Information Sources Survey:

Women's Depression Information Communities

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Introduction. My chosen community is women depression information communities. Women are twice as likely than men to suffer from depression and by 2020 experts predict that depression will be the second most diagnosed disability worldwide (Stewart 2008). Experts claim that women tend to turn to the internet and websites to gather health information and seek emotional support (Marton 2010). Additionally, studies show that community members of online depression groups are likely to be women (Houston, Cooper, & Ford, 2002).

Durrance and Fisher highlight several characteristics of an information community: they may be built around different "focal points" and varying topics, technology is used to facilitate access and the use of relevant content, the communities' reach extends beyond "geographical boundaries" and members can be anonymous (Durrance & Fisher 2003). Women's depression information communities tap into many of these facets. An abundance of websites such as the NIH (National Institute of Health) https://www.nimh.nih.gov/index.shtml and Psych Central http://psychcentral.com/ leverage technology to offer variances of interests for its members, which range from suicide to post-partum depression. According to Marton (2010), "internet websites may be a useful tool for conveying mental health information to those who are isolated by mental illness and who remain untreated" (p. 3).

Technology allows for a global reach, as evidenced by the Women's Mental Health community (womensmentalhealth.org). Users from all over the world can access their website or Twitter feed (https://twitter.com/wmnmentalhealth) for updated information. Lastly, in regards to

the anonymous nature of the internet, it's understandable why members seek refuge in these online communities, given the stigma associated with depression and mental illness in general.

Members with mental illnesses come to the web for many reasons, searching for doctors, researching for second opinions, learning about others who also suffer from mental illnesses, and fact checking information from their pharmacies. Women are more inclined than men to seek emotional support for "health or personal problems" on the internet, and two main factors "belief in help-seeking in general and greater willingness to associate with peers who have mental health problems," govern their health-seeking (Marton, 2010, p.4). Members primarily rely on medical experts, family members and printed sources for information, however. Online health seeking serves to complement, not supplant, these more traditional approaches (Marton, 2010).

Research based source. I will be examining the book: Mazure, C. M., & Keita, G. P. (Eds.). (2006). *Understanding Depression in Women: Applying Empirical Research to Practice and Policy*. Washington, DC: American Psychological Association.

Position within the information cycle. The book, published in 2006, was partly inspired by the 1990 publication of American Psychological Association's report: *Report of the American Psychological Association's National Task Force on Women and Depression* (McGrath, Keita, Strickland & Russo, 1990). Thus, it falls into the years after the event within the information cycle.

Scope and content. *Understanding Depression in Women* is a comprehensive book that offers empirical studies about American women who suffer from depression. The book covers causes, treatment options, risk factors, and suggestions on preventative measures. Additionally,

differences in gender are explored in relation to depression and a call to action is heeded to address outreach and service concerns.

Credentials and authority of author, editor, and/or publisher. American Psychological Association published the book. All of the authors and editors in the collection hold PhDs and work either directly for the American Psychological Association, or in the field of psychiatry or at universities.

Purposes and uses. The purpose of the book serves as a blueprint for public policy and addresses how depression impacts women and calls attention to the grave importance of continued research, education, outreach, treatment and prevention of the disease.

Intended audience. In the foreword the need for awareness, more research, better treatment options and services for women are stressed; therefore, it's assumed the authors' intended audience is fellow professionals in policy-making roles and/or psychiatrists who wish to better understand the disease's impact on their patients.

Design. *Understanding Depression in Women* is a 163 page published academic book. It contains a foreword, preface and an introduction, which all serve to stress the grave importance of the growing trend of women suffering from the condition, as well as provide background information on the disease. Four chapters (each written by a psychiatrist) contain the following subjects: differences in depression by gender, treatment and prevention, and recommendations on ways to enhance service and outreach to those who suffer from the disease.

Currency and frequency of update. This book was published in 2006 and it's a first edition. It is a stand-alone book.

Biases and gaps. No known biases exist.

Value for your informational communities. *Understanding Depression in Women* offers context for women in depression communities by helping them better understand their illness in way of treatment options, as well as expanding overall awareness on why their gender is more prone to mental illness than men. The book also adds value in an academic setting; it benefits scholars or those requiring a research based source on women and depression communities and thus, would be an instrumental source for a librarian.

Community based source. For my community based source I will examine Psych Central [website] (n.d.). Retrieved October 15, 2016, from http://psychcentral.com/.

Position within the information cycle. Blog posts are responses to current studies or findings. Most of the posts therefore, would be considered as "months after the event." However, a few posts could be considered "years after the event" in the cycle, as a writer may decide to look at older research with a fresh pair of eyes to supplant older findings.

Scope and content. The website, easily accessible to anyone in the world, encompasses a wide range of articles and resources relating to mental health issues and illnesses. The main menu has numerous categories ranging from quizzes (pre-screening for mental illnesses), an "ask the therapist" section, blogs, recent news events, research, drug information and additional resources. There are also many subtopics that delve deeper into important topics such as women and mental health, suicide, etc. Users can register for online forums and support groups.

Credentials and authority of author, editor, and/or publisher. Dr. John Grohol founded Psych Central in 1995, and he still manages the website. Dr. Grohol holds a graduate degree in clinical psychology, and he was the first to publish the diagnostic criteria for mental

illnesses, such as depression, bipolar disorder and schizophrenia. He founded Psych Central after his close friend committed suicide.

Purposes and uses. Psych Central is a user-friendly website available free to the general public where one can access mental health information and/or seek emotional support and advice from like-minded members.

Intended audience. Psych Central claims it has over 175,000 subscribers. The website is an outreach service to the general population who, either suffer in silence from mental illness, or for those who have loved ones afflicted with a mental health issue. A "pro" section intended for mental health professionals is also offered.

Design. Psych Central is both a website and an online community. The home page displays recent articles and there are tabs at the top of the website where users can easily search for various topics ranging from support forums, medication, quizzes, research, resources and medication options. On the left-hand side of the site is a sidebar with mental illnesses headings that users can click onto to get information.

Currency and frequency of update. Psych Central publishes blog posts daily, sometimes hourly. For instance, on October 12, 2016 there were at least a dozen articles published on that day.

Biases and gaps. Quite a few drug advertisements are displayed on Psych Central's homepage. Therefore, it could be construed that Psych Central is profiting off pharmaceutical companies. For example Vvaynse, a stimulant used to treat ADHD and binge-eating disorder, is advertised at the top of the home page. Thus, the site does have the potential to fall into conflict

of interest. It may suggest to those interested in alternative treatments that Psych Central is biased toward using medication for treatment.

Value for your informational communities. Psych central offers a wealth of information and resources on mental health illnesses and topics easily accessible to the general public. The site boasts over 250 support forums that members can use to seek support with fellow depression sufferers (or those with other mental health illnesses). Members can search for a therapist based by zip code. An "ask therapist" column and quizzes are useful to gauge mental illness in individuals. Additionally, they also have a charity group called Psych Central Community that helps fellow members in need. It's a non-profit arm of Psych Central and they claim that they match 1:1 in donations.

Compare and Contrast. Despite differences in their intended audiences and the book's narrower scope of subject matter, both sources strive to inform, educate and promote awareness of mental illness. The book tries to influence policy change and promote awareness for women afflicted with depression through empirical based research. Psych Central on the other hand, focuses on a broader sweep, offering its members timely information, resources and emotional support through its many forums. *Understanding Depression in Women's* authors are all established psychiatrists, but not all of Psych Central's writers are experts in mental health, however. Marton (2010), who conducted an evaluation study on health websites, observed: "participants tend to regard large portal health sites and websites authored by clinicians to be more reliable than health websites authored by individuals, including those writing about their personal health experiences" (p 17). Thus, a member interested in a more authoritative source may give preference to the academic work. Overall, both sources benefit women depression

information community members either indirectly or directly, with the ultimate goal of bettering the lives of those struggling with mental illness.

Conclusion. Both sources offer a wealth of information. I'm not a mental health professional; nevertheless, the book enhanced my overall knowledge and awareness about the possible causes of depression and the urgent need for more resources dedicated to this proliferating illness in women. Although I found Psych Central's website cluttered and overly run with ads, I found the information and resources equally important and the support forums beneficial for women to explore information and gain support in an open and non-threatening environment. Moreover, it's clear the founder truly cares about his members as evidenced by his commitment to sharing information and his dedication to helping those members in financial need through his charity organization.

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