LETTER TO THE EDITOR

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The impact of the use of Facebook™ on social support networks and symptoms of depression reported by the elderly

Although the benefits of social networks on the health of the elderly is well known, what is observed is that this part of the population maintains few social relationships and support is restricted to family members. Hence, this limits the possible benefits that a network can offer the elderly (Brito et al., 2012). In this sense, social networking sites such as Facebook™ can help maintain and strengthen the “real” social connections of the elderly, making it an important therapeutic tool. Thus, considering that there is still no conclusive evidence on this topic, a study was developed in Brazil whose aims was to analyze the impact of the use of Facebook™ on the “real” social networks of the elderly, as well as on reported symptoms of depression.

It was a study with a quasi-experimental design, in which 23 elderly subjects were submitted to an intervention protocol that included 16 workshops (1 workshop per week) addressing topics related to the use of Facebook™ (profile creation, virtual interaction with friends and/or family, sharing of photos and/or videos, security/privacy). The pre- and post-intervention evaluation was accomplished through the application of a questionnaire consisting of questions regarding socioeconomic and health conditions, structural and functional characteristics of the social network, and depressive symptoms. The differences between the pre- and post-intervention groups were estimated using the Wilcoxon, paired-t, and McNemar tests.

Following the intervention, it was observed that the average number of members of the elderly social support network rose from 17.5 to 35.7 individuals (p < 0.001). In addition, the mean score of the Geriatric Depression Scale fell from 3.5 to 3.1 (p = 0.008), revealing a decrease in the mentioned symptoms of depression.

Regarding the different types of social support, however, there was no increase in the level of support received after the intervention. This finding may be justified by the reduced intervention time. The establishment of the exchange of social support in the different dimensions may require a greater time of contact between individuals. The workshops were held over a period of four months, weekly, and through two-hour workshops, which may not have been sufficient to deepen the relations established to the point of favoring an increase in the exchange of support.

Previous research suggests that the use of social networking sites by older people helps maintain affectional and social relationships, favoring greater integration between individuals (Ferreira, 2017; Moorhead et al., 2013; Nef et al., 2013). The use of Facebook™ by the elderly as a tool for health promotion and social inclusion promotes the active aging process and helps them stay in touch with friends and family (Páscoa and Gil, 2015).

The results found in the research developed in Brazil may influence the implementation of health actions by proposing the use of an elderly health promotion tool that favors elderly social and digital inclusion. These findings may encourage organizations and individuals to use social networking sites to improve social integration and, consequently, the mental health of the elderly.

References


Letter to the Editor

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