Analysis of Doctor-Patient Relationship in Social Media: the Case of Greece

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Abstract: - The entrance of Social Media in everyday life has changed the way people communicate with each other. This has affected all areas and the daily routine of people. This dynamic entrance of Social Media also affects the field of health, one of the most important areas of people's lives. Doctors and Dentists throughout Greece are approximately 78,760 according to the Hellenic Statistical Authority data for 2017. The competition in this field is very high and medical marketing has become an indispensable tool for all health professionals. This study focuses on the Doctor-patient relationship in the era of the continuously use of Social Media. This Paper highlights matters arising both ways, from the patient's side but also from the perspective of a Doctor.

Key-Words: - Social media, Social stereotypes, Doctors, Patients, Medical marketing, Social Computing

1 Introduction

The social media (in short SM) are tools of interaction and communication among groups of people through online communities. SM has become an integral part of people's modern culture and everyday life. The giants of social media, like Facebook, Twitter, Instagram have contributed to the creation of an entire new world where users are free to express their opinion and share it with their friends and followers. This world of social media provides easily and quickly the convenience in everyone to express and share ideas, thoughts and feelings. The SM have changed the science of marketing completely the last years. The companies do not invest in TV channels or radio stations for their advertisements, but they are getting closer to the customers through interactions that take place via SM and their websites. A basic characteristic of social networks is that they improve the speed of the diffusion of information and simplify communication between people. The SM influence the public opinion rapidly, and they are an excellent tool in the promotion of specific ideas, values and even products (Marketing). In many sectors the use of SM has been fully assimilated and has brought satisfactory results, as in the field of fashion and media. However, in the field of self-employed persons and especially those categories that have been established in people's consciousness as professions with strong social prestige (Doctors, Engineers, Lawyers, Notary), SM has not been established yet and there are at a very immature stage to use and exploit them as a marketing tool. This study focuses in the relationship between one of these categories of professionals and more specifically the category of Doctors-Dentists (to facilitate the reader from now on the term Doctors will be included in it and the Dentists) and patient-clients-users of SM and how this relationship is affected. How the social stereotypes that may arise from the use of SM will mediate in this relationship to make it better or worse. The study takes place in two directions. Firstly, the study examines the relationship of patient-Doctor through SM. How the patients-users of SM are affected from this relationship and their

reaction in Doctors' published timeline-posts. Mainly the first part of the study focuses on the social stereotypes which may arise from the Doctors' posts in SM and how these stereotypes may affect patients' opinion about the Doctor. Secondly, the study examines the relationship between doctors and SM and how doctors can extend this relationship to benefit from this use, i.e. increasing their clients. What are the advantages and disadvantages of the above use and the influence that may have on the patients. More specifically, if the Doctor will choose to expose his or her life to SM, and if this will have negative or positive effects on the relationship of a Doctor-Patient. Also, the study examines if the use of SM is beneficial to both parties and makes this relationship vulnerable. In the following study as SM will be considered mainly the most popular platforms as Facebook, Twitter, Instagram and LinkedIn.

2 Related work

Social Media has radically changed the way of life and the communication among people. The SM may create and destroy relationships at the same time. Fighting or misunderstandings are created and resolved more difficult, as there is no verbal communication and enough arguments. However, SM are very high in people's preferences. As times goes by, the use of SM is increased not only among young people but also for elderly people. In a research which was carried out in Atlanta in 2013 and was participated older people (over 52 with an average age of 72 years), it was found that 50% of these people are users of the Facebook and those who were not SM users were particularly old (average age over 75 years). Also, those who made use of SM felt much better socially than others and their levels of loneliness were much lower than the non- users [1]. Until now this number will certainly have risen, because the technological gap is decreasing and more and more people over 60 years old are trained and can now use quite comfortably the SM.

According to another survey conducted at the University of Cambridge by John Clarkson and participated 3,420 people from England, America and Australia, and had examined the relationship of the satisfaction that people feel from their everyday lives in relation to ten ways of communication, the investigation showed that the continuous technological bombing in communication tires people while at the same time decrease the satisfaction that they take from their lives. Also, the

majority of those who often used various forms of modern communication technologies tended to declare less satisfaction from their lives, while tended to take more satisfaction by using the richest and most traditional forms of communication (face-to-face and telephone communication). Instead, those who felt that they were keeping the use of technologies under control appear clearly more satisfied of their lives. It has been identified that communication with SM is related to the reduction of general satisfaction that individuals feel but not necessarily to the satisfaction they derive from communication itself. The investigation also examined whether different forms of communication affect each relationship individually. That is, what is the influence that SM has on related relationships or on business, or what is the influence of telephone communication on friendly relations. It has been found that different forms of communication affect each form of relationship differently. A business relationship is influenced differently by a call between the participants and differently with a communication between them in the SM [2]. So, SM has a different influence on all kinds of relationships. The relationship between two friends, two partners, a customer and a supplier, or a lawyer and his client or a doctor and his patient, will be influenced differently through SM.

In categories of professions that have to do with retail sales such as sales of clothes, footwear, cosmetics, electrical-technological devices, the promotion-advertising through SM has been developed rapidly in recent years and with great success. Large retail Businesses (B2C- business to customers) have special departments-executives who are exclusively engaged in the promotion of their products through SM. Although, at the beginning, there were doubts whether SM could contribute to the promotion of a company and its products, investigations were carried out, showed that it strengthens the company's brand name. A survey conducted with 441 companies showed that companies using SM had only positive results in customer-product, client-brand, client-company relationships and customer relationships with each other, with increased confidence in the brand and thus the customer's dedication to the product [3]. The promotion of products via SM is an entire industry, to that extent that they acquire commercial value even people-users of SM depending on the followers they have (the more followers the more paid the user), there are also brokers (agents) who negotiate advertising

contracts between users with many followers and businesses.

While the spread of social media marketing in retail companies is in great development, it does not happen the same in B2B-Business to business companies and companies which provide services. The use of SM by these categories of companies is still at an early stage and the entrepreneurs themselves-executives of these companies are not convinced of the benefits they will have. According to a survey done at 145 B2B companies from various sectors found that despite their interest in the SM sector, they still do not know exactly the benefits they will bring to them and do not have the necessary know-how to exploit them [4]. In addition, other surveys showed that SM can play a very dominant role and prove to be particularly beneficial for the B2B companies. The research conducted by the company Omobono has demonstrated that not only the B2B companies can be benefit from SM but there is also the most effective advertising path that can follow. The survey involved 115 marketing experts in B2B companies and found that 79% of them made SM the most effective advertising tool with 38% noting that if they had an additional budget for next year, they would spend it all on advertising via SM [5].

The social media marketing of professionals who are active in the service sector is at an even more early stage, especially in Greece. In some areas of professionals where the object-product of their service is more glamorous and commercial the social media marketing has invaded dynamically in contrast to sectors of professionals that the object of their service does not seem so shiny and commercial. For example, the owners of a hair salon or a nail care or pet store, or a child's activity, or a gym, or a photographer, have grasped the dynamics of SM and it is easier for them to use them because they see directly the results of this promotion (increase in clients and popularity). How often do we see an accounting office owner, or a surveyor, or a gas station owner, or a lawyer or a doctor to use SM in order to attract new customers.

Medical marketing involves the creation, promotion and provision of medical services in accordance with the needs of the consumer and based on science, for the protection and promotion of the health of different populations. The doctor must deal not only with the treatment of patients but also with his professional survival and development. A doctor should not only be informed about developments in his science, for example for new medicines, new therapies, but at the same time promoting his practice, to maintain and increase his

clients and to improve his reputation both among patients and among health professionals. According to a survey conducted in 2007 in seven European countries, Norway, Denmark, Germany, Greece, Poland, Portugal and Latvia the 71% of Internet users say that they use it to get informed on health issues [6]. Also 30% of patients who use the internet declare that they trust more a doctor who has his/her own website. So, more and more patients before reaching a doctor will search at his/her website, as well as they will search the doctor in social networks and especially on his/her page in SM.

The current crisis in Greece, which first appeared in its economic and political form, brought to the surface some more dimensions of the crisis that the Greek society is experiencing, the social crisis. The economic-political crisis was made the society to express extreme positions, but more to externalize reactions to social stereotypes from the citizens. Social stereotypes relate mainly to the gender, origin, appearance and beliefs of a person or group of individuals, and these stereotypes will be studied in this research. The SM either because of the power of the image they possess, or the projection of the daily moments of a person's life, have the power to spread very quickly many of these characteristics that group people into categories according to their gender, their origin, their appearance in whatever occupation they belong to. So, the same problem may arise with the Doctors. If a Doctor has a personal profile in SM or even a professional profile, many of his/her features are made public regardless of whether the original purpose of creating the profile was for professional purposes or personal.

According to a survey conducted in Australia and attended by 187 Doctors of various specialties, most of them used SM for their personal use and a quarter of them (25.7%) they were not using SM at all. One in five (19.4%) had received a friend request on his personal profile from one of his patients. Three out of five doctors said they feel comfortable handing out personal information to their patients. More than three out of five stated that they were hesitant about the use of SM because of their visibility and the constraints that govern their profession. When asked how they would react to a friend request from one of their patients a large percentage replied that they would respond negatively and only a 2.6% replied that they would accept the request. More than half (57%) have argued that they prefer a strictly personal closed profile and only one in four (24%) they felt comfortable sharing personal content with one of

their patients. Most participants (60%) declared that they would not feel comfortable having a patient that before the visit-treatment would have access to personal information about him/her [7].

Another survey in USA involving 455 doctors, practitioners and medical students, more than half (58%) replied that they did not find it morally acceptable to visit the profile of their patients in SM. Also, more than half (68%) agreed that it is not morally acceptable to interact with patients in SM either for social or medical reasons [8].

According to another survey, 65% of Doctors use SM for business purposes. Very rarely, doctors use them to communicate with patients. The American Medical Association has advised physicians to be very careful at the limits they pose to the doctor-patient relationship and suggests that they have completely separated their personal and professional profiles in SM.

On the other hand, patients according to research conducted in America, 74% of all Internet users use SM, and more specifically the search for health issues is in one of the top positions of the actions carried out by users. Patients are expressed through SM, share their stories, learn from other patients and offer their knowledge to third parties. Many Doctors believe that the use of SM is beneficial in patients with chronic diseases (cancer, multiple sclerosis, Parkinson's disease, depression) because they derive courage and strength from other patients who have the same disease or by users who support them via SM.

So, it is important to study further issues in this area of the medical-patient relationship. That it may affect the patients' choice of visiting a Doctor is the reaction of the patients in their interaction with a Doctor in SM, depending on the profile of the Doctor. If the morals, the social-economic status, the personal life and the political beliefs to be communicated by the profile of Doctors will prevent patients from choosing a Doctor for their treatment. The challenges that arise, the obstacles and benefits of the interaction of doctor-patient in SM.

3 Research Prerequisites

The research philosophy of this research is positivism and the method followed is quantitative. The sample was non-random and basically convenient, also the snowball method may be used. In order to collect the material from the sample, the method was the online questionnaires. In this research it was considered necessary to use non-random sampling due to the low cost and time constrictions.

The design of both questionnaires was done using the Google Forms, so that many data can be easily collected and processed. Both questionnaires were accompanied by an explanatory text referring to the reasons for conducting the investigation in order to inform the participants.

The first type of questionnaire is addressed to the potential patients of a doctor and consists of five sections. The sections are the use of the Internet, the social media, the relationship between social networks and doctors and finally the relationship between the doctor and the patient. All the questions are multiple choice, except one that is with check boxes.

The second type of questionnaire is addressed to Doctors and Dentists and consists of five sections. The sections are the use of the Internet, the social media, the relationship between the social media and the patients and finally the relationship between the doctor and the patient. All the questions are multiple choice, except one that is with check boxes and one open type.

The pilot questionnaire was submitted to 4 participants (2 for each questionnaire) from 17/12/2018 to 19/12/2018. The clarifications and observations of the participants in the questionnaire were considered and incorporated in the final form of the questionnaire.

The questionnaires were distributed via e-mail. The patient's questionnaire was available from 21/12/2018 to 14/01/2019. And the doctors' questionnaire from the 28/12/2018 to the 14/01/2019. The collected questionnaires were 138 completed correctly from the patients and 46 completed correctly from Doctors.

4 Experimental Results

In the first questionnaire the 56.5% of the patients were females and the 43.5% were males. The 97.8% were users of Internet, and only the 2.2% were not. The 99.3% of the users of Internet were everyday users, and the 95.6% of the users had at least one account in the Social Media. The 79.1% of them had a friend or a follower in SM, who is Doctor. Only the 20.2% would search if the Doctor had a SM account before their visiting him/her.

In the question, if the doctor's posts in SM, point out his/her political beliefs that are not in line with the patients' beliefs, would they visit the doctor, the 80.6% of the patients replied yes and the rest 19.4% replied no. In the question, if the doctor's posts in SM, points out his/her extreme political beliefs

Eirini Michalopoulou
Klimis Ntalianis

(extreme right-extreme left), would they visit the doctor, the 31.8% of the patients replied yes and the rest 68.2% replied no (Fig. 1).
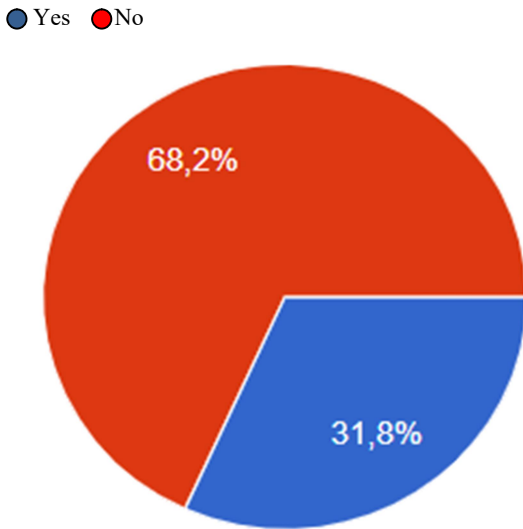

Fig.1: Question about a doctor's extreme political beliefs

In the question, if the doctor's posts in SM, point out his/her sexual identity, which is not the same as the patients', would they visit the doctor, the 89.9% of the patients replied yes and the rest 10.1% replied no (Fig. 2).
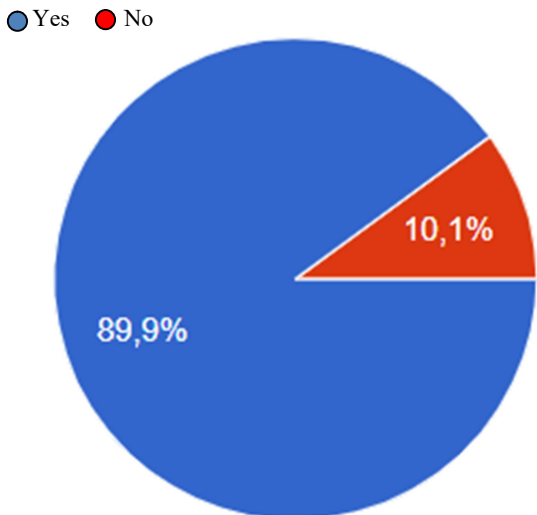

Fig.2: Question about a doctor's sexual identity

In the question, if the doctor's posts in SM, point out a disability, would they visit the doctor, the 89.1% of the patients replied yes and the rest 10.9% replied no. In the question, if the doctor's posts in SM, point out his racial origin (from countries that have been observed a racist tendency of Greek citizens), would they visit the doctor, the 82.9% of

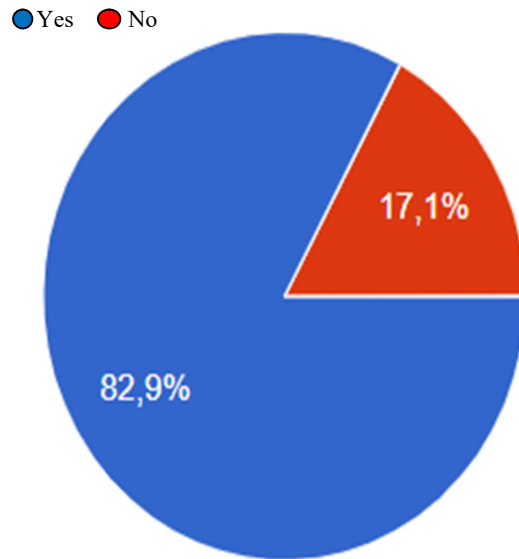the patients replied yes and the rest 17.1% replied no.

Fig.3: Question about a doctor's racial origin

In the question, if the doctor's posts in SM, point out that he/she embraces a different religion would they visit the doctor, the 93% of the patients replied yes and the rest 7% replied no. In the question, if the doctor's posts in SM, point out a way of life or some options that are not in accordance with patients' way of life, but nevertheless has the reputation of an excellent scientist would they visit the doctor, the 93.8% of the patients replied yes and the rest 6.2% replied no.

In the second questionnaire the 32.6% of the Doctors were females and the 67.4% were males. The 97.8% of the Doctors were users of Internet, and only the 2.2% were not. The 100% of the users of Internet were everyday users, and the 91.1% of the Doctors had at least one account in the Social Media. The 40% of the Doctors had a personal profile in SM, the 24.4% had two different profiles (personal and professional), the 15.6% both in one profile, and 11.1% only professional profile. The 73.2% of them had an open profile in SM, and the rest 26.8% a close profile. In the question if they accept friend requests from patients, they had visited them, the 82.9% answered yes, and the 17.1% no. In the question if they proceeded first in a friend request to the patients who have visited them the 92.7% answered no and only the 7.3% answered yes. Also, in the question if they have contacted a patient via SM for medical purposes the 51.2% answered yes and the 48.8% answered no. In the question if they have been affected in the diagnosis they have made to a patient, knowing his/her lifestyle through SM (e.g. doing abuses), the

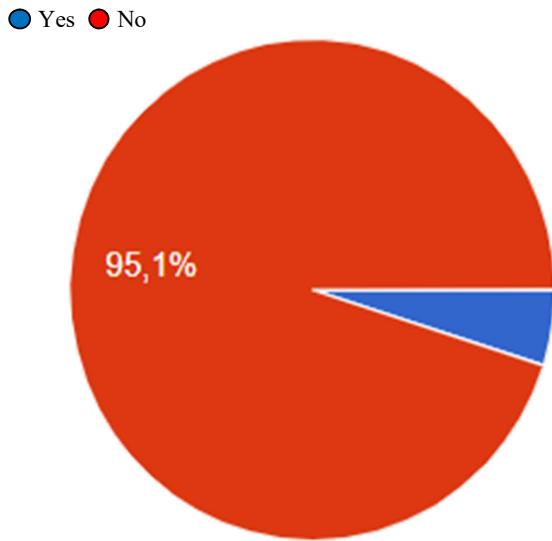95.1% answered no and the 4.9% answered yes (Fig. 4).

Fig.4: Is the doctor affected by the patient's lifestyle during diagnosis ?

If you do not have an account in SM, is because:

- You have concerns about privacy issues
- You do not have the time to be involved
- You believe that it will not help you in your job
- You feel that SM use is not morally compatible with your profession
- You do not have the know how
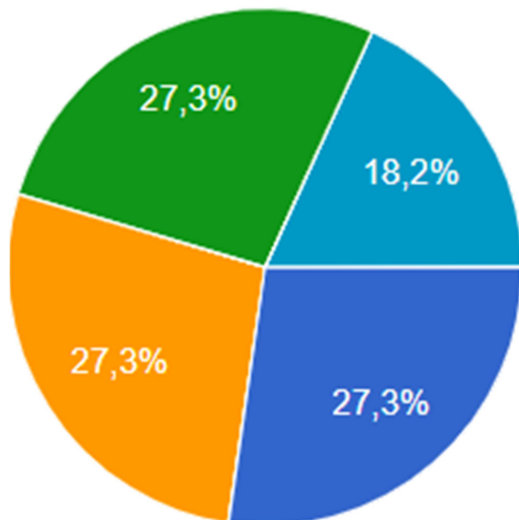- The use of SM is addicted

Fig.5: Why doctors do not have an account in SM

In the question if the Doctors keep a mixed profile (personal and professional in one), how do they feel if their patients are watching their personal moments, the 46.7% of them answered comfortably and the 53.3% uncomfortably. The 93.1% of the Doctors believed that they have gained clients

through SM and the 6.9% that they have lost clients through SM. However, the 61.1% of the Doctors have not noticed an increase in their clients since they started using the SM as a promotional tool. Finally, the 27.3% of the doctors who do not have an account in SM, believe that it will not help them in their job, also the 27.3% of them do not have the time to involve, another 27.3% of them had concerns about privacy issues and finally the 18.2% felt that SM use is not morally compatible with their profession (Fig. 5).

5 Conclusions and Future Work

According to the results of the survey, the only thing that prevents the Greek people from visiting a doctor whom they search or follow in SM, is to have notified that he/she has extreme right or extreme left political beliefs. Everything else does not prevent them from trusting him. According to answers no other social stereotype that has to do with appearance, sexual identity, religion or ancestry can prevent the patient from visiting him/her. A very promising conclusion for Greek society and the way Greek citizens think. However, whether these intentions apply is uncertain, because the questions were if they would visit them and not if they have already visit them. Therefore, the conclusion of the patient's research is that the Greek people are not influenced by social stereotypes arising from SM, in the choice of a Doctor.

The second part of the survey showed that Doctors use the SM, for both personal and professional reasons and they choose to have a public profile, which means that they accept them as tools for advertising in order to increase their reputation. They consider that they will increase their clients but do not use them strictly on a professional level. Those who do not use them do so either because they do not have the time required, or they believe that it will not help anywhere, and finally they are anxious about the issues of privacy that arise and whether they are morally compatible with their profession. For the time being in Greece, the use of SM as promotional tools is treated very amateurish by professions such as doctors. If the conclusions of the two research questionnaires are combined, patients are very open to seek Doctors in SM and they are not be influenced by social stereotypes and personal perceptions, while Doctors are not very familiar with this form of advertising and projection and are currently facing it amateur and with reservation.

The above research could be extended both within the same scope of the study of the SM- doctors-

patients, as well as in different professional fields. A research with more questions could thoroughly enlighten the behavior of doctors and patients through SM and lead to additional useful conclusions. Also, a research into a much larger population sample would lead to more secure conclusions for the Doctors and patients. As mentioned above, the questions may be included could be not hypothetical and refer to actual events, such as whether someone has visited a homosexual doctor who knew his sexual identity from non-SM events but would not go to the same doctor if the doctor had communicated it to the SM because that would disturb the patient. The above research could be extended to other professions and enlighten what would be the behavior of client-users to the same social stereotypes. It would be interesting to extend it both to professions with social prestige and to professions that society has not given them such an importance and to make comparable comparisons. For example, the users of SM could be asked similar questions for a notary or lawyer or engineer and at the same time be asked for a plumber, electrician or hairdresser, and analyze the differences in the answers.

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