

Social tools prove powerful for online health programs

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In an era when social networking sites and blogs are visited by three quarters of online users, it's only natural that the medical profession would also tap into the power of social media tools.

Caroline Richardson, M.D., associate professor of [family medicine](#) at the University of Michigan Medical School, and her colleagues found that adding an interactive online community to an Internet-based walking program significantly decreased the number of participants who dropped out.

Seventy-nine percent of participants who used online forums to motivate each other stuck with the 16-week program. Only 66 percent of those who used a version of the site without the social components completed the program. Still, both groups saw equal improvements in how much they walked while using the program's [web interface](#) to track their progress – about a mile per day.

The findings, scheduled to be published this month in the *Journal of Medical Internet Research*, show that adding community features to online health programs can be a powerful tool for reducing attrition, says Richardson, the study's lead author. The approach also has the potential to produce significant savings compared to traditional interventions, such as face-to-face coaching, which are expensive to do on a large scale.

"Brick by brick we have been building a model of how to change health behaviors using online tools," Richardson says. "We can see that social

components can help to mitigate the big downside that Internet-mediated programs have had in the past, namely attrition."

For health programs with a national or international scope, even small reductions in attrition could lead to positive health outcomes for large numbers of people and significant system-wide cost savings.

While one-on-one interventions can cost hundreds or thousands of dollars, the web-based approach has the potential to deliver similar results at a much lower cost. The pedometers used in Richardson's program cost \$34 each. A website like the one they used is somewhat expensive to set up, but becomes cheaper on a per-person basis over time and as the size of the program increases. Plus, much of the content is provided for free by participants as they share tips and encouragement.

"There's already a huge demand for change that we're not meeting in the health system," Richardson says. "There are people who know what they want – help losing weight, sleeping through the night, improving their diet – but they don't have guidance. They don't have the necessary behavioral skills or support that will allow them to be successful. That's where these types of programs fit in."

Moreover, as social media networks become even more integrated into the fabric of American life, there will be additional opportunities to harness their power, encouraging participation and disseminating information at a low cost by piggybacking on that existing infrastructure.

"For many people, if you give them a path that's likely to be successful and it's not too painful, they'll do it," Richardson says.

A second, complementary study analyzed which strategies were most successful at garnering social interaction. Among the recommendations based on the findings:

- Use a small number of conversation spaces rather than many specialized ones.
- Have staff respond to user posts when other users don't and post new topics when there is a lull in the conversation.
- And conduct contests with small prizes.

Paul Resnick, Ph.D., a professor at the U-M School of Information, was the lead for the complementary study. "We know from this study that online communities can help to keep people engaged," Resnick says. "But it can be hard to build a critical mass of participation. We found that with the right kinds of staff participation, it's possible even within a small population to get the conversations going."

More information: Reference: *Journal of Medical Internet Research*, 10.2196/jmir.1338 and 10.2196/jmir.1339.

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