"The importance of positive health assets from participation in 3D social virtual world communities to living and coping with long term conditions in the physical world"
Dr. Evelyn McElhinney, Glasgow Caledonian University
Mental Health Symposium 2019
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[2019/04/26 08:31] Carolyn Carillon: Hello everyone. Today's presentation is being transcribed so those without audio or who require text only can participate in real time. A little explanation about this service. Voice-to-text transcriptionists provide a translation of the key ideas discussed, NOT a word for word transcription. Voice-to-text services provide an in-the-moment snapshot of ideas and concepts, so that those who are unable to hear or to understand the audio program are able to participate in real-time. You will see the transcription in local chat. Transcription is provided by Virtual Ability, Inc. The transcriptionists are: Carolyn Carillon Elektra Panthar In the transcription record, speakers will be identified by their initials. KP: Kali Pizzaro / Evelyn McElhinney

[2019/04/26 08:31] Gentle Heron: Good morning everyone. I want to welcome all our guests at Virtual Ability’s eighth annual Mental Health Symposium. I’m Gentle Heron and I’m president of the nonprofit Virtual Ability, Inc. which hosts this conference. It is an international free professional conference which is open to the public and archived on our website. This year we are exploring the theme “Mental Health in the 21st Century: Digital Destruction or Support?” I’m sure everyone here has thought about the plusses and minuses of living with so much digital interaction in our daily environment. Our invited presenters will explore this topic from a variety of angles. I would like everyone to note that the material will be presented simultaneously in text and voice, for maximum accessibility. You can read more about the conference here: https://virtualability.org/mental-health-symposia/mental-health-symposium-2019/ But enough of this introductory stuff. Linda, please come up and introduce our first conference speaker.

[2019/04/26 08:33] Carolyn Carillon: <<transcription starts>>
TaterLinda Resident: Hello and welcome everyone to Virtual Ability's 2019 Mental Health Symposium. Thank you all for being here today. My name is Linda. In RL I suffer from several different Co-Morbid conditions stemming from Chiari Malformation Type. All of these drastically changed my self-sufficient, full and active lifestyle into one that has left me bedridden. All that Second Life offers helps me Socially, Emotionally and Sensory. It helps distract me from my pains. I feel like I am participating in life again. My memory and abilities are slowly taking ground again and I am very grateful.

Next, I would like to introduce: Dr. Evelyn McElhinney PhD Senior Lecturer at Glasgow Caledonian University (Scotland). Her research interests lie in the area of emerging and immersive technologies for health and wellbeing.

Her PhD was conducted fully within Second Life. She has also taught nurse practitioners within Second Life.

The topic of this presentation is: "The importance of positive health assets from participation in 3D social virtual world communities to living and coping with long term conditions in the physical world".

She will discuss findings from her PhD which explored understanding how people living with long term health conditions can use 3D virtual worlds to engage with place and people to maintain and protect their physical and psychological wellbeing in the physical world.

As a reminder: please do not type or talk while the speaker is presenting.

At this time I will turn the mic over to Dr. Evelyn McElhinney PhD.

Kali Pizzaro: Hi All, Thank you for coming today and to Linda for that great introduction. As Linda said I am going to be speaking about findings from my PhD which you can find here (McElhinney, E (2015) Living in 3D Social Virtual Worlds and the Influence on Health Literacy, Health Behaviour and Wellbeing - https://www.researchgate.net/publication/314506853_Living_in_3D_Social_Virtual_Worlds_and_the_Influence_on_Health_Literacy_Health_Behaviour_and_Wellbeing and extracts are included in this presentation.

Important to the context of this study is the understanding of what is defined as a positive health asset. This was important in this study especially with the diary data as I wished participants to tell me what were the assets that were important to their wellbeing not me dictate what was important.

The next slide most of you know but just in case we have some newbies. We know social VWs are multi-user with avatars and through research we know this helps with embodiment and the psychological feeling of presence ‘being there’ and social presence ‘being there with others’.

The multiple visual, auditory and interactive nature
of these ‘place’ and communication tools help with immersion. Here the research questions can be
seen, essentially I wanted to find out if being in social VW communities influenced people with long term health conditions (LTC) ability to live and cope with their LTC in the physical world. All participants were recruited, interviewed in SL using voice and text as I wished to be as inclusive as possible.

For the purpose of this study, a longitudinal (12-week) multiple case (people) study method was chosen to gain an understanding of not only the single case but also to enable cross-case comparisons (similarities and differences) to be drawn from all four case studies (Meyer 2001, Stake 2013, Sandelowski 2011, Creswell 2013, Miles et al. 2014, Yin 2014). Three methods of data collection were used, semi structured interviews, unstructured (free text) diaries (with images) and a social network questionnaire. These multiple methods allowed integrated data triangulation to gain different participant perspectives of the same phenomena over time. The SNA data was analysed using qualitative methods by integrating it with the other methods. This approach allowed visualisation of the structure of networks as well as a deeper understanding of why specific people in the VW would be important or influential to the participant’s ability to cope or live with their LTC in the physical world over time, as opposed to statistically analysing people’s networks for binary measures, such as the presence or absence of a tie, the strength of a tie, and the similarity of ego to alter as a snapshot in time (Borgatti et al. 2013, Rice et al. 2014). Two focus groups were also undertaken with 10 people.

Participants
Paula is an American white female aged between 51 and 60 years who is a cancer survivor.
Ann is a 41 – 50 year-old single white American female, who has had a complex regional pain disorder, caused by post-surgical complications, since age 27. This disorder causes severe burning pain, swelling, deformity and sensory and motor disturbances in one of her legs, requiring regular opioid medication to control her pain. Ann required assistance with the activities of daily living and, without assistance, is bedbound and housebound. She is also deaf.
John is a 51 – 60 year-old married white English male, had suffered an ischemic leg resulting in post-thrombotic syndrome (PTS) which left him unable to work in the physical world. He had initially worked in the VW, however, he had a stroke, leaving him with residual upper limb weakness and speech problems resulting in him being unable to continue his work in the VW. He also had diabetes.
His physical and cognitive disabilities (PTS and stroke) left him with poor mobility, cognitive difficulties (memory impairment), unable to drive and, essentially, housebound. Mary is a 51 – 60 year-old married white American female who had multiple long term conditions which required several regular medications to control symptoms. She was unable to work in the physical world due to her long term conditions which caused chronic pain, fatigue, occasional confusion, and poor mobility. She had previously been diagnosed with depression and post-traumatic stress disorder (PTSD) as a result of an abusive relationship in the physical world.

Findings Two main Themes – Sense of Belonging to place and to people  Belonging to place’ highlights how participants became emotionally attached to particular VW places which evoked positive, comforting memories. For all four cases the positive benefits of sense of belonging to place to their wellbeing resulted from the visual, sensory and immersive aspects of the VW, specifically in places that represented virtual nature. Edward Wilson defines biophilia as “the innate tendency to focus on life and lifelike processes” (Wilson 1984 p. 1). He particularly focused on human interaction with nature and argues that humans are genetically biased to experience positive mental well-being after interacting with nature. He terms this the biophilia hypothesis (Wilson 1984, Kellert and Wilson 1995). Thomas (2013, p. 12) argued that when we use metaphors of nature and scenes of virtual nature within technology we create “the innate attraction to life and lifelike processes as they appear in technology” and terms this Technobiophilia. The flowing images and quotes represent these restorative benefits

Belonging with People – Here you can see two quotes from the focus group participants and why the VW helped them to live and cope with their conditions and reconnect with their pre-illness bodies, overcome their physical world body constraints and improve their mental health wellbeing. The people from the case studies reported a symbolic feeling of belonging to a wider VW community which evoked feelings of comfort and protection which was particularly empowering for John, Ann, and Mary who felt they had no control over their physical world life. However the social network interview allowed participants to specifically state and rate the importance of particular people from their personal networks to their
ability to cope, and combined with the other data sources evidenced a sense of belonging to individuals and the collective benefit of communities as opposed to their sense of belonging to the VW as a place. The sociograms seen in this slide, show how each personal network is represented, with those deemed more important to the person’s ability to cope closer to the centre. Paula named 20 avatars; 13 females and seven males. Analysis of the data collected in the social network questionnaire combined with discussions of networks/communities or individuals in the interviews and diaries records revealed particular characteristics of dyadic (between individuals) relationships or communities which were important to Paula. These could be separated into two groups: Supportive Network – people who were important specifically as other survivors of chronic conditions, or who gave her emotional and psychological support and hope for the future in respect to coping with her own health; and Activist Network – those whom she saw as activists who were influential and motivating, and who she respected and held in high regard. These people inspired her to find the activist in herself which empowered her to feel she had something meaningful to offer back to the community.

John also wanted to connect with professional groups within the VW, however, he also wanted to have fun and socialise in the VW; thus his network also had two distinct groups; professional and social.

For Ann, the positive health outcomes of supportive friendships and networks in the VW enabled her to restore some of what she described as the ‘fundamental requirements of life’; for example, having friends, working, being educated, having fun, which led to an overall improved quality of life.

The subtheme - Building Resilience - Regaining Control - When discussing the consequences of their long term health conditions, participants consistently mentioned a feeling of loss of control in their physical world life and discussed how the VW offered multiple ways to regain control. They considered how they chose
to represent themselves via their avatar as one of the ways to regain control. John, Ann and Mary, who all had physical disabilities, used their avatar to mask their disabilities, which they could not do in the physical world, by presenting themselves as able-bodied, younger, attractive avatars. John described this as allowing him to partially return to his former physical self. They believed the ability to conceal their disability if they so wished protected them from the adverse consequences or people’s negative assumptions based on their disability.

Ann stated that, as in the physical world, she assumed that self-disclosure of her disability in the VW would lead to people “feeling sorry for her” (Ann, Second interview June 14) and she did not want their pity. She therefore told very few people in the VW about her disabilities, although she did not hide her deafness. She also enjoyed seeing her avatar dance, fly and walk; activities which she was unable to do in the physical world. Mary’s multiple health conditions had left her feeling that her physical body was prematurely aged and damaged. She believed she physically appeared ill and this had a profound negative effect on her body image and self-esteem she wanted to use her avatar to portray a virtual image of her pre-illness body, which she believed was attractive and healthy. This ability to view her avatar as healthy and attractive increased her self-esteem and she believed it had contributed to a reduction in her body weight in the physical world. Although Paula had no physical disability and her avatar appeared similar to her physical world appearance, she described the emotional affects her cancer had on her feelings about her appearance and how she thought the avatar may help people to take control of and re-examine their identity. This ability to feel embodied in their avatar and increased self-awareness allowed participants to make sense of, construct meaning and cognitively appraise interactions in the VW to positively reconnect with their sense of self in both worlds. A bi-directional appraisal and modelling of behaviour, emotional and social interactions, was seen by participants as a way in which to transform and re-negotiate their post-illness identities and reconnect with
their bodies, something they had struggled with for many years. Mary, John and Ann described the VW as a place that offered them choice, control, escapism and freedom from their physical world responsibilities and constraints caused by their multiple long term conditions.

Maintaining a purposeful life
One of the most consistently mentioned concepts to emerge from the data from all four participants related to a sense of loss of how they could meaningfully contribute to society. This included their ability to work, their status, sense of self and identity, and control over their hopes and goals for their life. However, they believed the VW allowed them to develop strategies to adapt to these losses and reclaim some of their pre-illness goals and set new goals, resulting in a sense of purpose and meaning to their VW and physical world life.

Core Concept
The VW features that participants considered important to living and coping with their LTCs in the physical world were multi-factorial. Living in the VW enabled access to a range of positive health assets that influenced the participants' health and wellbeing (McKnight and Kretzmann 1993, Ryff and Singer 1998, 2000, Ryff et al. 2004, Harrop et al. 2006, Morgan and Ziglio 2007, Eriksson and Lindström 2010, Seligman et al. 2013).

The following diagram illustrates a conceptual model of how access to positive health assets reflects Antonovsky’s (1979) theory of Salutogenesis (what keeps us healthy) two main concepts in salutogenesis are a Sense of Coherence (in simple terms this is about a mixture of optimism and control) and General Resistance Resources (the resources available to make movement from weak to strong SoC possible) this is reflected in my diagram where positive health assets offered by people and places in the VW led to positive health outcomes which contributed to building a strong SOC and moved people from a position of illness to wellness, and from a weak SOC to strong SOC; thus, increasing their
ability to live and cope with the LTCs in the physical world. There ends the whirlwind discussion of the findings from my second study. I think I have time for Qs?

[2019/04/26 09:08] Tredi Felisimo: ᵉⁿˢⁿᵉ ᵇⁿˡᵉˢⁿᵉ 舻ｓᵗ.*,(_,(_,*,('„'„')*,_,*) œuve
           APPLAUSE!!!
[2019/04/26 09:08] Sarralie: ★ APPLAUDS ★
[2019/04/26 09:08] Valibrarian Gregg: applause!!!
[2019/04/26 09:09] Kali Pizzaro: Thank you
[2019/04/26 09:09] Linda (TaterLinda): ~ ~ applause ~ ~
[2019/04/26 09:09] Elektra Panthar: /me Applauds!
[2019/04/26 09:09] Zinnia Zauber: Thank you!
[2019/04/26 09:09] Buffy Beale: Cheering, great presentation!!
[2019/04/26 09:09]Namaara MacMoragh: YaY!
[2019/04/26 09:09] Kali Pizzaro: Thanks Kal
[2019/04/26 09:09] DrMCsqquared: Very exciting!
[2019/04/26 09:09] Dorie Bernstein: Great, Kali! Thank you for your work on this!
Thank you so much for presenting to us today.

[2019/04/26 09:09] Gentle Heron: QUESTION: What should we tell nonbelievers?
[2019/04/26 09:09] Carolyn Carillon: KP: I think we just have to keep spreading the word
Last week I presented this in New Zealand
I've done a webinar
And I've tried to promote
I played your video, Gentle, about what SL meant to you
I should have just spoke to you (laughs)
It's really about just keep going
In the UK, the Stroke Association have built their own virtual world with fantastic results
In a way, although they've created their own virtual world, it doesn't matter
It shows others the possibilities
so keep spreading the word

[2019/04/26 09:11] bowmanspartan: I love the focus on "sense of place" -- it's been a recent area of my own research. I am curious to know if you had a sense of the (a) emotions that folks were feeling and (b) what objects on "things" in the space folks attached their emotions to?
The quotes I've selected are only a small amount
As you know, in qualitative data, there are a lot of quotes
The participants were very expressive about the meaning of the virtual world and the places they went. The interesting part about doing research in, not on, virtual worlds is the ability of people taking part to give you an image and you can teleport to the area they're talking about and feel some of the emotions they attach to the place that allowed me to have a much deeper understanding and an ability to analyze that from a qualitative perspective that's unique to virtual worlds.

[2019/04/26 09:13] Tredi Felisimo: AMEN!!!!!!
[2019/04/26 09:13] Dorie Bernstein: Yes!!!

[2019/04/26 09:13] Carolyn Carillon: KP: one thing ... if you're going to do research in or about virtual worlds you need to have used them for at least a year you need to know the language the culture you need to be able to navigate the world yourself and understand the emoticons people use or people will know that you don't really understand this place I'm a wee bit evangelical about that but I think it's important
[2019/04/26 09:14] bowmanspartan: Thanks for this! I've been following players of Fallout 76 for nearly three months (and playing myself), and this is all very useful. Thanks!
[2019/04/26 09:14] Tredi Felisimo: Good ethnographic practice

[2019/04/26 09:14] Carolyn Carillon: [09:14] Buffy Beale: QUESTION: Will you be doing any follow up with your participants in the future to see if SL continues to have a positive affect on their lives?
[2019/04/26 09:15] Carolyn Carillon: KP: Buffy, I would love to do more research but it's a timing issue I'm busy The people had been in SL for several years

[2019/04/26 09:15] Gentle Heron: [09:15] Kal Kayo: Question - Do you plan to/have expand your research outside of Second Life. Like VR chat or other virtual settings?
[2019/04/26 09:16] Carolyn Carillon: KP: People are starting to write about that but they're forgetting about the historical research in SL I think we would find very similar positive assets It's about the people and the environment
and the ability to feel immersed
[2019/04/26 09:16] iSkye Silverweb: ability to feel not isolated!
[2019/04/26 09:17] Carolyn Carillon: KP: We have to remember when we're looking at these other areas, that we don't forget about the other research that's been done in SL
[2019/04/26 09:17] Kal Kayo: Thank you very kindly
[2019/04/26 09:17] Carolyn Carillon: KP: Aye, thank you

Gentle Heron: [09:14] DrMCsquared: Q @ Kali: Hi Kali-Thank you for that great presentation! I'm wondering about how we as scientists can make sure we look at and report possible negative aspects of virtual worlds?
[2019/04/26 09:17] Carolyn Carillon: KP: I think you just have to do the research Initially I said, just tell me what helps you or doesn't It could have been negative also People did tell me negative stuff but they minimized it One person had a bit of an issue so she created a new avatar I don't see SL as a utopia but there needs to be choice and this gives people a choice
[2019/04/26 09:18] Dorie Bernstein: agreed
[2019/04/26 09:18] DrMCsquared: Thank you!

[2019/04/26 09:18] Gentle Heron: [09:16] Xuna Demonia: I can participate, have multiple sclerosis 30 years, having other friends with MS, I've been in SL 11 years
[2019/04/26 09:19] Carolyn Carillon: KP: I'm not recruiting at the moment but I'm happy for people to friend me and send a message
[2019/04/26 09:19] Xuna Demonia: ok
[2019/04/26 09:19] Carolyn Carillon: KP: thank you Xuna for coming forward I think it would be great to contact people The generosity of time at times it was difficult to stay online to talk or type for over an hour that was phenomenal it was really quite humbling people were glad that someone was listening I think the increase in critical mass is starting to change the tide even if VR is the thing of the day it's still talking about very similar psychological processes so the more we do this research, the more this will come through I'd love to do more research
[2019/04/26 09:20] Tredi Felisimo: Thank you so much for that!
[2019/04/26 09:21] Zinnia Zauber: We are all in this together! <3

[2019/04/26 09:21] Gentle Heron: [09:19] Hope (hope4satobs): Question - I am very interested in this report to have in my charity...Can you please put the url on the screen put in local so I can click on it?
Carolyn Carillon: KP: Sure
Give me a second
Hope (Hope4Satobs): Thank you very much!
Carolyn Carillon: KP: There was obviously much more depth
she can take excerpts
I just have to go to my researchgate
unless someone can scroll back and get it
(singing : ))
I'm so glad I'm over my cold
Yesterday my voice was more husky
Ok, I've found it!
Kali Pizzaro: https://www.researchgate.net/project/Thesis-PhD-
Living-in-3D-Social-Virtual-Worlds-and-the-Influence-on-Health-Literacy-Health-
Behaviour-and-Wellbeing
Carolyn Carillon: KP: If someone could save me this transcript,
that would be amazing
DrMCsquared: smiles
Gentle Heron: You are a nurse and nurse educator, so this is a
great question.
DrMCsquared: I like the idea of balancing positives and negatives to counter
some of the more medical views.
DrMCsquared: Well, views of disability but also of VW
Carolyn Carillon: KP: Yeah
I think we probably have quite a lot to learn
We still have ...
there are fantastic people
but we focus on a biomedical view
the new view is the focus on what keeps us healthy not what keeps us ill
just like in our communities
we do have to make sure that when we look at people with disabilities, we do have
to focus on ability
we need to look at what makes a community strong and good and gives a sense of
place and belonging
not the deficits
from our ivory towers, we tell people what they need to do
the community needs to tell us
that's why I was trying not to influence people
Carolyn Carillon: KP: people would often ask what they should
put in their diary
I said, put what you want
it was shopping, dancing, having fun
these were all the things people felt were missing from their life
I've slightly deviated from the question (laughs) but I think it's important to say
DrMCsquared: Wonderful!
I need this transcript!
Carolyn Carillon: Gentle: the transcript will be available
Gentle Heron: [09:25] bowmanspartan: YES! We are often so quick to "pathologize" otherwise normal behaviors. Thanks for this.
[09:24] DrMCsquared: Well, views of disability but also of VW
[2019/04/26 09:27] Carolyn Carillon: KP: absolutely
I think that's important, Nick
I think we often pathologize other behaviours
but if it's not doing us harm, who cares
if you want to dance in the middle of the street, who cares? (laughs)
[2019/04/26 09:27] bowmanspartan: =)
[2019/04/26 09:29] Dorie Bernstein: amen and amen
[2019/04/26 09:28] DrMCsquared: laughs
[2019/04/26 09:28] Carolyn Carillon: KP: I think it is about a drip drip drip of turning people's minds to the virtual worlds
the media doesn't help
they prefer to focus on the negative
it's not a utopia but it's a world with people
and people are complex and different
and some are not nice
[2019/04/26 09:28] iSkye Silverweb: key phrase "with people"
[2019/04/26 09:29] Gentle Heron: Right iSkye!

Gentle Heron: [09:20] Shyla the Super Gecko (krijon): I wish we could mail this study to every professional who is so worried about us becoming part of the 'screen' generation.
I'm trying my best to present it as many places as I can
Many of you hopefully find this is transferable to your life
many of the quotes
you can relate to
many people often see all of this from their own perspective
instead of thinking about it if they had a disability
a number of people in New Zealand said OMG I didn't think about it like this
I think it's fascinating
this is an area rich for research
it's another area that people find helps their health and wellbeing
health practitioners only spend a short amount of time with people
people often have to cope on their own
this place gives people a choice
[09:29] Tredi Felisimo: I always remind folks that we're humans at the keyboard - we bring all our human traits here too - good bad and ugly
[2019/04/26 09:30] Tredi Felisimo: oh my! LOL
[2019/04/26 09:31] Carolyn Carillon: KP: I would say that's absolutely true, Tredi
you and everyone here would know that better than most
We have to accept that any place will have the good bad and the ugly
but if we can as we do in the physical world
pull ourselves away from the negativity
and towards positive networks
positivity can go through the network
[2019/04/26 09:31] Tredi Felisimo: SO true!

[2019/04/26 09:31] iSkye Silverweb: the coolest thing is the ability to connect, really connect, with people regardless of distance or time, and realising other people out there share many of the same feelings and experiences. It is enormously affirming to learn that you are not alone in what you experience.
[2019/04/26 09:32] Gentle Heron: agrees with iSkye
[2019/04/26 09:32] Tredi Felisimo: Hear! Hear!
[2019/04/26 09:32] Rhiannon Chatnoir: I absolutely agree with that!!
[2019/04/26 09:32] Carolyn Carillon: KP: one of the things about virtual ability and all the wonderful mentors like iSkye is the ability to connect they are so generous and altruistic it's a safety net when people come into SL People should have a list of the good guys "click here and you'll go to the good guys" "here are the people who will keep you safe"
[2019/04/26 09:33] Rhiannon Chatnoir: that through those positive people, communities, and connections - we are all stronger :) W
[2019/04/26 09:33] Tredi Felisimo: almost like a "rating" system
[2019/04/26 09:33] Valibrarian Gregg: yes- a library of authentic communities :) working on it!
https://communityvirtuallibrary.org/virtual-worlds-database/
[2019/04/26 09:34] Orange Planer: Authentic virtual community. Doesn't that sound odd?
[2019/04/26 09:34] iSkye Silverweb: not at all, Orange. Virtual is just another dimension of real!
[2019/04/26 09:34] Valibrarian Gregg: may sound odd Orange- but we live in digital culture- authenticity is essential even if hard to find
[2019/04/26 09:33] Carolyn Carillon: KP: Val, another fantastic advocate and activist
[2019/04/26 09:33] Rhiannon Chatnoir: you are a great advocate too kali <3
[2019/04/26 09:34] Carolyn Carillon: KP: It's wonderful to see so many of you here still doing this work I keep hearing that SL won't be here next week but the people are here
[2019/04/26 09:34] Tredi Felisimo: To infinity and beyond! :)
[2019/04/26 09:34] Kal Kayo: yeah I keep coming back like a boomerang

[2019/04/26 09:32] Lousonna: As with any pioneering research work, one of the main challenges is perhaps to make people (the ones who relate and the ones who don't and are always a majority) realize there is a whole range of "possibilities" outside their usual "frame" of mind.
[2019/04/26 09:33] Gentle Heron: agrees with Lousonna
Carolyn Carillon: KP: Anyone can contact me
Gentle has my email
you can friend me here
drop me a line
I'm not on as much as I would like
but I'm in email
I can always jump in

DrMCsquared: Thank you so much, Kali! It's so good to hear
this presentation.

Buffy Beale: Nice going Kali, awesome presentation!
Hope (Hope4Satobs): excellent presentation!
Zinia Zauber: Thank you so much!!
Gentle Heron: Thank you Kali, this was a fantastic way to open
our conference. You are always such a positive speaker. Thank you so much for
sharing your work here and so many places in RL. You are an excellent
ambassador.

Carolyn Carillon: KP: Thank you Gentle
Coming from you, that means a lot
Gentle, thanks for inviting me on
I'm delighted to be here

Delightful Doowangle: Wish we had a nurse like you Kali in
every university. Imagine the impact! Thank you.
Buffy Beale: So true Delightful!
Gentle Heron: so right Delightful
Marylou Goldrosen: We have been Empowering
Disenfranchised people on Floaters in real life for 10 years and upload their artworks
to Nonprofit Commons, Thank you!
Kal Kayo: Thank you for your time
DrMCsquared: applauds
Eme Capalini: Great job!

Carolyn Carillon: <<transcription ends>>