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Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?

Half of U.S. adults under 50 say they get health and wellness information from social media influencers or podcasts. About 4 in 10 of these influencers describe themselves as health care professionals; coaches and entrepreneurs are almost as common

BY Galen Stocking, Regina Widjaya, Anna Lieb, Kaitlyn Radde, Aaron Smith and Eileen Yam

FOR MEDIA OR OTHER INQUIRIES:

Galen Stocking, Associate Director, Science & Society

Aaron Smith, Director, Data Labs

Sogand Afkari, Communications Manager

202.419.4372

www.pewresearch.org

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About this research

This study looks at **health and wellness influencers** – individuals with large audiences online who provide information about health and wellness, largely on social media. It includes an in-depth analysis of these influencers' social media presence, including who they are and how they describe themselves. It also takes a deep dive into Americans' experiences with getting health and wellness information from social media influencers and podcasts.

Why did we do this?

Medical professionals remain the [most common source of health information](#) among U.S. adults. But many get information about their health from sources outside of the doctor's office, including social media. We conducted this study to better understand who the public might be hearing from when they get health and wellness information on social media and to explore the experiences and motivations of those who engage with this information on these sites.

How did we do this?

This analysis is based on two main data sources.

The first is **an analysis of 12,800 social media accounts belonging to 6,828 prominent health and wellness influencers**. The influencers included in the study have at least one account with more than 100,000 followers on YouTube, Instagram or TikTok and post health and wellness content in English aimed at a U.S. audience (or are owned by the hosts of a top-ranked podcast that features this content). We analyzed their profiles to see who these influencers are and how they describe themselves.

Here is more information about [how we identified the influencers](#) included in this study and [how we defined the different topics and categories](#) we measured in the analysis.

The second set of data comes from **two surveys of U.S. adults that asked about their experiences getting health and wellness information from social media influencers and podcasts**. One was conducted in June 2025 among 5,023 U.S. adults, and the other was conducted in October 2025 among 5,111 U.S. adults. Both were fielded on Pew Research Center's American Trends Panel.

Here are the [survey questions](#) used for this report, the [detailed responses](#) and the [survey methodology](#).

Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?

Half of U.S. adults under 50 say they get health and wellness information from social media influencers or podcasts. About 4 in 10 of these influencers describe themselves as health care professionals; coaches and entrepreneurs are almost as common

Most Americans [say it's important to be healthy](#), but fewer think they are doing a good job at managing their own health. They also report significant challenges figuring out the best way to reach their health goals: Around half of the public says they [struggle to know which health information is accurate](#), and most have encountered conflicting advice about their health.

The vast majority of U.S. adults turn to health care providers for guidance through this confusing landscape. **But four-in-ten U.S. adults (and half of those under 50) now get health and wellness information from social media influencers and podcasts.**

To learn more about who these influencers are and how they present themselves to the world, we identified 6,828 individuals with at least 100,000 followers on YouTube, TikTok or Instagram that regularly post about health and wellness and analyzed their social media profiles. We paired this analysis with two surveys of U.S. adults that asked about their experiences with health and wellness influencers. Some of the key findings:

- **Health and wellness influencers claim a wide range of backgrounds from inside and outside the world of medicine:** 41% describe themselves as some sort of health care professional, and around three-in-ten each say they are coaches (31%) or entrepreneurs (28%).
- **Around two-thirds of these influencers are women.** But men are more heavily represented for certain backgrounds (like doctors) and among the most popular health and wellness influencers.
- **Many draw on their life experiences.** Health and wellness influencers who are women are especially likely to cite their background as a parent.

Key terms used in this report

In our survey, we asked whether Americans ever get health and wellness information from social media influencers or from podcasts. In discussing the findings, we use “**health and wellness influencers**” to refer to these two sources. We also use “**health and wellness influencer consumer**” to refer to U.S. adults who say they ever get information about health and wellness from social media influencers or podcasts.

Health and wellness influencer: An individual (not an organization) who regularly posts health or wellness information on Instagram, TikTok or YouTube or hosts a top-ranked podcast where those topics are discussed. To be included in this analysis, they must have at least 100,000 followers on one of these three social media sites or appear on the charts of top podcasts on Apple Podcasts or Spotify, primarily discuss this content in English, and address a U.S. audience. Refer to methodology for more details.

Health and wellness information: Any information or discussion about the practice of improving or maintaining physical or mental health or wellness. This may include medical advice, personal health testimonials, commentary and other holistic guidance for how to live a healthy lifestyle.

Expertise terms

Health care professionals: Health and wellness influencers who identify themselves as health care professionals in their social media bios. These include conventional medicine practitioners like doctors and nurses, mental health professionals like psychologists and social workers, and other health professionals like physical therapists, nutritionists and chiropractors.

Life experience: Expertise that is established from a personal background on certain health and wellness issues. Influencers categorized as citing life experience often mention their medical conditions, disabilities or fitness journeys in their social media bios. Influencers who mention their role as a parent are only included in this category if parenthood is presented as a source of expertise on one of these issues.

Who gets health and wellness information from influencers?

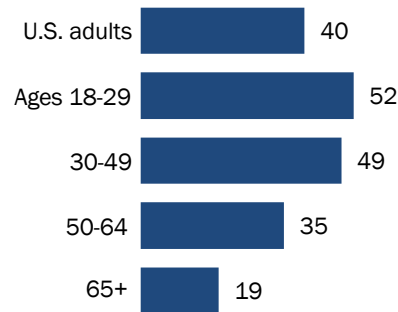
Four-in-ten U.S. adults – and half of those under the age of 50 – say they ever get health and wellness information from social media influencers or podcasts. This is similar to the share who at least sometimes [gets health information from social media in general](#).

Certain groups are particularly likely to say they get health and wellness information from these influencers, including adults under 50; Black, Hispanic and Asian Americans; and those without health insurance.

Refer to [Appendix A](#) for a table showing detailed breakdowns of different groups.

Half of adults under 50 get information from health and wellness influencers

% of U.S. adults who say they ever get health/wellness information from social media influencers or podcasts



Note: Respondents who say they do not get health/wellness information from these sources or did not give an answer are not shown.

Source: Survey of U.S. adults conducted Oct. 20-26, 2025. "Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

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Where are health and wellness influencers found online?

Health and wellness influencers tend to congregate on social media sites that are centered around images or videos, rather than text.

Nearly all of the influencers we studied have an account on Instagram (86%), and substantial shares have accounts on video-focused sites like TikTok (62%) and YouTube (45%).

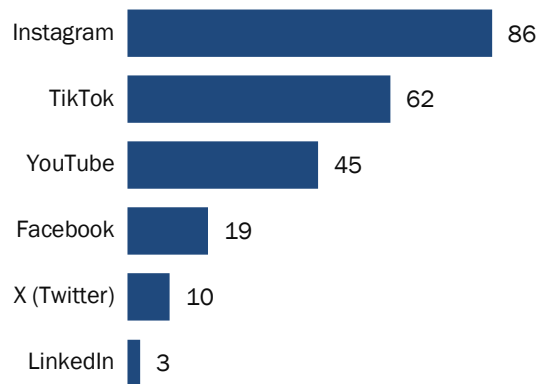
These influencers are less likely to be on other sites. About one-in-five are on Facebook (19%) and one-in-ten are on X (formerly Twitter). A number of other sites contain small shares of them (3% or less each). Most health and wellness influencers don't maintain a particularly broad presence: The accounts we looked at for this study maintain an account on just two social media sites on average.

This reflects a different outreach strategy than the one many *news* influencers follow. A [2024 Pew Research Center study](#) found that 85% of those influencers were on X, while 50% were on Instagram and 44% were on YouTube.

Of course, social media aren't the only way for an influencer to reach their audience. About one-in-ten (12%) host a podcast, and 2% have a Substack or Medium newsletter.

Vast majority of health and wellness influencers are on Instagram

% of health/wellness influencers who have an account on ...



Note: Sites where fewer than 3% of influencers have an account are not shown.

Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025.

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How do health and wellness influencers on social media describe their expertise?

Most Americans who get health and wellness information from social media influencers say they typically [come across this content rather than actively seek it out](#). When encountering a post in this way, viewers may wonder: Who is this person? Do they know what they're talking about? Why should I trust them?

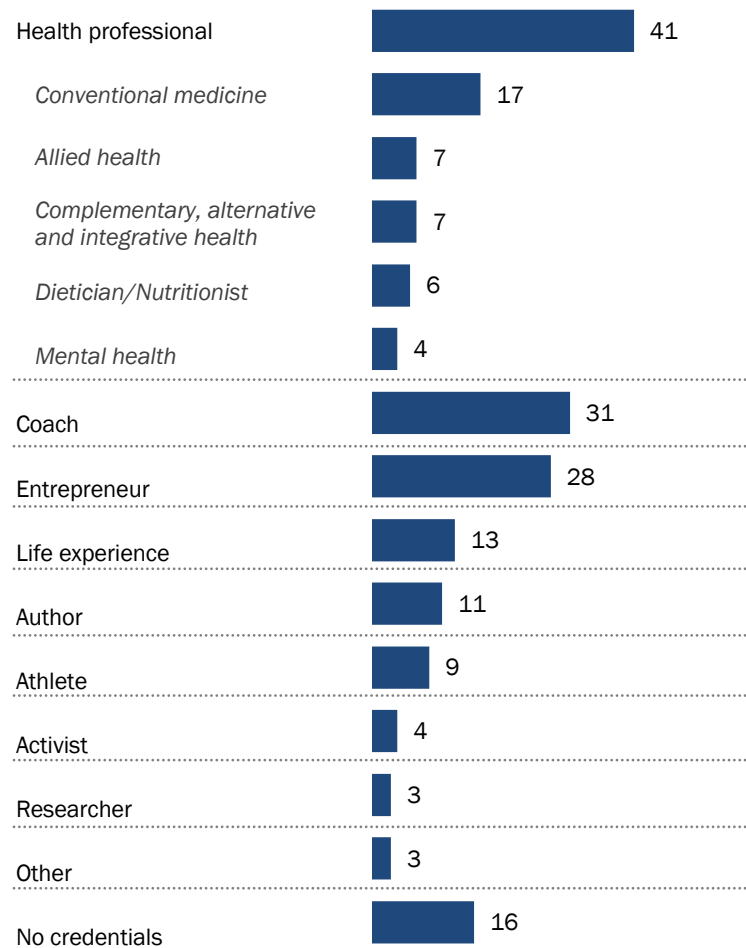
One way to answer these questions is to click through to the profile of the person who created the post. In that limited space, the creator can share a bit about themselves: information like their training (if any), what they do for a living or the kinds of life experiences they have. Some influencers offer a lot of information about themselves, while others simply describe the type of content they make.

Our analysis finds that **many health and wellness influencers describe themselves as**

some sort of health care professional – but a majority do not. Some 41% mention a health care profession in their profile.

41% of health and wellness influencers say they have a background as a health care professional

% of health/wellness influencers who say they are a(n) ___ in their social media bio



Note: "Other" refers to influencers who list credentials in their bio but do not have any credentials that fit into the other existing categories.

Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025.

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This category includes a range of specialties, some of which are outside the traditional Western medical establishment. And some influencers are included in more than one of these specialties:

- **Conventional medical professionals** like doctors, dentists and nurses. (17% of influencers fall into this category.)
- **Allied health professionals** like physical therapists or pharmacists (7%)
- **Complementary, alternative and integrative health professionals**, such as [functional medical practitioners, naturopaths, chiropractors or massage therapists](#) (7%)
- **Dieticians and nutritionists** (6%)
- **Mental health professionals**, including psychiatrists and social workers (4%)

Health care professional is the most common profession or background we found in these influencer profiles. But other types of expertise are common as well:

- **Coaches:** 31% of these influencers describe themselves as coaches, such as diet, fitness and/or life coaches. Many offer one-on-one services or guides.
- **Entrepreneurs:** 28% are entrepreneurs or business owners. These accounts typically mention a wellness studio or medical practice they own or the licensed products or treatments they offer.
- **Those who cite their life history or experience:** 13% mention things like a medical condition they have or have had, their journey to lose weight or improve their fitness, or their experience as a caregiver.

An influencer's profession can be a reason for their audience to trust them, but **16% of health and wellness influencers on social media do not mention anything about their background or expertise in their bios**. Many of these profiles contain very little text or include descriptions of the content they post rather than listing credentials.

What share of health and wellness influencers are men or women?

Women are huge drivers of [health care spending decisions in America](#) compared with men. Health and wellness influencers reflect that gender dynamic: **64% of these influencers are women, while 34% are men.** This is nearly the opposite of the gender split in a [2024 Center study of news influencers](#) (63% of whom were men).

How men and women signal their expertise

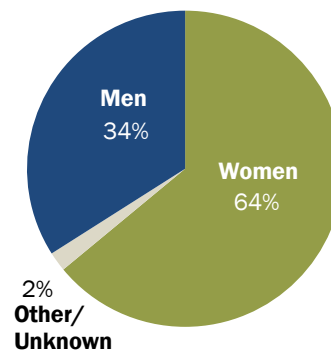
There are relatively few differences in how men and women who are health and wellness influencers describe their backgrounds and expertise. However, there are some differences around certain categories.

Women are especially likely to cite their life experiences in their social media account bios. Some 16% of health and wellness influencers who are women do this, nearly double the share among men (9%).

Specifically, **references to parenthood** are a common differentiator between men and women. Women are about three times as likely to describe themselves as some variation of “mom” or “mother” (17%) than men are to mention their role as a father (6%). This includes both generic references to being a parent (“Mom of two”) as well as references that connect parenthood to their expertise in a particular field or topic (“ADHD mom”).

Nearly two-thirds of health and wellness influencers are women

% of health/wellness influencers who are ...



Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025. “Moms, Coaches, Doctors, Entrepreneurs: Who Are America’s Health and Wellness Influencers?”

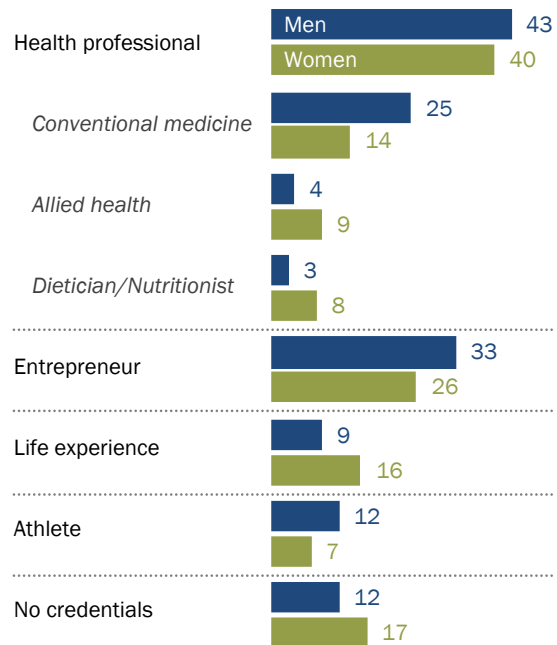
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In contrast, **health and wellness influencers who are men are more likely to say they are a conventional medical professional** (such as a doctor). Among these social media influencers, 25% of men mention these credentials, 11 percentage points higher than the share among women (14%). Slightly larger shares of men than women also mention their experience as an athlete or entrepreneur.

Beyond the broad category of conventional medical professional, health and wellness influencers who are men are more likely to describe themselves using specific terms like “doctor” (14% of men vs. 6% of women mention these in their bios) or “surgeon” (8% vs. 1%). Plastic surgeons particularly stand out in this regard: **Of all the accounts that mention plastic surgeon in their bios, 85% are men.**

Health and wellness influencers who are men are more likely to say they’re conventional medical professionals

% of health/wellness influencers who say they are a(n) ___ in their social media bios



Note: Some categories with less than a 5 percentage point difference between men and women are not shown.

Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025.

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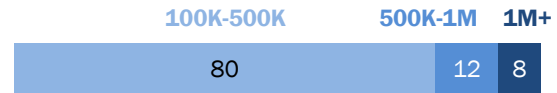
How many followers do popular health and wellness influencers have?

All of the social media influencers included in this analysis have at least 100,000 followers on Instagram, TikTok or YouTube. But a notable share has attracted an even wider audience. Some 8% have at least *1 million* followers on their most-followed account.

Just under half of these high-follower influencers are men (46%), which is more than the share of men among all health and wellness influencers (34%).

Around 1 in 10 health and wellness influencers have more than 1 million followers

% of health/wellness influencers with ___ followers on any site



Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025.

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Why do Americans get information from health and wellness influencers, and how do they find them?

Some 40% of U.S. adults say they ever get health and wellness information from social media influencers or podcasts. This analysis takes a deeper dive into the reasons Americans do this, how they come across these influencers and how they view the information these influencers offer.

Some of the key takeaways:

- **The desire to make a health or lifestyle change is a key motivating factor.** Some 41% of Americans who get health and wellness information from influencers say this is a major reason for doing so.
- **Young adults are particularly likely to tune in to health and wellness influencers for entertainment.** One-third of these consumers ages 18 to 29 say that entertainment is a major factor for them.
- **Most get this information because they happen to come across it.** Two-thirds of these consumers say they mostly get information from health and wellness influencers because they happen to come across it, double the share who says they are usually looking for it.
- **About one-in-five say the information they get from these influencers is extremely or very different than what they get from health care providers.** About twice as many (38%) say it's not too or not at all different.

Other parts of this study look at the [characteristics of health and wellness influencers](#) themselves, [the topics people say they learn about](#) from them and [how much people trust the information](#) they provide.

Why people get health and wellness information from influencers and podcasts

Our June survey asked about several reasons why people might get health and wellness information from social media influencers.

The **desire to make a change in one’s health or lifestyle** is the most prominent. Some 41% say this is a major reason why they turn to these influencers, and a similar share says it is a minor reason.

Around a quarter say **entertainment** is a major reason they get health information from these influencers, and around one-in-five say that **hearing from someone who shares similar personal beliefs or background** is a major reason.

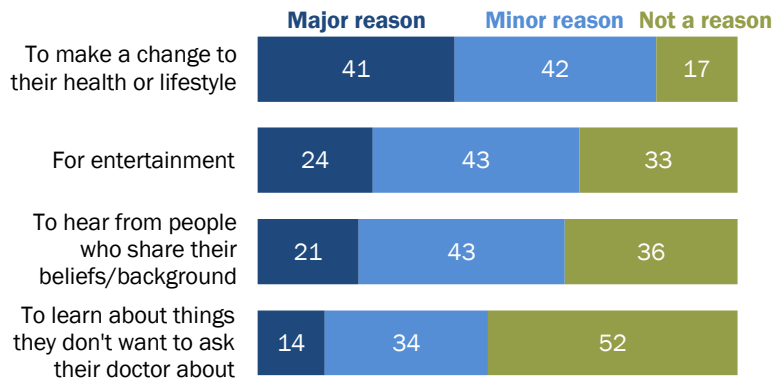
Entertainment is especially relevant to younger adults. One-third of health and wellness influencer consumers ages 18 to 29 say this is a major reason for them. That share drops to 26% among those ages 30 to 49 and to 13% among those 50 and older.

Of those who get health and wellness information from these influencers, 14% say that **learning about things they don’t want to ask their doctor about** is a major reason they turn to influencers, which is the lowest share among the reasons we asked about. But this is not uniform across all groups. For example, around 20% of Black, Hispanic and Asian health and wellness influencer consumers each say this is a major reason for them, compared with 10% of White consumers.

Refer to [Appendix A](#) for detailed breakdowns of these demographic categories.

Making a health/lifestyle change is a common reason people get info from health and wellness influencers

% of health/wellness influencer consumers who say each of the following is a ___ why they get health/wellness information from influencers



Note: “Health/wellness influencer consumers” refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who did not give an answer are not shown. Source: Survey of U.S. adults conducted June 9-15, 2025. “Moms, Coaches, Doctors, Entrepreneurs: Who Are America’s Health and Wellness Influencers?”

Do people seek out information from health and wellness influencers or just come across it?

Two-thirds of health and wellness influencer consumers (67%) say they mostly get that information because they happen to come across it. Fewer (33%) say they mostly get it because they are directly looking for it.

This reflects broader trends in the information environment. A [recent study of news habits around news influencers](#) found virtually the same share (69%) gets news from news influencers because they come across it, while 31% seek it out.

Do health and wellness influencers offer different information than health care providers?

When they get health-related information from health or wellness influencers, consumers are more likely to say that information is *similar* to what they get from health care providers than to say it is *different*.

About one-in-five of these consumers (18%) say the information these influencers provide is *extremely or very* different from the information they get from health care providers. Around twice that share – 38% – say this information is *not too or not at all* different. Another 43% are in the middle and say this information is somewhat different.

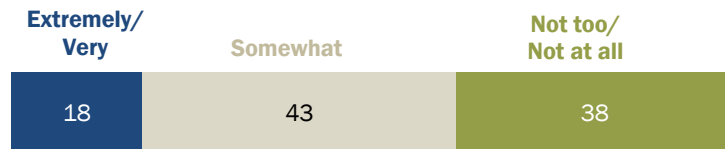
Across demographic groups, few health and wellness influencer consumers say the information they get from these influencers is extremely or very different from what they get from traditional health care providers.

But a slightly larger share of Black health and wellness influencer consumers say this information is extremely or very different (24%) relative to White (16%) or Asian consumers (14%). And 23% of those with lower incomes say this, compared with 13% of upper-income consumers.

For more information on demographic breaks, refer to [Appendix A](#).

Few say info from health/wellness influencers differs a lot from what they get from health care providers

% of health/wellness influencer consumers who say the information they get from influencers is ___ different from what they get from health care providers



Note: "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts.

Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted Oct. 20-26, 2025.

"Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

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Trust in health and wellness influencers

Some 40% of U.S. adults say they ever get health and wellness information from social media influencers or podcasts. This analysis takes a deeper dive into these Americans' experiences with these influencers – how much they trust them, what they learn, and how the information they get makes them feel about their health.

Some of the key takeaways:

- **Those who get health and wellness information from these influencers are mixed on how much to trust it:** 10% say they trust all or most of the information they get from these influencers, but 24% say they trust not too much or none of it. The largest share (65%) falls somewhere in the middle and says they trust some of it.
- Around half of these consumers say these influencers help them **better understand how to be healthy**. And young adults stand out as the age group most likely to say the information they get from these influencers makes them more worried about their overall health.

Other parts of this study look at the [characteristics of health and wellness influencers](#) themselves, [why people follow these influencers](#) and how they find them, and [the topics they learn about](#) from them.

How much people trust information from health and wellness influencers

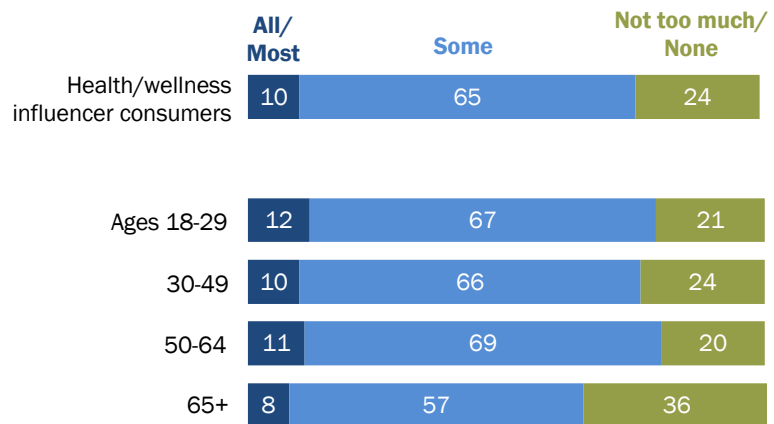
Just one-in-ten health and wellness influencer consumers say they trust *all or most* of the information they get from these influencers. More than twice that share (24%) say they trust *not too much or none* of it.

The largest share – around two-thirds – is in the middle, saying they trust *some* of this information.

Older adults express more skepticism of the information they get from these influencers than younger age groups. Some 36% of health and wellness influencer consumers ages 65 and older say they trust not too much or none of that information.

Older adults are more skeptical of health/wellness information from health and wellness influencers

% of health/wellness influencer consumers who say they trust ___ of the information they get from these influencers



Note: "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted June 9-15, 2025.

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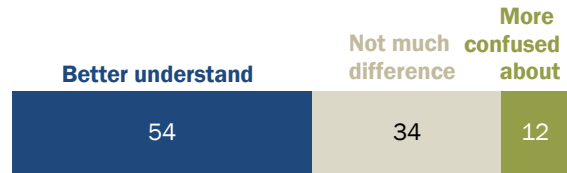
Other research by the Pew Research Center has found that those 65 and older are consistently less likely to [trust the information they get on social media](#) relative to younger age groups.

How information from health and wellness influencers makes people feel about their health

Many find these influencers to be helpful: 54% of those who get health and wellness information from social media influencers or podcasts say it has **helped them better understand how to be healthy**. Far fewer (12%) say it has made them more confused about how to be healthy, and 34% say it hasn't made much difference either way. This pattern tends to show up across demographic groups.

54% of health/wellness influencer consumers say influencers help them better understand how to be healthy

% of health/wellness influencer consumers who say influencers have made them ___ how to be healthy



Note: "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted Oct. 20-26, 2025. "Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

Meanwhile, 26% of these consumers say this information has **made them more worried about their overall health**. A similar share (22%) says it has made them *less* worried. About half say it hasn't made much difference either way.

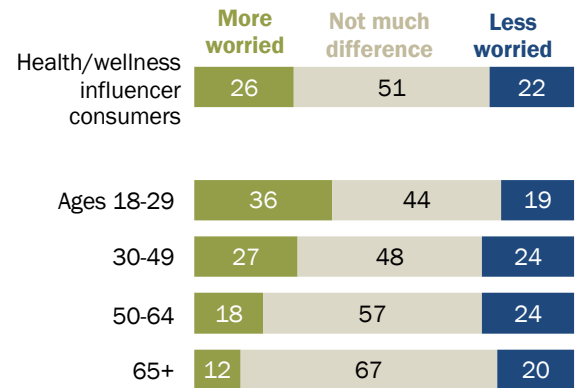
Younger adults are especially likely to say that information from these influencers makes them feel more worried about their overall health.

Some 36% of health and wellness influencer consumers ages 18 to 29 say this.

For more information on demographic breaks, refer to [Appendix A](#).

Young adults more likely to get worried by health and wellness information from influencers

% of health/wellness influencer consumers who say the information they get from influencers makes them feel ___ about their health



Note: "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted Oct. 20-26, 2025.

"Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

The topics Americans learn about from health and wellness influencers

Some 40% of U.S. adults say they ever get health information from social media influencers or podcasts. This analysis looks at some of the specific topics Americans get from these influencers.

Some of the key takeaways:

- **Those who get health and wellness information from social media influencers hear about a wide range of topics.** Around a third or more say they often hear about topics like fitness, weight loss and personal appearance.
- **Younger adults and women are especially likely to hear about certain topics.** Those ages 18 to 29 are especially likely to hear about topics like fitness or mental health, and larger shares of women than men hear about beauty and personal appearance.

Other parts of this study look at the [characteristics of health and wellness influencers](#) themselves, [why people follow them](#) and how they find them, and [how much people trust the information](#) they provide.

Key terms used on this page [BOX]

In our survey, we asked whether Americans ever get health and wellness information from social media influencers or from podcasts. In discussing the findings, we use “**health and wellness influencers**” to refer to these two sources. We also use “**health and wellness influencer consumer**” to refer to U.S. adults who say they ever get information about health and wellness from social media influencers or podcasts.

The topics health and wellness influencer consumers say they hear about often

There are many topics that health and wellness influencers might talk about, but what do audiences actually get? We asked these consumers how much they are hearing about seven different health topics.

Their responses highlight the broad range of topics that these influencers discuss.

A majority of wellness influencer consumers say they hear about each of seven topics asked about at least sometimes.

But certain topics are especially common. Notably, a third or more of health and wellness influencer consumers say they often hear about topics like fitness, weight loss and beauty or personal appearance. And 19% say they often hear about *all three* of these topics.

This just scratches the surface though: 85% of these users say they at least sometimes hear about topics related to living a healthy lifestyle *other than* the seven we included in the survey. Around a third say they hear about these other topics often.

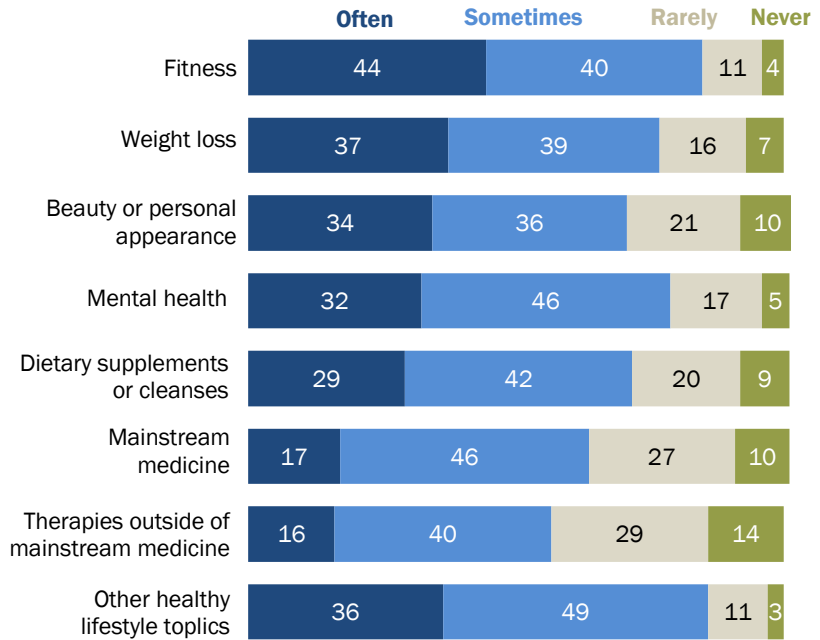
Differences by age

Younger health and wellness influencer consumers are especially likely to encounter some of these topics. For instance, 51% of these younger consumers *often* get content related to fitness.

Mental health is also a topic that younger adults encounter more frequently. Some 39% of these consumers ages 18 to 29 say they hear about mental health and well-being often. That share falls

Fitness, weight loss and beauty among the topics people hear about often from wellness influencers

% of health/wellness influencer consumers who say they hear about the following topics from influencers ...



Note: "Health/Wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted June 9-15, 2025.

"Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

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to 25% among those 50 to 64 and 21% among those 65 and older. In Pew Research Center's [recent study](#) on health information and trust, younger adults were especially likely [to rate their mental health as fair or poor](#).

Differences by gender

Half or more of both men and women who get health and wellness information from influencers say they at least sometimes encounter all of the topics we asked about in the survey. But there are certain topics that women get much more frequently than men. Most notably, women are around twice as likely as men to say they often hear about beauty and personal appearance from wellness influencers (44% vs. 20%).

For more information on demographic differences, refer to [Appendix A](#).

Acknowledgments

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pewresearch.org.

Primary researchers

Galen Stocking, *Associate Director, Science and Society Research*

Regina Widjaya, *Computational Social Scientist*

Anna Lieb, *Computational Social Science Assistant*

Kaitlyn Radde, *Computational Social Science Assistant*

Aaron Smith, *Director, Data Labs*

Eileen Yam, *Director, Science and Society Research*

Research team

Sawyer Reed, *Research Assistant*

Sofia Conway, *Qualitative Analysis Intern*

Devin Teehan, *Qualitative Analysis Intern*

Emma Kikuchi, *Research Analyst*

Isabelle Pula, *Research Assistant*

Skyler Seets, *Computational Social Science Assistant*

Editorial and graphic design

Mia Hennen, *Editorial Assistant*

Peter Bell, *Associate Director, Design and UX*

Bill Webster, *Senior Information Graphics Designer*

Communications and web publishing

Sogand Afkari, *Communications Manager*

Haley Nolan, *Communications Manager*

Ashley Loprete, *Communications Associate*

Talia Price, *Communications Associate*

Rachel Drian, *Associate Director, Communications*

Sara Atske, *Digital Producer*

Janakee Chavda, *Associate Digital Producer*

Madelyn Bonkoski, *Assistant Audience Editor*

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Methodology

This report aims to gain an understanding of social media influencers who focus on health and wellness topics and the experience of U.S. adults who get such information from these influencers. It uses two different methodologies, including an analysis of health and wellness influencers who regularly post on Instagram, TikTok or YouTube, as well as a nationally representative survey of U.S. adults conducted through Pew Research Center’s American Trends Panel (ATP).

Survey

Survey data in this report comes from two waves of the American Trends Panel (ATP), Pew Research Center’s nationally representative panel of randomly selected U.S. adults. It includes data from ATP Wave 173, conducted June 9-15, 2025, and ATP Wave 182, conducted Oct. 20-26, 2025.

The American Trends Panel survey methodology, Wave 173

Overview

Wave 173 of the American Trends Panel (ATP) was conducted June 9-15, 2025. A total of 5,023 panelists responded out of 5,737 who were sampled, for a survey-level response rate of 88%.

The cumulative response rate accounting for nonresponse to the recruitment surveys and attrition is 3%. The break-off rate among panelists who logged on to the survey and completed at least one item is 1%. The margin of sampling error for the full sample of 5,023 respondents is plus or minus 1.6 percentage points.

The survey includes an [oversample](#) of non-Hispanic Asian adults in order to provide more precise estimates of the opinions and experiences of this smaller demographic subgroup. Oversampled groups are weighted back to reflect their correct proportions in the population.

SSRS conducted the survey for Pew Research Center via online (n=4,842) and live telephone (n=181) interviewing. Interviews were conducted in both English and Spanish.

To learn more about the ATP, read [“About the American Trends Panel.”](#)

Panel recruitment

Since 2018, the ATP has used address-based sampling (ABS) for recruitment. A study cover letter and a pre-incentive are mailed to a stratified, random sample of households selected from the U.S. Postal Service’s Computerized Delivery Sequence File. This Postal Service file has been

estimated to cover 90% to 98% of the population.¹ Within each sampled household, the adult with the next birthday is selected to participate. Other details of the ABS recruitment protocol have changed over time but are available upon request.² Prior to 2018, the ATP was recruited using landline and cellphone random-digit-dial surveys administered in English and Spanish.

A national sample of U.S. adults has been recruited to the ATP approximately once per year since 2014. In some years, the recruitment has included additional efforts (known as an “oversample”) to improve the accuracy of data for underrepresented groups. For example, Hispanic adults, Black adults and Asian adults were oversampled in 2019, 2022 and 2023, respectively.

Sample design

The overall target population for this survey was noninstitutionalized persons ages 18 and older living in the United States. It featured a stratified random sample from the ATP in which non-Hispanic Asian adults were selected with certainty. The remaining panelists were sampled at rates designed to ensure that the share of respondents in each stratum is proportional to its share of the U.S. adult population to the greatest extent possible. Respondent weights are adjusted to account for differential probabilities of selection as described in the Weighting section below.

Questionnaire development and testing

The questionnaire was developed by Pew Research Center in consultation with SSRS. The web program used for online respondents was rigorously tested on both PC and mobile devices by the SSRS project team and Pew Research Center researchers. The SSRS project team also populated test data that was analyzed in SPSS to ensure the logic and randomizations were working as intended before launching the survey.

Incentives

All respondents were offered a post-paid incentive for their participation. Respondents could choose to receive the post-paid incentive in the form of a check or gift code to Amazon.com, Target.com or Walmart.com. Incentive amounts ranged from \$5 to \$20 depending on whether the respondent belongs to a part of the population that is harder or easier to reach. Differential incentive amounts were designed to increase panel survey participation among groups that traditionally have low survey response propensities.

Data collection protocol

¹ AAPOR Task Force on Address-based Sampling. 2016. “AAPOR Report: Address-based Sampling.”

² Email pewsurveys@pewresearch.org.

The data collection field period for this survey was June 9 to 15, 2025. Surveys were conducted via self-administered web survey or by live telephone interviewing.

For panelists who take surveys online:³ Postcard notifications were mailed to a subset on June 9.⁴ Survey invitations were sent out in two separate launches: soft launch and full launch. Sixty panelists were included in the soft launch, which began with an initial invitation sent on June 9. All remaining English- and Spanish-speaking sampled online panelists were included in the full launch and were sent an invitation on June 10.

**Invitation and reminder dates for web respondents,
ATP Wave 173**

	Soft launch	Full launch
Initial invitation	June 9, 2025	June 10, 2025
First reminder	June 12, 2025	June 12, 2025
Final reminder	June 14, 2025	June 14, 2025

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Panelists participating online were sent an email invitation and up to two email reminders if they did not respond to the survey. ATP panelists who consented to SMS messages were sent an SMS invitation with a link to the survey and up to two SMS reminders.

For panelists who take surveys over the phone with a live interviewer:

Prenotification postcards were mailed on June 6. Soft launch took place on June 9 and involved dialing until a total of seven interviews had been completed. All remaining English- and Spanish-speaking sampled phone panelists' numbers were dialed throughout the remaining field period. Panelists who take surveys via phone can receive up to six calls from trained SSRS interviewers.

Data quality checks

To ensure high-quality data, Center researchers performed data quality checks to identify any respondents showing patterns of satisficing. This includes checking for whether respondents left questions blank at very high rates or always selected the first or last answer presented. As a

³ The ATP does not use routers or chains in any part of its online data collection protocol, nor are they used to direct respondents to additional surveys.

⁴ Postcard notifications for web panelists are sent to 1) panelists who were recruited within the last two years and 2) panelists recruited prior to the last two years who opt to continue receiving postcard notifications.

result of this checking, three ATP respondents were removed from the survey dataset prior to weighting and analysis.

Weighting

The ATP data is weighted in a process that accounts for multiple stages of sampling and nonresponse that occur at different points in the panel survey process. First, each panelist begins with a base weight that reflects their probability of recruitment into the panel. These weights are then calibrated to align with the population benchmarks in the accompanying table to correct for nonresponse to recruitment surveys and panel attrition. If only a subsample of panelists was invited to participate in the wave, this weight is adjusted to account for any differential probabilities of selection.

Among the panelists who completed the survey, this weight is then calibrated again to align with the population benchmarks identified in the accompanying table and trimmed at the 1st and 99th percentiles to reduce the loss in precision stemming from variance in the weights. Sampling errors and tests of statistical significance take into account the effect of weighting.

American Trends Panel weighting dimensions

Variable	Benchmark source
Age (detailed)	2023 American Community Survey (ACS)
Age x Gender	
Education x Gender	
Education x Age	
Race/Ethnicity x Education	
Race/Ethnicity x Gender	
Race/Ethnicity x Age	
Born inside vs. outside the U.S. among Hispanics and Asian Americans	
Years lived in the U.S.	
Census region x Metropolitan status	
Volunteerism	2023 CPS Volunteering & Civic Life Supplement
Frequency of internet use	2024 National Public Opinion Reference Survey (NPORS)
Religious affiliation	
Party affiliation x Race/Ethnicity	
Party affiliation x Age	
Validated 2024 presidential election turnout and vote choice	Candidate vote share is based on official results from the Federal Election Commission. Turnout is based on estimates from the Election Lab at the University of Florida. The size of the voting-eligible population is based on the 2023 ACS.

Note: Estimates from the ACS are based on noninstitutionalized adults. For weighting to the 2024 presidential election results, panelists are considered validated voters if their self-report of having voted was confirmed after matching to a national voter registry.

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The following table shows the unweighted sample sizes and the error attributable to sampling that would be expected at the 95% level of confidence for different groups in the survey.

Sample sizes and margins of error, ATP Wave 173

Group	Unweighted sample size	Plus or minus ...
Total sample	5,023	1.6 percentage points
Health and wellness influencer consumers	2,187	2.4 percentage points

Note: This survey includes an oversample of non-Hispanic Asian respondents. Unweighted sample sizes do not account for the sample design or weighting and do not describe a group's contribution to weighted estimates. Refer to the Sample design and Weighting sections above for details.

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Sample sizes and sampling errors for other subgroups are available upon request. In addition to sampling error, one should bear in mind that question wording and practical difficulties in conducting surveys can introduce error or bias into the findings of opinion polls.

Dispositions and response rates

Final dispositions, ATP Wave 173

	AAPOR code	Total
Completed interview	1.1	5,023
Logged in (web)/Contacted (CATI), but did not complete any items	2.11	117
Started survey; broke off before completion	2.12	46
Never logged on (web)/Never reached on phone (CATI)	2.20	548
Survey completed after close of the field period	2.27	0
Other noninterview	2.30	0
Completed interview but was removed for data quality	2.90	3
Total panelists sampled for the survey		5,737
Completed interviews	I	5,023
Partial interviews	P	0
Refusals	R	163
Noncontact	NC	548
Other	O	3
Unknown household	UH	0
Unknown other	UO	0
Not eligible	NE	0
Total		5,737
AAPOR RR1 = $I/(I+P+R+NC+O+UH+UO)$		88%

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Cumulative response rate, ATP Wave 173

	Total
Weighted response rate to recruitment surveys	11%
% of recruitment survey respondents who agreed to join the panel, among those invited	73%
% of those agreeing to join who were active panelists at start of Wave 173	34%
Response rate to Wave 173 survey	88%
Cumulative response rate	3%

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The American Trends Panel survey methodology, Wave 182

Overview

Wave 182 of the American Trends Panel (ATP) was conducted from Oct. 20 to 26, 2025. A total of 5,111 panelists responded out of 5,866 who were sampled, for a survey-level response rate of 87%.

The cumulative response rate accounting for nonresponse to the recruitment surveys and attrition is 3%. The break-off rate among panelists who logged on to the survey and completed at least one item is 1%. The margin of sampling error for the full sample of 5,111 respondents is plus or minus 1.7 percentage points.

The survey includes an [oversample](#) of non-Hispanic Asian adults and parents with children younger than 18 in order to provide more precise estimates of the opinions and experiences of these smaller demographic subgroups. These oversampled groups are weighted back to reflect their correct proportions in the population.

SSRS conducted the survey for Pew Research Center via online (n=4,945) and live telephone (n=166) interviewing. Interviews were conducted in both English and Spanish.

To learn more about the ATP, read [“About the American Trends Panel.”](#)

Panel recruitment

Since 2018, the ATP has used address-based sampling (ABS) for recruitment. A study cover letter and a pre-incentive are mailed to a stratified, random sample of households selected from the U.S. Postal Service’s Computerized Delivery Sequence File. This Postal Service file has been estimated to cover 90% to 98% of the population.⁵ Within each sampled household, the adult with the next birthday is selected to participate. Other details of the ABS recruitment protocol have changed over time but are available upon request.⁶ Prior to 2018, the ATP was recruited using landline and cellphone random-digit-dial surveys administered in English and Spanish.

A national sample of U.S. adults has been recruited to the ATP approximately once per year since 2014. In some years, the recruitment has included additional efforts (known as an “oversample”) to improve the accuracy of data for underrepresented groups. For example, Hispanic adults, Black adults and Asian adults were oversampled in 2019, 2022 and 2023, respectively.

⁵ AAPOR Task Force on Address-based Sampling. 2016. [“AAPOR Report: Address-based Sampling.”](#)

⁶ Email pewsurveys@pewresearch.org.

Sample design

The overall target population for this survey was noninstitutionalized persons ages 18 and older living in the United States. It featured a stratified random sample from the ATP in which non-Hispanic Asian adults and parents with children younger than 18 were selected with certainty. The remaining panelists were sampled at rates designed to ensure that the share of respondents in each stratum are proportional to its share of the U.S. adult population to the greatest extent possible. Respondent weights are adjusted to account for differential probabilities of selection as described in the Weighting section below.

Questionnaire development and testing

The questionnaire was developed by Pew Research Center in consultation with SSRS. The web program used for online respondents was rigorously tested on both PC and mobile devices by the SSRS project team and Pew Research Center researchers. The SSRS project team also populated test data that was analyzed in SPSS to ensure the logic and randomizations were working as intended before launching the survey.

Incentives

All respondents were offered a post-paid incentive for their participation. Respondents could choose to receive the post-paid incentive in the form of a check or gift code to Amazon.com, Target.com or Walmart.com. Incentive amounts ranged from \$5 to \$20 depending on whether the respondent belongs to a part of the population that is harder or easier to reach. Differential incentive amounts were designed to increase panel survey participation among groups that traditionally have low survey response propensities.

Data collection protocol

The data collection field period for this survey was Oct. 20 to 26, 2025. Surveys were conducted via self-administered web survey or by live telephone interviewing.

For panelists who take surveys online:⁷ Postcard notifications were mailed to a subset on Oct. 20.⁸ Survey invitations were sent out in two separate launches: soft launch and full launch. Sixty panelists were included in the soft launch, which began with an initial invitation sent on Oct. 20. All remaining English- and Spanish-speaking sampled online panelists were included in the full launch and were sent an invitation on Oct. 21.

⁷ The ATP does not use routers or chains in any part of its online data collection protocol, nor are they used to direct respondents to additional surveys.

⁸ Postcard notifications for web panelists are sent to 1) panelists who were recruited within the last two years and 2) panelists recruited prior to the last two years who opt to continue receiving postcard notifications.

Invitation and reminder dates for web respondents, ATP Wave 182

	Soft launch	Full launch
Initial invitation	Oct. 20, 2025	Oct. 21, 2025
First reminder	Oct. 23, 2025	Oct. 23, 2025
Final reminder	Oct. 25, 2025	Oct. 25, 2025
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Panelists participating online were sent an email invitation and up to two email reminders if they did not respond to the survey. ATP panelists who consented to SMS messages were sent an SMS invitation with a link to the survey and up to two SMS reminders.

For panelists who take surveys over the phone with a live interviewer:

Prenotification postcards were mailed on Oct. 17. Soft launch took place on Oct. 20 and involved dialing until a total of four interviews had been completed. All remaining English- and Spanish-speaking sampled phone panelists' numbers were dialed throughout the remaining field period. Panelists who take surveys via phone can receive up to six calls from trained SSRS interviewers.

Data quality checks

To ensure high-quality data, Center researchers performed data quality checks to identify any respondents showing patterns of satisficing. This includes checking for whether respondents left questions blank at very high rates or always selected the first or last answer presented. As a result of this checking, three ATP respondents were removed from the survey dataset prior to weighting and analysis.

Weighting

The ATP data is weighted in a process that accounts for multiple stages of sampling and nonresponse that occur at different points in the panel survey process. First, each panelist begins with a base weight that reflects their probability of recruitment into the panel. These weights are then calibrated to align with the population benchmarks in the accompanying table to correct for nonresponse to recruitment surveys and panel attrition. If only a subsample of panelists was invited to participate in the wave, this weight is adjusted to account for any differential probabilities of selection.

Among the panelists who completed the survey, this weight is then calibrated again to align with the population benchmarks identified in the accompanying table and trimmed at the 1st and

99th percentiles to reduce the loss in precision stemming from variance in the weights. Sampling errors and tests of statistical significance take into account the effect of weighting.

American Trends Panel weighting dimensions

Variable	Benchmark source
Age (detailed)	2023 American Community Survey (ACS)
Age x Gender	
Education x Gender	
Education x Age	
Race/Ethnicity x Education	
Race/Ethnicity x Gender	
Race/Ethnicity x Age	
Born inside vs. outside the U.S. among Hispanics and Asian Americans	
Years lived in the U.S.	
Census region x Metropolitan status	
Volunteerism	
Frequency of internet use	2025 National Public Opinion Reference Survey (NPORS)
Religious affiliation	
Party affiliation x Race/Ethnicity	
Party affiliation x Age	
Validated 2024 presidential election turnout and vote choice	Candidate vote share is based on official results from the Federal Election Commission. Turnout is based on estimates from the Election Lab at the University of Florida. The size of the voting-eligible population is based on the 2023 ACS.

Note: Estimates from the ACS are based on noninstitutionalized adults. For weighting to the 2024 presidential election results, panelists are considered validated voters if their self-report of having voted was confirmed after matching to a national voter registry.

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The following table shows the unweighted sample sizes and the error attributable to sampling that would be expected at the 95% level of confidence for different groups in the survey.

Sample sizes and margins of error, ATP Wave 182

Group	Unweighted sample size	Plus or minus ...
U.S. adults	5,111	1.7 percentage points
Health and wellness influencer consumers	2,183	2.6 percentage points

Note: This survey includes oversamples of non-Hispanic Asian adults and parents with children younger than 18. Family income tiers are based on adjusted 2024 earnings. Unweighted sample sizes do not account for the sample design or weighting and do not describe a group's contribution to weighted estimates. Refer to the Sample design and Weighting sections above for details.

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Sample sizes and sampling errors for other subgroups are available upon request. In addition to sampling error, one should bear in mind that question wording and practical difficulties in conducting surveys can introduce error or bias into the findings of opinion polls.

A note about the Asian adult sample

This survey includes a total sample size of 559 Asian adults. The sample primarily includes English-speaking Asian adults and, therefore, may not be representative of the overall Asian adult population. Despite this limitation, it is important to report the views of Asian adults on the topics in this study. As always, Asian adults' responses are incorporated into the general population figures throughout this report.

How family income tiers are calculated

Family income data reported in this study is adjusted for household size and cost-of-living differences by geography. Panelists then are assigned to income tiers that are based on the median adjusted family income of all American Trends Panel members. The process uses the following steps:

1. First, panelists are assigned to the midpoint of the income range they selected in a family income question that was measured on either the most recent annual profile survey or, for newly recruited panelists, their recruitment survey. This provides an approximate income value that can be used in calculations for the adjustment.
2. Next, these income values are adjusted for the cost of living in the geographic area where the panelist lives. This is calculated using price indexes published by the U.S. Bureau of Economic Analysis. These indexes, known as [Regional Price Parities](#) (RPP), compare the

prices of goods and services across all U.S. metropolitan statistical areas as well as non-metro areas with the national average prices for the same goods and services. The most recent available data at the time of the annual profile survey is from 2023. Those who fall outside of metropolitan statistical areas are assigned the overall RPP for their state's non-metropolitan area.

3. Family incomes are further adjusted for the number of people in a household using the methodology from Pew Research Center's previous work on [the American middle class](#). This is done because a four-person household with an income of say, \$50,000, faces a tighter budget constraint than a two-person household with the same income.
4. Panelists are then assigned an income tier. "Middle-income" adults are in families with adjusted family incomes that are between two-thirds and double the median adjusted family income for the full ATP at the time of the most recent annual profile survey. The median adjusted family income for the panel is roughly \$77,800. Using this median income, the middle-income range is about \$51,900 to \$155,600. Lower-income families have adjusted incomes less than \$51,900 and upper-income families have adjusted incomes greater than \$155,600 (all figures expressed in 2024 dollars and scaled to a household size of three). A panelist is assigned "no answer" in the income tier variable if they did not provide all three pieces of information needed to calculate their tier (family income, household size and residential address).

Two examples of how a given area's cost-of-living adjustment was calculated are as follows: the Pine Bluff metropolitan area in Arkansas is a relatively inexpensive area, with a price level that is 19.7% less than the national average. The San Francisco-Oakland-Berkeley metropolitan area in California is one of the most expensive areas, with a price level that is 18.2% higher than the national average. Income in the sample is adjusted to make up for this difference. As a result, a family with an income of \$40,200 in the Pine Bluff area is as well off financially as a family of the same size with an income of \$59,100 in San Francisco.

Dispositions and response rates

Final dispositions, ATP Wave 182

	AAPOR code	Total
Completed interview	1.1	5,111
Logged in (web)/Contacted (CATI), but did not complete any items	2.11	151
Started survey; broke off before completion	2.12	66
Never logged on (web)/Never reached on phone (CATI)	2.20	535
Survey completed after close of the field period	2.27	0
Other non-interview	2.30	0
Completed interview but was removed for data quality	2.90	3
Total panelists sampled for the survey		5,866
Completed interviews	I	5,111
Partial interviews	P	0
Refusals	R	217
Non-contact	NC	535
Other	O	3
Unknown household	UH	0
Unknown other	UO	0
Not eligible	NE	0
Total		5,866
AAPOR RR1 = $I/(I+P+R+NC+O+UH+UO)$		87%

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Cumulative response rate, ATP Wave 182

	Total
Weighted response rate to recruitment surveys	12%
% of recruitment survey respondents who agreed to join the panel, among those invited	74%
% of those agreeing to join who were active panelists at start of Wave 182	40%
Response rate to Wave 182 survey	87%
Cumulative response rate	3%

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Analysis of health and wellness influencers

To better understand the health and wellness landscape on social media, researchers conducted an in-depth analysis of influencers who discuss health and wellness topics to large U.S. audiences on Instagram, TikTok or YouTube.

In the social media analysis portion of this report, **health and wellness influencers** are defined as people (not organizations or brands) who regularly post health and wellness information on Instagram, TikTok or YouTube. To be included in this analysis, they must have at least 100,000 followers on one of those three social media sites, primarily discuss their content in English, and address a U.S. audience. For the purposes of this research, “**health and wellness**” refers to the information or discussion of treatments or lifestyle practices to improve or maintain physical or mental health or wellness. This may include medical advice, personal health testimonials, commentary and other holistic guidance for how to live a healthy lifestyle.

The final analysis was conducted on a sample of 6,828 health and wellness influencers that were identified through a combination of targeted health and wellness keyword searches and site auditing.

Key terms search

To focus our analysis on only influencers who discuss health and wellness topics, we started by developing a list of search terms that are relevant to wellness trends and current health discussions in the United States. We conducted a topic search for each key term on each of Instagram, TikTok, and YouTube using [Modash](#), a third-party social media marketing data platform.

From June to September 2025, five researchers brainstormed key terms across 14 health and wellness categories. These categories included physical health, mental health, diet and nutrition, beauty, supplements and vitamins, health philosophies, medical practices, women’s health, natural health, fitness, cosmetic treatments and surgeries, dental, sleep, and health devices. The initial list of topic key terms was built based on a review of existing literature on health and wellness influencers, qualitative analysis of topics mentioned by popular health and wellness influencers, and input from research team members with expertise in health and science. The topic key term list was further refined with iterative tests of search results across Instagram, TikTok and YouTube on Modash. Since each site is slightly different, we adjusted some of our search terms to return the largest set of results on each site. We also took note of algorithmically recommended similar searches and considered these for inclusion in our search term list.

For each search, we applied filters to get accounts that are based in the U.S., are operated by people (rather than businesses or organizations), post primarily in English, and have at least

100,000 followers. In total, we conducted the influencer account search with 333 key terms on Instagram, 334 on TikTok and 270 on YouTube from Sept. 19 to Oct. 9, 2025.

These searches resulted in 22,444 Instagram accounts, 21,152 TikTok accounts and 2,552 YouTube accounts (46,148 accounts in total).

Identifying additional influencers from podcasts

In the survey portion of this analysis, we asked U.S. adults about their experiences getting health and wellness information from social media influencers *and* podcasts. Although this report does not include findings from sites other than Instagram, TikTok, and YouTube, podcasts are an important part of the health and wellness influencer landscape. To ensure that popular podcast hosts were included in our set of influencers, we collected the [Spotify health and fitness podcast charts](#) (Top 50) and the [Apple Podcasts health and fitness top shows](#) (Top 100) each day from Aug. 12 to Sept. 14, 2025. Then, members of the research team manually reviewed the top podcasts that appeared most frequently in the Spotify and Apple charts.

For each podcast, we checked whether the host of the podcast was a health and wellness influencer on Instagram, TikTok or YouTube. Separately, we also checked accounts for each influencer on the [TIME100 Creators 2025](#) list. If we found that these podcast hosts and creators were health and wellness influencers but were not already included in our dataset of accounts, we collected their account data and added it to our dataset on Jan. 15 and 16, 2026. This process resulted in the addition of four influencer accounts – the vast majority of the accounts we found were already included in our dataset.

Account data collection

For each Instagram, TikTok and YouTube account that appeared in our health and wellness search results, we collected key account information including the account display name, username, bio text (or description text for YouTube), follower count, and up to 10 most recent posts. For the recent posts, we collected text data but not audio data or transcripts. Instagram and TikTok account data was collected using the [Modash Raw API](#), which provides real-time data from public social media profiles, while YouTube account data was collected directly using the [YouTube Data API](#). We ran the account data collection pipeline for all 46,148 accounts as soon as they appeared in our search results from Sept. 19 to Oct. 9, 2025.

Removing inactive accounts

To ensure we were only including accounts that were currently active, we used the account data to remove accounts from our dataset that had fewer than three posts in the last 90 days since account collection. After removing these inactive accounts, we had 35,325 accounts to analyze, including 18,581 from Instagram, 15,469 from TikTok and 1,275 from YouTube.

Health and wellness influencer verification

Next, we verified whether each of the 35,325 accounts we had collected belonged to health and wellness influencers. We were primarily concerned with two criteria: Did they regularly discuss health or wellness information? And do these accounts belong to individuals, rather than organizations or businesses?

To determine the extent to which these accounts had relevant content, researchers used the health and wellness definition provided above. Health and wellness information can include testimonials, commentary, advice, and product recommendations from conventional or alternative medicine as well as day-to-day healthy living. To be included, each account needed to discuss health and wellness topics in at least 30% of their 10 most recent posts. If an account appears to belong to a business or organization and not to individuals, then we did not label them as health and wellness influencers.

After finalizing the health and wellness influencer definition, two members of the research team labeled a random sample of 722 accounts from our set of Instagram, TikTok and YouTube accounts. For each account, the coders determined whether the account belonged to a health and wellness influencer, as defined above. The coders reached 88% agreement (Cohen’s kappa = 0.752), and all instances of disagreement between coders were resolved by a third member of the research team who was familiar with the health and wellness influencer definition.

OpenAI’s GPT-4.1 mini model was then used to classify all 35,325 active social media accounts in our dataset. For each account, we prompted the model with a codebook that included details about our health and wellness influencer definition, along with the account’s bio text, username, and text from up to 10 of their most recent posts. [Refer to the prompt](#) for more information about model input and the health and wellness influencer definition. Based on the human-annotated validation dataset, the model achieved 79% accuracy and an F1 score of 0.826. Refer to the “Model performance: Influencer identification” table for detailed performance metrics.

Overall, the machine classifier’s recall score was higher than its precision score, suggesting that the set labeled as health and wellness influencers included false positives. We found that false positives were particularly prevalent for YouTube accounts compared with the other two platforms. To mitigate this, one member of the research team who had previously been trained

Model performance: Influencer identification

GPT-4.1 mini classifier performance on a validation set of accounts from Instagram, TikTok and YouTube

	N	F1 score	Precision	Recall
All accounts	722	0.826	0.737	0.941
<i>By platform</i>				
Instagram	345	0.866	0.781	0.971
TikTok	281	0.800	0.742	0.868
YouTube	96	0.748	0.598	1.000

Note: Due to the low precision score for YouTube, all YouTube accounts classified as health and wellness influencers were further verified via manual review to remove false positives. “Moms, Coaches, Doctors, Entrepreneurs: Who Are America’s Health and Wellness Influencers?”

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on identifying these influencers manually reviewed all YouTube accounts that were classified as health and wellness influencers. Based on this manual review, we removed any false positive YouTube accounts that were not health and wellness influencers from our dataset.

Based on this analysis, 8,428 accounts of our original set of 35,325 were classified as belonging to a health and wellness influencer.

Influencer account matching

Our data collection process took place on an account-level basis, but many influencers have a presence across multiple sites. For example, one individual influencer with a consistent online persona might maintain popular accounts on both Instagram and TikTok. Therefore, to match influencers across sites, we used two different data sources: 1) links to other accounts found in the bio of each account we collected and 2) Modash influencer profile reports.

For each health and wellness influencer account in our dataset, we collected any links that were available in the account bio. For bios that included a link to an Instagram, TikTok or YouTube account, we checked whether the linked account was already available in our dataset. If the linked account was in our existing dataset, then the two accounts were marked as owned by the same influencer. If not, then the linked account was added to our dataset before being marked as owned by the same influencer as the original account. In cases where the linked account was previously labeled as not being a health and wellness account, the influencer was removed from our final dataset.

Instagram, TikTok and YouTube limit the number of links that a user can add to their bio. For this reason, some influencer bios include links to a landing page that aggregates many links related to that influencer, rather than linking to their other social media accounts in their bios directly. These sites, known as “microsites,” are common among content creators. To match more influencer accounts across sites, we collected data from microsites linked in account bios for the following microsite providers: Linktree, Stan Store, Beacons, hoo.be, Milkshake and Bio Sites. These were the most common sites used by the influencers in our dataset that were straightforward to collect with automated methods. We identified Instagram, TikTok and YouTube account links that were available on these microsites and marked them as belonging to the same influencer as the original account.

Finally, we also matched accounts across sites using influencer profile reports from Modash (the same social media data provider used for account search and data collection) using their [Discovery API](#). This report includes an influencer’s contact details, which contains information on their known social media accounts. We used this information to further match and consolidate the accounts in our collection to the individual influencers that own them.

Data from additional accounts identified during the account consolidation process was collected from Jan. 22 to 27, 2026, using the account data collection process described above. In total, this account matching process identified 5,441 additional influencer accounts from the three social media sites that we studied.

At this stage, we conducted a secondary language filtering step to ensure that all remaining influencer accounts posted primarily in English. We used the [langdetect Python package](#) to remove influencers for which more than 20% of recent posts across all accounts were in a language other than English.

These processes resulted in a final dataset of 6,828 influencers for analysis. From these influencers, we collected information on 12,800 accounts that consisted of:

- 5,766 Instagram accounts
- 4,124 TikTok accounts
- 2,910 YouTube accounts

A complete list of the influencers in our final dataset, including their handles across the three sites that we studied, is available to [download as a CSV](#).

Analysis of health and wellness influencer characteristics

To learn more about health and wellness influencers and how they describe themselves, we also analyzed the content of each influencer’s profile bio – including text and links – across Instagram, TikTok and YouTube.

Professions and credentials classification

Many health and wellness influencers in our dataset mention their profession or credentials in their profile bios, often to signal authority to speak on certain health and wellness topics.

After several rounds of qualitative reviews, we identified eight credentials that were frequently mentioned in these influencers’ bios: activist, athlete, author, coach, entrepreneur, health care professional, researcher, and life experience with certain health and wellness issues. For influencers with health care professional credentials, we further identified the type of health profession as conventional medicine; complementary, alternative, and integrative health; mental health; dietitians and nutritionists; and allied health professionals like physical therapists and pharmacists. Additionally, we identified accounts whose bio suggest they host a podcast.

Two members of the research team then labeled the credentials of a random sample of 500 influencers from our dataset. For each influencer, the coders reviewed the combined account bios of each influencer and assigned credential labels based on our list of health and wellness credentials. The credentials were not mutually exclusive; for example, an influencer could be labeled as both a coach and an author. Some influencers did not include any credentials in their bio. For this group, we assigned a “no credentials” code.

Ultimately, the two coders reached an average of 97% agreement (Cohen’s kappa = 0.817) across the credentials. All instances of disagreement between coders were resolved by a third member of the research team who was familiar with the credential categories and definitions.

OpenAI’s GPT-5.1 model was then used to identify the credentials of all influencers in our dataset. For each influencer, we prompted the model with a codebook that included details about our profession and credential cues, along with the influencer’s bio text, username and influencer display name for all available accounts. [Refer to the prompt](#) for more information about model input and the profession and credential definitions. We did not classify professions or credentials for influencers whose online presence included multiple people (such as an influencer duo or couple).

Based on the human-annotated validation dataset, the model achieved a weighted average accuracy of 94% and a weighted average F1 score of 0.831. Performance metrics by class are available in the “Model performance: Professions and credentials classification” table.

Gender classification

Most influencers portray themselves with text or images that the average person can perceive as gendered. In this analysis, we measure “perceived” gender based on four cues: pronouns, influencer name, explicit gendered identity cues (such as “father” or an emoji of a woman doctor), and images available in an influencer’s profile bios.

Using a similar approach to the professions coding, two members of the research team labeled the perceived gender for a random sample of 500 influencers from our dataset using the materials in their combined profile bios. The coders then marked an influencer as either a man, woman, non-binary person, “multiple genders” (if the accounts belonged to multiple people with different genders), or “unsure” if the influencer’s gender could not be determined.

Pronouns that influencers use to describe themselves were used as a first determinant of gender whenever possible. However, when pronouns were not available in the bio text, gender was

Model performance: Professions and credentials classification

GPT-5.1 classifier performance on a validation set of influencers

Profession or credential	F1 score	Precision	Recall
Activist	IS	IS	IS
Athlete	0.737	0.596	0.966
Author	0.925	0.942	0.907
Coach	0.935	0.908	0.963
Entrepreneur	0.792	0.688	0.934
Health professional	0.838	0.752	0.946
Allied health	0.667	0.516	0.941
Complementary, Alternative, and Integrative health	0.676	0.533	0.923
Conventional medicine	0.924	0.924	0.924
Mental health	0.920	0.920	0.920
Dietician or nutritionist	0.857	0.789	0.938
Unverified doctor	0.667	0.667	0.667
Life experience	0.878	0.831	0.931
Podcast host	0.897	0.875	0.921
Researcher	0.800	0.714	0.909
Other credentials	0.314	0.727	0.200
No credentials	0.845	0.857	0.833

Note: IS indicates that the given profession or credential had insufficient support to report performance metrics, with fewer than 10 instances in the validation set. “Other credentials” refers to influencers who list credentials in their bio but do not have any credentials that fit into the other existing categories.

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determined from explicit profile cues, followed by the gender of the influencer’s name, and finally, by the influencer’s profile picture if no other cues were available. Influencers who did not display any of the above cues were coded as “unsure.”

The two coders ultimately reached over 99% agreement on the final gender labels and all instances of disagreement were resolved by a third member of the research team. Refer to the “Inter-rater reliability scores for gender cue coding” table for more details.

OpenAI’s GPT-5.1 model was again used to identify the perceived gender of all influencers in our dataset. For each influencer, we prompted the model with a codebook that included gender cue classification instructions, along with the influencer’s bio text, username, and influencer display name for all available accounts. We used only text-based classification at this stage, so the profile picture was not included. [Refer to the prompt](#) for more information about model input and the gender cue definitions. Based on the human-annotated validation dataset, the model achieved over 99% accuracy and a weighted average F1 score of 0.987, with similarly high performance by class for men and women.⁹

Using the GPT-5.1-generated labels, we determined the final gender for each influencer in our dataset by aggregating the parsed cues as described above. About 9% of influencer genders were determined by pronouns available in the influencer’s bio texts, 35% were determined with explicit gender cues, and 41% were determined by the influencer’s name. For about 16% of influencers, gender could not be determined based on text-based review of the accounts alone. For these influencers, two members of the research team manually reviewed the influencer’s accounts and assigned a gender label based on the influencer’s profile picture and other available cues.

Bio link analysis

Influencers often use the links in their bios or microsites to link to their presence on other sites, including outreach channels like podcasts or newsletters and accounts on other social media

Inter-rater reliability scores for gender cues coding

Gender cue	Agreement	Cohen’s kappa
Pronouns	99%	0.883
Explicit cues	92%	0.845
Name	92%	0.872
Profile image	>99%	0.989
Collapsed label	99%	0.978

Note: “Collapsed label” represents the final gender label based on, in order of preference, the influencer pronouns, explicit cues, name and profile image.

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⁹ Class-wise accuracy and F1 score for “non-binary” and “multiple genders” labels are not reported here because they had very little support in the validation set (one or two instances, respectively).

sites. We used these links to identify additional sites and channels that other steps in our analysis did not capture.

We checked whether influencers linked to known podcast domains in their bios, including on microsites. If an influencer linked to a show listing on Spotify, Apple Podcasts, Podlink, Amazon Music, Downcast, Overcast, Fountain, Castbox, Audible, iHeart, TrueFans, iVoox, Pandora, Podcast Addict, Deezer, Goodpods, Player FM, podStation, Global Player, Podurama, Anytime Podcast Player, RSSRadio Podcast Player, gPodder, Podcast App, Podcast Guru, Podcast Republic, Podverse, Podbean, Castamatic, Castro, TuneIn, Pocket Casts or CurioCaster, we marked them as a podcast host. We did not include links to individual episodes as an indication for podcast affiliation. This process identified 272 podcast hosts.

We also used influencers' bio links to determine whether they maintained a presence on other social media sites outside of YouTube, Instagram and TikTok. We identified account links from 14 additional domains – X (Twitter), Facebook, Bluesky, LinkedIn, Threads, Telegram, Truth Social, Discord, Twitch, Rumble, Gab, Gettr, Bitchute and Snapchat – as an indicator of their presence in these sites. We excluded links to individual posts.

We used the same approach to determine whether influencers maintained a presence on two newsletter outreach channels, Substack and Medium.

Handling invalid health and wellness influencers

Throughout the various stages of manual review outlined above, we also took note of “false positive” influencers who were present in our influencer dataset but did not fit our definition of health and wellness influencers. These erroneous accounts are attributable to the automated account classification process, which labeled some accounts as health and wellness influencers that do not meet our standards for inclusion upon close human review. This type of error was expected based on the model performance metrics reported above that indicate higher recall than precision. After removing these false positives, our final dataset for this analysis included 6,828 health and wellness influencers.

Appendix A: Detailed Tables

Top 10 health and wellness influencers on each platform, by follower count

Instagram	TikTok	YouTube
Jay Shetty	Dr. Muneeb Shah	Sanjay Gupta
Sasha Pieterse Sheaffer	Sandra Lee, MD, FAAD, FAACS	Doctor Mike
Jen Selter	TheBentist	ATHLEAN-X
The Holistic Psychologist	Demi Bagby	Dr. Eric Berg DC
Jarek Tadia	Leana Deeb	Aдриene Mishler
Andrew Huberman, Ph.D.	Institute of Human Anatomy	Motivationaldoc
Miranda Cohen	Anthony Youn, MD	Sandra Lee, MD, FAAD, FAACS
Glucose Revolution	Lean Beef Patty	Institute of Human Anatomy
Jay Cutler	Doctor Ricky Plastic Surgeon	TheBentist
Lean Beef Patty	Paryss 譚	Jeff Nippard

Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025.

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Social media sites health and wellness influencers are on*% of health/wellness influencers on each site ...*

	%
Instagram	86
TikTok	62
YouTube	45
Facebook	19
X (Twitter)	10
LinkedIn	3
Snapchat	1
Threads	1
Telegram	1
Twitch	1
Substack	2

Note: Sites with fewer than 1% of health and wellness influencers not shown.

Source: Pew Research Center analysis of 6,828 influencers with over 100,000 followers who regularly posted about health and wellness on Instagram, TikTok or YouTube in mid-2025.

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Share who get health and wellness information from social media influencers or podcasts

% who say they ever get health and wellness information from social media influencers or podcasts

	Gets this information from social media influencers or podcasts
U.S. adults	40
Men	37
Women	42
White	35
Hispanic	47
Black	44
Asian*	48
Ages 18-29	52
30-49	49
50-64	35
65+	19
Rep/Lean Rep	41
Dem/Lean Dem	38
Insured	38
Not insured	53

* Estimates for Asian adults are representative of English speakers only.

Note: White, Black and Asian adults include those who report being only one race and are not Hispanic. Hispanic adults are of any race. Insured and uninsured refers to those who either have or do not have any form of health insurance. Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted Oct. 20-26, 2025

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Why health and wellness influencer consumers get information from health and wellness influencers

*% of health/wellness influencer consumers who say each of the following is a **major** reason why they get health/wellness information from influencers*

	To make a health/ lifestyle change	For entertainment	To hear from people who share their beliefs/backgrounds	To learn about things they don't want to ask their doctor about
Health/wellness influencer consumers	41	24	21	14
Men	37	24	18	12
Women	44	24	23	15
White	36	21	18	10
Hispanic	48	28	21	18
Black	43	27	26	19
Asian*	44	23	21	18
Ages 18-29	44	33	19	15
30-49	42	26	21	12
50-64	41	14	23	14
65+	30	11	18	14

* Estimates for Asian adults are representative of English speakers only.

Note: White, Black and Asian adults include those who report being only one race and are not Hispanic. Hispanic adults are of any race. "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who gave other responses "minor reason," "not a reason" or did not give a response are not shown.

Source: Survey of U.S. adults conducted June 9-15, 2025.

"Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

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How different is the information consumers get from health and wellness influencers and health care providers

% of health/wellness influencer consumers who say the information they get from influencers is ___ different from what they get from health care providers

	Extremely/Very	Somewhat	Not too/Not at all
Health/wellness influencer consumers	18	43	38
Men	17	44	39
Women	19	43	36
White	16	45	38
Hispanic	19	45	35
Black	24	37	36
Asian*	14	37	48
Ages 18-29	18	43	37
30-49	16	42	41
50-64	21	44	34
65+	17	45	34
Upper income	13	42	45
Middle income	17	46	37
Lower income	23	41	34
Insured	17	43	39
Not insured	23	45	30

* Estimates for Asian adults are representative of English speakers only.

Note: White, Black and Asian adults include those who report being only one race and are not Hispanic. Hispanic adults are of any race. Family income tiers are based on adjusted 2024 earnings. "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Insured and uninsured refers to those who either have or do not have any form of health insurance.

Respondents who did not give an answer are not shown.

Source: Survey of U.S. adults conducted Oct. 20-26, 2025

"Moms, Coaches, Doctors, Entrepreneurs: Who are America's Health and Wellness Influencers?"

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How much health and wellness influencers help consumers understand their own health

% of health/wellness influencer consumers who say influencers have made them ___ how to be healthy

	Better understand	Not much difference	More confused about
Health/wellness influencer consumers	54	34	12
Men	57	33	10
Women	52	34	13
White	55	36	10
Hispanic	53	31	15
Black	49	34	16
Asian*	56	31	13
Ages 18-29	53	30	16
30-49	57	32	11
50-64	55	37	7
65+	45	42	12
Insured	56	33	11
Not insured	45	36	19

* Estimates for Asian adults are representative of English speakers only.

Note: White, Black and Asian adults include those who report being only one race and are not Hispanic. Hispanic adults are of any race. "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Insured and uninsured refers to those who either have or do not have any form of health insurance. Respondents who did not give an answer are not shown. Source: Survey of U.S. adults conducted Oct. 20-26, 2025 "Moms, Coaches, Doctors, Entrepreneurs: Who are America's Health and Wellness Influencers?"

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How much health and wellness influencers make consumers more worried about their own health

% of health/wellness influencer consumers who say the information they get from influencers makes them feel ___ about their health

	More worried	Not much difference	Less worried
Health/wellness influencer consumers	26	51	22
Men	24	51	24
Women	26	51	22
White	24	55	21
Hispanic	25	49	25
Black	26	42	28
Asian*	29	51	20
Ages 18-29	36	44	19
30-49	27	48	24
50-64	18	57	24
65+	12	67	20
Insured	25	52	23
Not insured	31	49	20

* Estimates for Asian adults are representative of English speakers only.

Note: White, Black and Asian adults include those who report being only one race and are not Hispanic. Hispanic adults are of any race. "Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Insured and uninsured refers to those who either have or do not have any form of health insurance. Respondents who did not give an answer are not shown. Source: Survey of U.S. adults conducted Oct. 20-26, 2025 "Moms, Coaches, Doctors, Entrepreneurs: Who are America's Health and Wellness Influencers?"

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Topics people hear about often from health and wellness influencers

% of health/wellness influencer consumers who say they **often** hear about the following topics from influencers

	Fitness	Weight loss	Beauty or personal appearance	Mental health	Dietary supplements or cleanses	Mainstream medicine	Therapies outside of mainstream medicine	Other healthy lifestyle topics
Health/wellness influencer consumers	44	37	34	32	29	17	16	36
Men	45	33	20	27	25	16	12	32
Women	44	41	44	35	32	18	19	40
White	43	36	32	30	29	18	14	35
Hispanic	44	36	32	33	25	17	20	37
Black	45	43	41	34	33	20	19	36
Asian*	48	37	29	30	25	12	14	38
Ages 18-29	51	36	36	39	27	16	16	40
30-49	44	37	35	33	27	16	15	36
50-64	43	41	34	25	34	19	18	37
65+	30	35	23	21	28	19	16	28

* Estimates for Asian adults are representative of English speakers only.

Note: White, Black and Asian adults include those who report being only one race and are not Hispanic. Hispanic adults are of any race.

"Health/wellness influencer consumers" refers to the 40% of U.S. adults who say they ever get health and wellness information from social media influencers or podcasts. Respondents who gave other responses "sometimes," "rarely," "never" or did not give a response are not shown.

Source: Survey of U.S. adults conducted June 9-15, 2025.

"Moms, Coaches, Doctors, Entrepreneurs: Who Are America's Health and Wellness Influencers?"

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**2025 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL
Wave 173: Artificial Intelligence/Religious Radio/Health And Wellness
June 9-15, 2025**

**TOPLINE
N=5,023**

Note: All numbers are percentages unless otherwise noted. Percentages less than 0.5% are replaced by an asterisk (*). Rows/columns may not total 100% due to rounding. The questions presented below are part of a larger survey conducted on the American Trends Panel.

“No answer” includes web respondents who do not answer the question as well as telephone respondents who refuse to answer or who say they don’t know how to answer. In cases where “Not sure” was offered as an explicit option to web and telephone respondents, the “No answer” category includes only web skips and telephone refusals.

This survey was conducted primarily online, with some interviews conducted by live telephone. This topline shows the programming language for online administration. For details on how questions were slightly modified for phone administration, visit the questionnaire.

PN = Programming note

	Sample size	Margin of error at 95% confidence level
U.S. adults	5,023	+/- 1.6 percentage points

TXT:

[PN: DISPLAY TO ALL:]

Next, we’re going to ask some questions about health and wellness. This can include topics like medical care for yourself and others, fitness and diet, mental health, or tips about living a healthier lifestyle.

HWINFO

ASK ALL:

[PN: RANDOMIZE ITEMS]

Do you ever get health and wellness information from any of the following sources?

	<u>Yes</u>	<u>No</u>	<u>No Answer</u>
SOCMED Social media influencers (that is, individuals on social media with a lot of followers)	35	64	*
POD Podcasts	25	74	*

HWCAT

**ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,187]:
[PN: RANDOMIZE ITEMS]**

How often do you hear about the following health and wellness topics from podcasts or social media influencers?

		<u>Often</u>	<u>Sometimes</u>	<u>Rarely</u>	<u>Never</u>	<u>No answer</u>
FIT	Fitness June 9-15, 2025	44	40	11	4	*
WEIGHT	Weight loss June 9-15, 2025	37	39	16	7	*
BEAUTY	Beauty or personal appearance June 9-15, 2025	34	36	21	10	*
MODMED	Mainstream medicine, such as drugs, surgeries and tests used by doctors and other health care providers June 9-15, 2025	17	46	27	10	*
ALTMED	Therapies outside of mainstream medicine, such as acupuncture or herbal remedies June 9-15, 2025	16	40	29	14	*
MENTAL	Mental health and wellbeing June 9-15, 2025	32	46	17	5	*
DIET	Dietary supplements, detoxes or cleanses June 9-15, 2025	29	42	20	9	*
OTH	Anything else related to living a healthier lifestyle June 9-15, 2025	36	49	11	3	*

HWGET

**ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,187]:
[PN: ROTATE RESPONSE OPTIONS]**

Which statement best describes how you get health and wellness information from podcasts or social media influencers?

June 9-15,
2025

33	I mostly get it because I'm looking for it
67	I mostly get it because I happen to come across it
*	No answer

HWREASON

**ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,187]:**

[PN: RANDOMIZE ITEMS]

How much of a reason are each of these for why you get health and wellness information from podcasts or social media influencers?

		<u>Major reason</u>	<u>Minor reason</u>	<u>Not a reason</u>	<u>No answer</u>
ENT	For entertainment	24	43	33	*
DOC	To learn about things that I don't want to ask my doctor about	14	34	52	*
PERS	To hear from people who share my beliefs or background	21	43	36	*
CHANGE	To make a change to my health or lifestyle	41	42	17	*

[QUESTION HELD FOR FUTURE RELEASE]**HWTRUST****ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS**

(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,187]:

[PN: ROTATE RESPONSE OPTIONS]

Thinking about all of the health and wellness information you get from podcasts or social media influencers, how much of it do you trust?

June 9-15,
2025

*	All of it
10	Most of it
65	Some of it
22	Not too much of it
2	None of it
*	No answer

**2025 PEW RESEARCH CENTER’S AMERICAN TRENDS PANEL
Wave 182: Health & Wellness (Science and Society)
October 20-26, 2025**

**TOPLINE
N=5,111**

Note: All numbers are percentages unless otherwise noted. Percentages less than 0.5% are replaced by an asterisk (*). Rows/columns may not total 100% due to rounding. The questions presented below are part of a larger survey conducted on the American Trends Panel.

“No answer” includes web respondents who do not answer the question as well as telephone respondents who refuse to answer or who say they don’t know how to answer. In cases where “Not sure” was offered as an explicit option to web and telephone respondents, the “No answer” category includes only web skips and telephone refusals.

This survey was conducted primarily online, with some interviews conducted by live telephone. This topline shows the programming language for online administration. For details on how questions were slightly modified for phone administration, visit the questionnaire.

PN = Programming note

	Sample size	Margin of error at 95% confidence level
U.S. adults	5,111	+/- 1.7 percentage points

TXT:

[PN: DISPLAY TO ALL:]

Next, we’re going to ask some questions about health and wellness. This can include topics like medical care for yourself and others, fitness and diet, mental health, or tips about living a healthier lifestyle.

HWINFO

ASK ALL:

[PN: RANDOMIZE ITEMS]

Do you ever get health and wellness information from any of the following sources?

	<u>Yes</u>	<u>No</u>	<u>No Answer</u>
SOCMED Social media influencers (that is, individuals on social media with a lot of followers)			
Oct 20-26, 2025	31	68	*
June 9-15, 2025	35	64	*
POD Podcasts			
Oct 20-26, 2025	24	76	*
June 9-15, 2025	25	74	*

HW_INFORMED

**ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,183]:
[PN: ROTATE RESPONSE OPTIONS]**

Would you say health and wellness influencers or podcasts have...

October 20-26,

2025

54	Helped you better understand how to be healthy
12	Made you more confused about how to be healthy
34	Not made much of a difference
*	No answer

TXT:

**[PN: DISPLAY IF GETS HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1):]**

Thinking about the health and wellness information you get from health and wellness influencers or podcasts...

HW_WORRIED

**ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,183]:
[PN: ROTATE RESPONSE OPTIONS]**

Would you say that this information makes you feel...

October 20-26,

2025

26	More worried about your overall health
22	Less worried about your overall health
51	Not made much of a difference
1	No answer

HW_INFO_DIFF

**ASK IF GET HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS
(HWINFO_SOCMED=1 OR HWINFO_POD=1) [n=2,183]:
[PN: ROTATE RESPONSE OPTIONS]**

How different is this information from the information you get from health care providers?

October 20-26,

2025

4	Extremely different
14	Very different
43	Somewhat different
32	Not too different
6	Not at all different
1	No answer

**2025 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL
Wave 173: Artificial Intelligence/Religious Radio/Health and Wellness
JUNE 9-15, 2025**

QUESTIONNAIRE

Note: The questions presented below are part of a larger survey conducted on the American Trends Panel. For all questions, the 98 ("Don't know" in phone mode) and 99 ("Refusal" in phone mode and "No answer" in web mode) codes are combined in the data for analytical purposes.

PN = Programming note

CODEBOOK FOR ATP SAMPLE VARIABLES TO BE USED IN SURVEY PROGRAMMING LOGIC

X_FORM

1 Form 1
2 Form 2

Note: Flag to randomly assign panelists to one of two forms (Form 1, Form 2) and weight within form
Source: Randomly assigned for each survey.

 -----**MAIN QUESTIONNAIRE BEGINS HERE**-----

OTHER QUESTIONS PREVIOUSLY RELEASED

TXT:**[PN: DISPLAY TO ALL:]**

Next, we're going to ask some questions about health and wellness. This can include topics like medical care for yourself and others, fitness and diet, mental health, or tips about living a healthier lifestyle.

BAT: HWINFO**ASK ALL:****[PN: RANDOMIZE ITEMS; INCLUDE RANDOMIZATION IN DATA FILE]**

[PN: IF WEB:] Do you ever get health and wellness information from any of the following sources?

[PN: IF CATI: READ FOR FIRST ITEM:] Do you ever get health and wellness information from any of the following sources? First, **(INSERT ITEM)**. Do you ever get health and wellness advice from this source? **(READ LIST AS NECESSARY)**

[PN: IF CATI: READ FOR SUBSEQUENT ITEM:] What about from **(INSERT ITEM)**? **(READ AS NECESSARY: Do you ever get health and wellness advice from this source? (READ LIST AS NECESSARY))**

BATTERY ITEMS:

SOCMED **[PN: IF WEB:]** Social media influencers (that is, individuals on social media with a lot of followers) **[PN: IF CATI:]** Social media influencers, that is, individuals on social media with a lot of followers

POD Podcasts

RESPONSE CATEGORIES:

1 Yes

2 No

98 **[PN: IF CATI:] (DO NOT READ)** Don't know99 **[PN: IF WEB:]** Web blank / **[PN: IF CATI:] (DO NOT READ)** Refused

BAT: HWCAT**ASK IF GET HEALTH/WELLNESS CONTENT FROM INFLUENCERS OR PODCASTS****(HWINFO_SOCMED=1 OR HWINFO_POD=1):**

[PN: RANDOMIZE ITEMS OVER TWO SCREENS, KEEPING HWCAT_MODMED ALWAYS RIGHT BEFORE HWCAT_ALTMED AND ON THE SAME SCREEN TOGETHER, AND WITH HWCAT_OTH ALWAYS LAST; INCLUDE RANDOMIZATION IN DATA FILE]

[PN: SHOW "READ FOR FIRST ITEM" AND "READ FOR SUBSEQUENT ITEMS" ON THE FIRST SCREEN; ON THE FIRST SCREEN, BETWEEN THE QUESTION TEXT AND THE GRID, INCLUDE AN INTERVIEWER INSTRUCTION: "[INTERVIEWER NOTE: QUESTION CONTINUES ON NEXT PAGE]"; ONLY SHOW "READ FOR SUBSEQUENT ITEMS" ON THE SECOND SCREEN]

[PN: IF WEB:] How often do you hear about the following health and wellness topics from podcasts or social media influencers?

[PN: IF CATI: **READ FOR FIRST ITEM:**] How often do you hear about the following health and wellness topics from podcasts or social media influencers? First, **(INSERT ITEM)**. How often do you hear about this from podcasts or social media influencers? **(READ LIST)**

[PN: IF CATI: **READ FOR SUBSEQUENT ITEMS:**] What about from **(INSERT ITEM)**? **(READ AS NECESSARY:** How often do you hear about this from podcasts or social media influencers? **(READ LIST))**

BATTERY ITEMS:

FIT	Fitness
WEIGHT	Weight loss
BEAUTY	Beauty or personal appearance
MODMED	Mainstream medicine, such as drugs, surgeries and tests used by doctors and other health care providers
ALTMED	Therapies outside of mainstream medicine, such as acupuncture or herbal remedies
MENTAL	Mental health and wellbeing
DIET	Dietary supplements, detoxes or cleanses
OTH	Anything else related to living a healthier lifestyle

RESPONSE CATEGORIES:

1	Often
2	Sometimes
3	Rarely
4	Never
98	[PN: IF CATI:] (DO NOT READ) Don't know
99	[PN: IF WEB:] Web blank / [PN: IF CATI:] (DO NOT READ) Refused

QUE: HWGET

ASK IF GET HEALTH/WELLNESS CONTENT FROM INFLUENCERS OR PODCASTS

(HWINFO_SOCMED=1 OR HWINFO_POD=1):

[PN: ROTATE RESPONSE OPTIONS 1-2/2-1, HOLDING 98 AND 99 LAST; INCLUDE ROTATION IN DATA FILE]

Which statement best describes how you get health and wellness information from podcasts or social media influencers?

[PN: IF CATI:] (READ LIST)

- 1 **[PN: IF WEB:]** I mostly get it because I'm looking for it **[PN: IF CATI:]** You mostly get it because you're looking for it
- 2 **[PN: IF WEB:]** I mostly get it because I happen to come across it **[PN: IF CATI:]** You mostly get it because you happen to come across it
- 98 **[PN: IF CATI:] (DO NOT READ)** Don't know
- 99 **[PN: IF WEB:]** Web blank / **[PN: IF CATI:] (DO NOT READ)** Refused

BAT: HWREASON**ASK IF GET HEALTH/WELLNESS CONTENT FROM INFLUENCERS OR PODCASTS****(HWINFO_SOCMED=1 OR HWINFO_POD=1):****[PN: RANDOMIZE ITEMS; INCLUDE RANDOMIZATION IN DATA FILE]**

[PN: IF WEB:] How much of a reason are each of these for why you get health and wellness information from podcasts or social media influencers?

[PN: IF CATI: READ FOR FIRST ITEM:] How much of a reason are each of these for why you get health and wellness information from podcasts or social media influencers? First, **(INSERT ITEM)**. **(READ LIST)**

[PN: IF CATI: READ FOR SUBSEQUENT ITEMS:] Next, **(INSERT ITEM)**. **(READ AS NECESSARY: How much of a reason is this for why you get health and wellness information from podcasts or social media influencers? (READ LIST))**

BATTERY ITEMS:

ENT	For entertainment
DOC	[PN: IF WEB:] To learn about things that I don't want to ask my doctor about [PN: IF CATI:] To learn about things that you don't want to ask your doctor about
PERS	[PN: IF WEB:] To hear from people who share my beliefs or background [PN: IF CATI:] To hear from people who share your beliefs or background
CHANGE	[PN: IF WEB:] To make a change to my health or lifestyle [PN: IF CATI:] To make a change to your health or lifestyle

RESPONSE CATEGORIES:

1	Major reason
2	Minor reason
3	Not a reason
98	[PN: IF CATI:] (DO NOT READ) Don't know
99	[PN: IF WEB:] Web blank / [PN: IF CATI:] (DO NOT READ) Refused

QUESTION HELD FOR FUTURE RELEASE

QUE: HWTRUST**ASK IF GET HEALTH/WELLNESS CONTENT FROM INFLUENCERS OR PODCASTS****(HWINFO_SOCMED=1 OR HWINFO_POD=1):****[PN: ROTATE RESPONSE OPTIONS 1-5/5-1, HOLDING 98 AND 99 LAST; INCLUDE ROTATION IN DATA FILE]**

Thinking about all of the health and wellness information you get from podcasts or social media influencers, how much of it do you trust?

[PN: IF CATI:] (READ LIST)

- 1 All of it
- 2 Most of it
- 3 Some of it
- 4 Not too much of it
- 5 None of it
- 98 **[PN: IF CATI:] (DO NOT READ)** Don't know
- 99 **[PN: IF WEB:]** Web blank / **[PN: IF CATI:] (DO NOT READ)** Refused

QUESTION HELD FOR FUTURE RELEASE

**2025 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL
Wave 182: Health & Wellness (Science and Society)
October 20-26, 2025**

QUESTIONNAIRE

Note: The questions presented below are part of a larger survey conducted on the American Trends Panel. For all questions, the 98 ("Don't know" in phone mode) and 99 ("Refusal" in phone mode and "No answer" in web mode) codes are combined in the data for analytical purposes.

PN = Programming note

CODEBOOK FOR ATP SAMPLE VARIABLES TO BE USED IN SURVEY PROGRAMMING LOGIC

X_FORM

1 Form 1

2 Form 2

Note: Flag to randomly assign panelists to one of two forms (Form 1, Form 2) and weight within form
Source: Randomly assigned for each survey.

 -----**MAIN QUESTIONNAIRE BEGINS HERE**-----

OTHER QUESTIONS PREVIOUSLY RELEASED

TXT:

[PN: DISPLAY TO ALL:]

Next, we're going to ask some questions about health and wellness. This can include topics like medical care for yourself and others, fitness and diet, mental health, or tips about living a healthier lifestyle.

BAT: HWINFO

ASK ALL:

[PN: RANDOMIZE ITEMS; INCLUDE RANDOMIZATION IN DATA FILE]

[PN: IF WEB:] Do you ever get health and wellness information from any of the following sources?

[PN: IF CATI: READ FOR FIRST ITEM:] Do you ever get health and wellness information from any of the following sources? First, **(INSERT ITEM)**. Do you ever get health and wellness advice from this source? **(READ LIST AS NECESSARY)**

[PN: IF CATI: READ FOR SUBSEQUENT ITEM:] What about from **(INSERT ITEM)**? **(READ AS NECESSARY: Do you ever get health and wellness advice from this source? (READ LIST AS NECESSARY))**

BATTERY ITEMS:

SOCMED **[PN: IF WEB:]** Social media influencers (that is, individuals on social media with a lot of followers) **[PN: IF CATI:]** Social media influencers, that is, individuals on social media with a lot of followers

POD Podcasts

RESPONSE CATEGORIES:

1 Yes
 2 No
 98 **[PN: IF CATI:] (DO NOT READ)** Don't know
 99 **[PN: IF WEB:]** Web blank / **[PN: IF CATI:] (DO NOT READ)** Refused

QUE: HW_INFORMED

ASK IF GETS HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS

(HWINFO_SOCMED=1 OR HWINFO_POD=1):

[PN: ROTATE RESPONSE OPTIONS 1-2/2-1 HOLDING 3, 98, AND 99 LAST; INCLUDE ROTATION IN DATA FILE]

Would you say health and wellness influencers or podcasts have...

[PN: IF CATI:] (READ LIST)

1 Helped you better understand how to be healthy
 2 Made you more confused about how to be healthy
 3 Not made much of a difference
 98 **[PN: IF CATI:] (DO NOT READ)** Don't know
 99 **[PN: IF WEB:]** Web blank / **[PN: IF CATI:] (DO NOT READ)** Refused

TXT:

[PN: DISPLAY HW_WORRIED AND HW_INFO_DIFF ON SAME SCREEN, IN ORDER]

TXT:

[PN: DISPLAY IF GETS HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS (HWINFO_SOCMED=1 OR HWINFO_POD=1):]

Thinking about the health and wellness information you get from health and wellness influencers or podcasts...

QUE: HW_WORRIED

ASK IF GETS HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS

(HWINFO_SOCMED=1 OR HWINFO_POD=1):

[PN: ROTATE RESPONSE OPTIONS 1-2/2-1 HOLDING 3, 98, AND 99 LAST; INCLUDE ROTATION IN DATA FILE]

Would you say that this information makes you feel...

[PN: IF CATI:] (READ LIST)

- 1 More worried about your overall health
- 2 Less worried about your overall health
- 3 Not made much of a difference
- 98 [PN: IF CATI:] (DO NOT READ) Don't know
- 99 [PN: IF WEB:] Web blank / [PN: IF CATI:] (DO NOT READ) Refused

QUE: HW_INFO_DIFF

ASK IF GETS HEALTH/WELLNESS INFO FROM INFLUENCERS OR PODCASTS

(HWINFO_SOCMED=1 OR HWINFO_POD=1):

[PN: ROTATE RESPONSE OPTIONS 1-5/5-1 IN SAME ORDER AS CHILDVAXVIEWS, HOLDING 98 AND 99 LAST; INCLUDE ROTATION IN DATA FILE]

How different is this information from the information you get from health care providers?

[PN: IF CATI:] (READ LIST)

- 1 Extremely different
- 2 Very different
- 3 Somewhat different
- 4 Not too different
- 5 Not at all different
- 98 [PN: IF CATI:] (DO NOT READ) Don't know
- 99 [PN: IF WEB:] Web blank / [PN: IF CATI:] (DO NOT READ) Refused

OTHER QUESTIONS PREVIOUSLY RELEASED OR HELD FOR FUTURE RELEASE

QUE: INSURANCE**ASK ALL:**

Are you, yourself, now covered by any form of health insurance or health plan or do you not have health insurance at this time?

[**PN: IF CATI:**] **(READ LIST IF NECESSARY)**

1 Covered by health insurance

2 Not covered by health insurance

98 [**PN: IF CATI:**] **(DO NOT READ)** Don't know

99 [**PN: IF WEB:**] Web blank / [**PN: IF CATI:**] **(DO NOT READ)** Refused