

## Videoconferencing more confusing for decision-makers than face-to-face meetings

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Although videoconferencing has become a billion-dollar substitute for flying business people to meetings, it leaves distant participants less likely to make sound judgments about speakers being viewed over a screen, according to a study published in a journal of the Institute for Operations Research and the Management Sciences (INFORMS).

"Videoconferencing in the Field: A Heuristic Processing Model" is by Carlos Ferran of Pennsylvania State University Great Valley and Stephanie Watts of Boston University. It appears in vol. 54, number 9 of the INFORMS flagship journal *Management Science*.

The researchers find that attendees of videoconferences must work harder to interpret information delivered during a conference than they would if they attended face-to-face.

A field study of medical professionals reveals differences in information processing: participants attending a seminar via videoconference are more influenced by the likeability of the speaker than by the quality of the arguments presented, whereas the opposite pattern is true for participants attending in person.

"Important business decisions may suffer if videoconferencing is used to make them without adjusting the process to take its differences into account," says Prof. Ferran.

Professors Ferran and Watts offer guidelines for understanding when



videoconferencing is most appropriate and for improving the design of videoconferencing equipment:

- -- Videoconferencing may not be appropriate for decision making when some stakeholders are present face-to-face and others attend via video, because these two groups are likely to process information differently.
- -- Videoconferencing equipment may be improved by the addition of features that reduce cognitive workload, such as support for turn taking, audio localization, and personal distance location.
- -- Videoconference presenters can use heuristic cues to increase the influence of their message.

The research was conducted in a medical setting. (The name of the medical organization was not released by the researchers).

Medical professionals were surveyed as they attended 1 of 19 different live interactive seminars, either face-to-face or via videoconference. The seminars spanned a 12-week period, comprising part of the teaching activities of an urban healthcare consortium. Each interactive one-hour seminar was delivered live by a different physician in a large auditorium, followed by questions and answers. These seminars were simultaneously broadcasted via videoconference to a number of smaller sites. Both face-to-face and remote attendees could ask questions. Attendees were primarily residents, attendings, and local physicians specializing in pediatrics, psychiatry, or orthopedics.

Source: Institute for Operations Research and the Management Sciences

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