

## What Do People with Diabetes Talk about on a Diabetes Social Networking Web Site?

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Computer-based peer-directed forums for diabetes patients can potentially improve health outcomes;<sup>1</sup> however, little is known about the content of conversations shared by diabetes patients. To better understand this interaction, we studied communication on a social networking Web site, [www.NING.com](http://www.NING.com), over 3 months. Participants first completed an Internet-based self-paced educational tool adapted from the Penn State Diabetes Playbook.<sup>2</sup> Upon completion of six educational modules, participants were permitted to engage in conversation on the online forum. At the end of the trial period, a transcript of all conversations was analyzed using the Giorgi phenomenological method,<sup>3</sup> which breaks content down into meaning units and then transforms units into theoretical categories.

In analyzing the NING<sup>®</sup> manuscript of conversations between 35 diabetes patients, four categories of social support emerged. The four categories were (1) affirmation of feelings about diabetes, (2) sharing of personal stories about diabetes, (3) information or knowledge sharing about diabetes, and (4) statements of encouragement. These categories appeared evenly distributed throughout the transcript.

Affirmation statements were comments where agreement was expressed or stories mirroring the feelings of another user were posted. Personal stories were differentiated from affirmation statements by their focus primarily on events versus feelings. These comments read as a chronology of participant experiences. The third category identified was posts providing information or knowledge. Solicitation for fact-based knowledge was met with objective comments that provided resources as opposed to emotional support. The final category that appeared in the discussions was statements of encouragement. These posts sought to inspire and reassure. Though not prevalent, there were some comments expressing disagreement and conflict. Some comments were negative statements made by those with type 1 diabetes criticizing those with type 2 diabetes. Affirmation statements appeared 94 times (30.8%), sharing of personal stories 41 times (13.4%), information sharing 128 times (41.9%), and encouraging statements 37 times (12.1%); 1.6% percent of comments showed disagreement.

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Our experience suggests that online social networking has great potential to supplement medical treatment for diabetes patients. Though participants completed a set of educational modules prior to using the online forum, a great deal of posts still centered on information sharing. This suggests a discrepancy between information provided by health care providers and what patients need.

Starting and maintaining such a Web site was relatively easy. Though our Web site was prepopulated with stories from well-controlled diabetes patients, participants did not reference those posts, suggesting prepopulation is unnecessary. A researcher monitored conversations; however, there were no issues with users making inappropriate recommendations. Other papers have cited concerns over the extent to which postings were fictitious testimonials by manufacturers.<sup>4</sup> In the closed online community, we did not have similar concerns.

Feedback about the Web site was positive. The impression, flow, design, and degree users felt engaged were rated well. Users felt that the Web site was useful and found it helpful to learn about the habits of others. Future studies might separate type 1 and type 2 as the self-management required for both is different.

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