Exploring experiences, behaviours and associated behavioural determinants of healthcare professionals in Qatar regarding medically related social media use.

ABABNEH, M., STEWART, D., PEDERSEN, S., NAZAR, Z. and CUNNINGHAM, S.

2022

Exploring experiences, behaviours and associated behavioural determinants of healthcare professionals in Qatar regarding medically related social media use

Ma'an Ababneh[1], Derek Stewart[2], Sarah Pedersen[3], Zachariah Nazar[2], Scott Cunningham[1]
1 School of Pharmacy and Life Sciences, Robert Gordon University, Aberdeen, United Kingdom
2 College of Pharmacy, QU Health, Qatar University, Doha, Qatar
3 School of Creative and Cultural Business, Robert Gordon University, Aberdeen, United Kingdom

ROBERT GORDON UNIVERSITY ABERDEEN
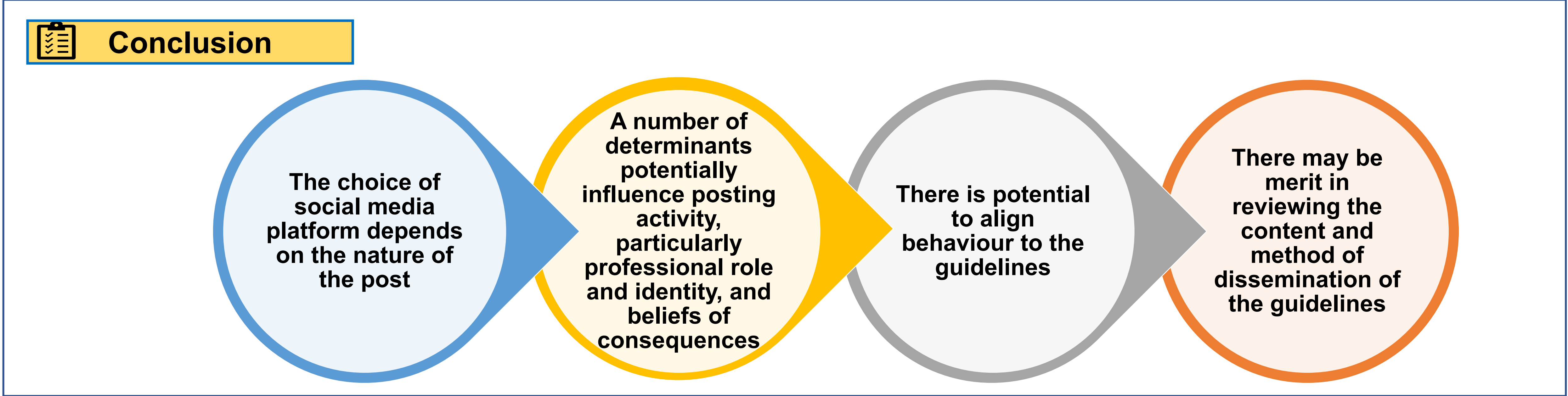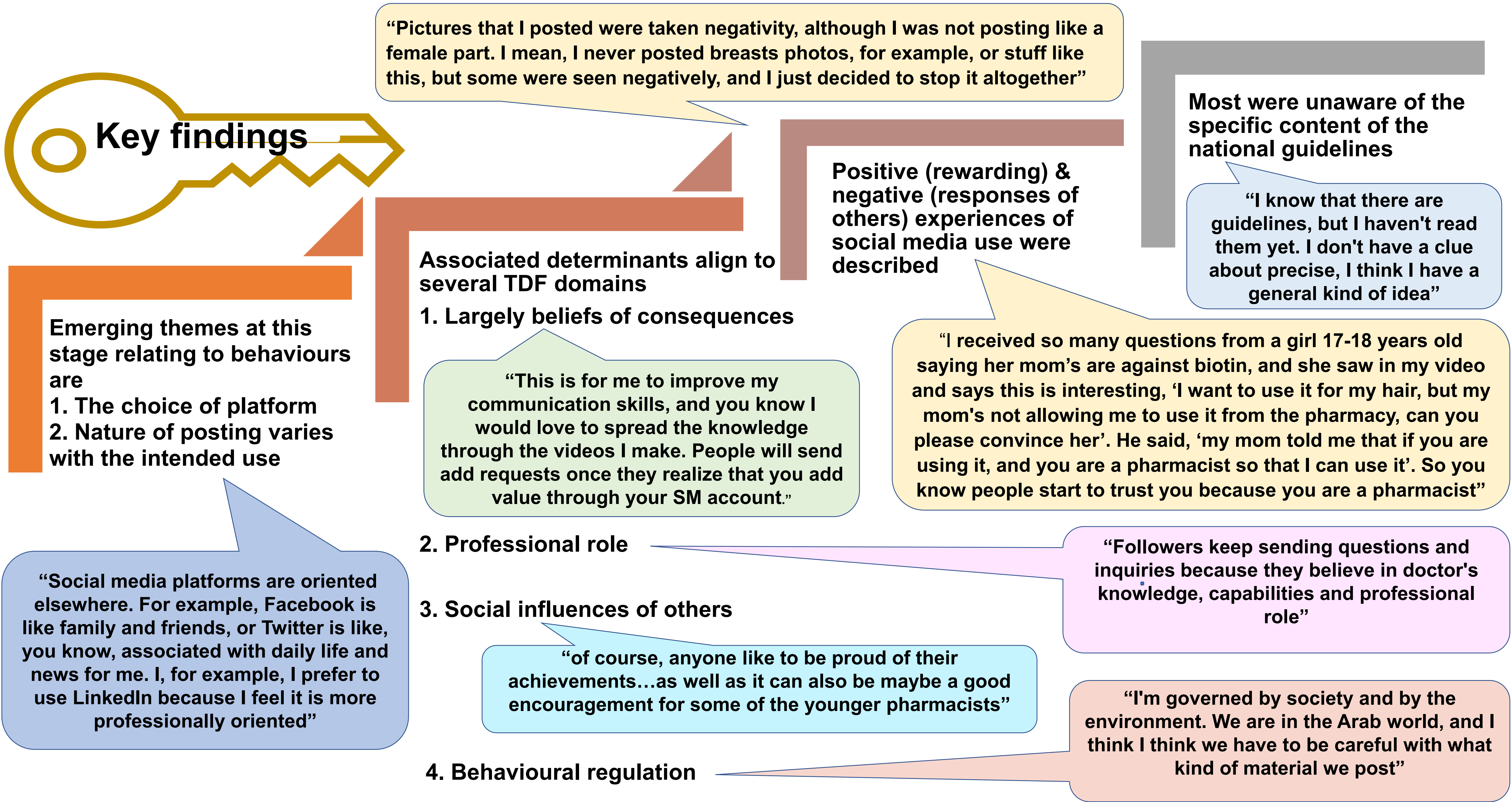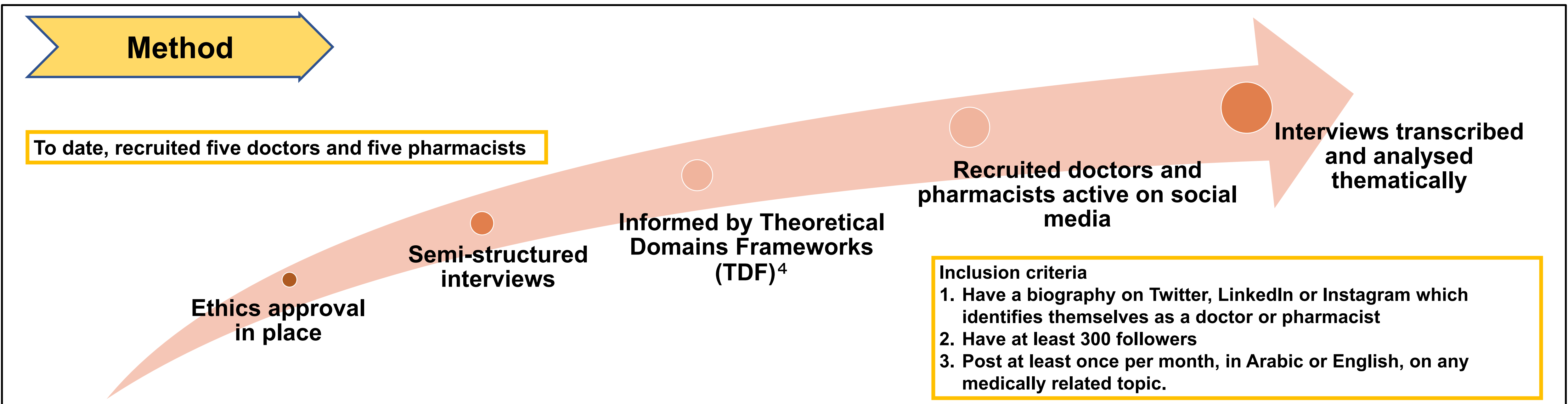
جامعة قطر QATAR UNIVERSITY

Background

There is an accumulation of evidence that healthcare professionals are increasingly using social media to provide services to patients, share and disseminate information, and develop their professional skills[1,2].
Research originating from the Middle East is rare, and guidelines for healthcare professionals on the appropriate use have only recently emerged[3].

SOCIAL MEDIA — Learn, Promote Practice, Educate, Personal Branding

Aim

To explore the experiences, behaviours and associated behavioural determinants of healthcare professionals in Qatar regarding medically related social media use and recently issued national guidelines

Method

To date, recruited five doctors and five pharmacists

Ethics approval in place

Semi-structured interviews

Informed by Theoretical Domains Frameworks (TDF)[4]

Recruited doctors and pharmacists active on social media

Interviews transcribed and analysed thematically

Inclusion criteria
1. Have a biography on Twitter, LinkedIn or Instagram which identifies themselves as a doctor or pharmacist
2. Have at least 300 followers
3. Post at least once per month, in Arabic or English, on any medically related topic.

Key findings

"Pictures that I posted were taken negativity, although I was not posting like a female part. I mean, I never posted breasts photos, for example, or stuff like this, but some were seen negatively, and I just decided to stop it altogether"

Most were unaware of the specific content of the national guidelines

"I know that there are guidelines, but I haven't read them yet. I don't have a clue about precise, I think I have a general kind of idea"

Positive (rewarding) & negative (responses of others) experiences of social media use were described

Associated determinants align to several TDF domains
1. Largely beliefs of consequences

"This is for me to improve my communication skills, and you know I would love to spread the knowledge through the videos I make. People will send add requests once they realize that you add value through your SM account."

"I received so many questions from a girl 17-18 years old saying her mom's are against biotin, and she saw in my video and says this is interesting, 'I want to use it for my hair, but my mom's not allowing me to use it from the pharmacy, can you please convince her'. He said, 'my mom told me that if you are using it, and you are a pharmacist so that I can use it'. So you know people start to trust you because you are a pharmacist"

Emerging themes at this stage relating to behaviours are
1. The choice of platform
2. Nature of posting varies with the intended use

2. Professional role

"Followers keep sending questions and inquiries because they believe in doctor's knowledge, capabilities and professional role"

3. Social influences of others

"Social media platforms are oriented elsewhere. For example, Facebook is like family and friends, or Twitter is like, you know, associated with daily life and news for me. I, for example, I prefer to use LinkedIn because I feel it is more professionally oriented"

"of course, anyone like to be proud of their achievements…as well as it can also be maybe a good encouragement for some of the younger pharmacists"

4. Behavioural regulation

"I'm governed by society and by the environment. We are in the Arab world, and I think I think we have to be careful with what kind of material we post"

Conclusion

The choice of social media platform depends on the nature of the post

A number of determinants potentially influence posting activity, particularly professional role and identity, and beliefs of consequences

There is potential to align behaviour to the guidelines

There may be merit in reviewing the content and method of dissemination of the guidelines

References

1. Alshakhs, F., & Alanzi, T. The evolving role of social media in healthcare delivery: measuring the perception of healthcare professionals in Eastern Saudi Arabia. Journal of Multidisciplinary Healthcare. 2018;11:473–479. doi:10.2147/jmdh.s171538

2. Fatollahi, J., Colbert, J., Agarwal, P., Lee, J., Lehmann, E., Yuan, N., Lehmann, L. and Chretien, K., 2019. The Impact of Physician Social Media Behavior on Patient Trust. AJOB Empirical Bioethics, 11(2), pp.77-82.

3. Al-Balushi, A.. In the Era of Social Media: Is it time to establish a code of online ethical conduct for healthcare professionals?. Sultan Qaboos University Medical Journal [SQUMJ]. 2020;20(1):25. doi:10.18295/squmj.2020.20.01.004

4. Atkins, L., Francis, J., Islam, R., O'Connor, D., Patey, A., Ivers, N., Foy, R., Duncan, E., Colquhoun, H., Grimshaw, J., Lawton, R. and Michie, S., 2017. A guide to using the Theoretical Domains Framework of behaviour change to investigate implementation problems. *Implementation Science*, 12(1).