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Examination of bariatric surgery Facebook support groups: a content analysis

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Abstract

Background: Support following bariatric surgery is vital to ensure long-term postoperative success. Many individuals undergoing bariatric surgery are turning to online modalities, especially the popular social media platform Facebook, to access support groups and pages. Despite evidence suggesting that the majority of patients considering bariatric surgery are utilizing online groups, little is known about the actual content of these groups.

Objectives: The purpose of the present study was to conduct a content analysis of bariatric surgery support groups and pages on Facebook.

Setting: Online via Facebook, independent academic medical center, United States.

Methods: Data from bariatric surgery–related Facebook support groups and pages were extracted over a 1-month period in 2016. Salient content themes (e.g., progress posts, depression content, eating behaviors) were coded reliably (all $\kappa > .70$).

Results: More than 6,800 posts and replies were coded. Results indicated that seeking recommendations (11%), providing information or recommendations (53%), commenting on changes since surgery (19%), and lending support to other members (32%) were the most common types of posts. Content surrounding anxiety, eating behaviors, depression, body image, weight bias, and alcohol was found less frequently.

Conclusions: Online bariatric surgery groups can be used to receive support, celebrate physical and emotional accomplishments, provide anecdotal accounts of the "bariatric lifestyle" for preoperative patients, and comment on challenges with mental health and experiences of weight bias. Providers should become acquainted with the content commonly found in online groups and exercise caution in recommending these platforms to information-seeking patients. (Surg Obes Relat Dis 2017; 1:00–00.) © 2017 American Society for Metabolic and Bariatric Surgery. All rights reserved.

Keywords:

Bariatric surgery; Support groups; Social media; Online social networking; Content analysis; Media effects

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Introduction

The prevalence of obesity in the United States is an estimated 30–40% for adults \geq 20 years of age [1], with some states expected to reach 60% by 2020 [2]. For many,

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weight loss can be achieved through nutritional, behavioral, and pharmacologic therapies. For those at higher weights, bariatric surgery represents the most durable option for losing excess weight and reducing medical co-morbidities [3–5].

Recently, social media platforms have maximized obesity-related content to appeal to individuals who are attempting to lose weight. Unfortunately, not all of the content is medically accurate or helpful for individuals with excess weight, especially those considering bariatric surgery. Undoubtedly, the Internet impacts decision-making processes for patients undergoing bariatric surgery. A recent study of 212 candidates for bariatric surgery found that 95% had Internet access and 78% reported having researched bariatric surgery [6]. When researching, 81% of participants wanted to know more about the surgical techniques used and 72% wanted to know more about patient outcomes [6]. Another study examined online bariatric resources for the quality of information provided [7]. Of 30 websites, none were rated as "excellent," 2 were rated as "good," 4 were rated as "fair," and the remaining 22 were rated as "poor" [7]. Most commonly, websites did not describe how the surgery would affect overall quality of life [7]. Another study found that Facebook is the preferred place to search for information by bariatric patients (81%), followed by search engines (70%). Weight loss after surgery (77%), healthy eating (77%), regaining weight (69%), postoperative care (64%), physical activity (62%), and plastic surgery (60%) were the most commonly searched topics [8].

In-person support groups for bariatric patients are an integral part of the postoperative lifestyle. Past research highlights that those who attend support groups lose more excess weight than those who do not attend such groups [9]. Online support groups have recently gained attention by many bariatric patients. Research shows that 84% of bariatric patients join or follow support groups on Facebook [8]. When asked about the beneficial aspects of online support groups, members highlighted interacting with other patients, giving or receiving support, exchanging experiences, and accessing information as most beneficial [8]. Despite these benefits, the study found that increased bariatric surgery social networking was correlated with fewer follow-up visits and more negative reactions from providers [8].

Despite evidence suggesting that the majority of patients considering bariatric surgery are utilizing online support groups, little is known about the actual content of these groups or how helpful/supportive they may be. The purpose of the present study was to conduct a content analysis of bariatric surgery support groups/pages on Facebook. This study aims to describe the type of content posted, what information is given and sought by users, and other features of posts that may be salient to bariatric surgery health professionals. Given the overwhelming popularity of these support groups/pages and the frequency of member questions and posts, the goal of this research is to help

professionals better understand what online content their patients are likely accessing.

Methods

Data collection

Facebook groups and pages were examined during May and June 2016 to facilitate identification of the most popular ones for analysis. Facebook groups are places for group communication to occur around a particular topic area and can be: (1) public (accessible to the general public if one has a Facebook account), (2) closed (member names can be viewed publicly, but one must join to view discussions and contribute to the group), or (3) private (group membership and discussions are completely private to nonmembers). Pages are public spaces for administrators/entities to post material and receive comments.

Facebook groups were examined first; thousands were available, with membership ranging from 1 to 34,901 online users. Groups with <5,000 members appeared specific to geographic location, families, surgeons, or healthcare facilities, whereas those with >5,000 members appeared more diverse. The first 50 groups listed for each search term were recorded. Searched terms included "bariatric," "bariatric surgery," "bariatric surgery group(s)," "bariatric support," "bariatric surgery support group(s)," "bariatric surgery complication support group," "gastric bypass," "gastric bypass surgery," "gastric bypass support," "gastric bypass surgery support group(s)," "bypass support group," "gastric bypass and sleeve," "gastric bypass and sleeve support group," "gastric sleeve," "gastric sleeve surgery," "gastric support," "gastric sleeve support," "gastric sleeve support group(s)," "sleeve," "sleeve support group," "weight loss surgery," "weight loss surgery support," and "weight loss surgery support group(s)." Approximately 515 unique groups were identified.

Public groups with the highest numbers of members were reviewed first. Membership ranged from 1 to 310 online users. Closed groups with the highest numbers of members were reviewed next, with membership ranging from 1 to 39,410. Because many of the largest groups were closed, messages were sent to the administrators of 10 groups with the highest member counts. An overview of the study protocol and an explanation that identifiable member/group information would not be recorded were included in the messages. Of the 10 administrators who were contacted, 4 responded; 2 declined the request to join, citing group policies on researchers in the group, and 2 accepted the request. Those who accepted allowed a pseudo-Facebook account to join the group under a false identity to examine the content of posts.

Facebook pages were examined next, and were publicly accessible to anyone with a Facebook account. Pages were examined by using the same search terms given above. Support pages were far less common than support groups,

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