Framing depression on Chinese social media: The role of media organizations, mental health institutions, and a citizen support group

Yuan Zhang, Westfield State University
Yifeng Lu, Chinese Petroleum University
Yubin Wang, Jiangxi University of Finance and Economics
Yan Jin, University of Georgia

Study summary

We examined/analyzed:

- How the health issue of depression…

- was framed (i.e., highlighting certain aspects)…

- either thematically (e.g., highlighting social context & broad pictures) vs. episodically (e.g., highlighting personal stories and individual anecdotes)…

- by media organizations, mental health institutions, and an online support group…

- on Weibo, the Chinese version of Twitter
Why depression?

• A leading public health problem in China
  • 1/3 (100 million) of the world’s 322 million depression sufferers
    • 2\textsuperscript{nd} largest burden on public health (after cardiovascular diseases)
    • 200,000 attempted suicides per year by depressed individuals

• And yet…
  • Only 10% diagnosis rate
  • 5% of those diagnosed have ever sought mental healthcare
  • 1% treatment rate
Stigma as a major barrier to mental healthcare in China

- **Historical context**
  - Political idiosyncrasy (1949 – 1980s)
  - Depression not a disease category till 1980s (instead, treated as “neurasthenia,” or “weak nervous system”—somatization as protection mechanism)

- **Cultural context**
  - Collectivist person perception: identity as part of group/collective
  - Values group wellbeing & emotional moderation/control based on relational demands
  - Mental disorder/emotional distress
    - Disrupts group/interpersonal harmony
    - Brings shame to one’s in-group
Stigma and the framing of health

- Stigmatization: accomplished through communication and framing
  - By definition, it’s about the knowledge, recognition, and communication of discrediting marks and devaluation of marked members within a community

- Framing of health issues
  - Episodic framing: highlighting the personal, anecdotal, & isolated
    - Examples: individual events, isolated anecdotes, & personal stories
  - Thematic framing: highlighting the societal, contextual, & systemic
    - Examples: social determinants of health, widespread trends and consequences, statistical evidence, research reports, community-level & collective solutions, policy-based remedies

- Framing effects on public perception & stigmatization
  - Episodic framing: condition the public to think in terms of personal responsibility for health (Major, 2009) → stigmatization (Weiner, 2006)
  - Thematic framing: trigger sympathy and social support (Jin et al., 2015); alleviate stigma (Corrigan et al., 2002)
Framing of depression

• Depression framing in the West
  • Episodic framing (personal storytelling) predominated in 28 American TV news stories covering postpartum depression aired in 2007 (Dubriwny, 2010)

  • Thematic framing predominated in 359 print news articles and 303 broadcast and cable news stories published in the US from 1980 to 2012; however, decreasing tendency of thematic framing over time (Zhang et al., 2016)

• Depression framing in China
  • Thematic framing predominated in 527 print news articles published from 2000 to 2012; however, increasing tendency of episodic framing over time (Zhang, Jin, & Tang, 2015)
Framing depression: why media?

• Primary source of info about mental health issues (Yankelovich, 1990)

• Shape public perceptions and attitudes about mental disorders and afflicted individuals (Granello & Pauley, 2000)

• The professional routine of framing issues (general/social, health, depression) by highlighting certain aspects over others (e.g., thematic vs. episodic framing) (Entman, 1991; Kim & Willis, 2007; Zhang et al., 2016)
Framing depression: why mental health institutions/professionals?

- Provides disciplinary, authoritative, & scientific understanding for a complex & under-recognized issue

- Primary source of mental health-related knowledge for the media (Len-Rios et al., 2009)

- Professionals framing of health problems: reflection of training and disciplinary knowledge—individualized (trained to provide one-on-one help) & medicalized (dominance of biomedical paradigm) (Schon, 1983; Lloyd & Hawe, 2003)
Framing depression: why the online support group?

- Patient narratives: navigate illness experience; attempt to cope with & dispel social stigma (Sayre, 2000)

- Chinese patient narratives: largely missing from public discourse—the “invisible victims” (Dong, Chang, & Chen, 2008)

- Increasing popularity of online and social media support groups—provide anonymity and social support (Shi & Chen, 2014)
Framing depression: why Weibo?

• Web-based interactive communication: increasingly important source of mental health info (Eysenbach & Kohler, 2004); can change stigmatizing responses (Kim & Stout, 2010)

• Social media (SNS): facilitate online issue networks through variety of interactive user engage devices (Huang & Sun, 2014); lack of info vetting can also reinforce/spread existing stigma

• Weibo: China’s 1st & most popular SNS w/ over 300 million users; combines features of Twitter, Facebook, & BBS to enable multi-modal social networking
Method: sampling

• Selecting accounts
  • Top media organizations: Weibo’s 2012 & 2013 ranking lists (based on # of followers, level of activity & influence) → 2 newspaper accounts, 2 broadcast TV network accounts, & 2 news magazine accounts
  • Mental health institutions: we used the same criteria used by Weibo → 2 top accounts
  • Online support group: only one account had large enough # of posts for random sampling

• Retrieving posts
  • Timeframe: 1st day of posting—June 26, 2015 (retrieving started on July 15, 2015 to allow time for user engagement data to post)
  • Keyword search: 抑郁 (Chinese for “depressed) which also yielded posts including the word of 抑郁症 (Chinese for “depression”)  
  • Total # of unique posts retrieved: 1,077
Method: measures & analysis

• Measures: thematic and episodic framing
  • Development of measures: prior research (Zhang et al., 2016); inductive examination of the data
  • Thematic framing: issue placed in social context; focus on big pictures; use historical data, statistics, expert analysis, research findings; information-oriented
  • Episodic framing: issue presented as specific events/cases, isolated anecdotes, or personal stories; use storytelling devices such as characters, plots, conflicts and resolutions; human interest-oriented
  • 1-5 scale anchored by “thematic only” and “episodic only”

• Reliability & data analysis: pre-test on random selection of 10% \( n = 107 \) of the sample yielded Cohen’s kappa of 0.793; subsequent coding followed by data analysis using one-sample and independent-samples t-tests
Main findings and conclusions

- Weibo framing by both media organizations and mental health institutions showed more thematic than episodic tendencies.

- Compared with mental health institutions, the online support group’s Weibo framing was more episodic, emphasizing individual cases, plights, and needs.
Thank you! Questions?

Yuan Zhang, Westfield State University
yzhang@westfield.ma.edu

Yifeng Lu, Chinese Petroleum University
luke1978@gmail.com

Yubin Wang, Jiangxi University of Finance and Economics
cindywyb1013@gmail.com

Yan Jin, University of Georgia
yanjin@uga.edu