

Audio recording transcript: Social Science Stars

Canberra, September 2018

- Thijs Van Vlijmen: Hello, my name is Thijs Van Vlijmen and I'm Associate Editorial Director for academic journals at Routledge in Australia.
- Divya Das: Hi, I'm Divya Das and I run CHASS, Council for the Humanities, Arts and Social Sciences.
- Thijs V.: We are pleased to present a recording of our social science stars event which was held in September of 2018 in Canberra at the National Library. You're about to listen to Hugh Mackay and Deborah Lupton. We hope you enjoy it.
- Divya Das: Hi everyone. Good morning. Welcome to Social Sciences Stars in Canberra. I'm Divya Das, I run the Council for the Humanities, Arts and Social Sciences. As we begin, I would like to acknowledge and celebrate the First Australians on whose traditional lands we meet, I pay my respects to the elders of the Ngunnawal and Ngambri people, past and present, for caring for this land, and we are now privileged to call our home. Social Sciences Stars is a series of public events being organized by CHASS in collaboration with publishers, Routledge, Taylor and Francis and The Conversation. This series is running through Australia's first inaugural National Social Sciences Week. So we're making history. National Social Sciences Week starts today. And so thank you for being here. The lovely National Library has provided this venue, so we'd like to thank them for their support. We're very grateful for it. Thanks also to event collaborators Sarah Blatchford and Thijs from Routledge and Misha Ketchell, and Peter Martin from The Conversation.
- Divya Das: The world of HAS, Humanities, Arts and Social Sciences is exciting as well as challenging. Social Sciences Stars is an attempt to showcase social science research and get you thinking about why the world needs that more now than ever. We at CHASS, always aim to bring people together at such events, to ensure that the sector continues to stay strong, connected and relevant. I would now like to introduce Peter Martin, who will be moderating this session. Peter is the business and economy editor of The Conversation. He has recently joined The Conversation from The Age and Canberra Times where he was economics editor. A Co-presenter of The Economists on ABC Radio National and former Commonwealth Treasury official, he has reported from the Canberra Press Gallery since 2006. He's a visiting fellow at the ANU's Crawford School of Public Policy and in 2016 he was made a distinguished alumni of Flinders University, in recognition of his contribution to the community's understanding of economics. Thank you Peter. Thank you for being here.

Divya Das: Our first speaker, Social Sciences Star is Dr. Hugh Mackay AO. Hugh doesn't really need an introduction. He's fabulous and I'm pretty sure you've already seen him before. He's a prolific social researcher, author, commentator, and most of you will know his latest book, *Australia Reimagined*, was published earlier this year. He is a fellow of the Australian Psychological Society and has been awarded honorary doctorates by Charles Sturt, Macquarie, New South Wales and Western Sydney universities. A newspaper columnist for over 25 years, Hugh is currently an honorary professor of Social Sciences at the University of Wollongong, an adjunct professor at Charles Sturt University and a patron of the Asylum Seekers Center. In 2015, he was appointed an Officer in the Order of Australia. The title of his talk today is, "Please explain us to ourselves".

Divya Das: Our second Social Sciences Star is Professor Deborah Lupton. Deborah is an internationally renowned sociologist, and foremost advocate for engagement with digital spaces and methods. She's the Centenary Research Professor at the University of Canberra. Her research and teaching is multidisciplinary, incorporating sociology, media and communication, and cultural studies. Deborah has previously held academic appointments at Sydney, Charles Sturt and Western Sydney universities. She is a published author, fellow of the Academy of the Social Sciences in Australia, the co-convenor of the National Digital Data and Society Consortium and Director of the Smart Technology Living Lab at UC. The title of her talk is "Lively sociology: researching new ways of living using new methods". Thanks for making it here this morning. I hope you will enjoy the session and I encourage you to make the most of the discussion that would follow. I would now like to invite Hugh. Thank you.

Hugh Mackay: Thank you Divya, and good afternoon everyone. I was told that there were going to be 40 secondary school pupils in our midst, and they seem to have got lost or fallen by the wayside, and I'd prepared some things particularly for those students. So I'm delighted that we do have some students who may want to respond to some of the things I'm going to say that are directed at you. It used to be accepted that the heart of any university was the philosophy department. This is where life's deepest questions were debated, and where that ultimate question, "how should we live?" Was constantly being addressed, and has been addressed, century after century. But there are other deeply important questions like, "how do we live?" And "why do we live like that?" Which are, of course, the province of social science.

Hugh Mackay: So it has occurred to me for a long time that we should be putting social science right up there with philosophy, as the core of any serious university education. Now, I thought in the time we have together, I just share with you some of the things that social scientists know. For example, we know the deepest truth about human beings, which is that we are social creatures, and that one of our most profound motivations is the desire to belong. We depend on communities to sustain us and nurture us and support us and to protect us, and we recognize that those communities in turn will only thrive, will only survive if we engage

with them and nurture them. And part of that, of course, is learning that communities will only survive if we learn to treat each other kindly and with respect.

Hugh Mackay: So that's one of the lovely symmetries of social science, our understanding that we as humans need communities to sustain us, and those communities need us to sustain them. But there's another deep truth about human beings, which is that while we have evolved into this interdependent cooperative species, because we're sustained by communities, for very different evolutionary reasons we've also evolved as a kind of paradox into highly independent beings with a strong sense of our own individual personal identity, driven by not the desire to belong, but the desire to be taken seriously as the unique individuals that we are.

Hugh Mackay: So there's one of the central insights of the social sciences, which informs a great deal of our work, that is, that we are both independent and interdependent all at once. We are both selfish and selfless all at once. We are both competitive and cooperative. So it's no wonder we're often confused and conflicted about what we're doing or why we're doing it. And no wonder that we often find ourselves saying one thing and doing another. The two sides of our nature equally authentic, and yet they often seem to be at war within us. But the deepest truth still remains that we are social beings. Carl Rogers, one of my psychological heroes, the founder of the Client Centered School of Psychotherapy in the US, once wrote that when any of his clients came to a full realization of who they were, it was always to realize that they belonged somewhere, that they were part of a family, a social group, a friendship circle, workplace, herd, or whatever other social context they belong to. But out of that context the idea of "who I am" made no sense.

Hugh Mackay: There's a thriving industry in encouraging people to search for the answer to the question "who am I?" You can pay a fortune to go away on a weekend to discover yourself, save your money would be my advice. We don't discover ourselves by looking in the mirror, or by gazing at our navels, we discover ourselves by looking into the faces of the people who love us, the people will put up with us, the people we work with, and most especially the people who need us, that's who we are. It's a social construct. Gabrielle Marcel, a French existentialist philosopher, wrote that the reality of our personal existence can only be fulfilled through our engagement with communal life.

Hugh Mackay: If we're outside of a community, we become self-absorbed, we become self-pitying, we become self-indulgent. And all of those are signs of disengagement, and all of those things carry mental health consequences. In fact, if you had to talk about the central reality of contemporary Australian society, I think this is what you'd focus on. You'd say the most remarkable thing about our society given all the things that suggest we should be healthy, and prosperous and thriving, et cetera. The most significant thing about us is that we're a society in the grip of an epidemic of anxiety and a closely associated epidemic of depression. And there's no mystery about why that is, because we have similarly become a more socially fragmented society than we've ever been. And there

are many factors that have contributed to social fragmentation, ranging from high divorce rate, shrinking households, increased busyness, increased mobility, increased reliance on information technology, at the expense of face to face communication.

Hugh Mackay: So it's not surprising that the latest research on heavy use of social media, for example, points to the fact that the heaviest users feel the most socially isolated, that's another paradox, and often the most highly anxious. So we know all that stuff because we're social scientists, that's our meat and drink, and our understanding of the essentially social nature of the human species is the key to our discipline. So what does that lead to? Well, one thing it leads to is the understanding that since we are in our very essence, social beings, communication is our lifeblood. So we study communication, and we can very confidently say that human communication does not work in the way engineers wish that it did work, and often talk about it, as though communication is the process of putting a thought into a message and sending that message to someone else who will take the thought out and share it. If only it was so it was so simple.

Hugh Mackay: It's not like that at all. We put a thought into a message and we send it and the message may or may not be noticed at all, by the person that it's intended for. And if it is noticed, it will be interpreted by that person, according to all the attitudes, beliefs, preconceptions, prejudices, experience they already have, and which they draw on to make their own sense of what we've said to them. So we know why nagging doesn't work. It's not what the message does to the audience, it's what the audience does with the message that determines whether communication is going to occur or not. A social scientists we understand that particular form of communication called persuasion. When a government or an NGO or a commercial organization says as they so often do say, "We must change their attitudes", they being the voters or the community or the market.

Hugh Mackay: When we hear them say, "We must change their attitudes." We know they don't know much about social science because we know as social scientists that the relationship between attitudes and behavior is much more complex than people generally assume, that in fact the serious direction of influence is that our behavior creates our attitudes, rather than our attitudes leading to behavior. Our behavior is shaped by our circumstances, our environment, our upbringing, our context, all of that and our behavior will change when those things change, and then our attitudes will change. But there's almost no evidence to suggest that if you want to change someone's behavior, which is what those governments, NGOs, commercial organizations, et cetera, are really interested in. If you want to change someone's behavior, there's almost no evidence to say you do it by changing their attitudes first. In fact, you won't change their behavior until you can have some impact on the environment in which they operate.

Hugh Mackay: As a public health initiative, when we wanted to change the behavior of smokers, no amount of propagandizing ever did it, not here, and not anywhere

around the world. But we started to change the behavior of smokers when we put the price up. And when we started defining all sorts of places where it was impossible to smoke. And so it became harder and harder and more and more expensive to smoke. And in their millions, billions around the world smokers gave up or non-smokers didn't start. We could never persuade drivers not to drink and drive. No amount of propaganda here or around the world ever succeeded in reducing the road toll through drink driving, until we intervened in the driving environment and introduced random breath testing, change the world in which you drive, and when the world changes, your behavior changes.

Hugh Mackay: One of the most ancient experiments in social science was looking at that very question and just demonstrated how complicated these things can sometimes be. An Australian social scientist called Elton Mayo, many years ago studying the productivity in a General Electric factory plant in the US, decided that there were improvements to be made in the working environment which would be likely to improve productivity. And Mayo began with what he thought was the most obvious shortcoming, which was the illumination. So he brightened the illumination in the factory, in the plant, and sure enough productivity went up. But Mayo was a true social scientist, and not content with observing that, later he thought, "Well, now we should reduce the illumination to its original level and see what happens." The illumination level was reduced to its original and productivity went up further.

Hugh Mackay: I leave it particularly to the students in our midst to speculate about why that might have been the case, but I'll give you a hint. People respond very well to other people being interested in them. And that's led to what's known in social science as the Hawthorne effect, which is, you can improve productivity by standing around with a clipboard and not worrying too much about the illumination. That's a cynical interpretation. Well, we know all that. Another thing we know is that humans are essentially non-rational beings, driven more by the heart than the head, and shaped by the force of circumstances, family background, et cetera. Yet, curiously, we are as a species capable of rational behavior. It takes 12 years of education and probably a few more years of technical and further university education to get us to think rationally, and to behave rationally in circumstances where that's appropriate like if you're flying a plane or building a bridge.

Hugh Mackay: But people who say, "humans are rational," or "why can't people, especially my kids or someone, be more rational", have completely lost sight of another central truth about us, which is that we are not by nature rational. Economists, urban planners, marketing strategists, all kinds of people have in the past made appalling mistakes based on the assumption that humans are rational. Daniel Kahneman, a famous psychologist who also became an economist brought psychology and economics together to point out that no, people in an economy don't behave rationally. And he won a Nobel Prize for that and wrote a best selling book about it. At last we're coming to realize that when you are puzzled by a piece of human behavior, the explanation is not logical, but more likely psychological. Now we know all this stuff because social scientists love doing research, and we do a lot of research. The world is our laboratory.

Hugh Mackay: People are out there behaving all the time. So it's not hard to find subjects to study. All we have to do is watch and listen, observe closely. And occasionally, of course, interact with people to try and get them to tell us why they're doing what they're doing. So as social scientists, we do ask a lot of questions about human behavior. But when it comes to social research, and particularly social research surveys, based on questions, we realize that we are often getting very suspect answers from our questions, for the very obvious reason that if you ask someone a question, you will always get an answer, and then you will never know whether what you got as an answer exists only because you asked the question or exists in that form, only because you asked the question in that form or in that position in a list of questions.

Hugh Mackay: So, many of us have been looking for ways to bypass the apparent rationality of questions and answers in order to get at the apparent non-rationality of much of human behavior. So we've noticed, for example, that if you ask people questions beginning with the word "why": "Why did you do that?" "Why did you marry that person?" "Why did you vote for that candidate?" "Why did you buy that car?" We will usually get answers that are far more rational sounding, than is realistic. Because if you ask somebody, this is good advice to parents, by the way. If you ask someone why they did something, you almost certainly won't get the truth. What you'll get is an answer that sounds as though it fits the question. And so we've looked in social research for ways of getting people to talk about their behavior, their motivations, their attitudes, et cetera. The bypass questions, and that's led to the whole qualitative research industry, using non-directive non-linear methods like conversational interviews, and in particular, small group discussions which have become a very fashionable way of doing social research.

Hugh Mackay: By the way, while I'm talking about small groups. One of the things we know from research into this subject is that small groups are great for conducting research into people's attitudes and values and beliefs and so on, but they are not good for creativity. We know that people generally come up with their best ideas when they are working in isolation, but we keep persisting with this idea of running workshops and brainstorm sessions as though something to do with the group dynamic will produce a better result when the evidence shows us that it's likely to produce a worse result. Like the old story about the camel being a horse designed by our committee. And by the way, speaking of groups, we know that in work groups, committees and dinner parties, the human group is at its best when it's about five to eight people. Fewer than five, it doesn't really work like a group, more than eight it's likely to work like a couple of subgroups.

Hugh Mackay: We know why people behave so badly so much of the time. We know how peer group influence works. We know about the effects of obedience and conformity on people's behavior. We know about the malign influence of people's desire to control each other. We also know about the negative effects of rewards, which seem to be almost as negative as the effects of punishment, because both rewards and punishments ask people to focus on the extrinsic aspects of what they're doing, rather than the intrinsic aspects. It will come as no surprise to the school students in our midst, I'm sure, to say that it's very easy to get seduced

by marks as though the whole process is about your marks. It'd be wonderful if we could devise an education system in which we didn't have to have marks because they are like of reward and we focus on the marks, instead of focusing on the inherent value of the educational process.

Hugh Mackay: Well, as social scientists, we smile when we hear people say that diet and exercise will keep you healthy and slow the aging process, and we don't smile because that proposition is false. We smile because it's so often said without any acknowledgement of the third crucial ingredient in keeping healthy and slowing the aging process, namely social interaction. Diet and exercise are crucial, but even with the right diet and lots of exercise reduced social interaction, deprivation of social interaction can have deleterious effects on our health. I mentioned that problem in relation to social fragmentation and social isolation. Many social scientists are now saying that the number one public health issue western societies are now facing is the problem of social isolation, likely to have more impact on public health even then obesity.

Hugh Mackay: So we know that chatting to people is better for your mental health and general development than doing crosswords, or any of the other things that people do in order to stay young and keep the brain alive. They're just habits. Social interaction takes us by surprise, and that's much better for our brains. Well, this has been a sort of a lightning tour around some of the things we know because we're social scientists. And I think it is fair to say without sounding smug, that social scientists have a great deal to offer a society struggling to cope with the pace and the nature of change. Technological, cultural, social, economic. But of course, we don't do social science just to amuse ourselves, we do it for the benefit of the societies, for the benefit of the communities who pay us to do this work, and our work is useless if it can't be harnessed in the service of the common good.

Hugh Mackay: So to this school pupils in our midst, may I say, if you are thinking of a career in the social sciences, and I hope the fact that you're here means that you're at least contemplating that as a post-school possibility, go for it. It requires a bit of intelligence, it requires a lot of insight and it requires an insatiable curiosity. But all of us in the social research game need to remind ourselves that yes, it does require those things but it requires something else as well. And that's compassion, empathy, a deep respect for the people we're studying. It's all too tempting for social scientists to start thinking about, and talking about, and writing about human beings as though they are rats in a laboratory, when in fact they're human beings leading their own lives trying to cope with what every life has to cope with, including tragedy, sadness, disappointment, and loss.

Hugh Mackay: Our task as social scientists is not to tell people how to be happy, but to help them better understand what's actually happening to them, show them how to cope with their reality, how to be whole, how to be resilient. The question society is really asking social science is this question: "can you please explain us to ourselves?" To the students, let me say, do give social science serious thought. I know this has been said in many other contexts, but from six decades

in the business, I can say with great confidence, it's the most fun you can have with your clothes on. Thank you.

Deborah Lupton: Thanks Hugh, that's a hard act to follow. What can I say now about social science, is it's more than that much amount of fun. But what I'd like to, actually a lot of what Hugh has said, I will be probably building on, because what I want to talk about is how, as a social researcher and I sort of identify as a sociologist and a media studies researcher is how you can keep being interested. I absolutely agree that a sort of impetus that many of us who are social scientists have is we're very very curious about the way that people act and how they relate to each other. And because we're social scientists we're interested in those social relationships, we're interested in their practices, their beliefs, their behaviors. And as Hugh says, we're also interested in the irrationalities and he didn't actually talk too much about what he meant by that.

Deborah Lupton: But I would say that one of the things that I'm interested in, is the feelings and emotions that people have. And of course, that is how often what propels people's social behaviors and what is an essential part of their social encounters with other people. I'm also interested not just in how humans engage and interact with other humans but also how they engage and interact with non humans and in particular at the moment what my interest is, it's digital technologies, if we're talking about those as non-human objects, and I'm interested in how humans come together with these non-humans and how they interact in emotional ways and sometimes the rational ways, but also how those digital technologies generate capacities for them, and agencies for them, what they can help them do, but also how people might be disadvantaged by those technologies.

Deborah Lupton: Because again, as a sociologist, we tend to be very interested in social inequalities. We're very interested in comparing different social groups in society and looking at the ways in which some social groups are disadvantaged, some are advantaged, why it is that those cycles of disadvantage and marginalization are perpetuated. Now I actually started off as an English literature student here at ANU because I've always been really interested in I guess the inner thoughts and feelings and behaviors of people. Of course, English literature is a great way to get insights into people. But then once I started studying Sociology and Anthropology, I became interested in the sorts of methods of research that sociologists and anthropologists engage in, which is, as Hugh was saying, going out and talking to people, whether it's doing one on one interviews with them, focus group discussions, surveys and so on.

Deborah Lupton: I did my PhD about 27 years ago now. So quite a long time ago now. And I chose the topic because it was a new topic. And it was a new way of doing analysis of that topic. And the topic was HIV and AIDS in Australia. And I wanted to look at how the mass media and particularly the Australian press, newspapers reported HIV and AIDS from the time they first started talking about HIV and AIDS to the period that I stopped at, which was 1990. Now the Australian Press first started reporting HIV AIDS in 1982. That was when the world first learned about this strange virus that people have never heard of before. And most Australians first

learned about HIV and AIDS through the Australian news media. That's how they learned about this new disease, which then went on to spread quite rapidly in certain social groups in Australia. But with that came a lot of very negative reporting of those social groups, gay men, injecting drug users in particular.

Deborah Lupton: Then the Australian government decided to warn heterosexuals that they might be at risk of HIV infection. And the notorious Grim Reaper campaign, which some of you, the older people in the room might remember, got a lot of media attention, because it was very much using fear tactics to try and scare heterosexuals into being aware of the risk of HIV and AIDS. And so there was a huge amount of reporting about that, and HIV went from being a gay virus to being a heterosexual virus. And then it turned back again, to being a gay virus again. So I looked at 9,000 newspaper articles reporting, every single newspaper article and every single newspaper in Australia that were reporting HIV AIDS from the early '80s to 1990, and did an analysis of the metaphors used, the language in the headlines, the images used, and it was a qualitative analysis.

Deborah Lupton: Now as that was some time ago, what I find as somebody who has a low boredom threshold, but is also very curious about human behaviors and practices, I like to experiment with methods. So what I'm going to talk about today is some of the new methods that I use. The great thing about sociology, is there's always new things to look at, and explore, because society is changing all the time. But I like to use different methods as well, experiment with those new methods. Also, I like to experiment with new ways of communicating my research to the general public, because I think that we have a moral imperative as social scientists to not just keep all our research findings within the university, but to think of ways that we can actually let the general public know about our insights, because it is about people and it's about Australian people, then not only are we funded by the Australian people to do our research, but it has relevance to Australian people.

Deborah Lupton: So one example is a project I did recently on self tracking cyclists. Cyclists who used digital technologies to track their cycling trips. And with my research team we use GoPro cameras as an innovative method. So what we did is use GoPro cameras, a tiny action camera. They're about this being and you can clip it on your body or on your tech equipment, like a bike for example. Mountain climbers use them a lot, surfers use them a lot, and it's a way of getting video footage of that person's sporting exploits. So we decided to use these GoPro cameras as a research tool. So we asked cyclists here in Canberra and in Melbourne because some of the research team was located in Melbourne, who were self tracking their rides either using bike computers or a wearable device or an app on their smartphone, to put the GoPro camera on their helmet. And so we got a cyclist's eye view of one of their trips.

Deborah Lupton: So we asked them to put on their helmet, off they went, we weren't involved, they went on a regular cycle trip to work. And what we got is this image and it was a video, but that's a screenshot from the video. So that's one of our participants, and what she's showing is how she turns on his smartphone just before she goes off on her ride. And we were able to have footage of each of

our participants' rides. So we could, for example, see the kind of traffic conditions, this is in Melbourne by the way, we could see the other cyclists who might be on the route, we could see non-humans that they might be interacting with. For example, here in Canberra, it might be that rowdy magpie, that cyclists have to be aware of at this time of year, it could be dogs on the path, it could be people with strollers, and so on. So we had all this sort of insight into that person's regular ride.

Deborah Lupton: Then we sat down with our participants and we had our laptop computer with us, and we played the video of their ride with them, and we talked to them as they were looking at the footage of their cycling trip. And we said, "Okay, you got out your smartphone there, what is it you were looking at? Were you looking at your statistics from your app about your ride? Were you checking your messages? What was it you were doing? When you stopped here, were you looking at the people around you or were you looking at your bike computer? Because we are really interested in finding out how people engage with this self tracking data. And what we found out from this project is a lot of really interesting material about how people not only engaged with their digital technologies, but the bike itself, the impact that had on the tracking practices. So for example, people talked about some bikes went faster than others because of the way they were engineered, and the importance of the weather.

Deborah Lupton: So people talked about, "Okay, when I reviewed my data, whether it was while I'm cycling, or when I got home and checked my app, I knew there was a tailwind behind me. So that actually meant that when I reviewed my data, and it might have looked like I had my personal best, well I actually knew it was the wind that was pushing me forward." So there was a lot of really interesting issues about the way that people engaged with their self-track data, which we could talk about and explore further when we talk to people about the video of the rides. Now, another approach that I've become quite interested in using as a research technique is an approach that comes out of design. And it's the kind of thing where we're getting right away from using digital technology.

Deborah Lupton: So the GoPro camera ride is the digital technology that I used for research, but the good old pen and paper and sticky notes, and those sorts of analog methods remain quite an interesting creative way to do research, and to invite research participants to engage creatively. So this was a experiment that I ran as part of a Smart Technology Living Lab. Now, living lab is all about using participatory methods to get people who are interested in being involved in your project to interact with each other, and to interact and come up with your research materials, and to come up with solution-based outcomes from the interactions. So this is an example of the digital health stakeholder project that I ran last year at the University of Canberra. And I got 25 people, invited 25 people who were working in digital health. And these included people from the digital health agency, other government officials, doctors, members of the pharmaceutical guild and consumers, healthcare consumers, and just regular people who engage with healthcare.

Deborah Lupton: So it was a very diverse group of people, which was what I wanted to have involved in this. And what I was interested in exploring this workshop was the different kinds of ways that people were thinking about and using digital health technologies. Because these days, back in the days before Google existed, before the internet existed, before apps existed, people learned about health and illness in very limited ways. They learned about about health from their own experiences, through talking to other people, through talking to healthcare providers. And there might be the occasional newspaper article or TV documentary or self-help book. But since the explosion of the internet and online discussion groups, and Google search, and websites, and apps, and so on, there's many more ways that people can learn about health and illness and healthcare.

Deborah Lupton: So I was interested in exploring what people were accessing terms of digital health, what they found useful, and what they didn't find useful with this group of people. So we had this mapping activity. And I worked out this method with some design researchers. So they sort of helped me in working out how to do it. And so what we did is we had groups of people, and they were sitting around tables in small groups, and they were asked to map the landscape of digital health in terms of what they knew about, and also in relation to the people.

Deborah Lupton: So you can see little images of people there, because obviously, people are absolutely part of how other people use digital health technologies. And I was interested in, if people are sort of going to use apps to learn about health and illness, how are they also engaging with healthcare providers, or with community members, or with their family members, as they also use apps. So this was all part of this mapping the landscape, and we had these little cards that people filled in. And so there was some cards about technology. So what technologies are you using in that moment? Where would you put those technologies on this big map? And then we got them to draw the connections there.

Deborah Lupton: So that's just a close up showing one of these these landscapes of digital health that the group's produced. So as you can see, they're able to draw the connections between people and people, and between people and digital health technologies. And then we asked each group, once they'd finished mapping the landscape, we asked each group to stand up with their big piece of paper that they've worked on and explain to the other groups, why is it they put these technologies in there? What technologies were working well for them? And where did they see the barriers and gaps and limitations? So that was each group explaining their landscapes to each other, then what I think is a another really interesting way of doing social research, is to ask people to imagine the futures. So not only what is happening right now, say, for example, in digital health, but where they see the future of digital health going, because I think the average Australian citizen should play a role in being able to contribute to the futures of initiatives like digital health.

Deborah Lupton: So part of this project was asking people, "Okay, we've now talked about what exists in digital health, what is out there, what is working, but what can you

imagine could be developed or invented or imagined around digital health technologies that doesn't already exist?" So these were another set of cards that we asked people in pairs, I think, we did them in pairs with this actual activity, and they were asked to imagine a new digital health technology, to write it down. When would it be invented? Would it be invented in five, 10 or 20 years? What would it do? And then the third activity in this workshop was using a storyboard format. Now, this gets back to my interest in English literature, because I think that asking people to tell stories can be a really interesting insight into their thoughts and feelings, their emotions, their behaviors than their social connections.

Deborah Lupton: So once we'd ask people to imagine a new digital health technology, they were then asked to choose one of those, and to put that technology into a storyboard format, and there's one of the participants doing just that. So we had five boxes there and people draw could little stick figures, and also write a very simple story underneath. So I'll just show one of them. So this is Dr. Toilet, and this is a new technology that one of the groups imagined. So it's a really good way if you're asked to put this new device into a story, it actually contextualize as the use.

Deborah Lupton: So you're asking people, "Okay, you've imagined a new technology, how would it actually work? How would it be part of somebody's everyday life?" And so he's showing this person who's got some problem with his tummy looking very sad, it could be a male or female, it's kind of androgynous looking person. That person uses the smart toilet they have at home, which is filled with all these sensors from their waste, that they can sort of check out their waste products, sends a message straight to the doctor, their phone app says, "Go see your Dr. Love, Dr. Toilet. And then the person goes to see the doctor and all is well. And there's a lovely big internet sign there, Wi-Fi sign showing all these smart houses and smart toilets, all interconnected.

Deborah Lupton: So that was that person's imaginary. And as a sociologist, that's really interesting to me. Because what that tells me is how the average Australian person, what they would like to see in digital health. What would work for them? And obviously, it's a bit of a ... Who knows if a smart toilet can be invented. But there may be some interesting insights here for digital health developers, for the government who was absolutely really pushing for digital health to be in every person's home, and to be in every clinic and every hospital, because for one thing, it saves money, right? But the other thing it actually improves access for remote communities, and so on. So this is where I think social research can provide some really interesting insights and using these kinds of methods can really help with that.

Deborah Lupton: Now, as a social researcher, I'm also interested, as I mentioned previously, in conveying the findings of my research in an engaging way. So to achieve or to help with that, I went to a workshop myself a few weeks ago, where we learned as researchers how to draw comic strips, and this is my first ever attempt, but it was a lot of fun learning how to do this. And so that's me continuing to sort of build on my own skills in terms of conveying my research to others. And this

little comic strip is actually drawing on another project, looking at young people's use of digital health technologies. And what came out in that project was really interesting in that the young people people I spoke to, and it was interviews, did not use health apps as much as we might expect them to. Because we tend to think, "Oh young people, smartphones apps, they're always on their phones, they're always using apps."

Deborah Lupton: Well in fact, YouTube was the key source of health information for young people, and it was often other young people, YouTubers, YouTuber influences, talking about health issues, just as part of their regular vlogging activities. So the young person might be looking at a YouTube video because they're interested in makeup tips or fitness tips, or gaming. And then that young person might start talking about a health issue that they have, often a mental health issue. And so the person who's viewing the YouTube video, gets some insights into another young person, and their experiences about, say, a mental health issues. So that's what came out in these conversations with young people about digital health. So what I tried to do in this little comic strip is an example of a person from this project. So it's a person who feels sad and anxious, "What's wrong with me?" "Oh, I'll google it." Because absolutely they were googling. First thing they did, young people is Google it. But everyone does their young young people or old people.

Deborah Lupton: I've done another project on Australian women in digital health, and everyone regardless of their age goes to Google first thing. Young people aren't alone there. So then that young person has found a self diagnosis tool online, has diagnosed themselves, "Oh, no, this says I might have an anxiety disorder, I feel so alone." Because what came out again, is how alone young people often felt when they were worried about a health problem, and how going online, say to YouTube, helped them feel less alone, helped them feel that somebody else was experiencing that problem, that was really important to them. So this person goes onto YouTube. And a YouTuber is there saying, "I had anxiety, but I feel better." So they were getting a bit of information there. And then the young person says, "I feel a bit better, but I'd like to see a doctor for more help." And goes to see the happy smiling doctor, who refers them to a psychologist. But this is what came out in the interviews.

Deborah Lupton: So it's not as if young people were just only going on Google and only going on websites and only going on YouTube, they absolutely valued the expert advice of friends and family, particularly their parents. So often, they would say, "The first thing I do is, I go and talk to my mum, if I've got a health problem, then I google." But they really value the expertise of doctors, and they said things like, "Okay, but I went on Google, I found all this conflicting information. So I decided I need to see the doctor, because the doctor's an expert, and the doctor can help me work out what's right and what's wrong in the information I found." So all these sort of assumptions that a lot of people might have about young people just wanting online information. Well, yes, they do in some ways, but in other ways, they still absolutely want that face to face engagement with family members and healthcare providers. So this is what I tried to show in this little cartoon strip.

Deborah Lupton: And finally, I just want to talk about story completion method, which is a new method that I've been experimenting with recently, and again gets back to the whole idea of asking people to tell stories. So the story completion method, you start off a little story for people, and then you ask them to complete the story. And the beauty of this method is that you're not asking them about themselves, you're not asking the "why?" question that Hugh mentioned. But of course, when they're completing a story, they are absolutely drawing on their own experiences, because how else would they have the ideas that they complete the story with? So they're indirectly conveying their own experiences without putting them on the spot and saying, "What would you do?" Or, "What did you do?"

Deborah Lupton: So this method, I actually combined using digital tools and using this story completion method. So what I did is I used the Survey Monkey free survey tool, put the stories on there, then I have a lot of followers on Twitter, and I have a special Facebook page from research methods inside publicize my survey, online survey, using these story completions to my followers. And that's how I got my participants. Which was great because I mean, I got participants not only in Australia, but in other countries as well.

Deborah Lupton: So these were the three story, we call them story stubs. So Isabel wants to improve her health and fitness, but doesn't know how to go about this. Tom has been feeling unusually sad and anxious for a few months. He wonders whether this is normal, and what he should do about it. And Alex has been sexually active over the past year and has recently noticed some unusual symptoms that could be signs of a sexually transmissible infection. Alex needs further information to work out what is going on and what to do. And then the participants were asked to write online, what happens next, please write four or more sentences in the box provided below to finish the story.

Deborah Lupton: So these stories come out of my previous research, they are examples, they just characters drawn out of findings from my previous research about dilemmas that people might have, and I was really interested because I'm interested in digital health, I was interested if ... I don't mention digital here at all, I was interested in the stories whether how much people would talk about, say googling going online, or how much they wouldn't. So I was sort of leaving it quite open to see what would happen. Now, I don't have any time really to go into the details of the findings. But what I do have is some word clouds. And making a word cloud of people's stories is just a very initial and simple and easy way of visually representing the content of the story. So I just thought I'd quickly show the word clouds that came out from each of these stories.

Deborah Lupton: So it's interesting, from the word cloud Isabel story, she was the one who wanted to get healthier and fitter, how much "friend" comes out there. And this gets back again, to Hugh's observations about the importance of other people, particularly for something like feeling motivated, but taking up a new health practice and continuing with it. So a lot of stories talked about the importance of finding a friend who could help her give her advice and do some activity with her. "Gym" comes up, because that is where a lot of people do exercise. But

"walking" also came up as a massive one that people talked about in these stories. And there is mention of "googling" and "online", and the "internet", some of the words around there, but it's "walking", "friend", "gym", right? So they're the key issues that really come out of that word cloud.

Deborah Lupton: Then for Tom's stories, so Tom was a person who was feeling sad and anxious, and wondered what he should do about it. So "feeling", as you'd imagine, because it's all about how he's feeling he is dealing with mental health problems. "Feeling" is a big one. But again, "friend". See below "feeling" is "friend" and "doctor". And "googles" is there as well, and "internet". But again, it's the interpersonal and the stories often talked about how Tom as a male might have troubles talking to a doctor, how he talked to his partner to get advice from his partner first, not so much to friends, because Tom was worried about revealing his vulnerability, as a man it's socially inappropriate to do that kind of thing.

Deborah Lupton: Alex's story was the one who thought they might have ... And I left the gender ambiguous. So that's why I say "they". They might have a STD. Again "doctor" really pops out there and "googles", because it's a stigmatized condition, people are worried about talking maybe to their friends or family obviously their partners probably might not ... at first you might not want to let your partner know until you know for sure. So it's "doctor", "googles", "clinic" really comes out there, and if you look at all those stories combined, again, "feels", "friend", "appointments", "symptoms", "googles", they're all in the mix there. So it really gets back to the human and non-human aspects of these stories where people talked about what these people do. And just finally, this is another little creative effort of mine, because I like experimenting with it. This is my sketch noting. So this is my other way drawing on my comic strip expertise now, limited as it is.

Deborah Lupton: So this is going back to Isabel, and this is just another way of conveying, a fun way of conveying the findings from Isabel's story. So the barriers to her engaging in regular fitness and health activities was, and these came out of the stories, "I feel self-conscious in gyms, my body looks so fat, it all seems so hard. I don't have enough time, online information is confusing." These are all the the main things that came out in the stories and then facilitators, "I have a clear plan, I trust my friend's advice, I like exercising with my friend and I can make a small change." So this is just another way of me thinking about creative ways to present my findings. And if you're interested in any further information, I do have a blog. I have my Facebook page Innovative Social Research Methods, and you can follow me on Twitter. And the slides from this talk are available on SlideShare at that link. Thank you very much.

Divya Das: We really enjoyed the discussions at Social Sciences Stars in Canberra. Hugh Mackay had some fascinating things to say about the epidemic of anxiety and depression, in a socially fragmented society, and also about how social interaction is the third crucial ingredient apart from diet and exercise to keep us healthy and young.

Thijs V.: And it was great to hear Deborah Lupton referencing the use of wearable technology like GoPro cameras in sociology. It's great to see the use of modern technology in the social sciences.

Divya Das: If you enjoyed this, look out for a recording from our Melbourne event where we were honored to hear public intellectual Robert Manne and Associate Professor Leanne Weber from Monash Uni, discuss Australia's asylum seekers policy and how social scientists could increase the impact of border related research.

Thijs V.: Bye for now, and we look forward to seeing you at social science event in the future, near you.