

ORIGINAL RESEARCH

Healthy eating blog readership: A cross-sectional survey in Australian adults

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Abstract

Aims: To investigate whether members of the public read blogs for the purpose of accessing healthy eating information; examine demographic predictors of healthy eating blog readership, specifically education, gender, age, body mass index, and residential location; and explore the reasons for reading, and not reading, healthy eating blogs.

Methods: This study used a cross-sectional online self-reported survey design collected over three time points (round 1: December 2017–March 2018, round 2: August 2018–December 2018, round 3: December 2021–March 2022). The total sample of participants comprised of 238 respondents with a mean age of 46 years old, who mostly reported gender as female (82%), being educated with a university degree (69%), and predominantly resided in urban and city areas (84%).

Results: Fifty-one percent of respondents reported reading healthy eating blogs, suggesting that consumers were proactively seeking healthy eating information through this avenue. Participants who identified as female were 3.2 times more likely to read healthy eating blogs. Commonly, healthy eating blogs were read to receive practical information that aligned with current food choices. The main reason participants reported not reading healthy eating blogs was not thinking about using them (29%).

Conclusions: Understanding who is seeking healthy eating information through blogs, and their reasons doing so, is important to continue research into the potential effectiveness of blogs as a platform to communicate healthy eating and nutrition messages. This study provides direction for further investigation into how dietetics professionals could effectively use blogs to disseminate healthy eating information and positively influence consumer food choices and dietary intake.

KEYWORDS

blogs, health communication, healthy eating, nutrition information, online social networking

1 | INTRODUCTION

With the growth of social network sites, consumers have greater access to health and nutrition information than ever before.¹ Social networking sites describe a collection of websites that enable individuals to create and share content and participate in online social networking.²⁻⁴ In 2020, it was estimated that there were over 3.6 billion active users on social network sites globally, with more than 4 billion active users predicted by 2025.⁵ Studies suggest that social network sites are not used in isolation, rather, users are likely to engage with a combination of popular platforms including Facebook, YouTube, Twitter, Snapchat and Instagram.⁶⁻⁸ From an Australian perspective, it was reported by the Australian Communications and Media Authority that 72% of consumers engage with social network sites.⁹ The top five most popular social network sites for Australian users in 2021 were reported to be Facebook, YouTube, Reddit, Instagram and LinkedIn.^{10,11}

One form of social networking that has been gaining interest is online blogging (for example, there are dedicated blogging platforms such as Reddit and Tumblr).^{12,13} While blogs are described in various ways, they can be defined as a website containing 'posts' which are date stamped in reverse chronological order.¹²⁻¹⁴ Blogs can be created for a range of purposes, including personal use, to share news and information, provide education, promote a business or product, or share information on niche topics.¹²⁻¹⁴ In 2021, it was reported that there were more than 570 million blogs across the platforms WordPress, Tumblr, Blogger, Squarespace, and Medium.¹⁴ Additionally, blogs accounted for more than a third of all websites, with 70 million new blog posts every month on WordPress,¹⁵ demonstrating their increasing presence.

Currently, there is limited and inconsistent literature describing the demographic profile (i.e., gender, age, body mass index [BMI]) and behaviours of blog readers in general, and more specifically, for those readers who access blogs for nutrition and health-related information.¹⁶⁻¹⁹ General demographic descriptions of blog readers in both the grey and scientific literature suggest an age profile of between 30 and 49 years, male gender, with a high level of education.^{8,17-19} While it is unclear how many active users read blogs, it has been suggested that the number of blog readers surpass blog writers (bloggers).²⁰ Research examining the motivations for using blogs, and usage, have primarily been positioned from the perspective of a blogger rather than the reader,¹²⁻¹⁴ that have been inferred from studies investigating social media broadly (i.e., Twitter, Facebook, Snapchat), rather than blogs specifically.²¹ These limitations notwithstanding, motivations for blog readership have been proposed to include obtaining desired information, convenience of accessing

information, personal fulfilment, personal expression and surveillance of different landscapes including political and social settings.^{18,19}

Given many individuals seek information online, it is not surprising that health professionals also utilise blogs to disseminate information.^{12,22-24} In the context of nutrition-related information, dietitians have been creating blogs to disseminate healthy eating and nutrition information.^{25,26} The online nature of blogs allows the communication of dietary information to a broader audience in a relatively quick, simple, and inexpensive manner.²⁷⁻²⁹ This potential to communicate healthy eating information is further supported by consumers identifying dietitians as a credible, trusted and preferred source of nutrition information.³⁰ However, little is known about whether consumers access blogs for the purpose of receiving healthy eating information, or their underlying motivations.

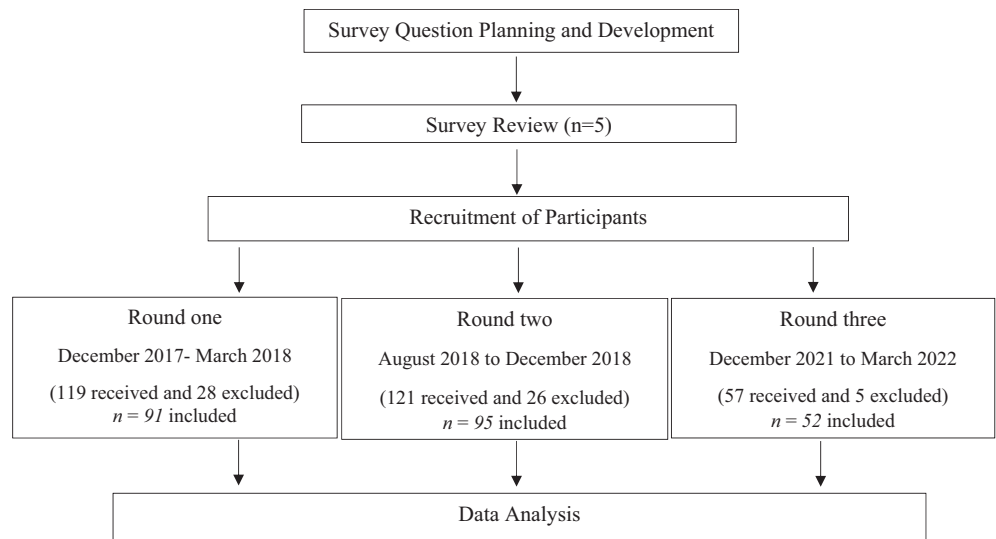
Understanding whether, and which, consumers access healthy eating blogs online, and the reasons underlying their engagement (or non-engagement) with healthy eating blogs, is important to evaluate the feasibility of blogs as a platform to communicate healthy eating and nutrition messages to the public. As such, this study explores healthy eating blog readership in a community sample of adults using a cross-sectional survey design comprising both quantitative and qualitative methodology. Specifically, it aims to (i) investigate whether members of the public read blogs for the purpose of accessing healthy eating information, (ii) examine demographic predictors of healthy eating blog readership, specifically education, gender, age, BMI, and residential location, and (iii) explore the reasons for reading, and not reading, healthy eating blogs.

2 | METHODS

The study was approved by the relevant institutional Human Research Ethics Committee at the University of Canberra (HREC 16-192). No personal or identifiable data were collected or stored, and only the research team had access to survey responses. Additionally, there was no contact between the research team and participants. Participation in the study was voluntary and no incentives were offered. To ensure transparency, methods were reported using the 'Checklist for Reporting Results of Internet E-Surveys (CHERRIES)' (see Supplementary Material A).

A cross-sectional open online survey design was employed using Qualtrics,³¹ with the sample collected at three points in time (Round 1: December 2017–March 2018, Round 2: August 2018–December 2018, Round 3:

FIGURE 1 Overview of data collection and recruitment.



December 2021–March 2022). An online survey was specifically chosen over traditional paper-based techniques given the online nature of the study focus.

Participants were recruited through Facebook (all rounds), online community newsletters (i.e., Health Care Centres and Medical Practices) (Rounds 1 and 2 only) and via posters on campus at the University of Canberra (Rounds 1 and 2 only). In Round 1, Facebook was used to recruit participants via the sharing of a post about this study in which a survey link was embedded. A paid Facebook campaign was utilised to extend the reach of the survey as part of recruitment for Rounds 2 and 3 only. Participants were able to access the survey using either a unique link or QR code generated by Qualtrics.³¹ Convenience sampling was chosen in this study as there was no accessible public database that could identify consumers' internet and social media use. Participant recruitment for the three rounds of sampling were the same, with the exception that paid Facebook advertising was employed to extend the reach of the survey in the second and third rounds. Consumers were eligible to participate in the survey if they met the following criteria: (i) acknowledged and agreed to informed consent, and (ii) aged between 25 and 65 years of age (Figure 1). For the purpose of this study, adults were defined as being aged between 25 and 65 years as it aligned with commonly used government classifications.^{32,33} Participant responses were excluded from the survey if they did not meet eligibility criteria and/or if responses were less than 80% completed. This progress rate was deemed sufficient as the self-reported height and weight questions accounted for most missing responses.

The survey comprised two main sections. The first survey question required the respondent to consent to the study eligibility criteria and participation. If consent

was provided, the respondent then completed four socio-demographic items assessing gender (male, female, unspecified), age (in years), highest level of education (i.e., high school graduate, TAFE diploma/equivalent or University qualification), and geographic location (city, urban, rural and remote). Participants were then asked to indicate whether they read blog posts about healthy eating (yes/no), with a blog defined as a type of website that is frequently updated, consisting of dated entries about healthy eating information, in which text, images and links to other blogs or websites related to healthy eating information can be found. Those that indicated 'yes' then were asked to list their favourite healthy eating blog(s), and the reasons for reading these blog(s), both using free-text question formats. Information about blog use was then assessed by asking participants on average how frequently they read healthy eating blogs (multiple times a day, once a week, a few times per week, once a month, a few times per month, and only when I need information), how much time they spend on average when reading blogs (0–15 min, 15–30 min, 30–45 min, 45–60 min, and over 60 min), and reasons for reading blogs about healthy eating (free-text). Finally, those who read healthy eating blogs were asked to indicate their agreement with nine items assessing reasons for blog readership, such as 'I use blogs to gain information about what foods I should be eating', using a five-point Likert scale from (1) strongly agree to (5) strongly disagree.

Respondents who answered 'no' to reading blogs were asked about the reasons why they do not read healthy eating blogs (I am not interested in healthy eating blogs, I do not know where to find a blog, I prefer to get healthy eating information from another source, I have not thought about using blogs to find healthy eating information, I do not trust healthy eating information on

TABLE 1 Demographics and comparisons by survey round.

Demographics	Survey rounds (%)				Comparison between all three rounds
	One (n = 91)	Two (n = 95)	Three (n = 52)	Total (n = 238)	
Age (years)					$F(2, 230) = 0.352, p = 0.704$
Mean (SD)	45.6 (12.6)	45.5 (12.9)	47.0 (12.6)	45.9 (12.7)	
Gender					$\chi^2(2, n = 238), =11.797, p = 0.003$
Female	71	86	92	82	
Male or unspecified	29	14	8	18	
Education level					$R(5.310) = p = 0.252$
High school graduate	6	5	12	7	
TAFE diploma/equivalent	22	20	31	23	
University qualification	72	75	57	70	
Location					$\chi^2(2, n = 235), =0.208, p = 0.901$
City and/or urban	90	83	90	87	
Rural and/or remote	10	17	10	13	
Healthy eating blog readership					$\chi^2(2, n = 238), =1.526, p = 0.466$
Yes	55	51	44	51	
No	45	49	55	49	

Note: For the purpose of analysis, some categories were combined (for example, 'high school year 10 graduate' and 'high school year 12 graduate' were combined; 'bachelor qualification' and 'post graduate qualification' were combined to 'university qualification'; 'city' and 'urban' were combined; and 'rural' and 'remote' were combined). For gender, 1 participant identified as 'unspecified' in Round 2. Since this category could not be analysed separately, it was combined with participants who reported identifying as 'male' and the category was named 'male or unspecified' so that all participants could be retained in this analysis.

blogs, and 'other' with additional free-text to specify). All participants were also invited to provide additional comments and self-reported height (in metres) and weight (in kilograms) data after both sets of questions (full questionnaire available in Supplementary Material B). These optional questions were included in the survey to characterise respondents and were placed at the end of the survey, given the focus of the study related to healthy eating blog readership.

Survey questions were informed by a review of the literature which highlighted re-occurring key factors that were suggested to influence blog readership.^{34–37} These factors included reading frequency, readability, trust, inspiration, interest in topic and content, and perceived value of information, which were prioritised in the development of questions.^{34–37} Closed questions allowed for the collection of quantitative data to provide insight into reader characteristics (i.e., age, location, gender, and education level), usage information (i.e., frequency of blog reading), and reasons for blog readership. The survey was pilot tested by researchers ($n = 5$) in the field of nutrition and dietetics prior to being made available to consumers. The purpose of pre-testing the survey was to ensure that questions were comprehensible, and the survey layout was consistent and functional (Supplementary Material A).

While a completeness and atypical timestamp check was not embedded as part of the survey design, participants were able to review and change response(s) at any point before submitting a response. To ensure each survey response was unique to prevent multiple entries, IP restrictions were selected through Qualtrics.³¹

Statistical analyses were performed using the IBM Statistical Package for the Social Sciences (SPSS) Statistics version 25.³⁸ To investigate whether there were any demographic differences between participants across the three periods of data collection, and by blog readership, comparative analyses were conducted using Chi Square tests, t -tests and Fishers t -tests. To investigate demographic predictors of healthy eating blog readership, a logistic regression analysis was conducted in which age, gender, location, BMI and education were entered as independent variables, and healthy eating blog readership entered as the dependent variable. For the purpose of statistical analysis, responses in some categories were collapsed (see note in Table 1), with the reference category for categorical variables set as those who identified as male or unspecified gender, rural and remote for location, no university qualification for education, and no for healthy eating blog readership. A significance level of $p < 0.05$ was employed for these analyses. Means and

standard deviations were calculated to examine reasons for reading healthy eating blogs, and response category frequencies examined.

A qualitative descriptive approach was used to analyse open-ended data and gain additional insight into blog readership, as well as the reasons for reading (or not reading) healthy eating blogs, and was conducted by the primary researcher.³⁹ Qualitative description has been reported to be appropriate for exploratory research focusing on an under-reported phenomenon.^{39,40} Open-ended questions that asked participants for non-descriptive responses (i.e., to list favourite blogs) were analysed and categorised to produce descriptive summaries of responses. Additionally, for blogs that were categorised as authored by 'health professionals', the self-reported profession of the author was identified by searching for and reading the 'about me' page of the blog. Open-ended questions that asked participants for descriptive information were read by the first author as per guidelines by Braun and Clarke.⁴¹ Once the primary researcher became familiar with the data, initial codes were developed.⁴¹ Repetitive codes were clustered and codes were further refined by considering patterns in responses into key themes.⁴¹ Key themes were discussed by the research team to ensure interpretation and coherency supported by the data.⁴¹

3 | RESULTS

A total of 238 survey responses were included for analysis. Respondents in this study were on average 46 years old ($SD = 12.8$), mostly reported their gender as female (82%), were educated with a university degree (69%), and predominantly resided in urban and city areas (84%) (Table 1). No differences were found between respondents across the three survey rounds in relation to age ($F(2, 230) = 0.352, p = 0.704$), healthy eating blog readership ($\chi^2(2, n = 238) = 1.526, p = 0.466$), level of education ($R = 5.310, p = 0.252$) and residential location, ($\chi^2(2, n = 235) = 0.208, p = 0.901$). Differences for gender distribution were observed, with a greater proportion of females in later rounds relative to those not reporting gender as female ($\chi^2(2, n = 238) = 11.797, p = 0.003$). As there were no significant demographic differences between the three survey rounds, except for gender, data were combined to analyse the profile and predictors of healthy eating blog readership collectively.

Of the 122 participants who reported reading healthy eating blogs, 12 (10%) participants reported reading blogs daily, 40 (33%) reported reading a few times per week, and 18 (15%) reported reading blogs weekly. Most participants, 73 (61%), reported spending between 0 and 15 min

per day, while 39 (33%) spent between 15 and 30 min per day, and only 7 (6%) spent 30–45 min per day.

Collectively, 151 blogs were identified by respondents when asked about their 'favourite' healthy eating blog(s) (see Supplementary Material C). While respondents highlighted a broad array of different healthy eating blogs, there were some identified by multiple respondents. Blogs were categorised based on the author or source of the blog, with those that could not be identified from a Google search assigned as 'uncategorised'. The vocation of blogs that were self-reported to be authored by a health professional included dietetics, nutrition, naturopathy, general medicine, health and wellness coaching. Healthy eating blogs that were authored by health professionals (27%) was the most favoured blog category identified by respondents.

No differences were found between those respondents that read and did not read healthy eating blogs in relation to education, location and BMI (Table 2). However, differences in gender were reported, with those identifying as females more likely to report reading healthy eating blogs compared to those who did not identify as female (9% male, 1% gender unspecified), with a small to medium effect size of Phi (Φ) = -0.194 .⁴²

Investigation of demographic predictors of healthy eating blog readership was undertaken using a logistic regression (Table 3). The model overall was significant, ($\chi^2(5) = 12.167, p < 0.033$), explained 71% (Nagelkerke R^2) of the variance in blog readership, and correctly classified 50% of cases. Examination of the unique predictors in the model revealed that only gender contributed significant variance, with participants who reported identifying as female demonstrating a 3.2 times greater likelihood of reading healthy eating blogs compared to those who identified as male or unspecified gender (OR = 3.238, 95% CI [1.5, 6.8]). No other demographic variables (i.e., age, education, location or BMI) significantly contributed to the model.

Reasons for healthy eating blog readership were assessed by examining means and standard deviations for survey items developed in consultation with the empirical literature (see Table 4). Participant agreement with statements assessing reasons for reading healthy eating blogs reflected overall high levels of endorsement across all items, as evidenced by scores below the scale midpoint which ranged from 1 (strongly agree) to 5 (strongly disagree) (Refer to Supplementary Material B, Question 9). The most influential reasons for reading blogs were because they provided practical information about healthy eating, and this information was perceived to be valuable.

To further understand quantitative data pertaining to healthy eating blog readership, thematic analysis of

TABLE 2 Demographic statistics and comparisons by healthy eating blog use.

Demographics	Those who read healthy eating blogs (n = 121)	Those who did not read healthy eating blogs (n = 117)	Comparison (p-value)
Age (years)			
Mean (SD)	47 (12.9)	44 (12.4)	$t(231) = 1.537, p = 0.126$
Range	24–65	24–65	
BMI (kg/m ²)			
Mean (\pm SD)	26.8 (6.4) ^a	26.5 (5.5) ^a	$t(225) = 0.378, p = 0.706$
Gender			
Female	n = 108 (89%)	n = 87 (75%)	$\chi^2(1, n = 238), = 8.918, p = 0.003$
Male or unspecified	n = 13 (11%)	n = 30 (25%)	
Education level			
High school graduate	n = 9 (7%)	n = 8 (7%)	$\chi^2(2, n = 238), = 0.712, p = 0.700$
TAFE diploma/equivalent	n = 30 (25%)	n = 24 (20%)	
University qualification	n = 82 (68%)	n = 85 (73%)	
Location			
City and/or urban	n = 101 (85%)	n = 104 (89%)	$\chi^2(1, n = 235), = 0.162, p = 0.687^b$
Rural and/or remote	n = 18 (15%)	n = 13 (11%)	

Note: For the purpose of analysis, some categories were combined as they could not be analysed separately. For example, 'unspecified' and 'male' gender were combined into a single category labelled 'male or unspecified'; 'high school year 10 graduate' and 'high school year 12 graduate' were combined into a single category 'High school graduate'; 'bachelor qualification' and 'post graduate qualification' were combined into 'university qualification'; 'city' and 'urban' location were combined; and 'rural' and 'remote' were combined.

^aA total of 113 participants from 121 who read healthy eating blogs and a total of 114 participants from 117 who did not read healthy eating blogs provided both self-reported height and weight data.

^bThe category 'other' was excluded from analysis due to having a small sample.

Predictor	B (SE)	Wald	OR (95% CI)	p-value
Gender	1.175 (0.385)	9.334	3.238 (1.524, 6.880)	0.002
Education	-0.038 (0.349)	0.012	0.962 (0.486, 1.907)	0.912
Location	-0.205 (0.353)	0.337	0.815 (0.408, 1.627)	0.561
BMI	0.006 (0.023)	0.056	1.006 (0.960, 1.053)	0.813
Age	0.009 (0.011)	0.598	1.009 (0.987, 1.031)	0.439

TABLE 3 Logistic regression analysis of demographic predictors of healthy eating blog readership.

qualitative responses was undertaken. Findings highlighted several factors explaining why participants favoured specific healthy eating blogs. Receiving practical information was reported frequently, with participants identifying a variety of ways in which blogs did this, such as by providing recipes, healthy eating tips, meal ideas, food swaps and alternatives. Participant comments included, 'Healthy quick easy recipes as I have two young children', 'Accessible recipes', '... And provide helpful recipes and meal suggestions.' Participants also appeared to value information that they perceived to be well-researched, based on scientific principles, and authored by a dietitian or nutritionist, 'nutritionists and dietitians are frequently the best sources of information regarding the

latest information about what constitutes a healthy diet'. Information that was seen to promote specific food products, supplements and/or powders were perceived as being less credible and even untrustworthy, 'everyone can write a blog about healthy eating. The information can be false, and blogs are widely used to promote products (therefore they would lie to sell)'. Participants also appeared to favour blogs if they felt a sense of connection with blog post content or the author themselves, 'I like the recipes from them. [de-identified] was the first I started with, and I identified with her because she also has an autoimmune disease' and 'A lot of their posts revolve around the creation of raw treats, helping me alter my sweets and snacks into healthy treats made of raw ingredients'.

TABLE 4 Descriptive statistics for reasons for healthy eating blog readership.

Questions	Total	Mean (SD)	Likert scale				
			Strongly agree (%)	Agree (%)	Neither agree nor disagree (%)	Disagree (%)	Strongly disagree (%)
I use blogs to gain information about what foods I should be eating	117	2.22 (0.91)	20.51	47.01	23.93	6.84	1.71
I find blogs contain valuable information about healthy eating	118	2.07 (0.81)	22.88	53.39	18.64	4.24	0.85
I find blogs contain practical information about healthy eating	119	1.96 (0.75)	24.37	60.50	10.92	3.36	0.84
If I have questions about healthy eating, I usually find answers on blogs	119	2.61 (0.97)	11.76	36.13	35.29	13.45	3.36
I find healthy eating information on blogs simple to understand	118	2.08 (0.73)	16.95	62.71	16.10	3.39	0.85
I find blogs about healthy eating inspiring	118	2.18 (0.82)	16.95	55.93	21.19	4.24	1.69
I find healthy eating blogs make me want to change how I eat	119	2.28 (0.81)	14.29	51.26	27.73	5.88	0.84
I change the way I eat because of the healthy information I read on blogs	119	2.63 (0.94)	11.76	32.77	37.82	15.97	1.68
I trust the healthy eating information that I read on blogs	119	2.78 (0.85)	3.36	34.45	47.90	9.24	5.04

Note: Scale ranges from 1 = strongly agree to 5 = strongly disagree; lower scores reflect greater endorsement of the item.

Participants provided information about what influenced them to access blogs through an open comment box. Responses suggested these included an interest in health and wellbeing, 'I enjoy healthy living and interested in improving quality of life'; to increase knowledge in food and nutrition, and make healthier food choices, 'I like to alter bad eating habits and expand my knowledge on food and ingredients'. Additionally, responses also suggested that feeling a sense of inspiration, motivation and relating to the author encouraged readership, 'although I know how to find sources of scientific nutrition information, I like hearing tips or advice from a more personal and unique role model whom I relate to. I like hearing tips for actually incorporating healthy eating into one's lifestyle, and the healthy lives of my favourite bloggers give me inspiration and motivation - so I can turn my learned facts into habits/recipes/and so forth that I actually follow'.

A total of 117 participants reported that they did not read healthy eating blogs. The top three responses endorsed from a list of reasons for not accessing blogs included not thinking about using healthy eating blogs to find healthy eating information (29%), not trusting the healthy eating information provided by blogs (24%), and a preference to receive healthy eating information from other sources, for example, a doctor or a

dietitian (22%). Additionally, not being interested in healthy eating blogs and being unsure where to find/access a healthy eating blog were also selected (see Supplementary Material D).

Thematic analysis of open-ended responses mirrored quantitative findings concerning the reasons reported by participants for not reading healthy eating blogs. A lack of trust in the information provided by healthy eating blogs was reported, with concerns about author qualifications raised. For example, 'Blogs are generally not authoritative sources. Unless it's a [de-identified] blog or from some other reputable organisation. But if it's just some random person with opinions, then I'm not really interested'. Concerns regarding funding and profit were also raised and perceived to influence the trustworthiness of blogs, 'I am mainly concerned that those who write blogs have an agenda to push, for example, paleo, keto. Blogs are often funded so one can't be sure that there is no vested interest. I prefer to read on the internet about healthy foods which are backed up by scientific research, not just opinion'. Participants also reported that there was little need to read healthy eating blogs due to perceived good health and nutrition knowledge, 'I would probably seek out relevant blogs if there was a specific need or interest. I am mostly fairly healthy and fairly well informed about healthy eating'.

4 | DISCUSSION

This study identified that many Australian consumers read healthy eating blogs, particularly favouring blogs authored by health professionals, a few times per week of a duration of up to 15 min. Furthermore, investigation of motivations for blog readership suggest that individuals read healthy eating blogs to receive practical information from credible authors who write in a way that is easy to understand. Conversely, factors that discouraged individuals from accessing healthy eating blogs included not thinking about using blogs for healthy eating information, not trusting blogs as source for healthy eating information, preferring to access healthy eating information from other sources, and not being interested or knowing where to find blogs.

The limited research investigating demographic characteristics of blog readers is dated, and there are conflicting reports according to gender, age, residential location and BMI.^{17–19} Previous research investigating blogs has focused on those relating to politics, science, and journalism, and describes blog readers as educated males.^{18,19,43,44} In contrast, our study highlighted that females were 3.2 times more likely to read healthy eating blogs than participants who identified as male or unspecified gender, which aligns with evidence that females are more likely to engage and seek health and nutrition-related information online in general.^{45,46} In addition, findings from this study did not support prior findings that attainment of a higher level of education, residential location, age or BMI are associated with healthy eating blog readership. While there is bias in the study's sample towards female respondents, these findings still highlight the importance of future research exploring who is reading healthy eating blogs to assist health professionals in tailoring information for the blog reader.

The current study also contributes to an increased understanding of the reasons motivating members of the community to seek healthy eating information online, or indeed, their reasons for not doing so. Little is known about consumer blog reading behaviours including how frequently individuals visit blogs, and the time spent reading blog posts, as the focus of previous research has been bloggers.¹⁶ Our study found that consumers mostly read blogs a few times per week and spent no longer than 15 min doing so. In contrast, the literature suggests a greater frequency of engagement across social network sites generally. For example, it has been suggested 29% of users visit social network sites once or twice per day, 23% visit every 2–3 days and 13% visit less than once per week.⁴⁷ Furthermore, others have suggested that blog reading becomes habitual, with consumers reading blogs 'every other day', which was described as 'visiting blogs 2–3 times a week'.³⁷

Importantly, this frequency in readership may suggest a posting rate for future healthy eating bloggers to meet the expectations, or at the very least, the rate at which a blog reader has capacity to read healthy eating-related information.

Participants also read healthy eating blogs to obtain desired information. The provision of easy to understand and practical healthy eating information in the form of recipes, tips and ideas was identified by participants in this study to encourage readership. These findings are also similar to what has been reported by other studies which suggest consumers use blogs for information as they offer alternative ideas, perspectives and advice.^{17,34,35,45,48} However, while consumers are turning to blogs for information, author qualifications and expertise were also influential in both facilitating, and impeding, healthy eating blog readership. Findings from this study mirrored others in the literature who suggested that consumers are aware of, or have a perception of, the degree of expertise needed to provide trustworthy and credible nutrition information.^{49,50} This uncertainty relating to author qualifications may be reflective of the nature of online blogs, whereby, any individual can author a blog, and this sentiment was evident in the reasons reported for not accessing blogs in this study.

A blog readers' fulfilment and connectedness with a healthy eating blog, and a desire to obtain information, were identified as factors contributing to blog readership in this study. Readers were more likely to favour a blog if they felt connected with the author in an important way or felt 'inspired', for example, if a blog aligned with the readers' perception of health or mirrored a similar eating and lifestyle perspective. This finding is consistent with reports in the literature describing connections between a reader of a blog and a blogger³⁷; and the need for some consumers to feel a sense of community.^{35,37} Consistent with the literature, our findings suggest that a readers' sense of connection with a blog, blogger or blog community may differ from reader to reader, and therefore more investigation is needed to explore what 'connectedness' means to blog readers.^{35,36} This understanding will be helpful for health professionals when authoring future healthy eating blogs that engage the reader when providing information.

This study is not without limitations. First, a convenience sampling technique was used to recruit as there are no available lists or databases in which there is a record indicating healthy eating blog readership or the demographics of readers that could have been used for purposive sampling. This means the sample is not representative of, or generalisable to, the Australian population as a whole.⁵¹ However, the purpose of this study was exploratory in nature, and sought to provide initial insights into reader

demographics, predictors and underlying reasons for readership^{52,53} to inform future work. It is recommended that research builds on the current findings and prioritises a larger sample with greater gender diversity. This is particularly important given that a significantly greater proportion of participants identified as female in later rounds of the study compared to those identifying as male or unspecified gender, and so comparatively less is known about blog readership in these groups. Furthermore, studies should also consider additional factors that could influence blog readership, such as ethnicity. Secondly, due to low participation rates, a second recruitment round occurred 5 months after the first round, and a third round which was 36 months later also coincided with the COVID-19 pandemic. As such, there is potential that temporal bias may have influenced responses, including that participants may have been more aware of healthy eating blogs. However, despite these limitations, this study possesses notable strengths as it was novel and the first known to explore healthy eating blog readership in Australian adults. It is recommended that research continues to investigate and monitor healthy eating blog readership with a larger and more representative sample. Furthermore, future research should monitor healthy eating blog readership behaviours over time to identify the factors that either lead to the adoption or cessation of readership, and outcomes on eating behaviour to understand the role of blogs within health promotion more broadly.

Many consumers proactively seek healthy eating information online, and dietetics professionals could benefit from utilising blogs as a tool to support the dissemination of healthy eating information to consumers. However, it is important to address barriers to healthy eating blog readership, which includes enhancing perceptions of credibility. This study provides direction for further investigation into how health professionals, such as dietitians, could effectively use blogs to disseminate healthy eating information and positively influence consumer food choices and dietary intake.

AUTHOR CONTRIBUTIONS

RM contributed to the study design, data collection, data analysis and wrote the manuscript. JK, RB, AS and KM provided research supervision, refined the study design, assisted in the interpretation and validation of data, and writing of the manuscript.

CONFLICT OF INTEREST STATEMENT

Rebecca Mete is a current PhD candidate and is employed by Dietitians Australia. This manuscript is part of the research conducted for Rebecca Mete's PhD candidature and has not been informed or influenced by Rebecca Mete's place of employment.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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SUPPORTING INFORMATION

Additional supporting information can be found online in the Supporting Information section at the end of this article.

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