e-comms

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This paper was prepared and settled jointly by the members of ADRAC.

Communication and e-communication

The mapping of e-comms in Australia is an unknown field. E-comms itself (defined below), while now part of everyday life, is nevertheless a new field. This paper raises the questions of whether but also how mapping e-comms would contribute to the ADR field.

In this short and preliminary consideration about mapping e-comms used in ADR in Australia, 'e-comms' is taken to include all forms of electronic communication, including all forms of social media, email, phones, Instagram, Facebook, Whatsapp and all similar 'club' or closed communication systems. The characteristics that make them worth grouping together for study in ADR and mapping is that they are immediate, informal, informative oral, text or pictorial and can be accompanied by diagrams, documents, photos, messages. All have high degrees of flexibility of communication. Most are regularly used in and associated with ADR processes.

Communication in DR, as in life, can be conceptualised by form: oral, written and non-verbal. Oral communication is between speaker(s) and listener(s); written communication between writer(s) and reader(s); and non-verbal communication between speaker(s) and/or writer(s) and observer(s). All are part of DR.

E-comms is a subset of communication. E-comms, like communication in general, can be analysed according to a number of taxonomies of styles, elements and languages including for example formal and informal styles, emoticon and emoji languages as well as by form and other variables referred to below.

Why use 'e-comms'; won't social media do?

Communication is conducted in both real and virtual settings. While there is an accepted glossary to describe communication in real settings, consistent descriptive terminology for the field of virtual interpersonal communication is elusive. At present the terms 'social software', 'social media', 'social networking' and 'online comms' are used almost interchangeably. Even when terms are defined and distinguished from another, the distinction is often specific to a particular author and likely to be contradicted by another.

This paper uses a generic, collective term for 'online' and 'mobile comms': 'e-comms' namely communication through the internet and wireless as well as by platforms that rely on them.

Functional e-comms variables include narrowcast and broadcast; synchronous and asynchronous; regulated (by software such as Facebook etc) and unregulated (eg email).

Whose use of e-comms in DR could be mapped?

Data collected would record the use of e-comms in DR that is initiated and/or maintained by the DR practitioner. Data collected would exclude the use of e-comms that is initiated and used by participants, their personal support people or their professional support people independently of the DR practitioner. Also excluded would be initiatives of the DR practitioner to describe their practice, manage complaints or any other nonclinical purpose.

What aspects of e-comms in DR in Australia could be mapped?

If ADRAC decides to map the use of e-comms in DR in Australia the task may be to map 'DR and the use of narrowcast, synchronous and asynchronous unregulated e-comms': narrowcast due to the private nature of DR; synchronous and asynchronous depending upon the style of DR eg shuttle, together; and unregulated because the current high-tech social software seems to be aimed at social networking not at problem-solving.

There are numerous aspects of e-comms and DR that could be mapped. Three examples follow.

To describe the use of e-comms in DR in Australia ADRAC could:

- ask DR practitioners, perhaps grouped according to facilitative, advisory and determinative DR practitioners, whether they use oral, written and/or non-verbal e-comms then map the responses.
- ask DR practitioners in what percentage of DR they use all three, oral, written and non-verbal or other combinations in their clinical practice and map the outcomes. The measure of use could be per client/per hour of DR/per week etc.
- ask DR practitioners when they mostly (80%) use e-comms: before, during, after the DR process and map the responses.

There are many more questions regarding the use of e-comms in DR in Australia that could be mapped.

Sample responses

Data sought: Which styles of practice use which categories of e-comms?
Possible response: I am a facilitative practitioner; I use oral and written e-comms.

Data sought: In what percentage of DR matters do practitioners regularly use one style of e comms; two styles of e-comms; three styles of e-comms?
Possible response: I use written e-comms in every mediation; oral e-comms in less than 5% of mediations; and non-verbal e-comms in 0% of mediations.

Data sought: When in the DR process do DR practitioners mostly use e-comms: before and/or during and/or after the DR process?
Possible response: I use e-comms before and during the mediation process.

Why map DR in Australia?

Prof Ian Chubb AC, Australia's Chief Scientist, in the introduction to 'Mapping the Humanities, Arts and Social Sciences in Australia' October 2014 p. iv explains the

importance of mapping. Subsequent chapters describe the process and outcomes of mapping.

In the following excerpts Prof Chubb is quoted as substituting 'DR' for HASS; 'justice system' for education system. Imagine the contribution to DR in Australia if ADRAC could say, as Prof Chubb has said:

> Mapping and benchmarking are never easy or popular tasks, particularly in the complex ecosystem in which we function. There are limits to our data, and different views on how it to be presented.
>
> That should not defeat us, but remind us of the need to work together.
>
> This report provides the robust and comprehensive data to serve both practitioners of DR and those who rely on their skills. It is a timely reminder of the essential place in building Australia's future of DR.
>
> I trust it will, at the same time, spur on our efforts to raise the bar higher.
>
> p. 3
>
> The following chapters provide detailed analysis of the current condition of DR practice
>
> Each chapter concludes with a discussion of critical issues for the future. The data presented, and the analysis performed, within these chapters is based on a substantial body of background data that is collected in the appendices.
>
> Finally, in addition to these detailed data, the appendices contain an account of the methodology and the sources for this report, as well as an outline of the areas this research has revealed is likely to repay further investigation in the future.
>
> p. 6
>
> The nation needs a solid and reliable evidence base from which to make decisions about its DR capabilities…

Our approach to data collection, analysis and capability mapping draws upon the Office of the Chief Scientists report Health of Australian Science (2012)

This report maps DR within the context of the justice system ...

The data presented in this report is mostly gathered from Australian sources, including publicly available data and customise data access on request from the relevant departments and agencies.

How might the role of DR in the justice system change if decisions were evidence-based? Expressed in the language of DR, if decisions were reality tested?

and equally importantly

How might the role of DR in the justice system change if decisions are not evidence-based; in the language of DR, if decisions are not reality tested?

If ADRAC were to map, perhaps using an infogram, the numbers of facilitative practitioners, advisory practitioners and determinative practitioners, first according to 0-5, 6-10, 11-15, 16+ years' experience and then according to their use of e-comms: oral, written and non-verbal e-comms; frequency of use; purpose of use; timing of use.