

## Questioning the Quality of Peer Health Advice

Online forums are a popular way for the general public to access health information. Though there are accessible and reputable websites at which to obtain health information (i.e. WebMD) and databases of academic studies (i.e. PubMed), individuals often prefer using online forums for the ease of finding peers, viewing a variety of viewpoints (Schon, Ristic, & Manning, 2015) with no time constraints (Appleton, Fowler, & Brown, 2014), and identifying a satisfactory answer to a personal question (Zhao & Zhang, 2017). Susannah Fox recently posted a [blog post](#) to stimulate dialogue among peer support researchers and practitioners on assessing the quality of peer health advice.

In seeking to understand challenges faced by *in-person* peer support programs, we asked investigators funded by Peers for Progress if they had any instances of misinformation on the part of the peer supporter and how that might be addressed. Of five programs accounting for nearly 250 peer supporters, four reported no instances of misinformation and one reported that where a peer supporter was unsure, the study nurse sat in on peer support groups to assist (Peers for Progress, 2015). We know that in selecting for peer supporters, we want to look for traits like resourcefulness and self-awareness while avoiding those who may be too bossy or overly confident. This is important because we want peer supporters who are naturally resourceful while understanding where their boundaries lie in offering support or personal anecdotes (E. B. Fisher et al., 2018; E. Fisher, Hacker, McDonough, Nielsen, & Tang, 2015). We have found that underscoring all of this is the critical component of accessible backup (E. Fisher et al., 2015). As in the case above, a nurse, program coordinator, or other clinician should be available to assist with questions regarding accurate information and to provide credible resources to the peer supporters which they could share with their peer clients; the backup's responsibilities can also include crisis management and ongoing supervision

Online forums used by peers often exist without moderators, supervision, or peer supporter training (disclaimer: there are also a number of moderated forums). While Susannah's original blog sources, and ensuing commentary, does find a variety of credibility to the health information posts in these forums both positive and negative, it seems that

generally, information posted in online forums can be beneficial. We found it heartening that (Brady, Segar, & Sanders, 2016) found that forum participants, specifically those for those with chronic conditions, largely framed their posts as experiential, deferred major decision-making to discussions with healthcare professionals, and practiced self-policing within their communities. Further, they found that those seeking information in online forums identified and trusted posts from those with (longer) lived experience and whose personal experiences were more like theirs – those with a higher level of peerness to themselves. On some forums, healthcare professionals partake in posting or monitor the information being circulated on a forum. There is no way to ensure that online peer health advice is 100% accurate, but we can certainly do more to promote good health information and reduce the spread of information that can cause harm.

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Peers for Progress circulates each Tuesday an abstract or other item of interest to the general community of those interested in peer support, community health workers, promotores de salud, lay health advisors, etc. Comments to Program Manager, [Patrick Tang](#).

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