



Giving and receiving emotional support online: Communication competence as a moderator of psychosocial benefits for women with breast cancer



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ABSTRACT

This study examines the moderating role of emotional communication competence in the relationship between Computer-Mediated Social Support (CMSS) group participation, specifically giving and receiving emotional support, and psychological health outcomes. Data were collected as part of randomized clinical trials for women diagnosed with breast cancer within the last two months. Expression and reception of emotional support was assessed by tracking and coding the 18,064 messages that 236 patients posted and read in CMSS groups. The final data used in the analysis was created by merging (a) computer-aided content analysis of discussion posts, (b) action log data analysis of system usage, and (c) baseline and 6-month surveys collected to assess change. Results of this study demonstrate that emotional communication competence moderates the effects of expression and reception of emotional support on psychological quality of life and breast cancer-related concerns in both desired and undesired ways. Giving and receiving emotional support in CMSS groups has positive effects on emotional well-being for breast cancer patients with higher emotional communication, while the same exchanges have detrimental impacts on emotional well-being for those with lower emotional communication competence. The theoretical and practical implications for future research are discussed.

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1. Introduction

Aside from skin cancer, breast cancer is the most frequently diagnosed cancer among American women and approximately 12% of women in the United States develop invasive breast cancer during their lifetime (Ma & Jemal, 2013). As a result of their cancer diagnosis and subsequent treatments, women with breast cancer often face major psychosocial and emotional challenges (Carlsson & Hamrin, 1994; Ganz, 2008; Shapiro et al., 2001). To cope with such stresses, breast cancer patients exchange social support with peer patients in Computer-Mediated Social Support (CMSS) groups (Klemm et al., 2003; Sharf, 1997; Shaw, McTavish, Hawkins, Gustafson, & Pingree, 2000). Accordingly, the participants benefit from the social support of the groups. A growing body of research has found that breast cancer patients' participation in CMSS groups is beneficial to their emotional well-being (Lieberman et al., 2003; Lieberman & Goldstein, 2005; Winzelberg et al., 2003), psychoso-

cial well-being (Gustafson et al., 2001; Rodgers & Chen, 2005), and healthcare competence (van Uden-Kraan et al., 2008).

From the perspective that people exchange social support via text-based messages in virtual communities (Walther & Boyd, 2002), recent research has focused to identify the health benefits of expression and reception of social support in CMSS groups for women with breast cancer (Kim et al., 2012; Namkoong et al., 2010). These studies have found that giving and getting supportive messages benefits women with breast cancer, with the effect of expression often outpacing reception (Pingree, 2007; Han et al., 2011; Winefield, 2006). Other studies have found that individual differences, including demographic characteristics, digital competence, and coping strategies predict giving and receiving emotional support (Kim et al., 2011; Yoo et al., 2013). Yet, despite the importance of individual characteristics in exploring the expression and reception of social support in CMSS groups, relatively little attention has been paid to whether the benefits of the support expression and reception are conditioned by personal characteristics of the communicators. Particularly noteworthy in this context is communication competence, individuals' abilities to send, receive,

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and interpret messages regarding social support processes (Goffman, 1972; Wentowski, 1981). In other words, communication competence reflects the ability to render and elicit social support (Heller, 1979; Sarason, Sarason, Hacker, & Basham, 1985; Wentowski, 1981). Accordingly, communication competence may affect the health benefits of emotionally supportive expression and reception in breast cancer CMSS groups.

To better understand how the effects of exchanging computer-mediated social support differ according to communication competence, we examine the moderating role of emotional communication competence in the relation between the expression and reception of emotional support and two measures of emotional well-being: (a) psychological quality of life and (b) breast cancer-related concerns. Tracking and coding the messages sent and received by 237 women with breast cancer in CMSS groups was used to assess expression and reception of emotional support. The data used in the analysis was created by merging (a) computer-aided content analysis of discussion posts within online support groups, (b) action log data analysis of use of this system, and (c) baseline and 6-month surveys collected to assess change.

2. Emotional support for cancer patients

Emotional support is a critical form of social support, facilitating both coping strategies and contributing to sustained well-being. In general, emotional support has been described as messages or actions assuring an individual that he or she is cared for, loved, esteemed, and valued (Cobb, 1976). It centers on the provision of “comfort and security during times of stress that leads the person to feel he or she is cared for by others” (Cutrona & Russell, 1990, p. 322).

Emotional support can be conceptualized as having four distinct functions. First, emotional support facilitates empathic and sympathetic responses, including the cognitive understanding for the suffering of others (Cutrona & Suhr, 1994; Dakof & Taylor, 1990). Second, emotional support provides encouragement and reassurance, bolstering the recipient's hope and confidence (Burlleson, 1994; Rook & Underwood, 2000). Third, emotional support offers caring and physical affection, including hugs, kisses, hand-holding, and shoulder patting (Albrecht & Adelman, 1987; Cutrona & Russell, 1990; House, 1981). Finally, emotional support includes universality to emphasize the importance of closeness, bonding, and community (Braithwaite, Waldron, & Finn, 1999; Coursaris & Liu, 2009; Shaw et al., 2000; Yalom, 1970). Most conceptions center on individuals' efforts to assist one another cope with affective distress.

Emotional support plays an important role in cancer patients' psychological and physical adjustment to their disease. When confronted with a traumatic event, such as cancer, most individuals have high needs of emotional support to improve their self-esteem or to reduce feelings of personal inadequacy. Indeed, cancer patients identify emotional support as the most helpful kind of support (Dakof & Taylor, 1990; Dunkel-Schetter, 1984; Neuling & Winefield, 1988). Emotional support is linked with greater psychological well-being (Bloom, 1986; Roberts, Cox, Shannon, & Wells, 1994; Slevin et al., 1996; Taylor, Falke, Shoptaw, & Lichtman, 1986), better quality of life (Courten, Stevens, Crebolder, & Philipson, 1996), and lower rates of cancer morbidity and mortality (Glanz & Lerman, 1992; Reynolds & Kaplan, 1990).

Emotional support has proven particularly beneficial for women with breast cancer. Many studies on breast cancer have shown that emotional support contributes to improve patients' mental well-being (Alferi, Carver, Antoni, Weiss, & Duran, 2001; Bloom & Spiegel, 1984; Bloom, Stewart, Johnson, Banks, & Fobair, 2001), health-related quality of life and self-efficacy (Arora, Finney

Rutten, Gustafson, Moser, & Hawkins, 2007), coping with breast cancer (Northouse, 1988), and survival rates of breast cancer (Ell, Nishimoto, Mediansky, Mantell, & Hamovitch, 1992; Kroenke, Kubzansky, Schernhammer, Holmes, & Kawachi, 2006).

3. Computer-Mediated Social Support (CMSS) groups and emotional support

According to the cancer stigma hypothesis (Cobb, 1976), patients with cancer may feel marked and branded by their illness. The stigma of breast cancer, in particular, with its focus on issues of sexuality and womanhood, leads some patients to locate themselves outside what they see as acceptable criterion. For women with breast cancer, CMSS groups provide anonymous and asynchronous communication that allows participants to be more open and honest about potentially embarrassing topics and stigmatizing concerns without the limits of time, space, and social cues (White & Dorman, 2001; K.B. Wright, 2002). In this regard, CMSS groups have been attractive to breast cancer patients who have feelings of social isolation or unmet social needs. Women with breast cancer cope with varied stressors by exchanging social support with other patients in CMSS groups (Sharf, 1997; van Uden-Kraan et al., 2008; Weinberg, Schmale, Uken, & Wessel, 1996). Among all types of social support, emotional support is exchanged most frequently in CMSS groups for breast cancer patients (Rodgers & Chen, 2005; Winzelberg et al., 2003). As the need for emotional support increases, patients' family and friends might not be able to offer appropriate support because the situation also causes extensive illness-related concerns among these caregivers and supporters (Northouse et al., 2002). In response, CMSS groups can serve as an alternative to traditional support channels, with people facing similar challenges sharing practical information with each other and exchanging supportive messages with other participants (McTavish, Pingree, Hawkins, & Gustafson, 2003; Shaw et al., 2000).

4. Health benefits of CMSS groups: Expression and reception of emotional support

Most research on emotionally supportive exchanges investigates the benefits from the recipient's perspective. From this perspective, emotional support has been found to influence the feelings, coping strategies, personal relationships, and even physical health of the recipient (Albrecht & Goldsmith, 2003; Uchino, 2004; Wills & Fegan, 2001). Research has found that emotional support decreases the recipient's emotional distress and results in other desirable health outcomes (Burlleson, 2003; Burlleson & Goldsmith, 1988; Dunkel-Schetter, Blasband, Feinstein, & Herbert, 1992; Goldsmith, 1994). Similarly, the social and health benefits of emotional support can be achieved through the reception of relevant messages in online cancer support groups (K.B. Wright, 2002; K.B. Wright & Bell, 2003). For example, breast cancer patients consuming more emotional support messages in CMSS groups are likely to report fewer breast cancer-related concerns (Kim et al., 2012; Lieberman & Goldstein, 2005).

Countering the dominant message-reception paradigm, communication scholars have begun to advance a theoretical model of message-expression effects (Pingree, 2007; Shah, Cho, Eveland, & Kwak, 2005; Shah et al., 2007). From the expression-effects perspective, “the act of expression might change the message sender, which expressed ideas often do not exist intact, if at all, in the speaker's mind prior to expression” (Pingree, 2007, p. 439). For this reason, writing therapy has been widely applied to text-based online counseling (J. Wright, 2002). For instance, written expression of specific messages has been shown to improve patients' mental

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