**Health Support Groups Compared in Virtual and Non-Virtual Worlds** John R Norris Albany, Oregon October 19, 2009

#### Abstract

This paper is an addition to an already published report concerning healthcare support groups in virtual worlds. Information reported about Second Life, IMVU, There, and Kaneva is cross compared . Further, a collection of groups in the non-virtual, real, world is also used for comparison. Eight types of groups are identified and the percentage of groups in each category was compared across worlds. The percentage of members for each category is also compared. Overall similarity between categories is noted with a few dissimilar elements. Different features and demographics of each world are given as possibilities for these differences in categories. Difficulties in categorization and data collection prevent strong conclusions. The haste in which the author publishes the work, in a desire to make the information available, precluded a more fully developed paper.

During the study for the report "The Growth and Direction of Healthcare Support in Virtual Worlds", published in <u>The Journal of Virtual Worlds Research</u>, <sup>1</sup> I collected information regarding the different categories of healthcare support groups. I did not include that data and analysis in the report. However, the information may be of interest, and so I would like to make it available. Unfortunately, I do not have much time to write up a more complete report on this information. I recommend one read the principle report in order to properly understand this additional report.

### Background

Data was collected on over 300 groups from virtual worlds, Second Life, IMVU, There, and Kaneva.<sup>2</sup> A collection of non-virtual, real life, world support groups was included. For the real world data the groups collected and published by the American Self-Help Groups was used.<sup>3</sup>

This part of the study was to see how general categories of healthcare support groups related to each other in a virtual world as well as those in real life. This study used the categories from the American Self-Help Group Clearinghouse. This organization has been around since the 1980's, has a database of over 900 support groups, and indexes those groups via their own classification system.

The following table summarizes some of the demographic information from "The Growth and Direction of Healthcare Support in Virtual Worlds" and may be helpful. A detailed explanation of the statistics is provided in that paper. This information was not available for the real life groups.

	Second Life	IMVU	There	Kaneva
Minimum Age Limit	18	13	13	14
Average Age	~40	18-24	~20	~20
Total Users	~15,000,000	~22,000,000	~2,000,000	~800,000
Number of HSG's	152	142	48	27
Total Memberships	~10000	3270	443	313
The Three Groups with the Highest Memberships	Support for Healing	Suicide, Depression, and Relationships	Disability_in_There	GBLT
	Transgender Research Center	<be yourself=""></be>	Deaf_People_R_Not_Ig norant	Kaneva Mafia
	Wheelies	Suicide Awareness	Find_A_Cure	Diabetes

Virtual World Demographics and Healthcare Support Groups (HSG)<sup>1</sup>

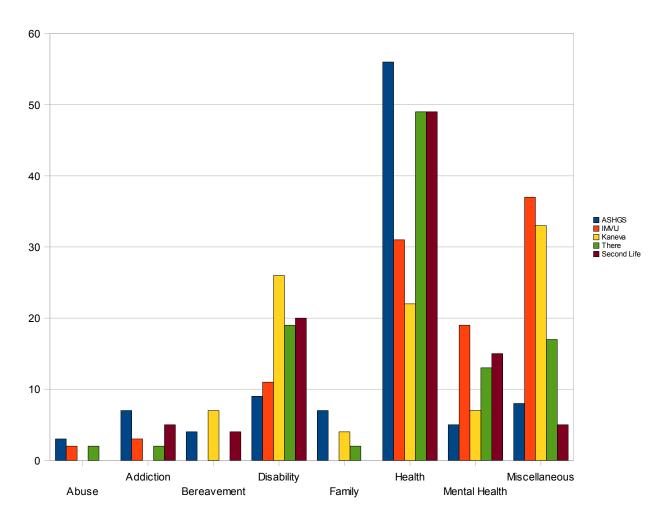
<sup>1</sup>Please refer to the text for explanation of the statistics

In this paper we will look at two summaries of the category data. The percentage of groups

within each category tells us what categories harbor the greatest and least amount of groups. The percentage of members within each category, tells us which categories have the most and least number of individual members. This paper compares the summaries across worlds.

# Worlds' Comparisons

The following relates the percentage of groups in each category for the four virtual world's as well as one actual, real life, world: (American Self-Help Group Clearing House, "The Self-Help Groups Sourcebook" is identified as ASHGS.)



Percentage of Groups Within Each Category

# Group Category

Note: There is a significant difference in the amount of data shown for each world. Second Life has 152 groups, Kaneva has 27. This may effect the veracity of the graph. In the broadest view every world has remarkably similar percentages of groups in each category. The categories with more groups tended to have more groups in most worlds, and those with fewer groups were less represented in most worlds. Further, the virtual worlds tracked fairly closely with the real world. No world was extremely different from the rest. However, when analyzed more closely, there are some differences.

In Miscellaneous, the worlds with younger members had a higher percentage of groups of this type. This is due to the large number of general chat groups. These chat groups do identify themselves as healthcare oriented, but are so general as to not constitute a particular health issue. This may be similar to Danah Boyd's findings about teens use of networked public spaces. Teens use such spaces differently than adults. Where teens use the space to socialize and hangout, adults are more task oriented. Second Life (and ASHGS) have a much lower percentage of groups that identify themselves in this general way.<sup>4</sup>

For Mental Health, virtual worlds had a much higher percentage of groups than their real world counterpart. Might it be that there is something in virtual worlds that lend themselves to this type of group formation, but not others? The anonymity of virtual worlds may allow those concerned with privacy to pursue their interests more easily in a virtual world. Further, the immediacy of synchronous communication these platforms provide, may be helpful for those that need someone to talk to in real time. That accessibility may not be available in the typical real life group.

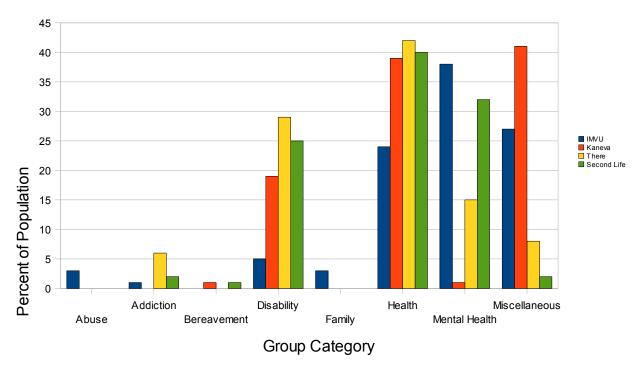
IMVU has younger members as well as a higher percentage of Mental Health groups than Second Life. One suggestion is that this may correspond to the national rise in mental health issues amongst adolescents.<sup>5</sup>

For Health groups, ASHGS has a much higher percentage than other worlds. This maybe due to the reason their list was created, to help people find such groups. They may put extra emphasis in noting more rare health issues to help raise awareness. Several other worlds, Second Life and There, also have a high percentage of such groups. As we noted about Boyd's findings, the older members of Second Life are more interested in going after specific issues. Older members may be more likely to have more health issues that they need to deal with. The world of There's demographics are not as old as Second Life, so that same reason does not make sense in There's case. Perhaps once specific health groups begin to be created, other people take up the idea and create their own specific groups.

Those worlds with the greatest amount of mobility and communication possibilities, have a higher percentage of Disability groups.<sup>7</sup> Thus, IMVU's more simpler based world is less popular than the more immersive ones. IMVU is more avatar based, and does not put as much emphasis on actual

movement through space. People with disabilities may appreciate being able to move around and communicate more freely, thus setting up groups in the worlds that offer that freedom.

Generally, those worlds that have older members, ASHGS and Second Life had a higher percentage of bereavement oriented groups. This might be because younger people have less experience with loss than older populations.<sup>7</sup>



Percentage of Members Within Each Category.

Note: Since ASHGS does not include membership totals it can not be compared. Further, there is significantly less data for Kaneva and There. However, it may still be valid to compare across virtual worlds in a general fashion.

At first glance many of the virtual worlds have similar group membership percentages. Those that tend to be small are small for most worlds, and similarly for larger populations. This shows that by-and-large virtual world support group members follow a similar pattern, despite being in different worlds. However, there are also differences which may be important.

IMVU has a much smaller percentage of actual members in the Health category than the other worlds. The demographics of IMVU are roughly similar to Kaneva and There, so why the difference.

Perhaps it is due to the style of IMVU content. IMVU's world has the style of a younger person's cartoon. Proportions of objects and people are outsized. Movement within the game is limited and not through 'realistic' space. This may create a less serious environment, one that is not conducive to the possible weighty matters of specific health issues.

Kaneva has a significantly lower percentage of groups in the Mental Health category than all the other worlds. This study is at a bit of a loss to explain why. Kaneva is not that much different than most of the other worlds. However, the results may be due to there being a fewer number of people in the world and Kaneva's relative newness. It would not take more than a few leaders with strong personalities to increase membership in the Mental Health area and change the balance of Kaneva's world. Those people may not have made it to Kaneva yet. Perhaps those people have already found a home in earlier virtual worlds and do not know of any reason to move.

Kaneva has a higher percentage of people as members in groups for Miscellaneous . Perhaps that is also due to the world's more recent start. Early adopters to a world may tend toward more general groups. Perhaps once people have been in a particular world for awhile they then start to create more specific groups. This may be shown by the growth rate chart for Kaneva as it shows a higher rate for non-miscellaneous groups after its beginning. However, the other worlds do not seem to share in this phenomenon.

## Conclusion

The study of the growth of healthcare support groups in virtual worlds showed remarkable similarity as to group types being created and populated in different worlds as well as in real life. However, there were also important differences. The reasons for those differences can only be supposed. More research will be needed to properly analyze and confirm/deny those reasons.

The studies research was somewhat hampered by lack of data. Some is simply not available without special access. Using what is available the study was able to take a good look at a fascinating and important area of virtual worlds.

In each of the worlds studied, people had created areas to discuss health. It seems that when communication is available, healthcare is a topic that will soon come up. The growth charts show how they spring up almost immediately.

It the hope of this research that it will allow us to better understand healthcare support groups in virtual worlds in order to create better worlds, support, and tools required for this obvious need.

### Endnotes

 Norris, John. "The Growth and Direction of Healthcare Support in Virtual Worlds". <u>The</u> <u>Journal of Virtual Worlds Research: 3D</u> Virtual Worlds for Health and Healthcare. Volume 2, Number 2, August 2009. http://jvwresearch.org/index.php?\_cms=1248968023 Accessed October 20, 2009.

2. Data on groups was collected for *Second Life* via Linden Lab's Second Life inworld search feature, using the "groups" tab on Nov. 23rd and 24th, 2008. *IMVU* data was collected via the website's groups, IMVU.com, area, going through the 331 groups listed in the subheading "Health". *There* data was collected on January 10, 2009 by using the There Forum. *Kanvea* data was collected on January 10, 2009.

3. White B. J., Madara E. (2002) *The Self-Help Group Sourcebook* (7th ed). Denville, NJ: Saint Clares Health Services.

4 Boyd, D. M. (2008) *Taken Out of Context American Teen Sociality in Networked Publics*. University of California at Berkeley. Retrieved February 25, 2009 from http://www.zephoria.org/thoughts/archives/2009/01/18/taken out of co.html

5 This idea was suggested by Ed Madara, as commented on the website john-norris.net. December 14, 2008. http://john-norris.net/2008/12/02/healthcare-support-groups-in-the-virtual-worldof-imvu Accessed Oct 26, 2009.

6 This idea was suggested by Mark Kizelshteyn, as commented on the website john-norris.net. December 2, 2008. http://john-norris.net/2008/12/02/healthcare-support-groups-in-the-virtual-world-of-imvu Accessed Oct 26, 2009.

7 This idea was suggested by E Madara, as commented on the website john-norris.net. December 14, 2008. http://john-norris.net/2008/12/02/healthcare-support-groups-in-the-virtual-worldof-imvu Accessed Oct 26, 2009.