Characteristics of empathic communication in virtual communities for people with mental health sickness in Israel

/ Nava Rothchild

Abstract:

During recent decades computer-mediated communication (CMC) has become available and accessible to growing parts of the world's population. Cyberspace encourages the creation of new communication channels that enable the formation of personal ties and group discussions on different subjects. Virtual communities are among the popular tools for carrying out discourse by means of computer-mediated communication channels. Many researchers are interested in studying the social discourse that takes place in these communities, and they investigate whether virtual communication channels can fill people's social needs and be a substitute for face-to-face communication.

Use of virtual communication channels to form social relationships between people has gained momentum since the 1990s and today large parts of the world's population participate in social discourse and form social relationships by means of virtual communication channels.

Social relationships are important for people's mental welfare; and a person's feeling of being loved, appreciated and a member of a network of human relationships and mutual commitment contributes to their mental strength and enables them to become integrated in society. However, there are people in society who have difficulty in forming systems of adequate social relationships with others. The reasons for difficulties in forming social relationships are varied and include personal internal

obstacles and obstacles that originate in a society that pushes individuals and groups who do not integrate and do not answer precisely to the values and norms accepted in society to the margins of social discourse. These people experience social exclusion and frequently feel deep isolation.

People who suffer from mental illness have difficulty forming significant social relationships with other people in society. The reasons for this are personal and environmental and the main one is the stigma associated with mental illness, because of which people with mental illnesses suffer from social exclusion. In consequence, many of the people contending with mental illness feel isolation and lack of understanding on the part of the "well" community and are pushed to the margins of social discourse. Virtual communities can serve as an alternative channel of communication with other people like themselves and through them people with mental illnesses can increase their network of social relationships and reduce, however slightly, their isolation.

The aim of the current research is to examine the character and the nature of the social relationships that people with mental illness form in two closed virtual communities in which people who suffer from mental illness participate. For this purpose, we used qualitative research techniques, and by means of case study techniques we analyzed the discourse that is conducted in the communities and examined their social characteristics.

In order to determine whether significant social relationships exist between the participants in the communities, we defined an empathetic process as a characteristic of significant social relationships, as this requires that both sides participating in the process know each other and feel trust and security in the relationship that has been

formed between them. From this definition four main research questions emerged according to which the research corpus was analyzed:

- Who are the participants in the virtual community of mentally ill people in Israel?

- What kinds of social support are exchanged in these communities?

- What are the expressions of empathy that are produced in the communities?

- What social relationships do mentally ill people manage to form by means of participation in the discourse in virtual communities?

In order to carry out the research, permission was received from the administrators of the communities to carry out passive observation of the activity in two closed virtual communities in which mentally ill people participate. Before carrying out observation, maintaining the anonymity of the participants in the discourse was promised.

According to the system of analysis that was chosen, case study, two sampling periods were chosen: the first, September to October 2011, and the second, January to February 2012, during which all the messages written in the period were sampled.

Analysis of the content was carried out in three stages: the first stage included analysis at thread level, and each thread was classified as one of six main subjects, according to content. In the second stage, content analysis was carried out at message level and each message was coded in one of the six main categories. In the third stage, each message was analyzed at paragraph or sentence level and entered into the general system of themes that was built according to the research questions. During the research a total of 216 threads containing 1,384 messages were analyzed and a

final categories' tree was formulated that consisted of six main categories and 87 specific subject categories.

From analysis of the messages in view of the research questions, the following main findings emerge:

Mentally ill people who choose to join activity in communities do so for a number of reasons. The overwhelming majority of the participants began activity in the community because of crisis situations that they experienced as a consequence of the mental illness from which they suffer, when they felt that the "well" surroundings did not provide them with the kind of support they needed. Another reason for joining is the feeling of isolation that many mentally ill people feel which is a result of the process of social exclusion they suffer from.

Most of the writers who join activity do not continue to participate in the discourse when the difficulty they are contending with passes and for them participation in the communities serves only for the purpose of solving a specific crisis. However, those who do choose to continue participating in discourse provide support for other writers, and they are the most significant contributors to the discourse conducted in the communities. These people comprise the social core of the community and manage to create deep relationships with other participants.

By means of discourse in the communities, the participants exchange a number of kinds of support: support by providing information from personal experience of a kind that cannot be obtained from a professional source. The participants provide emotional support at different levels to others who ask or from whose words it appears that they need support. As a result of participation in the group, the writers feel they belong to a community that understands them and their special difficulties that are derived from their mental disorder.

In contrast to previous studies, which maintained that an important part of an empathetic process includes transmitting non-verbal messages such as physical gestures and tone of voice, which are not possible in computer-mediated communication channels, in the present study we did find examples of empathetic processes that take place between the participants in discourse, despite the lack of physical gestures, which do not exist in virtual communication channels that are based on textual messages. Empathetic processes that take place in virtual communication channels have characteristics that are slightly different from similar processes in face-to-face communication, and so we found empathetic processes that take place between a writer asking for support from a specific other, or between a writer who reports difficulty following which he receives an empathetic reaction from another member of the community, and also situations in which a writer reports difficulty and a crisis and a number of members give empathetic messages to the specific person or the entire community.

The results of the research led us to the conclusion that it is possible to form social relationships by means of computer-mediated communication systems. However although many people turn to these channels when they experience difficulty or a crisis only a few manage to build significant relationships by means of participation in the communities. It appears that this channel of communication is not suitable for everyone and depends greatly on the person's individual personality, the nature of the difficulties with which they contend, their expressive ability and their understanding of messages that are transmitted in textual form, and the strength of the social support system they have in the physical world.

There is apparently no conclusive answer to the question as to whether virtual communication channels can replace physical social relationships for people who

belong to population groups that suffer from social exclusion generally or the population of mentally ill people in particular. It appears that further research is required in order to clarify and adapt virtual communication channels so that more people can find in them an adequate communication channel that can relieve their feeling of isolation and improve these people's level of participation in social discourse.

System No.

002391556