Online social support for obese adults: Exploring the role of forum activity

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A R T I C L E   I N F O

Article history:
Received 24 September 2015
Received in revised form 18 January 2017
Accepted 3 February 2017

Keywords:
Obesity
Social support
Online forum
Active participation

A B S T R A C T

Purpose: Worldwide, the number of obese persons continues to grow. Online-mediated self-help groups represent an opportunity for obese persons to support each other. The aim of our study was to evaluate whether and how the use of and active participation in online self-help groups is associated with perceived informational and emotional support among obese adults.

Methods: We conducted an online-based questionnaire (N=230) with users of online self-help groups for obese adults in Germany.

Results: Findings revealed that forum activity is significantly correlated with perceived informational and emotional support. While asking questions was strongly correlated with both types of social support, sharing opinions and answering posts were more strongly correlated with perceived emotional support.

Conclusion: The level of social support in online communities depends on an individual's forum activity. Our findings offer a foundation for professionals in the health care sector to enhance their understanding, make recommendations, and further develop online self-help groups.

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1. Introduction

In the last decade online support groups have become an increasingly common way to obtain support for health-related issues [1,2]. Online support groups address a range of health issues such as cancer, HIV, and pregnancy, and can help people to receive relevant and specific information, as well as to effectively manage stress and cope with negative events resulting from their health problems. Online communication enables the asynchronous and anonymous exchange of social support [3,4], which engages social group processes for remote participants and disinhibits communication among weak-tie networks [5]. This offers the possibility of social support to populations that would not otherwise be able to obtain it.

Online support groups enable members of a group to support each other despite certain impediments (such as mobility), while also representing a low-cost supplement to the traditional professional treatment of obesity [5]. The fact that physical appearance is not evaluated in online support groups [6] may also be an important consideration for obese persons, who are often confronted with stigmatization and discrimination [7]. The benefits of online obesity support groups may be significant, as this disease has dramatically increased worldwide in recent decades [8], posing serious health risks and increasing related medical costs [9,10].

To date, studies evaluating the efficacy of online interventions for obese persons have focused on participant weight loss as the key outcome measure [11]. However, the treatment of obesity should not be limited to weight loss, as sustainable healthy behaviors are important for sustaining success. In addition, online groups are—in contrast to clinical therapies—more focused on improving general psychological outcomes than on specific interventions aiming [5] or health parameters [3]. Online groups should therefore not be regarded as a substitution for weight management programs, but rather as a complement to them. Das and Faxvaag [12] regard online forums as particularly useful for those patients who exclude themselves from traditional interventions or who experience barriers to making contact with medical experts.

Therefore, participation in online support networks should be considered an important part of obesity treatment programs. The present paper presents current research on obesity therapy and theories that can be applied to social support interventions in obesity therapy. Our study explores the role that online social support plays for obese or overweight individuals. We conducted an online survey to investigate the associations between online forum activity and different types of perceived social support. The present paper concludes with a discussion of the implications of how online

http://dx.doi.org/10.1016/j.ijmedinf.2017.02.003
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support networks can be used as part of obesity treatment programs with regard to health communication theory; it also presents ideas for future research.

2. Challenges of obesity

According to the WHO [10], being overweight or obese is defined as having abnormal or excessive fat accumulation in relation to one’s weight and height (i.e., Body Mass Index), to a degree that is hazardous to one’s health. While a Body Mass Index (BMI) lower than 25 is classified as normal weight, individuals with a higher BMI are classified as overweight (≥25) or obese (BMI > 30) by the WHO [10]. About 13% of the world’s adult population, 23% of adults in Germany, and more than 33% of adults in the United States are considered obese, and more than 39% of adults worldwide are overweight [13,14,10]. The prevalence of being overweight or obese was once considered a problem only in high-income countries; however, this worrisome health trend is now dramatically on the rise in low-and middle-income countries as well [10].

Being obese is currently regarded as a more serious health risk than being overweight [10], with obesity identified as a major risk factor for a number of chronic diseases, including diabetes, cardiovascular diseases, and cancer [14]. In Germany, obesity is among the most common underlying causes of preventable diseases and deaths [59]. Being obese or overweight also often causes considerable limitations in the social life, mobility, and quality of life of affected individuals [13]. Obese persons face a number of barriers; some of these barriers are based on having difficulty in moving or going outside, while others are more social, and based on shame or social exclusion [15,16].

The treatment of obesity is connected with various challenges. In addition to traditional medical treatments (i.e., pharmaceutical and surgical interventions) of physical symptoms and comorbidities, lifestyle modifications (including diet, exercise, and behavior therapy) are common tools in obesity treatment interventions [17]. Obesity is a chronic disease [9] that cannot be cured by any single measure, and treatment is lengthy and includes the threat of relapses [17]; any successful treatment must therefore have long-term effects [18]. To maintain behavioral changes and the associated weight loss, individuals must develop self-management [19]; individual success in building this core competence is in turn based on social, psychological, and competence-related variables that are often not addressed in programs that concentrate solely on weight loss, or that are primarily commercial [20]. In addition, the widespread stigmatization of obese individuals often contributes to low self-esteem and feelings of low self-control; the resulting reduced feelings of self-efficacy can lead to difficulties in developing the constructive coping strategies necessary for weight loss [7]. With these broader causes and challenges in mind, the focus of behavior therapy is not on weight loss per se, but on the empowerment, self-management, and self-regulation [21] necessary to achieve this change. These personal strengths can be nurtured by both offline and online disease-specific social support groups, which offer peer counseling and various forms of social support [9].

3. Theories of social support

Bandura [22] views social support as an important antecedent for both self-efficacy beliefs and behavior change. According to his social cognitive theory, individuals who perceive themselves to have stronger social support are likely to hold stronger self-efficacy beliefs, which positively influence behavior changes and the maintenance of those changes. Several studies have demonstrated the relevance of informational and emotional social support [23,12,24,25] in the efficacy of both online and offline obesity interventions. These studies indicate that social support is important for long-term weight loss maintenance. As social support is such an important prerequisite in the treatment of obesity [26], it should therefore be considered an important factor in the success of online support groups for obese persons [27]. Harvey-Berino et al. [18] could already show that internet is a viable medium for promoting long-term weight loss in a 12-month support intervention program.

Many studies have examined the social support provided via online support groups for various health-related problems and topics, and these studies have provided ample evidence of the promising potential of these forums (for a review, see [28,29]). Online support groups can augment the social support of one’s offline network [30], increase the perceived availability of social support [6], provide specific informational support [29], and foster compliance [31] and empowerment by enabling emotional relief [5].

Although social support includes many dimensions, online networks most frequently feature informational and emotional support [32–35]. Informational support pertains to the exchange of relevant information and advice, while emotional support is the provision of caring and sympathy. Content analysis revealed that both forms of social support are highly relevant in online support groups, with different health topics focusing on different forms. For example, forums for people with disabilities may focus on emotional support [36], while informational support messages may be more frequent for individuals living with irritable bowel syndrome [37] or AIDS [34].

The theory of optimal matching [60] states that, depending on the kind of stress, different forms of social support may be most beneficial. For example, while controllable events benefit most from informational support, uncontrollable events require more emotional support. Turner et al. [30] argue that online communities can dramatically increase opportunities for optimal matching to occur, as, unlike in scattered offline networks, thousands of other participants with similar concerns are available. This argument is also supported by weak-tie support network theory [2], which considers online communities to be one way to provide access to weak-tie support. This effect is especially important in cases where strong-tie support may be perceived to be inadequate or insufficient (e.g., because close friends or family members might be too emotional or inexperienced in this area). Therefore, we expect that forum usage is positively related to perceived informational and emotional support (H1).

4. Effects of forum activity

In addition to the type of social support, engagement level in online communities seems to play an important role in whether individuals receive effective social support [38]. However, existing theories on online support networks do not differentiate between different levels of forum activity or different kinds of users with regard to the intensity of participation. Some users of online forums are active contributors, some post a little, but most members do not post at all [39]. Members of this category are described as lurkers, only following the discussions and browsing the forum without contributing to it [40]. Depending on their posting and participation behavior the more active users can be categorized in various user types [41]. In a systematic review of studies on online health communities Carron-Arthur et al. [42] identified different participation styles based on activity, network and content features. So far, they found no consistent participatory style across different health communities apart from high-engaged users with a high post frequency [42].
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