include:

- monitoring misinformation narratives early
- arming HCPs with plain-language explanations
- developing patient-facing content that addresses common misperceptions
- supporting credible digital opinion leaders
- building trust before the point of care

Part 5

Toward A New Health Communications Model

Healthcare communications must evolve from informing audiences to helping them make sense of complexity

Move from message delivery to translation

Communications can no longer assume that scientific accuracy alone is enough. Credible information must be translated into formats, voices, and narratives that feel understandable and relevant.

Treat influencers as interpreters, not amplifiers

Influencer strategy should not begin with reach. It should begin with fit, trust, and interpretive value. The most important question is not simply who has an audience, but who can responsibly contextualize information for that audience.

Build trust before the point of care

By the time patients arrive at the clinic, many already have questions, beliefs, and concerns shaped by emerging media. Communications has a role upstream — before the clinical moment — in helping shape understanding and reduce the burden on HCPs.

Go grassroots and community-first

The local trust advantage suggests that reputation-building may increasingly need to start closer to communities. Local health departments, local media, academics, HCPs, pharmacists, patient organizations, and community leaders can all play a role in building trust from the ground up.

Build communications strategies around audience beliefs, values, and information behaviors — not demographics alone

People's media behavior is shaped by values, identity, trust orientation, political worldview, cultural context, and information habits. Advanced segmentation and message testing must incorporate how audiences interpret and validate information — not just who they are demographically.

Support HCPs as communicators

HCPs are being asked to correct, explain, contextualize, and rebuild trust under pressure. There is a role for healthcare organizations to support them with tools, training, plain-language content, and credible digital ecosystems that help address misinformation before and during patient conversations.

Integrate traditional, emerging, and local media

Traditional media still matters. Local trust matters. Emerging media matters. The opportunity is not to choose one over the other, but to design strategies that understand the different functions each source plays in communicating information and building trust.

New Communications Strategies for the New Health Information Environment

The future of healthcare communications will be defined by how well organizations understand the fragmented, interpretive ecosystem in which health opinion is now formed.

To lead in this environment, communications teams must connect evidence with emotion, expertise with lived experience, and institutional credibility with the voices people already turn to for meaning.

For biopharma leaders, this is a moment to rethink how communications strategies are built: how audiences are segmented, how messages are tested, how influencers are selected, how HCPs are supported, how local trust is activated, and how credible information reaches people before beliefs harden.

Connect with us

to explore how these findings can inform practical strategies, new models of engagement, and communications programs built for how health opinion is formed today.
You can reach us at: **hellocap@syneoshealth.com**

The Harris Poll, on behalf of Syneos Health, conducted an online survey in the United States among 1,510 consumers (adults ages 18+), March 19 – 28, 2026, and 200 primary care physicians, March 13-20, 2026. Respondents for this survey were selected from among those who have agreed to participate in our surveys. The sampling precision of Harris online polls is measured by using a Bayesian credible interval. For this study, the sample data among consumers is accurate to within ± 3.0 percentage points using a 95% confidence level. The sample data among primary care physicians is accurate to within ± 7.1 percentage points using a 95% confidence level. This credible interval will be wider among subsets of the surveyed population of interest.

For complete survey methodology, including weighting variables and subgroup sample sizes, please contact **hellocap@syneoshealth.com**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