Chapter 5 Ethos in E-Health: From Informational to Interactive Websites

Abigail Bakke

Minnesota State University, USA

ABSTRACT

The proliferation of medical information online, without physicians or peer reviewers as gatekeepers, has made e-health an important focus for credibility research. Web 2.0, enabling lay users to contribute content, has complicated patients' challenge of deciding who to trust. To help inspire trust, an e-health website must convey a credible ethos in its homepage and other pages that constitute a user's first impression of a site. This chapter compares the visual and textual ethos strategies of three major e-health sites that represent a continuum from informational to interactive: a government site, a commercial site, and a patient social networking site. The findings reveal a variety of features, such as scientific imagery, privacy seals, and video of patient stories, that can ultimately contribute to an ethos based in expertise and/or in community. This study has implications for the design and evaluation of trustworthy e-health communication.

INTRODUCTION

Medical information has been accessible on the Internet for years, and looking up conditions and symptoms has become a common patient practice. Today, many types of e-health sites are available, from traditional information-based sites to more social, interaction-based sites.

As the web has grown as a resource for today's patients, so have concerns about the credibility of that information. As early as 1995, medical professionals were formally meeting to address concerns with the credibility of health information on the web (Adams & Berg, 2004). Current issues like the anti-vaccination movement or global health crises like Ebola have highlighted the need for credible, trustworthy online information today. Web 2.0, or the participatory web, has raised special complications.

Web 2.0 in itself is nothing new; what is newer and significant is that the values that characterize Web 2.0—openness, transparency, sharing (Eysenbach, 2008)—are extending into medicine and other areas that have been characterized by hierarchy and limited access. Web 2.0 has granted today's patients

DOI: 10.4018/978-1-5225-1072-7.ch005

unprecedented levels of access to, and interactivity with, medical information and other patients. In this new context of the patient-participatory web (my term for online spaces where patients can contribute and comment on health information rather than just consume it), it is not uncommon for patients to discuss health questions in a social media site in lieu of a call to the doctor. Along with much helpful medical information online, patients may encounter unproven information, well-intentioned misinformation, and outright scams. Without the gatekeeping mechanisms of peer review or physician guidance, patients are left with the difficult decision of what to trust.

By extension, e-health organizations, whether established or novel, are left with the challenge of promoting patients' trust in their sites. One of the main rhetorical means by which e-health organizations promote trust is constructing a credible ethos. However, there are limitations to traditional ways of establishing credibility online, particularly given the shift from passive information consumption to more active participation.

Given this shift, what is needed is a greater understanding of the rhetorical strategies diverse e-health websites use to establish ethos. Therefore, this chapter compares popular e-health sites to paint a broader picture of how these sites attempt to inspire trust.

This chapter first sets the background, addressing trends in e-health as well as the rhetorical concepts that help illuminate how websites secure users' trust. Then, the chapter moves to an in-depth rhetorical analysis of the homepages and other promotional pages of three major e-health sites that represent a continuum from informational to interactive: the government site for the National Institutes of Health (NIH.gov), a commercial site (WebMD.com or "WebMD"), and a medical social networking site driven by patient input and crowdsourced data (PatientsLikeMe.com, or "PLM").

Overall, the findings of this analysis point to a broad range of strategies for securing users' trust in e-health sites. Expected ethos markers for health and medical information, such as expertise and scientific authority, are present across all the sites. However, the more interactive sites also encompass personal and social features. These ethos strategies are innovative and underexplored within the context of medical information. Therefore, as will be explained in the conclusion, these findings are significant for scholars, instructors, and designers of e-health communication.

BACKGROUND

E-Health

In order to understand the ethos strategies of today's e-health websites, it is important to place them in the larger context of e-health. The term "e-health" has been used since the early 2000s to characterize the broad overlap between the Internet and medicine. Eysenbach (2001) defined it as a field "referring to health services and information delivered or enhanced through the Internet and related technologies" (para. 3). Of U.S. Internet users, 72% have gone online to research health topics, and 35% could be considered "online diagnosers"—meaning they have gone online specifically to decide whether to seek medical attention to or learn to treat a condition themselves (Fox & Duggan, 2013).

E-health resources have been expanding on the web in terms of types and levels of interactivity, which suggests a need for a nuanced, rather than monolithic, approach to e-health sources (Arduser, 2015; Neubaum & Krämer, 2015; Sillence & Briggs, 2015). Standard informational e-health sites abound, including WebMD, NIH.gov, and MayoClinic.org. More patient-participatory sites include

17 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

www.igi-global.com/chapter/ethos-in-e-health/171538

Related Content

Computer Mediated Learning: Applying Burke's Pentad

Alison Ruth (2008). *Handbook of Research on Computer Mediated Communication (pp. 73-86).* www.irma-international.org/chapter/computer-mediated-learning/19738

Millennium Leadership Inc.: A Case Study of Computer and Internet-Based Communication in a Simulated Organization

Stacey L. Connaughton (2008). Handbook of Research on Computer Mediated Communication (pp. 146-166).

www.irma-international.org/chapter/millennium-leadership-inc/19743

Reviewer Motivations, Bias, and Credibility in Online Reviews

Jo Mackiewicz (2008). *Handbook of Research on Computer Mediated Communication (pp. 252-266).* www.irma-international.org/chapter/reviewer-motivations-bias-credibility-online/19751

Communicative Content of Selected Visual Construction of Humour on Facebook: A Visual Social Semiotic Analysis

Ibrahim Esan Olaosun (2016). *Analyzing Language and Humor in Online Communication (pp. 85-100).*https://www.irma-international.org/chapter/communicative-content-of-selected-visual-construction-of-humour-on-facebook/156879

Bridging the Communication Gap

(2017). Solutions for High-Touch Communications in a High-Tech World (pp. 1-22). www.irma-international.org/chapter/bridging-the-communication-gap/174295