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Social networks, social isolation and cyber-scepticism: evaluating Twitter for users with disability

INTRODUCTION

In principle Twitter is available to anyone who has access to the internet, providing a communication platform accessible to a wide variety of users. Whilst Twitter's restriction of 140 characters or less per message gives rise to excessively abbreviated terminology, reducing the semantic accessibility of postings; the limitation is ideal for those who find typing arduous or who use inordinately time-consuming input devices, forming the message letter by letter using a head switch and infinite patience.

It is suggested that social media offers significant benefits in terms of democratisation, levelling out the effects of accessibility issues. The persona behind the tweet is usually accepted on trust by other users. Those who subscribe to this view believe Twitter offers the following advantages:

- Benefit of social networking enabling discourse, distribution and creation of ideas without being in close physical proximity.
- As a means of everyday communication it can reduce the impact of disability – for example, a visually impaired individual may use Twitter to communicate with friends when in a crowded social situation where eye contact is difficult.
- Communication with existing friends and like-minded people.
- Subject-specific discussions that users can engage in such as the opportunity to involve users in service development.
- Participating in the 'Zeitgeist' – reducing social isolation.
- Easy information sharing – Twitter 'share' button is the most commonly used.
- Benefit to businesses and marketers who have access to a communication platform for a targeted audience.

Isolation in particular is known to be a serious problem for the disabled and aged. Teresa Seeman comments that "social integration leads to reduced mortality risks, and to a better state of mental health" (Seeman, 1996). Simonsick et al identified in their study of disabled individuals that 23% visited no benefit to businesses and marketers who have access to a communication platform for a targeted audience.

RESULTS

When asked about the use of social media for their client, rather than themselves, the number of respondents (who used media personally) who would not suggest any form of social media rose from 15.3% to 28.3%. The majority of respondents, however, felt that they would, in at least some circumstances, recommend social networks to clients (see Figure 4). The most popular recommendation was Facebook, followed by Twitter.

Box one: Self-reported views of social network usage

Comments included lacking home access to a PC and, although there was availability at local libraries, advised that the opening times and access could be difficult. This appeared to be a particular issue where the client required specific audio / visual support or for whom a standard mouse / keyboard was contraindicated. The ‘accessible’ equipment was identified as being less than straight-forward to use. Ill-familiarity with social media put people off, although interestingly of these some cited Google+ as in use, apparently seeing this as linked to a trusted search facility. Some reported that they had been advised against the use of social media by a professional (generally apparently a health professional) which had put them off, perceiving the use as risky.

Box two: Survey of health professionals

We reached a total of 53 respondents and the survey was left open for 12 days. We asked respondents to comment on their own social network usage and on the social networks that they would be likely to recommend to others. Facebook was the most commonly used social media from a social network perspective, with only 15.1% of respondents stating they never used any social media. When asked whether social media was useful for work-related purposes, such as discussion with other professionals and continuing professional development, Twitter's use remained stable whereas the use of Facebook declined. These results suggest a difference in platform preference depending on whether the purpose for interaction is professional or a personal, social perspective.

DISCUSSION AND CONCLUSION

Of the four social networks that we chose to include in our survey-based work, we found that the most popular overall both for everyday use, work-related usage and recommendation was Facebook, followed by Twitter. Myspace, which was placed in our survey primarily as it is an example of a site that no longer attracts widespread use, predictably receives little interest. We speculate that the work-related interest in Twitter may be attributable to the ease of sharing links for new papers, developments in research, articles, etc.

Views on social networks were sharply split. Factors in the decision of whether or not to recommend social sites included:

- Familiarity with specific social sites
- Personal perception of informational value of social sites for specific purposes (such as support in obtaining grants)
- Discomfort with the format
- Provenance and reliability of information

The concept of social networks as acting as support or subject-related communities was referenced only infrequently.

Of most interest for our hypothesis were the comments received both from respondents with disability and from survey respondents in extended discussion. The high profile of accessibility issues (access to PC, appropriate input mechanism, etc.) suggests that if nothing else, more could be done to provide support to enable greater access to information resources.

REFERENCES


Carrington, K and Ballum-Stanton, B (15th) ICT2010 International Conference #38 An Agreeable Swarm: Twitter, the Democratization of Media & Non-Localized Proximity


Figure 1: Respondent profiles

Figure 2: Self-reported social network usage of healthcare professionals

Figure 3: Work-related social network usage of healthcare professionals

Figure 4: Recommendation of social networks to clients by healthcare professionals (self-reported)

Authors: Larissa Tonkin (Independent Occupational Therapist) and Emma Tonkin (Communications Researcher)