Public and private faces in web spaces – How Goffman’s work can be used to think about purchasing medicine online.

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Abstract

Medicines and drugs are subject to national, state or federal regulation. The misuse, illegal consumption and purchase of drugs and medicines is not a new phenomenon, but it is one which the Web may enable or magnify, opening up as it does access to online information and purchasing. People can use the Web to discuss buying medicines online and provide new opportunities to avoid stigmatisation and manage their illnesses and medicine purchasing in a private or backstage spaces. This paper discusses how Erving Goffman’s analyses of social behaviour and interaction are useful for understanding digital interactions and can be fruitfully applied to the specific problem of understanding the act of buying medicines online. Goffman’s connections to symbolic interactionism, and the development of his ideas regarding dramaturgy and interaction as performance, as well as his concepts of the presentation of self and stigma are investigated to show how these ideas are pertinent for scholars interested in studying the Web and digital communication. The paper also draws on recent studies which have applied Goffman’s concepts to the digital realm before proceeding to propose how Goffman’s ideas can be used to understand new health behaviours, such as the purchasing of prescription medicines via the Web, via the presentation and discussion of initial findings of a study concerning the observation of online forums.

Introduction

Despite writing in an era that predated many of the digital communication technologies that have become important to us, Erving Goffman's analyses of social behaviour and interaction are useful for understanding digital phenomena. This paper reviews Goffman’s contributions, notably in relation to dramaturgy, performance and presentation of self to argue that his ideas are salient for scholars interested in studying the Web and digital communication about health related matters. This paper draws on recent work which has applied Goffman’s ideas to the digital field and goes on to suggest how, in my own work, his concepts can be used to shed light on new health behaviours such as the online purchasing of medicines.

Goffman’s contributions

Goffman’s work is often located with symbolic interactionism although he might not have aligned himself with this approach. Symbolic interactionism focuses attention on patterns of communication and interpretation between individuals and suggests that society and individuals are created out of social interactions. It is an approach which posits that social interaction is mediated by symbols – such as language – which enable individuals to interpret each other’s meaning and actions. Linked with the work of key theorists George Herbert Mead and Charles Cooley writing at the turn of the last century, symbolic interactionism focuses on our perception of how others (society) see us (Cooley 1902: 17) and how we reflexively see ourselves, or as Mead put it: ‘one does respond to that which he addresses to another and where that response of his own becomes a part of his conduct, where he not only hears himself but responds to himself ’ (Mead 1934: 139).

Goffman used these ideas to examine mundane and everyday social interactions such as walking on the street and getting in a lift. He was especially interested in understanding behaviour that occurred in public places and ‘regulation’, that is how people handle or manage themselves in face-to-face interactions with others. Goffman developed the idea of dramaturgy – using the metaphor of drama to understand these interactions. He suggested that presence of others – the audience – allows individuals to adjust and perfect their behaviour, a technique he termed ‘impression management’ (Goffman, 1959).

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1 Thomas J. Scheff, a student of Goffman, claims that for the majority of his career, Goffman was a symbolic interactionist, following in the tradition of Cooley. Scheff asserts that up until 1974 (and Goffman's work on frame analysis) the only sustained theoretical structure in Goffman's work followed Cooley's supposition of the looking-glass self. Just as Cooley had assumed shared awareness in interactions, Goffman also placed such importance on common comprehension with positive or negative states of consequence. However, Goffman studied the management of embarrassment or shame (Goffman, 1959).
How Goffman's work can be used to think about purchasing medicine online

In his later writing, Goffman (1981) looked at advertising and interactions where parties were not co-present, but most of his work explored face to face interactions. All of his writing predicted the emergence of now commonplace digital forms of interaction – including email and the Web. However Krner (2009:17) has argued that Goffman’s work can be useful for understanding digitally mediated interactions. He has used his ideas to explore ‘synthetic situations’ such as digitised stock market trading where buying and selling shares are not necessarily interactive parties meeting in person but instead interacting parties meeting in time rather than in a place’ (Krner, Cetina, 2009:79).

In addition, Goffman’s ideas have been applied to mobile phone communication. Rette (2009) used ideas about presentation and etiquette to understand the interactions on social networking sites and email messaging, showing that, like face to face interactions these were governed by normative expectations. In a similar vein, earlier work by Spitzberg (2006) about computer mediated communication drew on the dramaturgical perspective offered by Goffman (1959, 1961) to focus on the ways people present themselves in online communities.

My research examines web forums to see how people interact and communicate about buying prescription medicines (i.e. therapeutic pharmaceuticals rather than supplements). While many medicines are subject to national, state or federal regulation the Web may be used to bypass these restrictions, opening up access to online interactions and emergent opportunities for purchasing. Online purchasing can be ‘impersonal’ – buying medicines can be done without needing to visit a health, pharmacist or prescriber and may circumvent national regulation.

Web forums are online discussion groups where communities of people can converse about topics of mutual interest or problems and issues. They are comprised of strings or threads that begin with an initial post, the response to that initial post, and further replies. Others can respond with posts of their own, and multiple posts are connected together to create the threads/threads. Data obtained from web forums allows us an opportunity to explore how digital interactions are accomplished. In this study the posts were manually catalogued and thematically analysed.

Centrair’s concept of dramaturgy seems particularly relevant to the study of these web forums where there are back regions that are public and private and small localities for buying and much more public areas which anyone can view. What is interesting about the boundaries between private and public spaces is that they are not necessarily meant for those outside of the forum community. At other times members may present expertise, for example, for the article ‘I stay away from the glass. This is our cultural work in progress’ (Turkle 1995:177).

Viewed from this perspective the Web can be understood as a digital space where identities are constructed through computer-mediated interactions and where distinctions between public and private online spaces are virtual rather than physical there are clear boundaries (Surana, 2005) and the technology behind SMS (text) and email messaging, showing that like face to face interactions these were governed by normative expectations. In a similar vein, earlier work by Spitzberg (2006) about computer mediated communication drew on the dramaturgical perspective offered by Goffman (1959, 1961) to focus on the ways people present themselves in online communities.

Goffman argued that social interaction is structured [a classic example being the observation that when a patient is asked at the start of a consultation “how are you?” there is often an evaluative response “fine, thank you...” (Barrat, 2005). For smooth working of society individuals may suppress their feelings in order to convey a view of the situation which other people may, at least temporarily, accept. However, this does not exclude the possibility of real agreement (Goffman, 1959:18-21).

Based on field research in the Shetland Islands (1959) and in asylums (1961) Goffman argued that face-to-face transactions and interactions are carefully managed and performed for others to present a particular impression. If an individual comes in contact with other people s/he attempts to control or guide the impression that others form, using different compliments, insults and signs. Goffman argues that people constantly construct and reconstruct these presentations, partly adjusting to the reaction they receive and partly in response to perceived social rules for behaviour in each setting. Goffman used his concept of stigma (1963) to show how those with the failure or the inability to comply with societal norms may lead to negative reactions.

He defined stigma as ‘the situation of the individual who is disliked as a consequence from full social acceptance’ (Wright, 1960). This might occur in relation to a visible stigma such as a scar or functional disability, or because the individual failed to conform to social norms. Goffman showed how stigmatized persons struggled to reconcile gaps between their perceived identity and the identity expected by the social group.

Some identifying information such as links to websites, have been removed from the data.
Goffman’s concept of stigma can also be used to explain how the Web influences the management of virtual and offline identities. In the scenario of buying medicine people may feel stigmatised due to the condition or reason for purchasing such medicines – and the Web may allow them to manage this stigma by making less visible purchases. The need to manage stigma is likely to be condition and medicine dependent; someone who is very overweight may fear being labelled as greedy and might use the Web to buy slimming pills to manage this problem. Especially where some medicines are not available via legitimate means – if for example they were banned in the individual’s country, forum users may attempt to manage their presentation of self, by justifying breaking rules.

I have bought kamagra from some web sites in the past. The UK Government shut down most (or maybe all) of the UK sellers. Since the Government has done this, many ‘offical’ chemists are charging extreme prices in this country (and much cheaper in other countries). Everything is inflated in the UK. I realise that some sites are now back up and running. Can anyone suggest any good suppliers of kamagra?"

‘Does anyone know how to get hold of reductil in the UK? Tried many websites, but had no luck. Found the tablets amazing and really worked for me!’

‘I used to take reductil but they’ve stopped selling it in the UK. Does anybody know of any other places that I might be able to get some?’

Hello, I have been taking reductil for one year. Its nearly impossible to find online anymore and has been withdrawn everywhere as most of you know. I have found people selling it on ___, and I’ve also tried ___.

Goffman, in his work, showed how patients managed damaged or stigmatised identities. The discussions above offer examples of how people manage presenting the self as subverting medicine regulation, but being open about this and providing less incentives to suggest they are somehow still respectable.

The application of Goffman’s concepts to online interaction and discussions about buying prescription medicine within web forums informs our understanding of how those individuals who buy medicine from the Web present themselves. This may in part be influenced by the various affordances of the Web, and the private, backspace, spaces it opens up. My initial explorations of web forum discussions suggest that the boundaries between public and private are not fixed on the Web, sometimes the Web enables anonymity but at other times users are surprisingly open and appear less self-conscious of their multiple public and private spaces. Opportunities for copresence on the Web also appear to be increased, both in terms of the number of people who might see a particular discussion, but also because the Web provides a permanent trace of these conversations. I have suggested that some uses are open about behaviour that may be considered deviant, but at the same time others may use the Web to move their presentations of self from the public to the private regions. The Web appears to offer new ways to manage ‘the self’ or selves and potential stigmatisation.

Conclusion

In this brief paper I have suggested that Goffman’s ideas are useful for studying online interactions – in particular for exploring buying medicines online. The concept of dramaturgy, where people work individually and collectively to present a version of reality in performances can be usefully applied to understand behaviours on the different platforms and spaces of the Web. The concept of presentation of self helps us explore and compare offline and virtual identities and performances and it appears that the Web removes or reduces some of the perceived societal expectations and norms allowing the presentation of different identities and new ways of managing these. My initial explorations of web forums have suggested that people are using the Web to discuss buying medicines online. The Web may allow people new opportunities to avoid stigmatisation and manage their illnesses and medicine purchasing in a private or backspace space. Yet the forums also offer highly visible, semi public accounts of these purchasing behaviours, some of which may transgress regulation or societal norms. I plan to pursue this work by developing my use of Goffman’s theorisations to explore empirically, the phenomena of purchasing medicines on the Web. I hope that this paper has indicated some of the ways that Goffman’s work, undertaken in a pre-Web era – can be fruitfully applied to the digital era and can continue to help us study health-related behaviours.

References


Bibliography


