



## Letter to the Editor

## Re-thinking social functioning in psychosis



## Keywords:

Psychosis  
Social functioning  
Construct validity  
Measures  
Inventories

Many people with psychosis struggle with social interactions and relations. The reasons vary from social anxiety or paranoia to negative symptoms and withdrawal. Face-to-face interactions may be limited and form barriers to working or attending school. In turn, this can lead to severe social isolation. A significant part of contemporary social life unfolds online (Torous et al., 2019a). Despite fewer contacts in the physical world, persons with psychosis often use social media (Alvarez-Jimenez et al., 2014; Highton-Williamson et al., 2015). Online social activity may play an important role in reducing isolation, enabling people to maintain social relations in spite of psychotic symptoms and their consequences. Also, digital technology may increase the quality of care by accounting for clinical heterogeneity and offering better predictive models (Liu et al., 2019; Torous et al., 2019b).

In a recent systematic review of social functioning measures in psychosis (Bjornestad et al., 2019), the general conclusion was that the measures need updating to increase their validity and relevance for current social life. The measures currently used are based on offline face-to-face interactions. Further, most were developed using, and aimed at, chronic inpatient samples. This arguably reflects the period in which they were developed (typically 1970–2000). Only 8 of the 58 measures were revised or developed after the advent of Facebook, and consequently are the only ones that are likely to include online social activity. Of these, only one assesses online social activity to any degree. However, psychometric limitations, and a lack of collaborative service user-based exploration, hamper its usefulness.

A revised framework for social functioning should incorporate the possibility that technologies such as social media change the nature of communication (Jasanoff, 2016). Compared with face-to-face contact, social media represents radically evolving platform structures and a more asynchronous form of communication. For example, it allows for anonymity and delayed responses (Kuss and Griffiths, 2011), making an escape from social consequences possible. However, it is unclear whether social media platforms require extra social flexibility or if they can facilitate communication for persons who may periodically have limitations in face-to-face social skills typically found in individuals with active psychosis.

Post-normal science is a conceptual framework developed for interpreting and applying scientific results in the science–policy interface, and tailored for situations where “facts [are] uncertain, values [are] in dispute, stakes [are] high and decisions [are] urgent” (Funtowicz and Ravetz, 1993). It is highly relevant for our current understanding of social functioning in psychosis. Post-normal science

argues that we should address uncertainty, assess quality, and justify practice by including extended peer communities. It could thus ensure the inclusion of social functioning elements perceived as important by persons with psychosis. Post-normal science may lead to an incorporation of online social life and a lower risk of implementing outdated or ecologically invalid models. This could facilitate more flexible care that is in touch with the actual challenges facing this group of patients. In addition, it could enable care to be tailored to each individual's communication habits, whether they prefer online or offline contact or a combination of both. As empirical research indicates that reducing social withdrawal is a key factor in preventing protracted psychosis, this framework could help reduce social isolation and suffering for many people.

## Contributors

JB conceptualized and wrote the first draft. All authors were involved in design, provided scientific oversight throughout the project, provided detailed comments about the letter across several drafts, and edited the letter.

## Declaration of Competing Interest

None.

## Acknowledgement

None of the authors have any conflict of interest nor received any funding for the submitted work.

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