

HOW DO PEOPLE WITH AUTOIMMUNE CONSTRUCT THE MEANING OF ILLNESS IN ONLINE COMMUNITIES?

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DOI: <https://doi.org/10.33102/abqari.vol33no1.720>

Submission date: 13/03/2026 | Accepted date: 14/05/2026 | Published date: 31/05/2026

Abstract

Autoimmune diseases have become an increasingly significant global health issue affecting millions of people worldwide. Beyond their biomedical dimensions, these chronic conditions also shape individuals' psychological, social, and spiritual experiences. This study aims to explore how people with autoimmune diseases construct the meaning of illness through their lived experiences and interactions within online communities. Using a qualitative method with a cyberphenomenological approach, this research was conducted in the online community @cantik2autoimun, which operates on TikTok and WhatsApp Group. Data were collected through digital observation since three months, in-depth interviews with eight participants (patient), and documentation analysis. The data were analyzed using phenomenological thematic coding analysis supported by NVivo 14 software. The findings show that illness is interpreted through multiple meanings, including illness as a test, destiny, a process of life, spiritual reflection, self-acceptance, and experiences of flare and relapse. These meanings are constructed through interactions within the online community, where members share narratives, emotional support, and collective interpretations of illness. The study highlights how digital communities function not only as spaces for information exchange but also as platforms for constructing spiritual and social meanings of chronic illness. Future research may further examine how digital communication shapes coping strategies among individuals living with chronic diseases.

Keywords: autoimmune illness, spirituality, online health community, illness meaning, digital Health communication

INTRODUCTION

Autoimmune diseases have become a significant global public health challenge. Recent studies indicate that these conditions affect approximately 8% to 10% of the world's population, with annual incidence rates increasing between 3% and 12% (Miller, 2023; Xiao et al., 2026). This rising trend is influenced by a combination of genetic susceptibility and environmental changes associated with modern lifestyles, including dietary patterns, environmental pollution, and psychosocial stress (Miller, 2023; Zeng et al., 2025). These developments suggest that autoimmune diseases should not only be understood as individual medical conditions but also as global health phenomena shaped by broader social and environmental dynamics.

From a biomedical perspective, autoimmune diseases occur when the immune system fails to distinguish between self and non-self tissues, leading it to attack healthy cells within the body. Waluyo & Marhaendra (2014) explain that autoimmune disorders arise from dysfunctions in the immune system that disrupt the body's ability to regulate immune responses. These conditions may be influenced by genetic factors, certain medications, or viral infections that alter immune regulation. In autoimmune diseases such as rheumatoid arthritis, systemic lupus erythematosus, and type 1 diabetes, the immune system becomes hyperactive and mistakenly identifies the body's own tissues as foreign organisms.

The prevalence of autoimmune diseases also demonstrates notable geographical disparities. Countries with higher Socio-Demographic Index (SDI) levels—particularly in North America and Europe—report significantly higher rates compared to developing regions (Zhao et al., 2024). In these areas, conditions such as rheumatoid arthritis, psoriasis, and multiple sclerosis contribute substantially to the burden of chronic diseases. For example, the prevalence of multiple sclerosis in Europe is reported to be more than ten times higher than in the Western Pacific region (McKie, 2022). Conversely, developing countries in Asia and Africa, which historically recorded lower prevalence rates, are now experiencing increasing cases due to lifestyle changes associated with westernization, including fast-food consumption, environmental pollution, and heightened stress levels (Woods, 2023; Zhao et al., 2024)

At the national level, autoimmune diseases also present diverse epidemiological patterns. In the United States, approximately 15 million individuals—around 4.6% to 5% of the population—are estimated to live with at least one autoimmune condition. Recent studies also report a nearly 300% increase in antinuclear antibody (ANA) biomarkers among adolescents over the past two decades (Zeng et al., 2025; Zhang & Xu, 2024). In the United Kingdom, autoimmune diseases affect roughly 7% of the population, or around four million individuals, with high prevalence in connective tissue diseases such as systemic lupus erythematosus (SLE) and Sjögren's syndrome. Meanwhile, in China, approximately 2.7% to 3.0% of the adult population—equivalent to more than 31 million people—are estimated to have at least one autoimmune disease (De Widt, 2025; Mohamed-Ahmed et al., 2024). Japan has also experienced a significant rise in autoimmune diseases associated with its aging population, including rheumatoid arthritis affecting more than 822,000 individuals and a doubling of myasthenia gravis prevalence over the past decade.

In Indonesia, autoimmune diseases are also increasingly recognized as an emerging health concern, although national epidemiological data remain limited. More than 80 types of autoimmune diseases have been identified, including lupus, which has an estimated prevalence of approximately 0.5% of the Indonesian population (Muhawarman, 2024). Other data suggest that rheumatoid arthritis affects around 7.3% of the population, with higher prevalence among women (8.5%) compared to men (6.1%). In addition, lupus cases have continued to increase, with reports indicating 2,166 patients and 550 related deaths recorded in 2017 (Rina et al., 2024). Overall, autoimmune diseases are estimated to affect between 5% and 10% of Indonesia's population, or roughly 12.5 to 25 million individuals.

Beyond epidemiological considerations, autoimmune diseases also have profound implications for individuals' everyday lives. As chronic and often unpredictable conditions, autoimmune diseases involve alternating periods of flare-ups and remission, creating ongoing uncertainty for patients. Such uncertainty not only affects physical health but also influences psychological well-being, social relationships, and individuals' perceptions of their own bodies and life trajectories.

Previous studies suggest that living with chronic illness involves not only physical challenges but also processes of identity reconstruction and meaning-making. Research by Foley (2020) indicates that individuals living with chronic illness often experience shifts in self-perception and social relationships. Similarly, Joyce & Jeske (2020) found that individuals with autoimmune diseases actively use diagnostic categories to interpret and manage their illness experiences in everyday life. These findings highlight that illness experiences involve ongoing interpretative processes shaped by social interaction. In the Indonesian context, Rahman & Dahliah (2024) demonstrated that women with autoimmune diseases actively construct meanings of illness through digital interactions, particularly through social media platforms such as TikTok. Through narrative sharing in digital

spaces, individuals not only communicate their health experiences but also participate in collective meaning-making processes related to chronic illness.

One emerging digital space that facilitates such interaction is the online community @cantik2autoimun, which operates across social media platforms such as TikTok and WhatsApp. This community provides a space for individuals with autoimmune diseases to share experiences, exchange knowledge, and offer emotional support to one another. Through these interactions, members collectively negotiate meanings of illness, remission, and resilience in living with chronic conditions.

Despite the growing body of research on autoimmune diseases, most studies remain focused on biomedical mechanisms and clinical management. Research exploring how individuals interpret and construct meanings of illness—particularly within digital social environments—remains relatively limited. Understanding these meaning-making processes is important because the way individuals interpret their illness can influence how they cope with their condition and navigate their everyday lives.

Therefore, this study aims to explore how people with autoimmune diseases construct the meaning of illness through their lived experiences and social interactions within online communities. Using a cyberphenomenological approach, this research seeks to understand how illness meanings are shaped through embodied experiences, personal reflections, and digital interactions among individuals living with autoimmune diseases.

ILLNESS IN A MULTIDIMENSIONAL PERSPECTIVE

Illness in the context of autoimmune diseases should be understood through a multidimensional perspective that encompasses not only biological aspects but also psychological, social, cultural, and communicative dimensions. Individuals living with autoimmune diseases often experience persistent symptoms such as joint pain, chronic fatigue, and functional limitations that affect various aspects of daily life.

From a medical perspective, health is often defined as the absence of disease or physical impairment. However, the World Health Organization defines health as a state of complete physical, mental, and social well-being rather than merely the absence of disease (Mulyana, 2018). In health studies, a distinction is also made between disease and illness. Disease refers to the biological malfunction that can be objectively diagnosed, whereas illness refers to the subjective experience of feeling unwell (Notoatmodjo, 2007).

Pain itself is defined by the International Association for the Study of Pain as an unpleasant sensory and emotional experience associated with actual or potential tissue damage (Hammer, 2024). This definition indicates that pain is not merely a physiological response but also a subjective experience shaped by emotional and social contexts.

Contemporary health research increasingly recognizes the limitations of the traditional biomedical model and has incorporated the biopsychosocial model, which acknowledges the role of psychological and social factors in shaping illness experiences (Mulyana & Ganiem, 2021). Consequently, illness should be understood not only as a biological condition but also as a complex life experience influenced by multiple dimensions of human existence.

Psychologically, chronic illnesses such as autoimmune diseases often impose significant emotional burdens on patients. Uncertainty regarding disease progression, the possibility of relapse, and limitations in physical functioning can generate stress, anxiety, and even depression. Studies show that individuals with autoimmune diseases frequently experience psychological challenges because these conditions cannot be completely cured but must instead be managed over time (Benedict et al., 2021).

From a socio-cultural perspective, illness is also shaped by social norms and cultural interpretations. Wittgenstein argued that individuals learn how to express pain through social interactions, which shape collective understandings of suffering (van Rysewyk, 2023). Cultural norms, gender roles, and

age-related expectations also influence how individuals communicate and interpret pain (Lisbeth, 2022).

Religious perspectives further contribute to the meaning-making process of illness. Rahmawati & Muljohardjono (2016) note that illness can be interpreted either positively or negatively depending on individuals' spiritual beliefs. Positive interpretations often involve viewing illness as a test of faith that encourages patience and perseverance, whereas negative interpretations may lead to feelings of despair. Within Islamic teachings, illness is often framed as a spiritual test that invites individuals to reflect on life and strengthen their relationship with God (Hidayat, 2009)

From a communication perspective, illness can also be understood as a socially constructed experience communicated through symbolic interactions. Experiences of illness are articulated through narratives, conversations, and digital communication, allowing individuals to share and interpret their experiences collectively (Mulyana & Ganiem, 2021)

SOCIAL CONSTRUCTION THEORY

Social construction theory explains that reality is not a fixed and objective entity but is continuously produced through social interactions. Berger & Luckman (2012) argue that social reality is constructed through three interconnected processes: externalization, objectification, and internalization. Externalization refers to the process through which individuals express their experiences and interpretations of the world. These expressions later become objectified as shared knowledge within society. Finally, individuals internalize this socially constructed knowledge as part of their own understanding of reality (Berger & Luckman, 2012).

Within the context of illness experiences, individuals do not interpret illness solely through biomedical explanations but also through social interactions and shared narratives within their communities. Illness experiences shared in online spaces become forms of externalization where individuals articulate their bodily experiences, emotional struggles, and coping strategies. Through continuous interaction with other members of the community, these narratives gradually become objectified as collective knowledge about living with autoimmune diseases. Community members then internalize these shared meanings as part of their own understanding of illness and recovery processes.

Previous studies in communication and health research also highlight that illness meanings are shaped through communication processes and social interpretation rather than purely biological mechanisms (Mulyana, 2018). In digital environments, such as online health communities, these social construction processes occur through interactions mediated by digital platforms, allowing individuals to negotiate and reconstruct the meanings of illness collectively.

SYMBOLIC INTERACTIONISM

Symbolic interactionism, originally developed by George Herbert Mead and later elaborated by Herbert Blumer, emphasizes that meaning emerges through social interaction involving symbols. According to Mead, individuals interpret the world through symbolic communication, and these interpretations guide their actions and social relationships (Mead, 1934; Blumer, 1969).

From this perspective, illness is not only a physiological condition but also a symbolic experience interpreted through social interaction. Individuals learn how to interpret and communicate their experiences of pain, illness, and recovery through interactions with others. Symbols such as language, expressions, and shared narratives become essential tools in constructing meanings of illness within social groups.

Within online communities of people with autoimmune diseases, symbolic communication often appears in the form of shared terminology such as *flare*, *remission*, and *healing*. These terms function not only as medical concepts but also as symbolic representations of lived experiences. Through continuous symbolic interaction, community members collectively construct meanings related to

illness and coping strategies while reinforcing shared identities as individuals living with autoimmune conditions (Mulyana, 2018)

ONLINE HEALTH COMMUNITIES

The development of digital communication technologies has enabled the emergence of online health communities, which provide spaces for individuals with similar health conditions to interact, exchange information, and offer emotional support. Online health communities allow individuals to share personal experiences, discuss treatment options, and obtain social support from others who understand their health conditions (Rains, 2018)

These communities play an important role in helping individuals cope with chronic illnesses. Participation in online health communities allows patients to access experiential knowledge that may not always be available through formal medical consultations. In addition, digital platforms facilitate peer-to-peer communication where individuals can validate each other's experiences and construct shared meanings of illness.

In the context of autoimmune diseases, online communities often function as spaces for collective storytelling, emotional support, and identity formation among patients. For example, the Cantik2autoimun community on social media platforms such as TikTok and WhatsApp provides a digital environment where people with autoimmune diseases can share experiences of illness, discuss remission, and offer mutual encouragement. Through these interactions, members not only exchange health information but also collaboratively construct meanings of illness and recovery within their shared digital environment (Bungin, 2023; Rains, 2018, 2024).

METHODOLOGY

This study employed a qualitative approach using a cyberphenomenological approach to explore how people with autoimmune diseases construct the meaning of illness through their interactions within online communities. Bungin (2023) explore thah The cyberphenomenological approach extends phenomenological inquiry into digitally mediated environments, enabling researchers to examine lived experiences while also understanding how these experiences are communicated and interpreted through digital interactions.

The research was conducted within the online community @cantik2autoimun, which actively operates across social media platforms such as TikTok and WhatsApp. The community provides a space for individuals living with autoimmune diseases to share experiences, exchange information about their health conditions, and offer emotional support to one another. This digital environment provides an important context for understanding how illness experiences are communicated, negotiated, and collectively interpreted among community members.

The participants in this study consisted of eight individuals, which is member as an patient. Participants were selected using purposive sampling, focusing on individuals who had direct experience living with autoimmune diseases and who actively participated in discussions within the community. Including both members and administrators allowed the researcher to obtain a more comprehensive understanding of illness experiences and interaction dynamics within the community. Participants ranged in age from 30 to 44 years old and represented diverse autoimmune conditions, including, Sjorgen, Multiple autoimun multiple sclerosis etc. Participant demographics and interview backgrounds are presented in Table 1. Participant demographics and autoimmune backgrounds are summarized in Table 1 to provide contextual understanding of the individuals involved in this study.

Table 1 Participant Demographics and Autoimmune Backgrounds

Participant Code	Participant Initial	Gender	Participant Role	Interview Date	Interview Location	Autoimmune Condition	Length of Community Membership
ODAI_A01	SA	Female	Patient	December 28, 2025	Cimahi	Multiple Sclerosis	> 3 Years
ODAI_A02	SH	Female	Patient	December 31, 2025	Bandung	Rheumatoid Arthritis	> 3 Years
ODAI_A03	DRG	Female	Patient	January 3, 2026	Bandung	Multiple Autoimmune Conditions	> 3 Years
ODAI_A04	RNH	Female	Patient	January 9, 2026	Bandung	NMOSD (Neuromyelitis Optica Spectrum Disorder)	> 3 Years
ODAI_A05	AVA	Female	Patient	December 28, 2025	Cimahi	Multiple Sclerosis	> 3 Years
ODAI_A06	FFR	Female	Patient	December 31, 2025	Bandung	Multiple Sclerosis	> 3 Years
ODAI_A07	PVI	Female	Patient	January 3, 2026	Bandung	Multiple Sclerosis	> 3 Years
ODAI_A08	ES	Female	Patient	January 9, 2026	Bandung	Multiple Sclerosis	> 3 Years

Interviews were conducted in several stages at different times. In each interview session, the researcher interviewed two participants simultaneously, consisting of one administrator and one community member. In total, the interviews were conducted in four separate sessions, allowing all eight participants to be interviewed. This approach enabled the researcher to obtain diverse perspectives on illness experiences and communication practices within the community.

Data collection was carried out through multiple techniques. First, Digital observation was conducted for approximately 3 months, November until Januari, focusing on interactions, discussions, posts, and shared narratives within the TikTok and WhatsApp communities. This observation aimed to understand how members express their illness experiences and how other members respond to these narratives. Second, in-depth interviews were conducted to explore participants' personal experiences of living with autoimmune diseases, including how they interpret symptoms, diagnosis processes, and their everyday experiences of illness. Third, document analysis was conducted on various digital materials shared within the community, such as posts, comments, and discussion threads related to illness experiences and recovery processes.

Data analysis was conducted using phenomenological thematic analysis. The process began with familiarization with the data obtained from observations, interviews, and documentation. The researcher then conducted coding of significant statements related to participants' illness experiences. To support systematic data management and analysis, this study utilized NVivo version 14, which was used to organize data, conduct coding, categorize themes, and identify patterns emerging from participants' narratives. The use of NVivo helped enhance transparency and systematic organization in the qualitative data analysis process. The coding process involved open coding, categorization of recurring narratives, and theme development based on participants' lived experiences. Themes were refined iteratively through repeated examination of interview transcripts, digital observations, and documentation data.

To enhance research credibility, data triangulation was applied by comparing findings obtained from digital observations, interviews, and documentation. This approach helped ensure that the interpretations accurately reflected the participants' lived experiences.

This study also received ethical clearance for health research to ensure that all research procedures adhered to ethical principles protecting participants' rights and safety. Participants' identities were kept confidential through the use of pseudonyms, and all collected data were used solely for academic purposes. Participation in interviews was voluntary, and all participants provided informed consent prior to their involvement in the study. For digital ethic, Screenshots and digital interaction data presented in this study were anonymized by blurring personal identities, profile photos, and phone numbers to protect participants' privacy. Prior to conducting the study, the researcher also requested permission from the administrators of the @cantik2autoimun online community to observe interactions and collect research data within the community spaces. Permission was granted before the observation process was conducted. All participants involved in the interviews voluntarily agreed to participate in the study and provided informed consent prior to data collection.

RESULT DAN DISCUSSION

Result

The results of this study show that the experience of illness among people with autoimmune diseases within the @cantik2autoimun online community is not only understood as a medical condition but also as a life experience interpreted through various personal, social, and spiritual meanings. Through interactions within the community, participants narrated illness as a multidimensional experience that affects their physical condition, emotional wellbeing, social relationships, and spiritual reflections.

Several participants interpreted autoimmune illness as a form of life test that requires patience and emotional resilience. In this perspective, illness is not only seen as suffering but also as a process that encourages reflection and spiritual growth. One participant explained that illness can be understood as a form of divine test that encourages acceptance and emotional regulation.

"For me, it is simply part of the process of living. Sometimes people say that illness comes because someone has many sins, but I believe it is not just about that. Perhaps Allah simply wants to give this and see whether I can go through it or not. If I can endure it, maybe the reward will be greater. So I try to think positively. I focus more on acceptance and on managing my emotions so that I do not become stressed. (ODAI_A03, 44 years old, Interview, January 3, 2026).

The meaning of illness is also closely related to spiritual reflection and acceptance of destiny. Some participants described that the process of accepting autoimmune illness became easier when they strengthened their spiritual relationship with God. Through spiritual practices and reflection, illness was interpreted as part of divine destiny that must be accepted with sincerity.

"What finally helped me reach acceptance was when I began to draw closer spiritually to the Almighty, to Allah. I realized that everything has already been destined, and we just need to accept the condition that we experience."(ODAI_A02, 31 years old, Interview, December 31, 2025).

Other participants described autoimmune illness as a condition that gradually becomes integrated into everyday life. Because autoimmune diseases are chronic and often involve recurring symptoms, individuals learn to adapt and live with the illness as part of their life journey. One participant described the illness as something that eventually becomes a constant companion in daily life.

"It has already become part of my life. It feels like a companion now. Multiple sclerosis has become part of my life because it is not like flu or cough that disappears. It feels more like a partner that stays with me."(ODAI_AD04, 30 years old, Interview, January 9, 2026).

The experience of illness also encouraged individuals to develop patience and emotional resilience. Participants explained that observing other individuals with more severe conditions helped them cultivate patience and acceptance in facing their own illness.

“Their patience is extraordinary. It feels like a blessing. Some friends have more severe conditions, yet they remain patient and sincere. Seeing them makes me learn to be more patient and accepting.”
 (ODAI_A03, 44 years old, Interview, January 3, 2026).

In addition to interview data, illness experiences were also visible through digital interactions within the community. As illustrated in Figure 1, a TikTok post shared on the @cantik2autoimun account presents a short video highlighting the experience of invisible illness.

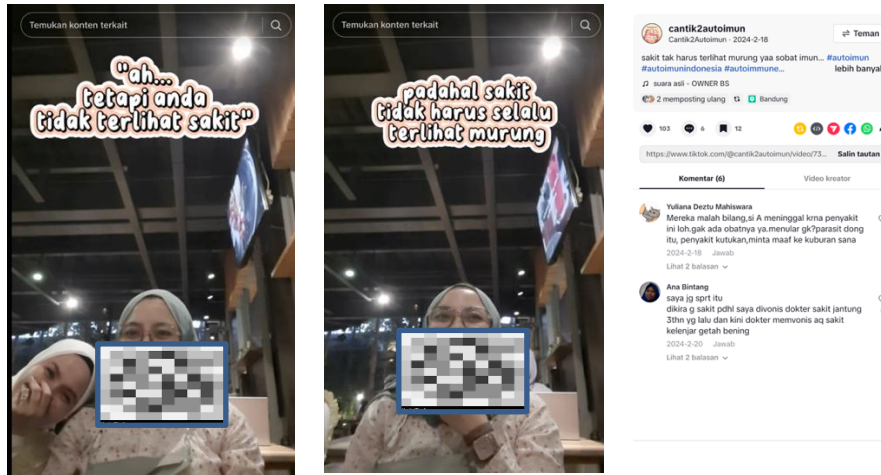


Figure 1 TikTok content from the @cantik2autoimun account illustrating the experience of invisible illness among people with autoimmune diseases.

The captions in the video reads “Ah... but you don’t look sick” and “In fact, illness does not always appear gloomy.” These statements reflect a common social perception faced by people with autoimmune diseases, where their condition is often questioned because their physical appearance does not match common expectations of illness. The post received numerous responses from other community members who shared similar experiences, indicating that social media functions as an important space where individuals with autoimmune diseases articulate and validate illness experiences that are often invisible in everyday social interactions.

In addition to visual narratives shared on TikTok, discussions about illness also take place through daily interactions within the community’s WhatsApp group. In this space, members exchange personal experiences, symptoms, and treatment information related to autoimmune conditions. These conversations illustrate how online communities function not only as information-sharing platforms but also as spaces of peer support and experiential knowledge exchange.

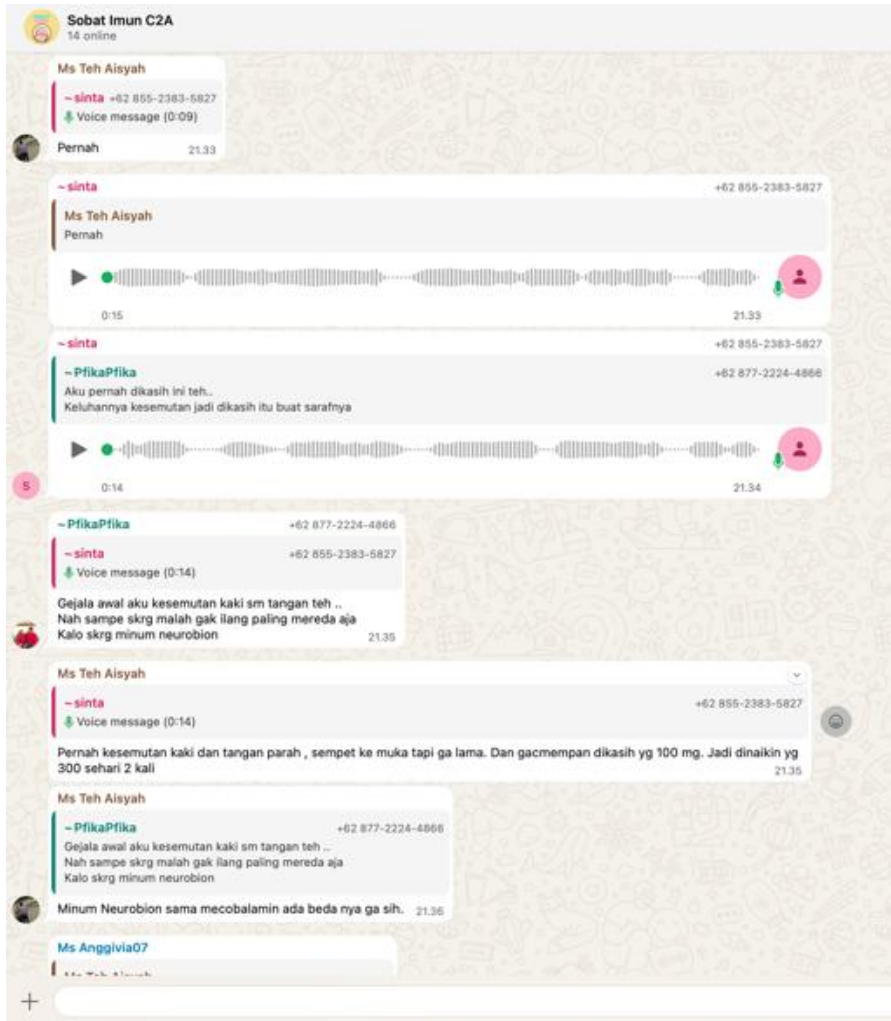


Figure 2 Conversation among members of the Cantik2Autoimun WhatsApp community discussing symptoms and treatment experiences.

As illustrated in Figure 2, members of the WhatsApp community actively share their experiences regarding symptoms and treatments. In this interaction, participants discuss symptoms such as numbness in the hands and feet, as well as medications used to relieve these symptoms. Some members describe their initial symptoms, while others respond by sharing similar experiences or suggesting medications they have used. These exchanges demonstrate how the online community functions as a supportive environment where individuals with autoimmune diseases validate each other's experiences and collectively construct knowledge about living with chronic illness. Amini et al. (2025) explain that this interaction also reflects the process of health communication, where individuals exchange symbolic messages related to health experiences within a community context.

The interactions observed in interviews, TikTok posts and WhatsApp discussions reveal that individuals with autoimmune diseases construct diverse meanings of illness through their lived experiences and interactions within the online community. The thematic analysis of these meanings, generated through NVivo 14 coding, is summarized in Table 1.

Table 1 Themes of Illness Meaning among People with Autoimmune Diseases in the Cantik2Autoimun Online Community

No	Theme	Description
1	Illness as a Test or Trial	Autoimmune illness interpreted as a spiritual test that requires patience and resilience.
2	Illness as Part of Life	Illness understood as an ongoing life process that individuals must adapt to.
3	Illness as Destiny	Illness perceived as part of God's destiny that must be accepted.
4	Illness as Patience and Gratitude	Illness interpreted as a lesson that encourages patience and gratitude.
5	Illness as Discomfort and Confusion	Early experiences of illness characterized by uncertainty, confusion, and emotional distress.
6	Invisible and Diverse Illness	Autoimmune disease experienced as a condition that is often invisible to others and varies across individuals.
7	Self-Acceptance Process	Illness leading individuals toward reflection and gradual acceptance of their condition.
8	Illness as Divine Compassion	Illness interpreted as a form of God's compassion that carries spiritual meaning.
9	Flare and Relapse Experience	Illness experienced through cycles of flare-ups and remission that shape everyday life.

Overall, the findings suggest that illness among “cantik2autoimun” is not only as a health problem but also as a complex life experience involving emotional, social, and spiritual reflections. Through interactions within online communities, individuals share experiences, negotiate meanings of illness, and construct collective understandings of living with autoimmune conditions.

DISCUSSION

The thematic analysis identified several meanings of illness constructed by individuals living with autoimmune diseases in the Cantik2Autoimun online community. These meanings emerge from participants' lived experiences, spiritual reflections, and interactions within digital environments. The relationships between these meanings are illustrated in Figure 3.

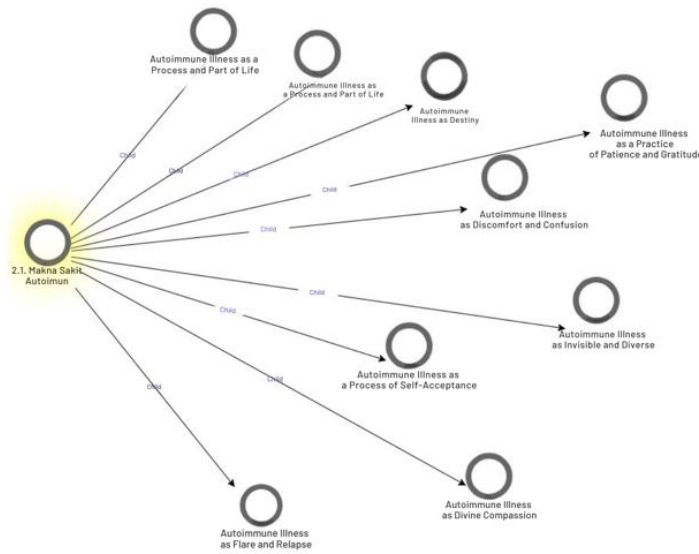


Figure 3 Thematic map of illness meaning among people with autoimmune generated from NVivo 14 coding analysis.

As illustrated in Figure 3, the meaning of autoimmune illness is constructed through multiple interpretative dimensions emerging from participants’ lived experiences, spiritual reflections, and interactions within the online community.

Autoimmune Illness as a Test or Trial From Allah SWT

In health communication studies, illness is not only understood as a biological condition but also as a social and symbolic experience shaped through interpretation and interaction. Social construction theory suggests that meanings of life experiences—including illness—are produced through processes of externalization, objectification, and internalization within social contexts (Bergeron et al., 2019). In the context of chronic illness, individuals often interpret their health conditions through cultural values, social interactions, and spiritual beliefs (Mulyana, 2018; Mulyana & Ganiem, 2021)

The findings of this study show that some individuals interpret autoimmune illness as a test or trial in life. This interpretation allows individuals to transform the experience of illness from a purely negative condition into a process of spiritual reflection. Within the online community, narratives about illness as a test are often shared to strengthen emotional resilience among members. These narratives illustrate how illness meanings are collectively reinforced through communication and interaction within digital communities.

Autoimmune Illness as a Process and Part of Life

Phenomenological perspectives on health suggest that chronic illness often becomes part of an individual’s life trajectory rather than a temporary event. Chronic conditions influence how individuals perceive their bodies, identities, and relationships with the surrounding environment. Symbolic interactionism emphasizes that individuals construct meanings through ongoing interaction and interpretation of shared symbols (Mead, 1934; Blumer, 1969).

The findings reveal that many ODAI perceive autoimmune disease as a long-term condition that gradually becomes integrated into everyday life. The recurring cycles of flare and remission require individuals to continuously adapt to their changing physical conditions. Through interactions within the online community, members share coping strategies and personal experiences that help them interpret illness not only as suffering but also as a condition that can be managed as part of life.

Autoimmune Illness as Destiny

Socio-cultural perspectives highlight that illness interpretations are often shaped by cultural and religious frameworks. Individuals do not interpret illness solely through medical explanations but also through broader belief systems that influence how health and disease are understood (Mulyana & Ganiem, 2021)

The findings indicate that some participants interpret autoimmune disease as part of life's destiny. This perspective helps individuals accept conditions that cannot be fully controlled. Within the online community, narratives about destiny frequently emerge as expressions of emotional support among members. Such interpretations allow individuals to cope with uncertainty while maintaining a sense of acceptance toward their illness experiences.

Autoimmune Illness as a Practice of Patience and Gratitude

Health communication research suggests that illness experiences often stimulate reflective processes that reshape individuals' perspectives on life. Experiences of suffering may lead individuals to reinterpret their life priorities and values (Mulyana et al., 2018).

In this study, several participants described illness as a process that teaches patience and gratitude. Living with physical limitations encourages individuals to appreciate aspects of health that might otherwise be taken for granted. Within the online community, narratives emphasizing patience and gratitude frequently appear as expressions of mutual encouragement among members facing similar challenges.

Autoimmune Illness as Discomfort and Confusion

Chronic illness is frequently associated with uncertainty, particularly during the early stages of diagnosis when symptoms may be difficult to identify or interpret. The biopsychosocial model explains that illness experiences involve interactions between biological, psychological, and social factors (Mulyana & Ganiem, 2021)

The findings indicate that many participants experienced confusion and discomfort during the early stages of their illness. Unclear symptoms and delayed diagnoses often generated anxiety and uncertainty. Through interactions in the online community, members shared experiences that helped others understand symptoms and navigate the complexities of autoimmune disease.

Autoimmune Illness as Invisible and Diverse

Illnesses that lack visible physical symptoms are often difficult for others to understand. Social constructions of illness frequently determine which conditions are recognized as legitimate health problems.

Participants in this study reported that autoimmune diseases are often misunderstood because symptoms are not always visible. As a result, individuals sometimes feel that their experiences are not validated by others. Online communities provide a space where members can openly express their experiences and receive validation from individuals who share similar conditions.

Autoimmune Illness as a Process of Self-Acceptance

Phenomenological studies of chronic illness emphasize that individuals often undergo gradual processes of self-reflection before reaching acceptance of their health conditions. Self-acceptance is an important psychological adaptation to chronic illness.

The findings show that many ODAI experience a gradual process of accepting their illness. Interactions with others who share similar experiences play an important role in this process. Within the online community, emotional support and shared narratives contribute to strengthening individuals' ability to accept their health conditions.

Autoimmune Illness as Divine Compassion

In religious interpretations, illness is sometimes understood as a form of divine compassion that carries spiritual meaning. Such interpretations help individuals frame illness as part of a larger spiritual journey.

In this study, some participants interpreted autoimmune illness as an expression of divine compassion. This perspective allowed individuals to view illness as an opportunity for spiritual reflection and personal growth rather than merely a source of suffering.

Autoimmune Illness as Flare and Relapse

Medically, autoimmune diseases are often characterized by cycles of flare and relapse, in which symptoms reappear after periods of remission. These cycles create uncertainty in the everyday lives of individuals living with autoimmune conditions.

The findings show that participants interpret flare episodes as part of the ongoing dynamics of living with autoimmune disease. During these periods, community members often provide emotional support and share coping strategies to help others manage worsening symptoms. This dynamic demonstrates how online communities function as spaces for collective support in navigating the unpredictable nature of chronic illness.

CONCLUSION

This study demonstrates that the experience of autoimmune illness extends beyond biomedical explanations and involves complex processes of meaning construction shaped by social interaction, spirituality, and lived experience. Within the @cantik2autoimun online community, individuals living with autoimmune diseases interpret illness in diverse ways, including as a test, destiny, a process of life, a practice of patience and gratitude, and a pathway toward self-acceptance. These interpretations reflect the interplay between personal reflection, religious beliefs, and collective narratives shared within digital environments.

The findings contribute to expanding scholarly understanding of the relationship between religiosity, spirituality, and digital Health communication in shaping illness experiences among individuals with chronic diseases. Online communities serve not only as platforms for exchanging health information but also as spaces where members construct shared meanings of suffering, resilience, and recovery. By highlighting the communicative and spiritual dimensions of illness, this study offers new insights into how digital social interactions influence coping processes and emotional support among people living with autoimmune conditions.

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