ПСИХОЛОГИЧЕСКИЕ ИССЛЕДОВАНИЯ

PSYCHOLOGICAL STUDIES

DEVELOPING POSITIVE IMAGE OF HEALTHCARE PROFESSIONALS IN THE U.S. SOCIAL MEDIA DISCOURSE

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One of the key indicators of the qualitative assessment of the health-care system is the integral indicator of the level of population satisfaction with the medical services provided. Satisfaction with medical assistance is a result of the ratio of patient expectations and received medical care, depending on a number of subjective sensations and objective factors. The article considers the representation of doctor (physicians), pharmacists (druggists) and other healthcare professionals in the American FB groups and other social media networks.

***Aim.** The purpose of this work is to study the representation of doctor (physicians), pharmacists (druggists) and other healthcare professionals in the American Facebook groups and other social media networks. It analyzes the main techniques of developing positive images and perceptions of the medical workers on the example of the American Medical Association Facebook community*

***Methodology and research methods.** Methods of systematic search, comparative analysis and cognitive-discursive analysis of the most frequently categories in the image of a medical worker are presented in the*

texts has been implemented in the study. Coefficient of φ-angular Fisher transform, correlation coefficient φ, and cluster analysis were included in the group of analyzing methods.

Results and Scientific novelty. *It is revealed that the main components of the healthcare professional's image in most related special AMA sites are the successful sustainability of doctor-patient relations and the team-building model, the best value-based care and the transforming doctor's practice via special training and educational programs offered by the AMA.*

Keywords: *healthcare professional's image; patient; special Facebook group; social media discourse; American Medical Association; e-health.*

ФОРМИРОВАНИЕ ПОЗИТИВНОГО ОБРАЗА СПЕЦИАЛИСТА СИСТЕМЫ ЗДРАВООХРАНЕНИЯ В ПУБЛИЧНОМ ДИСКУРСЕ США

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Одним из ключевых показателей эффективности системы здравоохранения является уровень удовлетворенности населения качеством предоставляемых медицинских услуг. Данный показатель является результатом соотношения ожиданий пациентов и субъективной оценки оказанной медицинской помощи. В настоящей статье рассматривается образ врачей, фармацевтов и других медицинских работников в американских группах в Facebook и других социальных сетях.

Целью *данной работы является изучение репрезентации образа врачей, фармацевтов и других специалистов в области здравоохранения в социальных сетях. Анализируются основные методы разработки позитивных образов и восприятия медицинских работников на примере сообщества Американской медицинской ассоциации в Facebook.*

Методология и методики исследования. *В исследовании использованы методы систематического поиска, сравнительного анализа и когнитивно-дискурсивный анализ для определения того, какие категории в репрезентации образа медицинского и фармацевтического работника представлены в текстах. Коэффициент φ-углового преобразования Фишера, коэффициент корреляции φ и кластерный анализ были включены в группу методов статистической обработки.*

Результаты и научная новизна. *В результатах исследования было показано, что основными компонентами образа профессионала здравоохранения на большинстве связанных с ним специальных сайтов американской медицинской ассоциации являются успешная устойчивость отношений между врачом и пациентом, модель формирования команды, ценностная опора в уходе за пациентами и практика непрерывного повышения квалификации врача посредством специальной подготовки и обучения на программах, предлагаемых американской медицинской ассоциацией.*

Ключевые слова: *образ работника здравоохранения; пациент; специальная группа; Facebook; социальный медийный дискурс; Американская медицинская ассоциация; электронное здравоохранение.*

Introduction

The issue of the image of healthcare professionals (HPCs) (doctors, physicians, paramedics, druggists and other healthcare specialists) is one of the most dynamic research areas in the field of social media health discourse from the point of view of psycholinguistics, psychology, sociology, cognitive linguistics and the Internet communication. Today social media discourse comprises various contemporary forms: social networking (Facebook, MySpace, Google Plus, Twitter), Professional networking (LinkedIn), Media sharing (YouTube, Flickr), Content production (blogs [Tumblr, Blogger] and microblogs [Twitter]), Knowledge/information aggregation (Wikipedia), Virtual reality and gaming environments (Second Life) and others [15].

Due to these growing healthcare Internet resources, the interaction of medical workers and patients and other participants is rapidly expand-

ing. Many social media tools are available for healthcare professionals, including social networking platforms, blogs, microblogs, wikis, media-sharing sites, and virtual reality and gaming environments [9], [2], [13]. These tools can be used to improve or enhance professional networking and education, organizational promotion, patient care, patient education, and public health programs.

On the other hand, there is currently a lack of qualitative information about the uses, benefits, and limitations of social media for health communication among the public, patients, and health professionals in the Russian social media healthcare discourse. The analysis of the best practices of creating and developing positive images of medical workers in the US social media could be a valuable source for healthcare professional practices and educational sphere in Russia.

The aim of our research is to reveal the specifics of the doctor' image and analyze the American Medical Association Facebook platform as the tool for developing a positive image of the healthcare practitioners in the US. In order to achieve the aim, we review the current published literature to identify the uses and benefits of social media for health communication for general public, patients, and health professionals, and try to identify current most advanced models to provide recommendations for creating a trustworthy health communication research.

Literature Review

The Facebook belongs to one of the forms of social media. The definition of «social media» itself is broad and constantly evolving. The term generally refers to Internet-based tools that allow individuals and communities to gather and communicate; to share information, ideas, personal messages, images, and other content; and, in some cases, to collaborate with other users in real time. Social media are also referred to as «Web 2.0» or «social networking» [15].

Due to the growing healthcare Internet resources, the interaction of medical workers and patients and other participants is rapidly expanding. "Social media provide HCPs with tools to share information, to debate healthcare policy and practice issues, to promote health behaviors, to

engage with the public, and to educate and interact with patients, care-givers, students, and colleagues" [15].

It is quite evident that healthcare professionals can use social media to potentially improve health outcomes, develop a professional network, increase personal awareness of news and discoveries, motivate patients, and provide health information to the community [9]. At the same time, the goal of e-health is to change the individual and public attitudes towards health and disease through the use of the Internet in the health education of the population [2], [13].

In the Internet environment, there is a complex multilateral communication of specialists and consumers (patients). On the one hand, the Internet makes it possible to involve forum participants in discussing a wide range of problems in health and medicine and inform them about medical services. One of the burning issues is how social media can be used as a medical quality improvement tool [7], [12], [6].

The medical Internet environment also performs an educational function aimed at training both specialists from the medical field and not specialists. Moreover, there is a rapid increase in the number of social groups in the most popular social networks VKontakte (VK) (mostly covering Russia) and Facebook (mostly international), related to Internet medicine and healthcare [3].

Materials and Methods

The materials of the study are the American Facebook groups related to healthcare, namely the names and descriptions of American-speaking communities in which the words *doctor*, *pharmacist*, *druggist*, *medical*, *healthcare practitioner*, *clinicians* are present. We identified 280 groups, ranging from 15–40 to 60–70000 participants. The number of participants in these groups is growing daily. As a rule, the word *medical* is used more often in the titles of the communities (87) than other mentioned ones (*healthcare practitioner*, *clinicians)*, for example: the American Veterinary *Medical* Association, the American *Medical* Dental Assistants Association, the American *Medical* Student Association and others.

The group of the American Medical Association (AMA) was of particular interest to us since it has a diversity of links, subsites and pages covering the three major trends: *collaborating to improve healthcare* that helps people live longer, healthier lives, *accelerating change in medical education* with visionary partners and bold innovations**,** *working with physicians* to advance initiatives that enhance practice efficiency, professional satisfaction and the delivery of care [12]. The American Medical Association has been a Facebook Group, created in 1995, is currently the largest FB community, numbering over 500 thousand participants.

The range of texts (146), published between November 2016 and December 2017 under the AMA headings *Patient Safety and Quality* and *Education* as well as *Reinventing Medical Practice* were analyzed. We applied systematic search, comparative analysis and cognitive-discursive analysis of the given discourse to identify how the most frequently categories in the image of a medical worker (healthcare professional) are presented in the texts.

We also considered The AMA's websites StepForward (www.stepsforward.org) and Transforming Clincal Practicies Initative (www.innovation.cms.gov/initiatives/Transforming-Clinical-Practices). STEPS Forward is the subsite which offers free online modules that help physicians and system leaders improve patient care, including learning about daily huddles, redesigning patient registration and listening with empathy.

The second subsite covers several modules that have been developed from the grant funding of the U.S. Federal Transforming Clinical Practices Initiative (TCPI). It is an effort designed to help clinicians achieve large-scale health transformation through TCPI's Practice Transformation Networks. The AMA, in collaboration with TCPI, is providing technical assistance and peer-level support by way of STEPS Forward resources to enrolled practices.

Results и Discussion

The most frequent categories we found in the texts are as follows: *Efficient Communication with Patient*, *Value-Based Care*, *Team-Based*

Approach, *Sustainable Change Initiatives*, *Redesigning Practice*, *Health-Care Education* and others.

The analysis of the first category *Efficient Communication with Patient* demonstrates shaping positive attitudes towards doctors and patients.

Let us consider some examples from the categories. We found out that one of the key concepts in this group is the word *empathy*: show empathy, listen to your patients with empathy, establish empathic relations, practice empathy, etc. In the most recent articles in the first heading *Patient Safety and Quality* the author suggests using daily huddles, redesigning patient registration and listening to patient concerns with empathy [8].

This article recommends reading this year's top five AMA Wire stories on the ways physicians, clinics and hospitals can improve communication in practice.

In particular, they refer to the story "*When acrimony arises with patients, listen with empathy*" [5]. An internist gets an email from the patient's wife, who is deeply frustrated and complains that the practice's off-hours care is "lousy". To respond, the physician requested a face-to-face meeting and made use of empathetic-listening skills to defuse the tense situation [5].

Another example of the emphasis on empathic listening is the article *5 ways to recognize patient cues, understand needs* by Troy Parks in the heading *Practice Management*, "When physicians show true empathy while listening to their patients in the exam room, patients and their families are often more satisfied and more open to adopting their advice – and it builds a much stronger patient-physician relationship. Though it seems simple, empathetic listening requires understanding how to recognize the cues that patients offer. Practicing empathy can save time and help physicians navigate difficult situations that arise in practice. It can also forge deeper connections with patients that lead to greater professional satisfaction and joy in work for physicians" [11].

In the given context we identify one more important concept of *joy in the work for physicians* which we would consider under the category *Redesigning Practice*. It is essential that the article immediately refer the reader to the educational professional Module *Listening with Em-*

pathy on the StepForward website where they get some psychological advice as in the following example, "Use subtle cues to convey that you are listening intently and honor the first "golden moments". Use body language to show that you are listening. Start by sitting nearby and facing the speaker. Lean toward them and make eye contact. Make sure your arms are not crossed as this can signal to the speaker that you are closed off and not really listening. Periodically echo or summarize to further demonstrate that you heard what the patient had to say" [14].

In this connection, we would consider one example from the category *Redesign Practice*. The StepForward offers 50 Models, developed by leading healthcare practitioners. One of them is titled *Preventing Physician Burnout*, being devoted to "improving patient satisfaction, quality outcomes and provider recruitment and retention". The introduction section recommends how to reduce the burnout effect in physicians, "Burnout is a long-term stress reaction characterized by depersonalization, including cynical or negative attitudes toward patients, emotional exhaustion, a feeling of decreased personal achievement and a lack of empathy for patients. By measuring and responding to burnout you will be able to: Reduce sources of stress, intervene with programs and policies that support professional well-being, Prevent burnout" [10].

It is worth mentioning that largest number of the StepForward Modules is dedicated to the tools improving communication with patients (16 Modules under the heading *Patient Care*). Thus, all the components of the large and complex media network of the AMA are aimed at developing a positive and high quality of image of a physician.

Conclusion

The results from this study show that developing positive images and perceptions of the healthcare professionals in themselves as well as others does change the quality of communication among the American professionals and the patients.

It appears that information from the sources including the American Medical Association (AMA) Facebook and the related sites and pages does form the positive components of the image of a doctor. Official initiatives

such as *Patient Safety and Quality* and *Practice Management* and *Education* or *Reinventing Medical Practice* seem to provide some additional information to both practitioners and patients. It is possible that after the modules are incorporated and the patients have an opportunity to assess the success of the team-building process, the results will be essential for all the parties.

Also, the results of this study could be used to provide a well-thought-out tool for creating and promoting a positive image and perception of healthcare practitioners in Russia, in Perm Krai in particular. It appears that the social media like the AMA Facebook does contribute to the medics' image improvement process while it disseminates information among thousands of FB users and active members of the specialized groups not only in the USA but worldwide. However, it does not appear that a Russian analogue of the AMA Facebook would attract many Russian HCPs and patients at first, since there is not much trust in the changing healthcare system in our country at the moment. If the medicine-related government officials at all levels provide a more complete framework within which they contribute to developing special media educational medical sites for both medical workers (practitioners) and patients in the future, the image of the doctor will improve considerably.

References

1. Zhdanova S.Yu., Zaripova L.Z., Puzyreva L.O., Pecherkina A.V., Polyakova S.V. Osobennosti vosprijatija obraza medicinskogo i farmacevticheskogo rabotnika v svjazi so specifikoj poluchaemogo bazovogo obrazovanija [Peculiarities of perception of the image of a medical and pharmaceutics worker in connection with the specificity of the basic education received]. *Novshestva v oblasti pedagogiki i psihologii: sbornik nauchnyh trudov po itogam mezhdunarodnoj nauchno-prakticheskoj konferencii* [Innovations in the field of pedagogy and psychology: a collection of scientific papers on the results of an international scientific and practical conference]. 2016, pp. 64–67.

2. Pavlenko E.V. Kiberprostranstvo mediciny: Internet kak vrag i sojuznik vracha i pacienta [Cyberspace of Medicine: The Internet as an enemy and ally of a doctor and patient]. *Sociologiya mediciny*. No 1 (22), 2013, pp. 42–47.

3. Polyakova S.V., Mishlanova S.L., Zhdanova S.Yu. Obraz vracha v special'nyh gruppah seti «Fejsbuk» [Image of the doctor in special Facebook groups]. *Aprobacija*, No 12 (51), Makhachkala, 2016, pp. 172–174.

4. American Medical Association. Official group of AMA at Facebook. https://www.facebook.com/search/str/american+medical+association+%28ama%29/links-keyword/articles-links. (accessed December 17, 2017).

5. Berg S. Improve communication, save time in practice with these methods. *AMA Wire*. https://wire.ama-assn.org/practice-management/when-acrimony-arises-patients-listen-empathy (accessed December 15, 2017).

6. Chauhan B., George R., Coffin J. Social media and you: what every physician needs to know. *Journal of Medical Practice Management*. 2012; 28 (3): 206–209.

7. Grindrod K., Forgione A., Tsuyui R.T., et al. Pharmacy 2.0: a scoping review of social media use in pharmacy. *Research in Social and Administrative Pharmacy*. 2014;10 (1): 256–270.

8. Henry T.A. When acrimony arises with patients, listen with empathy AMA Wire. https://wire.ama-assn.org/practice-management/improve-communication-save-time-practice-these-methods (accessed December 15, 2017).

9. Lagu T., Goff S.L., Craft B., Calcasola S., Benjamin E.M., Priya A., Lindenauer P.K. Can social media be used as a hospital quality improvement tool? *Journal of Hospital Medicine*. 2016 Jan; 11(1): 52–5.

10. Linzer M., Guzman-Corrales L., Poplau S. Preventing physical burnout https://www.stepsforward.org/modules/physician-burnout (accessed December 15, 2017).

11. Parks T. 5 ways to recognize patient cues, understand needs. AMA Wire. https://wire.ama-assn.org/practice-management/5-ways-recognize-patient-cues-understand-needs (accessed December 12, 2017).

12. Peck J.L. Social media in nursing education: responsible integration for meaningful use. *Journal of Nursing Education*. 2014; 53(3): 164-169. doi: 10.3928/01484834-20140219-03.

13. Sass H.M. E-health, health promotion and wellness communities in cyberspace. *Eubios Journal of Asian and International Bioethics*. 2004; 14: 170–174.

14. Tayal S.C., Michelson K., Tayal N.H. Listening with empathy. American Medical Association. https://www.stepsforward.org/modules/empathetic-listening (accessed December 12, 2017).

15. Ventola C.L. Social Media and Health Care Professionals: Benefits, Risks, and Best Practices. *Pharmacy and Therapeutics*. 2014 Jul; 39(7): 491–499, 520.

Список литературы

1. Жданова С.Ю., Зарипова Л.З., Пузырева Л.О., Печеркина А.В., Полякова С.В. Особенности восприятия образа медицинского и фармацевтического работника в связи со спецификой получаемого базового образования // Новшества в области педагогики и психологии: сборник научных трудов по итогам международной научно-практической конференции. Федеральный центр науки и образования «Эвенсис». 2016. С. 64–67.

2. Павленко Е.В. Киберпространство медицины: Интернет как враг и союзник врача и пациента // Социология медицины №1 (22). 2013. С. 42–47.

3. Полякова С.В., Мишланова С.Л., Жданова С.Ю. Образ врача в специальных группах сети «Фейсбук» // Апробация. № 12 (51). Махачкала. 2016. С. 172–174.

4. American Medical Association: Официальная группа Американской медицинской ассоциации в Facebook. URL: https://www.facebook.com/search/str/american+medical+association+%28ama%29/links-keyword/articles-links (дата обращения: 17.12.2017).

5. Berg S. Improve communication, save time in practice with these methods // AMA Wire. США, 2017. URL: https://wire.ama-assn.org/practice-management/when-acrimony-arises-patients-listen-empathy (дата обращения: 15.12.2017).

6. Chauhan B., George R., Coffin J. Social media and you: what every physician needs to know // Journal of Medical Practice Management. 2012; 28 (3): 206–209.

7. Grindrod K., Forgione A., Tsuyui R.T., et al. Pharmacy 2.0: a scoping review of social media use in pharmacy // Research in Social and Administrative Pharmacy. 2014;10 (1): 256–270.

8. Henry T.A. When acrimony arises with patients, listen with empathy AMA Wire. США, 2017. URL: https://wire.ama-assn.org/practice-management/improve-communication-save-time-practice-these-methods (дата обращения: 15.12.2017).

9. Lagu T., Goff S.L., Craft B, Calcasola S., Benjamin E.M., Priya A., Lindenauer P.K. Can social media be used as a hospital quality improvement tool? // J Hosp Med. 2016 Jan; 11(1): 52-5.

10. Linzer M., Guzman-Corrales L., Poplau S. Preventing physical burnout American Medical Association. URL: https://www.stepsforward.org/modules/physician-burnout (дата обращения: 17.12.2017).

11. Parks T. 5 ways to recognize patient cues, understand needs // AMA Wire. США, 2017. URL: https://wire.ama-assn.org/practice-management/5-ways-recognize-patient-cues-understand-needs (дата обращения: 12.12.2017).

12. Peck J.L. Social media in nursing education: responsible integration for meaningful use // Journal of Nursing Education. 2014; 53(3): 164–169. doi: 10.3928/01484834-20140219-03.

13. Sass H.M. E-health, health promotion and wellness communities in cyberspace. Eubios Journal of Asian and International Bioethics. 2004; 14: 170–174.

14. Tayal S.C., Michelson K., Tayal N.H. Listening with empathy // American Medical Association. URL: https://www.stepsforward.org/modules/empathetic-listening (дата обращения: 12.12.2017).

15. Ventola C.L. Social Media and Health Care Professionals: Benefits, Risks, and Best Practices // Pharmacy and Therapeutics. 2014 Jul; 39(7): 491–499, 520.

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