




Health Optimism: The Impact of Health Information Seeking and Healthcare Satisfaction

Seyed Milad. Saadati^{1*}, Valerie. Karstensen²

¹ Faculty of Education and Health Sciences, University of Limerick, Castletroy, Ireland

² Department of Regional Health Research, University of Southern Denmark, Odense, Denmark

* Corresponding author email address: 24361836@studentmail.ul.ie

E d i t o r	R e v i e w e r s
Wioleta Karna  Department of Social Studies, Jesuit University Ignatianum, Krakow, Poland wioletakarna@uj.edu.pl	Reviewer 1: Chidinma Chikwe  Department of Psychology, University of Toronto, Canada. Email: chichikwe@mail.utoronto.ca Reviewer 2: Roodi Hooshmandi  Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada. Email: roodihooshmandi@kmanresce.ca

1. Round 1

1.1. Reviewer 1

Reviewer:

The Introduction cites multiple studies but does not establish a clear research gap. Consider adding a sentence explicitly stating what this study contributes beyond existing literature.

The Methods and Materials section states that "A total of 194 participants were included in the study, with the sample size determined based on the Morgan and Krejcie table." It would be beneficial to provide a citation or explanation on why this table was used instead of other sample size determination techniques.

The Healthcare Satisfaction measure uses the PSQ-18 but does not clarify whether all 18 items were used or if subscales were selected. If certain aspects were emphasized (e.g., communication vs. accessibility), please specify.

The Findings and Results section presents descriptive statistics, but the distribution of scores is not visualized. Consider adding histograms or boxplots to illustrate data dispersion and detect potential skewness.

In Table 1, the standard deviation values for health optimism (0.75), health information seeking (0.68), and healthcare satisfaction (0.82) suggest moderate variability. It would be helpful to comment on whether this spread is consistent with past studies.

The Discussion compares findings to prior research (e.g., Agyemang-Duah et al., 2020; Gitobu et al., 2018), but these comparisons should be more critical. Did these studies use similar methodologies and sample characteristics, or are there potential reasons for differences?

The statement in the Discussion, "These findings underscore the importance of improving health information accessibility and the quality of healthcare services," is broad. Consider providing a specific recommendation on how this can be achieved.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

The Methods and Materials section mentions exclusion criteria, including "individuals with cognitive impairments or severe mental health conditions." However, no information is provided on how these were assessed during participant recruitment. Please clarify the screening process.

The description of the Health Optimism Scale in the Methods and Materials section states that it has been validated in "numerous studies." A citation or a brief mention of at least one key validation study would strengthen this claim.

The Measures section describes the HINTS tool for health information seeking. Given that this instrument covers multiple aspects of health information behavior, a brief mention of which subscales were prioritized in the analysis would be useful.

The Pearson correlation results in Table 2 indicate significant positive associations, yet there is no mention of whether correlation coefficients were tested for normality assumptions. Consider adding a note on whether the relationships remained robust under non-parametric testing.

In the Results section, the R^2 value of 0.40 in the regression model suggests that 60% of variance in health optimism remains unexplained. It would strengthen the discussion if potential missing variables (e.g., personality traits, past health experiences) were briefly considered.

The Discussion interprets findings effectively but should expand on why healthcare satisfaction has a stronger effect than health information seeking. Are there theoretical frameworks that support this observation?

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.