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Mapping Mental Health Intermediaries: Vulnerable Publics and Platformed Support

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This paper examines online mental health support programs through a case study of the support forums and Facebook Page of Australian non-profit mental health organisation *beyondblue*. We develop the concept of 'vulnerable publics' to help account for the differences in the forms of sociality and support between the Facebook Page and forums. Digital methods and qualitative analysis help distinguish patterns of participation, connective action and platformed and human mediation between the two sites. This is part of a larger project to identify and develop better models for using popular social media platforms like Facebook to facilitate community-based, peer mental health support at scale. Our analysis identifies standout characteristics and work of 'intermediaries' and mediators, both human and non-human or platformed (Smith-Maguire and Matthews, 2012; Moor, 2012) as they affect the impact of peer-oriented online mental health support, in order to better understand what we are referring to as vulnerable networked publics.

Vulnerable publics cohere around socially sensitive, stigmatised, and affective issues or experiences. In public health research, it relates to at risk populations ('vulnerable populations), or 'people whose situations or contexts make them especially vulnerable, or who experience inequality, prejudice, marginalization and limits on their social, economic, cultural and other rights' (The Global Fund, 2016). Vulnerable publics can be associated with aspects of identity such as race, sexuality, belief, political affiliation or activism and advocacy; the term can also designate health status, where stigma or disability factors are in play. Vulnerable publics are very much 'affective publics' (Papacharissi, 2014; McCosker, 2015), and follow Dewey's (1927) well-known sense of being 'problem-oriented', often operating outside of mainstream, dominant or majority contexts (Warner, 2002). With these characteristics in mind, we analyse vulnerable

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publics associated with mental health problems, with a focus on the influence of platform elements and the practices of peer mentors and community facilitators.

Aims, Approach, Findings

The primary question guiding the comparative analysis is: What are the characteristics and effects of human and platform intermediaries and mediators in building, sustaining and driving supportive mental health publics?

Two approaches are used to address these questions. First, we consider platform features and capacities, with a focus on observable effects in use patterns and outcomes for the formation of publics and interaction over time. Second, we examine activity, engagement and interactivity over time, extracting a year-long data set from the *beyondblue* Facebook Page (Sep 2015 – Sep 2016), and a sample of 5 Forums and 14 threads, with a total of 1140 posts from *beyondblue*'s moderated Forums.

The Forum analysis uses qualitative content analysis drawing on the core concepts of 'cultural intermediary' theory (Smith Maguire and Matthews, 2012; Moor, 2012). Smith Maguire and Matthew's analytical framework targets factors establishing a) expertise, b) framing practices, and c) impact or influence. These form the broad concepts guiding the initial coding of the Forum content, with more nuanced themes developed through an axial coding process (Strauss and Corbin, 1998).

Aligning with core tenets of cultural intermediary theory, analysis of the forums demonstrates the establishment of expertise through a range of 'devices' (e.g. badges – or indicators of experience and roles as Champions in the forums; or branding, as in the logo badging posts and comments from *beyondblue* admin on the Facebook Page). Expertise also involves the presentation of personal mental health experiences, translational stories, coping and recovery and strategy and information or help-seeking techniques. These factors establish an 'asymmetry of influence' (Smith Maguire and Matthews, 2012), and are far more explicit and distributed amongst members on the forums than the Facebook Page.

A range of framing practices are observable, often involving 'making choices credible' (Smith Maguire and Matthews, 2012: 555), processes of discursively shaping ideas about mental health experiences, and proffering a range of resources for coping and recovery. This is again more distributed among key peer mediators on the forums, and more centralized and driven by Admin on the Facebook Page. Finally, influence and impact become visible within the forums through the expression of recognition, and affirmation of the effects of advice and coping and recovery resources. These practices reaffirm the expertise of the designated 'cultural intermediaries' and others who have influence within the system. Importantly, our analysis revealed that these characteristics of cultural intermediary were not solely the domain of the designated group of around 26 Community Champions (trained peer mentors). We identified many more who take on this role, but were not badged as Champions.

To examine activity within the Facebook Page, we used the TrISMA tracking infrastructure (see <http://trisma.org/>) to capture Page data over the year with a focus on Comments in relation to unique Comment ID (excluding those by *beyondblue* Page

admin). This is visualised below (Figure 1) to illustrate the rate of comment-based engagement, with the aim of identifying high volume and high impact participants, or potential key intermediaries and mediators, engaging with the Page over time.

The Page has a large active community of more than 539,000 ‘fans’, and so the initial assumption by the researchers, and *beyondblue* community managers, was that there would be many high volume influential users matching the highly active members of the Forums. This was not the case.

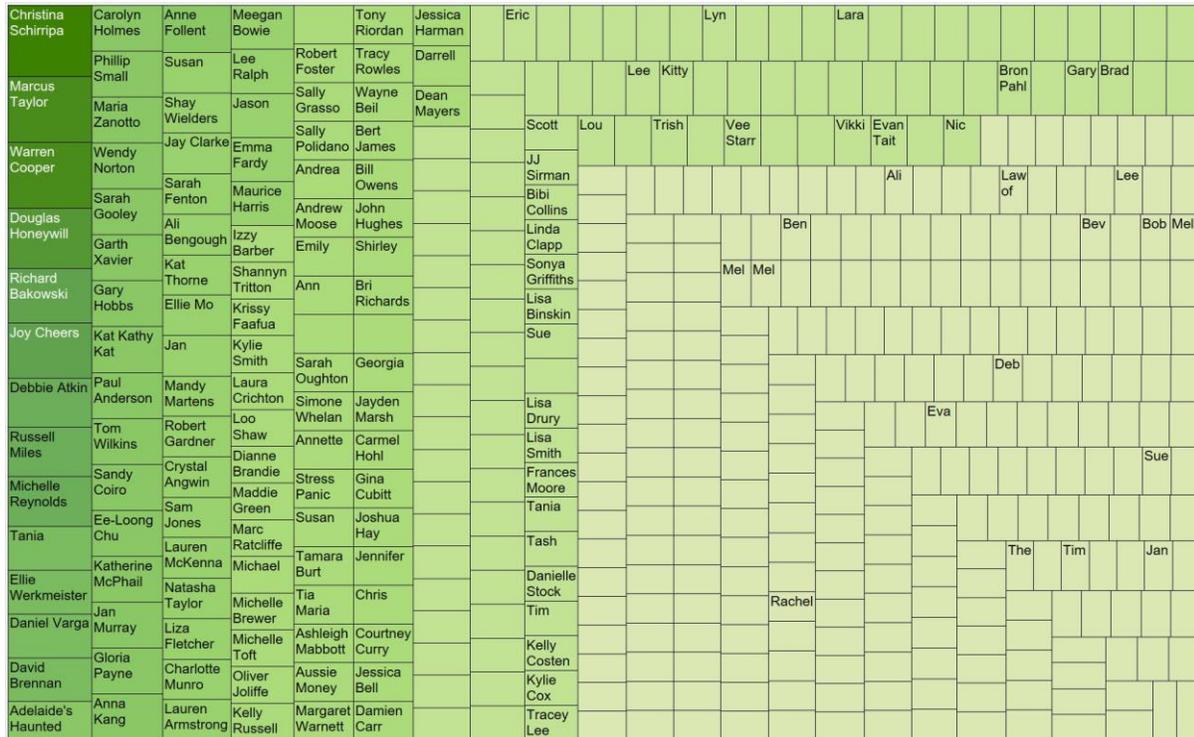


Figure 1. Facebook users who commented between Sep 2015 and Sep 2016. Color shows number of comments. Excludes *beyondblue* comments, and all users who commented less than 3 times.



The data in Figure 1 shows a small segment of the total number of people who commented on the *beyondblue* Facebook Page over the year (total commenters **N=10,155**, total comments **N=12,664** excluding the *beyondblue* Page administrators). Figure 1 shows those who commented 3 or more times (**N=484**), which represents approximately 5% of all commenters – a very small group. The two highest commenting participants, commented only 13 times in the year and both were on the same post.

The large number of Page followers (539,829) and level of post engagement would suggest a highly active and engaged public in relation to the mental health issues addressed by *beyondblue*. However, the analysis shows that there is not one single, sustained public, but rather that engagement is ephemeral. Facebook’s restrictions on Page posts appearing on Fans’ newsfeeds would be one factor. It does suggest that the Page does not function as a space for sustained engagement with mental health content, despite achieving extensive reach.

Preliminary Discussion

Unlike the Forums, the Facebook Page actively restricts the potential for intermediary practices. It does not support the establishment of expertise, framing practices and impact beyond that to be achieved (at cost) by the Page Admin team. The platform itself 'mediates' engagement, and the Page admins retain the primary role in this communicative system. This may be beneficial to *beyondblue* if it prefers to deal with mental health problems and associated vulnerable publics through other channels. But it does represent a missed opportunity with such large numbers following the Facebook page. To realise the connective value of social media, beyond the risks, there is space for developing the means for enabling greater participation by individual users as cultural intermediaries within both the Page and forums.

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