



Impact of Social Media Marketing on Branding and Business Development: A Study on Multi-Specialty Hospitals

Soaebmohammed Modasiya^{1*}, Dr. Riddhi Ambavale²

^{1*}Research scholar, Rai University, Saroda, Dholka

²Associate Professor, Rai School of Management Studies, Rai University- Saroda, Dholka

Citation: Soaebmohammed Modasiya et al. (2024), Impact of Social Media Marketing on Branding and Business Development: A Study on Multi-Specialty Hospitals, *Educational Administration: Theory and Practice*, 30(05), 15687-15696, Doi: 10.53555/kuey.v30i5.10234

ARTICLE INFO

ABSTRACT

Research Introduction: Multi-Specialty Hospitals are being urged to speed up their digital transformation in response to a variety of issues, including cyberhealth, novel business models, and global competitiveness. Within this framework, Multi-Specialty Hospitals have seen social media as a valuable instrument for bringing about reform and moulding public opinion. The purpose of this research is to conduct an analysis of the strategies that prominent Multi-Specialty Hospitals across the world employ in order to make use of social media in order to spread information that is linked to their brand and to improve their reputation.

Research Methodology: Our strategy consisted of doing a literature review on health communication, social media, and branding; conducting an investigation into the brand management strategies that are utilised by the top 100 Multi-Specialty Hospitals across the world on Facebook, Twitter, and YouTube; and presenting some managerial implications.

Results: For the purpose of self-promotion, the vast majority of Multi-Specialty Hospitals make use of their official websites (76%) and other social media platforms (78% on Facebook, 73% on Twitter, & 78% on YouTube). **Conclusions:** The implementation of a corporate communication plan should be a top priority for Multi-Specialty Hospitals, and they should also provide valuable content for all stakeholders and encourage their personnel to act as brand ambassadors.

Key Words: Social Media Marketing, Business Development, Branding, Multi-speciality Hospitals, Global Competitiveness.

INTRODUCTION

Multi-Specialty Hospitals are required to make continual adjustments to their professional procedures due to a number of factors, including the ever-changing cyberhealth environment, the emergence of new business models, the global competitiveness, the expectations of patients, and a number of other variables. The acceleration of these organisations' digital transition is being compelled by a multitude of forces, including those that are managerial, economic, and cultural in nature. On the other hand, not all of the healthcare practitioners and workers working for these organisations are excited about incorporating these improvements into their practices. As a result of the digital revolution, Multi-Specialty Hospitals are increasingly turning to social media in order to mould the attitudes of their employees. Online consultations, private patient platforms, and mobile applications are some of the ways in which healthcare institutions may improve their efficiency, strengthen their brand, and affect the attitudes of stakeholders such as staff, patients, media organisations, and governmental agencies. Multi-Specialty Hospitals that are considered to be among the best in the world use social media to spread information about their brands in order to improve their reputation; based on this research, an analysis of their methods for accomplishing this goal will be conducted. In order to accomplish this, researcher conducts a comprehensive review of the published material about health communication, social media, and branding. In order to determine which Multi-Specialty Hospitals are the best in the world, researcher looked into the annual World's best Multi-Specialty Hospitals of 2021 research that was conducted by Statista Inc. and Newsweek. This grade was determined by taking into consideration the suggestions of 74,000 medical professionals, the results of patient surveys, and

important medical performance metrics. Following that, researcher investigated the websites and social media profiles of the one hundred Multi-Specialty Hospitals in order to evaluate the advertising techniques that they put out for their services. Researcher was able to do this by establishing forty-eight criteria. In this presentation, researcher discussed three suggestions for further research as well as three consequences for management.

SHIFT TO ONLINE HEALTH CARE VIA HEALTH COMMUNICATION

Hospital branding & corporate messaging

According to Chan, Yu-Ling, Huxley, and Evans (2016), the communication practices of corporations have a significant impact on the policies that govern public health. It is possible for health organisations, such as Multi-Specialty Hospitals, public agencies, and patient organisations, to strengthen their humanistic approach to healthcare and maximise the effectiveness of all medical treatments that are provided to patients by enhancing their corporate communication efforts (Brent, 2016). The various training programs that are carried out by these organisations make it possible for patients and health care practitioners to enhance their communication skills, which in turn helps to strengthen their relationships (Jahromi, Tatabaee, Abdar, & Rajabi, 2016; Blackston & Pressman, 2016). Interpersonal communication, internal communication, and external communication are the three essential areas of communication in Multi-Specialty Hospitals that Medina Aguerrebere, Gonzalez Pacanowski, and Medina (2020) identified as being critical to the implementation of this organisational reform. Both patient engagement (Chan et al., 2016) and adherence to suggested therapy (Archiopoli, Ginossar, Wilcox, Avila, Hillm, & Oetzel, 2016) have been shown to be improved on the basis of effective interpersonal interactions between patients and their physicians. When physicians fail to appropriately manage these competences, it is possible for them to make mistakes in the treatment and medication selection processes (Fischer, 2014). According to Blackston and Pressman (2016), an increasing number of Multi-Specialty Hospitals have implemented digital transformation tactics, such as e-health, social media, and mobile applications, in order to enhance the human contact relationships that exist between medical professionals and their patients. According to Welch and Jackson (2007), strategic managers and other internal stakeholders participate in "internal communication" in order to increase the level of employee engagement inside the structure of the company. Multi-Specialty Hospitals can provide information to personnel and advocate for organisational values such as mission and identity through internal communication (Jahromi et al., 2016; Rodrigues, Azevedo, & Calvo, 2016). Multi-Specialty Hospitals consistently consider their rights while interacting with patients or other stakeholders, including media organisations and governmental entities (Medina Aguerrebere, et al., 2020; Pelitti, 2016). The Corporate Communication Department of the hospital is responsible for overseeing three primary channels of communication with the outside world:

- a) Research investigating the viewpoints and inclinations of external entities;
- b) Distribution of information related to public health, encompassing health literacy programs & health education efforts (Fischer, 2014);
- c) Evaluation of all communication initiatives utilising several measures to assess the impact of external communication on the organization's reputation (Zerfass & Viertmann, 2017).

According to the argument made by Matarin Jimenez (2015), the majority of Multi-Specialty Hospitals consider social media to be an effective medium for corporate communication. According to Lim (2016), these platforms improve crisis management, elevate the quality of medical services, and promote the collaborative decision-making process between medical professionals and their patients. As stated by Myrick, Holton, Himboim, and Love (2016), Multi-Specialty Hospitals offer patients not just physical assistance but also emotional companionship. According to Ruiz-Granja (2015), in order for these bodies to effectively carry out the task, they need to establish a Social Media Unit that is formed of communication and public health professionals. It was determined by Rando Cueto, Paniagua Rojano, and De las Heras Pedrosa (2016) that a number of Multi-Specialty Hospitals do not have the requisite cash, which puts their professional reputations in jeopardy. Studies conducted by Smailhodzic, Hooijsma, Boonstra, and Langley (2016) indicate that patients are becoming more interested in social media due to the fact that it facilitates better communication with their physicians. According to Namkoong, Nah, Record, and Van Stee (2017), Multi-Specialty Hospitals are required to maintain a courteous and professional attitude when managing social media platforms. This is because these platforms have a considerable influence on the actions and views of patients.

Campaigns for the brand

The principal responsibility of the Corporate Communication Director in Multi-Specialty Hospitals is to enhance the company's brand and fortify its strategic posture within the health sector (Medina Aguerrebere et al., 2020). The worth of a company's brands, encompassing both tangible and intangible assets, influences stakeholders' perceptions of the organisation (Esposito, 2017). Multi-Specialty Hospitals typically employ three strategies to enhance their brand.

- a) Outside efforts in communication like PR, marketing, or events

b) In order to improve the hospital's reputation in the eyes of the public, personal branding initiatives target specific staff with the goal of turning them into "brand ambassadors" (Trepanier & Gooch, 2014).

c) Multi-Specialty Hospitals can improve stakeholders' perceptions of the institution and its performance through collaborations with firms that specialise in rating (Cua, Moffatt-Bruce & White, 2017). Multi-Specialty Hospitals improve their corporate reputation, bolster their standing in the healthcare sector, and empower patients through branding initiatives on social media platforms (Triemstra et al., 2018; Costa-Sánchez & Míguez-González, 2018).

METHODOLOGY

The researcher conducted a quantitative study utilising the World's Best Multi-Specialty Hospitals 2021 ranking, published yearly by Newsweek and Statista Inc., to further our understanding of how premier Multi-Specialty Hospitals globally leverage social media to fortify their brand. This evaluation considers three main inclusion criteria and assesses over 2,000 Multi-Specialty Hospitals across 25 different countries (e.g., the US, UK, Germany, etc.).

a) Suggestions made by around 74,000 medical professionals from 25 countries (e.g., physicians, hospital administrators, etc.);

b) Outcomes of patient satisfaction surveys (overall hospital satisfaction, happiness with medical treatment and services, etc.);

c) Healthcare KPIs for Multi-Specialty Hospitals (such as cleanliness standards, patient load per physician, and overall treatment quality) (Newsweek, 2021a).

The score of each hospital is derived from three data sources: the first contributes 55%, the second 15%, and the third 30%. Refer to Annex 1 for the comprehensive list of the top 100 Multi-Specialty Hospitals globally. Bloomberg News, 2021b. This paper examines how various Multi-Specialty Hospitals utilised four distinct online platforms: a) their official website, serving as a medium for corporate communication and brand enhancement (Kotsenas et al., 2018); b) Facebook, which boasted 2.89 billion active users as of June 2021 (Facebook, 2021); c) Twitter, frequently employed by Multi-Specialty Hospitals for patient communication (Park, Reber & Chon, 2016); and d) YouTube, enabling health organisations to disseminate videos on health education and medical treatments (Apenteng, Ekpo, Mutiso, Akowuah & Opoku, 2020).

Table 1 presents the 48 criteria that were the foundation of our quantitative investigation. The indicators were categorised into three main areas: (a) identification, (b) communication activities, and (c) patient engagement. Utilising these 48 variables, researcher assessed the frequency with which Multi-Specialty Hospitals conveyed brand-related information (history, values, vision, etc.) to stakeholders and the efficacy of such communication.

Table 1: Critical Success Factors

Corporate Website	Facebook	Twitter	Youtube
Identity*			
1. Corporate logo	1. Corporate logo	1. Corporate logo	1. Corporate logo
2. Multilingual website	2. Links to corporate websites	2. Links to corporate websites	2. Links to corporate websites
3. Links to medical departments	3. Hospital's description	3. Hospital's description	3. Hospital's description
4. Find a doctor	4. Milestones	4. Joined date	4. Milestones
5. Find diseases	5. Awards	5. Foundation date	5. Awards
6. Links to research and education departments	6. Brand values	6. Hashtags on the description	6. Brand values
7. Link to the Press Department	7. Mission	7. Health professionals or hospital's buildings on the main image	7. Mission
8. Links to social media platforms	8. Vision	8. Links to other social media platforms	8. Vision
Communication Activities**			
9. Videos on the homepage	9. Videos integrated	9. Number of followings	9. Playlists
10. Press releases on the homepage	10. Events	10. Media section with videos	10. Channels
Patient's engagement***			
11. Patients' platform	11. Number of likes	11. Number of likes	11. Number of subscribers
12. Mobile apps	12. Number of followers	12. Number of followers	12. Number of views

* The corporate website's homepage, Twitter, YouTube's "About Us" section, and Facebook's "Information" section. ** Every platform's homepage. *** Every platform's homepage.

Although researcher endeavoured to standardise all indicators across the four web-based platforms, researcher remained cognisant of the distinct data each platform provided. In addition to seven variables assessed as absolute figures: Facebook (11, 12), Twitter (9, 11, 12), and YouTube (11, 12), all other indicators were analysed using the binary method. Researcher excluded inputs necessitating many clicks and navigation through various menus during our evaluation of each signal; instead, researcher concentrated on those easily identifiable on the site, in the "About Us" section, or the "Information" area. Researcher have exclusively considered the corporate profiles of each hospital, disregarding any secondary profiles these institutions may own on social media, their websites, or in films (events, medical departments, etc.). This quantitative investigation was conducted by us from June 20 to August 23, 2021. Researcher employed Microsoft Excel, a fundamental data application, to do this. Table 1 presents the 48 indicators utilised to assess the four variables (corporate website, Facebook, Twitter, and YouTube) concerning the three principal categories (identification, communication activities, and patient involvement) for the one hundred Multi-Specialty Hospitals selected for the analysis.

RESULTS

Leading Multi-Specialty Hospitals globally utilise social media platforms such as Facebook, Twitter, and YouTube to disseminate brand-related content and influence the perceptions of stakeholders, including patients, media organisations, and government representatives. Nevertheless, some of them execute their management of these platforms ineffectively. The quantitative data is categorised into four main sections: company website, Facebook, Twitter, and YouTube. This will elucidate our argument. The findings indicated that 76 percent of the Multi-Specialty Hospitals participating in the survey has a corporate website. The majority of Multi-Specialty Hospitals prioritised specific elements of corporate branding, including the prominent display of their emblem (100%) and the provision of links to medical departments (98.6%), research and education sections (94.7%), and the Communication Department (81.5%). However, additional parameters were also unmet: a multilingual website (77.63%), social media connectivity (76.31%), a search engine for finding doctors (48.7%), and a database for ailments (32.9%). In response to enquiries on their communication strategies, 27.5 percent of Multi-Specialty Hospitals reported having videos on their websites, while 55.6 percent indicated that they also disseminated press releases. Concerning patient engagement, 39.47% proposed an online platform, although hardly 6.6% used mobile applications. Table 2 indicates that 61% of Multi-Specialty Hospitals complied with 6–9 indications, whilst just 7 Multi-Specialty Hospitals satisfied 11 requirements. The Multi-Specialty Hospitals included are The Johns Hopkins Hospital (USA), Singapore General Hospital (Singapore), The Mount Sinai Hospital (USA), New York–Presbyterian Hospital–Columbia and Cornell (USA), UCSF Medical Centre (USA), Rush University Medical Centre (USA), and NYU Langone Multi-Specialty Hospital (USA).

Table 2: Distribution of Indicators

Number of indicators	Number of hospitals
12	0
11	7
10	7
9	14
8	7
7	13
6	13
5	6
4	8
3	1
2	0
1	0
0	24

FACEBOOK

This research considers Facebook sites in English and many local languages (such as Chinese, Spanish, French, etc.) to acknowledge the global right of individuals to communicate with physicians in their home

languages online. Our analysis indicates that more than eighty-nine percent of healthcare institutions utilized this social networking platform. However, only a limited number fulfilled all identity-related criteria: 100% had links to corporate websites, 98.72% included the logo in the primary profile image, 88.56% provided a description of the hospital, 26.72% included milestones, 10.26% showcased awards, 3.84% articulated a mission, 2.56% presented a vision, and 2.56% defined brand values. Video integration (98.72%) and an events section (96.15%) were the predominant modalities of hospital-wide communication. Finally, for patient engagement, the three Multi-Specialty Hospitals with the highest number of likes and followers were Hospital Israelita Albert Einstein, Cleveland Clinic, and Mayo Clinic (see Table 3). Conversely, regarding the 10 indicators related to identity and communication activities, 82.1 percent of Multi-Specialty Hospitals satisfied 5 or 6 criteria, with Sunnybrook Health Sciences Centre (Canada) being the sole institution to fulfil all 9 requirements.

TWITTER

Researcher also considered Twitter accounts in both English and the local language. Researcher established that 73% of Multi-Specialty Hospitals have a business presence on this social media network. Nonetheless, not all possessed identical attributes, like a corporate description, photographs of healthcare workers or hospital facilities, hashtags in the description, a founding date, or linkages to other social media platforms. Regarding communication operations, 97.26% of Multi-Specialty Hospitals have a Media Section. The leading three Multi-Specialty Hospitals by number of followings were Samsung Medical Center (South Korea) with 14,302 followings, Sunnybrook Health Sciences Centre (Canada) with 11,216 followings, and Rush University Medical Center (USA) with 8,876 followings. Table 4 indicates that the leading Multi-Specialty Hospitals in patient interaction are Hospital Clínic de Barcelona (Spain) with 44,600 likes, Hospital Universitari Vall d'Hebron (Spain) with 29,712 likes, and Cedars-Sinai Medical Center (USA) with 27,401 likes. The Multi-Specialty Hospitals with the highest follower counts were Mayo Clinic, Cleveland Clinic, and Johns Hopkins Hospital.

YOUTUBE

YouTube considered both English and local language profiles. Our data indicates that 78% of Multi-Specialty Hospitals possess a profile here; however, the overwhelming majority do not satisfy fundamental identity criteria, including the presence of a logo in the primary image (99%), links to their websites (94.87%), a corporate description (69.23%), milestones (12.82%), brand values (4%), awards (2.56%), a mission statement (1.28%), and a vision statement (1%). Approximately 97% of Multi-Specialty Hospitals have playlists, whereas around 43.59% maintained channels for diverse communication methods. Finally, for patient participation, the leading Multi-Specialty Hospital were Mayo Clinic, Cleveland Clinic, Ronald Reagan UCLA Medical Center, and UCLA Medical Center Santa Monica, ranked by the number of subscribers (700,000), views (278,000), and tables (refer to Table 5).

Table 3: Medical Facilities Ranked by Fan Base

	Hospital	Number of likes	Number of followers
1	Cleveland Clinic	2,027,605	1,952,374
2	Mayo Clinic - Rochester (USA)*	1,197,263	1,218,005
3	Mayo Clinic - Phoenix (USA)*	1,197,263	1,218,005
4	Mayo Clinic - Jacksonville (USA)*	1,197,263	1,218,005
5	Hospital Israelita Albert Einstein (Brazil)	833,642	841,785
6	Ospedale San Raffaele - Gruppo San Donato (Italy)	696,614	695,937
7	The Johns Hopkins Hospital (USA)	651,838	659,730
8	Istituto Clinico Humanitas (Italy)	598,799	597,097
9	Ronald Reagan UCLA Medical Center (USA)**	310,198	310,454
10	UCLA Medical Center - Santa Monica (USA)**	310,198	310,446

Table 4: Medical Facilities Ranked by Followers' Base

	Hospital	Number of followers
1	Mayo Clinic - Rochester (USA)*	2,027,059
2	Mayo Clinic - Phoenix (USA)*	2,027,059
3	Mayo Clinic - Jacksonville (USA)*	2,027,059
4	Cleveland Clinic (USA)	1,930,483
5	The Johns Hopkins Hospital (USA)	608,743
6	Hospital Universitario La Paz (Spain)**	91,101
7	Hospital Universitario 12 de Octubre (Spain)**	91,101
8	Hospital General Universitario Gregorio Marañón (Spain)**	91,101
9	The Mount Sinai Hospital (USA)	86,541
10	UCSF Medical Center (USA)	70,265

Ultimately, an examination of the ten factors related to communication activities and identification revealed that 69.2% of Multi-Specialty Hospitals satisfied four or five criteria, with Sunnybrook Health Sciences Centre (Canada) being the sole institution to fulfil all eight markers.

Table 5: Medical Facilities Ranked by Views

	Hospital	Number of views
1	Mayo Clinic - Rochester (USA)*	236,662,811
2	Mayo Clinic - Phoenix (USA)*	236,662,811
3	Mayo Clinic - Jacksonville (USA)*	236,662,811
4	Cleveland Clinic (USA)	89,753,324
5	Ronald Reagan UCLA Medical Center (USA)	77,724,149
6	UCLA Medical Center - Santa Monica (USA)	77,724,149
7	Asan Medical Center (South Korea)	56,496,481
8	University of Michigan Hospitals - Michigan Medicine (USA)	55,655,070
9	The Johns Hopkins Hospital (USA)	54,804,645
10	New York-Presbyterian Hospital-Columbia and Cornell (USA)	48,272,427

DISCUSSION

Prochaska, Coughlin, and Lyons (2017) assert that social media platforms may effectively engage extensive audiences at minimal or no expense, foster networks of emotional support, connect patients with physicians, and accumulate substantial data on diseases. Healthcare institutions can improve their business reputation by adopting research management systems that effectively manage data gathered on these platforms (b, 2015). This will allow them to formulate and execute successful communication strategies (Gonzalez-Pacanowski & Medina Aguerrebere, 2018). The hospital's director of corporate communication considers four essential components to attain this objective: a) communication goals, b) main and secondary objectives, c) brand positioning, and d) evaluation. All social media initiatives, whether internal or external to the hospital, are directed by these elements of the hospital's social media strategy.

Organizational growth, stakeholder perception, and communication contribute to the establishment of consistent, long-term objectives inside companies (Zerfass & Viertmann, 2017). Most Multi-Specialty Hospitals have a corporate website (76%); a Facebook profile (78%), a Twitter account (73%), and a YouTube channel (78%). Moreover, several Multi-Specialty Hospitals achieved several of the 48 KPIs outlined in this study, indicating that most Multi-Specialty Hospitals formulate strategic communication objectives prior to initiating social media initiatives. Nonetheless, as previously noted, several Multi-Specialty Hospitals' corporate websites lack an English translation, thereby impeding their endeavours to achieve global

recognition. These organizations must prioritize patient-centered communication objectives, including offering services in various languages and establishing confidential platforms, as patients have become significant stakeholders capable of influencing public perceptions of the hospital (Becerra, Reina & Victoria, 2015; Maier, 2016).

Multi-Specialty Hospitals can utilize social media to inform patients about their conditions, foster long-term relationships (Yeob, Hawkins, Baker, Shah, Pingree & Gustafson, 2017), collaborate with public health officials on events (De Las Heras-Pedrosa, Rando-Cueto, Jambrino-Maldonado & Paniagua-Rojano, 2020), and communicate narratives with journalists from diverse media outlets (Kotsenas et al., 2018). Our research indicated that patients are the primary focus for most of the institutions researcher examined. To assist patients in locating medical information, these institutions provided tools including social media accounts on Facebook (100%), Twitter (98.63%), and YouTube (94.78%). Moreover, they considered additional audiences, including journalists (81.6% of Multi-Specialty Hospitals provided a link to the Communication Department on their corporate website, and 97.26% featured a Media section on Twitter), international patients (77.63% of Multi-Specialty Hospitals maintained a multilingual website, predominantly in Spanish and Chinese), and the general public (94.7% of Multi-Specialty Hospitals included a link to health education sections on their corporate website, and 96.15% had a link to Events on Facebook).

The compatibility of these sites with traditional medical information transmission techniques has led to a significant increase in their acceptance by Multi-Specialty Hospitals in recent years (Kotsenas et al. 2018). Furthermore, these platforms provide these companies the potential to elevate their brand (Apenteng et al., 2020). Our research indicated that several healthcare facilities neglected to consider these recommendations. For instance, while several Multi-Specialty Hospitals displayed logos on multiple platforms, the majority failed to convey mission statements, vision statements, or brand values. Moreover, just 2.74% of Multi-Specialty Hospitals disclosed their foundation year on Twitter, a historical attribute that might enhance brand identity.

Penteng et al. (2020) assert that Multi-Specialty Hospitals ought to employ quantitative approaches to evaluate the impact of their social media presence on patient behavior. Multi-Specialty Hospitals may improve their business performance and customize their campaigns according to stakeholder sentiments using social media analytics (Noar, Leas, Althouse, Dredze, Kelley & Ayers, 2018; Garga, Gupta, Dzever, Sivarajahc & Kumar, 2020). A range of measures was employed to evaluate the social media presence of the Multi-Specialty Hospitals included in the study. These measures encompassed the quantity of likes and followers on Facebook and Twitter, in addition to the number of subscribers and views on YouTube. Our investigation indicated that Mayo Clinic, Cleveland Clinic, and Hospital Israelita Albert Einstein were the most effective Multi-Specialty Hospitals for Facebook likes and follows. On Twitter, Mayo Clinic surpassed Hospital Cl nic de Barcelona in follower count, while on YouTube, Mayo Clinic and UCLA Medical Center were equal in subscriber numbers, and Mayo Clinic and Cleveland Clinic were equal in view counts.

Our quantitative analysis of the world's leading Multi-Specialty Hospitals revealed three predominant trends. Multi-Specialty Hospitals primarily utilize their websites as promotional and journalistic instruments (press releases, videos, treatment links, etc.) instead of employing them as corporate communication tools to address the informational needs of its stakeholders (patient platforms, mobile applications). Secondly, social media platforms such as Facebook and Twitter possess significant potential for Multi-Specialty Hospitals to enhance their brand architecture, including their identity, purpose, vision, values, and culture. Consequently, they may influence stakeholders' perceptions of them. Thirdly, most Multi-Specialty Hospitals regard YouTube as a vital resource for health education, prompting them to publish videos that highlight physicians' expertise, patient narratives, and the hospital's treatments. This research elucidates how leading Multi-Specialty Hospitals worldwide have marketed their brands on social media and corporate websites. Our study has three significant limitations: first, researcher lack sufficient data regarding Multi-Specialty Hospitals' corporate communication strategies; second, researcher are unaware of patients' perceptions of Multi-Specialty Hospitals' social presence; and third, researcher do not understand how these social presences impact the financial aspects of Multi-Specialty Hospitals' internal operations. Researcher recommend that researchers aiming to advance this field focus on the following critical areas in the coming years: developing personal branding strategies for healthcare professionals, integrating social media into internal medical practices, and providing medical education initiatives and consultations on YouTube.

CONCLUSION

This research aims to analyze the tactics utilized by leading Multi-Specialty Hospitals worldwide in social media marketing to enhance their reputations through the distribution of brand-related content. Our quantitative analysis indicates that most Multi-Specialty Hospitals prefer basic branding elements (logo, company description, etc.) over more essential components such as identity, vision, purpose, or values. Moreover, they find it challenging to create a distinct and credible brand due to their failure to integrate these elements into their core communication efforts (events, films, etc.). Ultimately, a challenge in shaping stakeholders' perceptions of the hospital's brand is that the majority of Multi-Specialty Hospitals fail to integrate the four analyzed channels (website, Facebook, Twitter, and YouTube). The majority of the Multi-Specialty Hospitals in question should enhance the professionalism of their corporate marketing initiatives

on social media. In the absence of this, they would be unable to cultivate an authentic reputation for their brand. Researcher provides three final recommendations to conclude our inquiry. Prior to Multi-Specialty Hospitals effectively managing these channels to convey corporate principles and cultivate a pertinent brand for all stakeholders, they must transition from a marketing and journalistic approach to a corporate communication plan. Secondly, Multi-Specialty Hospitals should not just focus on medical treatments and patient experiences but also disseminate resources that are advantageous for all stakeholders, including health education initiatives and social engagement. Thirdly, Multi-Specialty Hospitals have to implement training programs to instruct staff on the independent and professional use of digital platforms, enabling them to serve as champions for the hospital's brand. Our three findings prompt us to propose three managerial implications: a) Establishing a Social Media Unit consisting of public health and corporate communication experts who can operate proficiently within defined protocols, annual plans, budgets, and key performance indicators; b) Financing research to ascertain the information requirements of all stakeholders to enable the adaptation of corporate communication strategies on social media; and c) Implementing personal branding strategies for a select group of health professionals to collectively enhance the brand.

REFERENCES

1. Abramson, K., Keefe, B., & Chou, W. (2015). Communicating About Cancer through Facebook: A Qualitative Analysis of a Breast Cancer Awareness Page. *Journal of Health Communication*, 20(2), 237-243. <https://doi.org/10.1080/10810730.2014.927034>.
2. Apenteng, B., Ekpo, I., Mutiso, F., Akowuah, E., & Opoku, S. (2020). Examining the Relationship between Social Media Engagement and Hospital Revenue. *Health Marketing Quarterly*, 25, 1-12. <https://doi.org/10.1080/07359683.2020.1713575>.
3. Archiropoli, A., Ginossar, T., Wilcox, B., Avila, M., Hillm, R., & Oetzel, J. (2016). Factors of Interpersonal Communication and Behavioral Health on Medication Self-efficacy and Medication Adherence. *AIDS Care*, 28(12), 1607-1614. <https://doi.org/10.1080/09540121.2016.1192577>.
4. Basch, C., Basch, C., Hillyer, G., & Reeves, R. (2015). YouTube Videos Related to Skin Cancer: A Missed Opportunity for Cancer Prevention and Control. *JMIR Cancer*, 2(1), e1. <https://doi.org/10.2196/cancer.4204>.
5. Becerra, E., Reina, J., & Victoria, J. (2015). Comunicación e Imagen de los Servicios Sanitarios. El Caso de los Centros Hospitalarios Andaluces (2004-2013). *Prisma Social*, 14, 1-28.
6. Blomgren, M., Hedmo, T., & Waks, C. (2016). Being Special in an Ordinary Way: Swedish Hospitals' Strategic Web Communication. *International Journal of Strategic Communication*, 10(3), 177-194. <https://doi.org/10.1080/1553118X.2016.1176569>.
7. Bubien, Y. (2015). Hôpital 2.0: du virtuel au réel. *European Psychiatry*, 30(8), S74.
8. Blackstone, S., & Pressman, H. (2016). Patient Communication in Health Care Settings: new Opportunities for Augmentative and Alternative Communication. *Augmentative and Alternative Communication*, 32(1), 69-79. <https://doi.org/10.3109/07434618.2015.1125947>.
9. Brent, R. (2016). Communication Theory and Health Communication Practice: The More Things Change, the More They Stay the Same. *Health Communication*, 31(1), 1-11. <https://doi.org/10.1080/10410236.2014.923086>.
10. Chan, K., Yu-Ling, M., Huxley, P., & Evans, S. (2016, January). Interpersonal communication, community participation and social inclusion among mental health services users. *International Behavioral Health Conference: BeHealth 2016 - Multiplicity in action for better health*, Hong Kong Baptist University, Hong Kong, January 16th-17th.
11. Costa-Sánchez, C., & Míguez-González, M. (2018). Use of Social Media for Health Education and Corporate Communication of Hospitals. *El Profesional de la Información*, 27(5), 1145-1150. <https://doi.org/10.3145/epi.2018.sep.18>.
12. Cua, S., Moffatt-Bruce, S., & White, S. (2017). Reputation and the Best Hospital Rankings: What Does It Really Mean? *American Journal of Medical Quality*, 32(6), 632-637. <https://doi.org/10.1177/1062860617691843>.
13. De Las Heras-Pedrosa, C., Rando-Cueto, D., Jambrino-Maldonado, C., & Paniagua-Rojano, J. (2020). Analysis and Study of Hospital Communication via Social Media from the Patient Perspective. *Cogent Social Sciences*, 6(1). <https://doi.org/10.1080/23311886.2020.1718578>.
14. Esposito, A. (2017). Hospital Branding in Italy: A Pilot Study based on the Case Method. *Health Marketing Quarterly*, 34(1), 35-47. <https://doi.org/10.1080/07359683.2016.1275211>.
15. Facebook. (2021). Number of Monthly Active Facebook Users Worldwide as of 2nd Quarter 2021. London: Statista. Retrieved from <https://www.statista.com/statistics/264810/number-of-monthly-active-facebook-users-worldwide/>
16. Fischer, S. (2014). Hospital Positioning and Integrated Hospital Marketing Communications: State-of-the-Art Review, Conceptual Framework, and Research Agenda. *Journal of Nonprofit & Public Sector Marketing*, 26(1), 1-34. <https://doi.org/10.1080/10495142.2014.870431>.

17. Gage-Bouchard, E., La Valley, S., Mollica, M., & Beaupin L. (2017). Examining how Cancer Caregivers use Facebook for Cancer-Related Communication. *Cancer Nursing*, 40(4), 332-338. <https://doi.org/10.1097/NCC.0000000000000418>.
18. Garga, P., Gupta, B., Dzever, S., Sivarajahc, U., & Kumar, V. (2020). Examining the Relationship between Social Media Analytics Practices and Business Performance in the Indian Retail and IT Industries: The Mediation Role of Customer Engagement. *International Journal of Information Management*, 50, 575-585. <https://doi.org/10.1016/j.ijinfomgt.2020.102069>.
19. González Pacanowski, T., & Medina Aguerrebere, P. (2018). El Rol de las Redes Sociales en la Difusión de la Identidad Corporativa de los Hospitals Españoles. *Revista de la Asociación Española de Investigación de la Comunicación*, 5(10), 30-38. Doi <https://doi.org/10.24137/raeic.5.10.5>.
20. Haluza, D., Naszay, M., Stockinger, A., & Jungwirth, D. (2016). Digital Natives versus Digital Immigrants: Influence of Online Health Information Seeking on the Doctor–Patient Relationship. *Health Communication*, 32(11), 1342-1349. <https://dx.doi.org/10.1080/10410236.2016.1220044>.
21. Ivanov, A., & Sharman, R. (2018). Impact of User-Generated Internet Content on Hospital Reputational Dynamics. *Journal of Management Information Systems*, 35(4), 1277-1300. <https://dx.doi.org/10.1080/07421222.2018.1523603>.
22. Kotsenas, A., Aase, L., Arce, M., & Timimi, F (2018). The Social Media DNA of Mayo Clinic – and Health Care. *Journal of American College of Radiology*, 15, 162-166. <https://doi.org/10.1016/j.jacr.2017.09.026>.
23. Jahromi, V., Tatabaee, S., Abdar, Z., & Rajabi, M. (2016). Active Listening: The Key of Successful Communication in Hospital Managers. *Electronic Physician*, 8(3), 2123–2128. <https://dx.doi.org/10.19082/2123>.
24. Lim, W. (2016). Social Media in Medical and Health Care: Opportunities and Challenges. *Marketing Intelligence & Planning*, 34(7), 964 – 976. <https://dx.doi.org/10.1108/MIP-06-2015-0120>.
25. McCaughey, D., Baumgardner, C., Gaudes, A., LaRochelle, D., Wu, K. & Raichura, T. (2014). Best Practices in Social Media: Utilizing a Value Matrix to Assess Social Media’s Impact on Health Care. *Social Science Computer Review*, 32(5), 575-589. <https://dx.doi.org/10.1177/0894439314525332>.
26. Maier, C. (2016). Beyond Branding: Van Riel and Fombrun’s Corporate Communication Theory in the Human Services Sector. *Qualitative Research Reports in Communication*, 17(1), 27-35. <https://dx.doi.org/10.1080/17459435.2015.1088892>.
27. Matarín Jiménez, T. (2015). Redes Sociales en Prevención y Promoción de la Salud. Una Revision de la Actualidad. *Revista Española de Comunicación de Salud*, 6(1), 62-69.
28. Medina-Aguerebereg, P., González-Pacanowski, T., & Medina, E. (2020). Online Reputation Management by Cancer Hospitals: A Systematic Literature Review in the USA and Spain. *Profesional de la Información*, 29(6), e290617. <https://doi.org/10.3145/epi.2020.nov.17>.
29. Moser, R., & Greeman, G. (2014). An Empirical Analysis of the Public’s Attitudes toward Advertising Hospital Services: A Comparative Cross-Sectional Study. *Health Marketing Quarterly*, 31, 13–30. <https://doi.org/10.1080/07359683.2013.847334>.
30. Myrick, J., Holton, A., Himboim, I., & Love, B. (2016). Stupidcancer: Exploring a Typology of Social Support and the Role of Emotional Expression in a Social Media Community. *Health Communication*, 31(5), 596-605. <http://dx.doi.org/10.1080/10410236.2014.981664>.
31. Namkoong, K., Nah, S., Record, R., & Van Stee, S. (2017). Communication, Reasoning, and Planned Behaviours: Unveiling the Effect of Interactive Communication in an Anti-Smoking Social Media Campaign. *Health Communication*, 32(1), 41-50. <http://dx.doi.org/10.1080/10410236.2015.1099501>.
32. Newsweek. (2021a). World’s Best Hospitals 2021. Methodology. New York: Newsweek. Retrieved from <https://d.newsweek.com/en/file/461200/worlds-best-hospitals-2021-extended-methodology-20200303.pdf>.
33. Newsweek. (2021b). World’s Best Hospitals 2021. New York: Newsweek. Retrieved from <https://www.newsweek.com/best-hospitals-2021>.
34. Noar, S., Leas, E., Althouse, B., Dredze, M., Kelley, D., & Ayers, J. (2018). Can a Selfie Promote Public Engagement with Skin Cancer? *Preventive Medicine*, 111, 280-283. <http://dx.doi.org/10.1016/j.ypmed.2017.10.038>.
35. Park, H., Reber, B., & Chon, M. (2016). Tweeting as Health Communication: Health Organizations’ Use of Twitter for Health Promotion and Public Engagement. *Journal of Health Communication*, 21(2), 188-198. <http://dx.doi.org/10.1080/10810730.2015.1058435>.
36. Pelitti, P. (2016). Estrategias de Comunicación Interna y Externa de los Hospitals Públicos Bonaerenses de la Región Sanitaria X. Question. *Revista Especializada en Comunicación y Periodismo*, 1(49), 368-379.
37. Peluchette, J., Karl, K., & Coustasse, A. (2016). Physicians, Patients, and Facebook: Could You? Would You? Should You? *Health Marketing Quarterly*, 33(2), 112-126. <http://dx.doi.org/10.1080/07359683.2016.1166811>.
38. Prochaska, J., Coughlin, S., & Lyons, E. (2017). Social Media and Mobile Technology for Cancer Prevention and Treatment. *American Society of Clinical Oncology Educational Book*, 37, 128-137. http://dx.doi.org/10.14694/EDBK_173841.

39. Rando Cueto, D., Paniagua Rojano, F., & De las Heras Pedrosa, C. (2016). Influence Factors on the Success of Hospital Communication via Social Networks. *Revista Latina de Comunicación Social*, 71, 1.170-1.186. <http://dx.doi.org/10.4185/RLCS-2016-1140en>.
40. Revuelta, G. (2019). Comportamiento de la Ciudadanía respecto a la Información sobre Salud: Exposición, Acceso y Usos. *Revista Española de Comunicación en Salud*, 10(1), 9-20. <https://doi.org/10.20318/revhisto.2019.4448>
41. Rodrigues, A., Azevedo, C., & Calvo, V. (2016). Internal Communication in Organizations: Practical Instruments to Help the Shift Change. *Millenium*, 2(1), 105-114.
42. Rodríguez-González, A.-M. (2021). Educación para la Salud, Prevención y Promoción Comunitaria a través de la Página de Facebook de un Centro de Salud de Atención Primaria. *Revista Española de Comunicación en Salud*, 12(1), 58-66. <https://doi.org/10.20318/recs.2021.5307>
43. Ruiz-Granja, M. (2015). Análisis Comunicacional de Páginas Web Hospitalarias. El Caso de los Hospitals Sevillanos. *Revista Española de Comunicación y Salud*, 6(2), 138-156.
44. Sedrak, M., Cohen, R., Merchant, R., & Schapira, M. (2016). Cancer Communication in the Social Media Age. *JAMA Oncology*, 1, 2(6), 822-823. <http://dx.doi.org/10.1001/jamaoncol.2015.5475>.
45. Smailhodzic, E., Hooijsma, W., Boonstra, A., & Langley, D. (2016). Social Media Use in Healthcare: A Systematic Review of Effects on Patients and on their Relationship with Healthcare Professionals. *BMC Health Services Research*, 16, 442. <http://dx.doi.org/10.1186/s12913-016-1691-0>.
46. Taken, K. (2017). Hospital Marketing and Communications via Social Media. *Services Marketing Quarterly*, 38(3), 187-201. <https://doi.org/10.1080/15332969.2017.1363518>.
47. Trepanier, S., & Gooch, P. (2014). Personal Branding and Nurse Leader Professional Image. *Nurse Leader*, 12(3), 51-57. <http://dx.doi.org/10.1016/j.mnl.2014.03.005>.
48. Triemstra, J., Stork, R., & Arora, V. (2018). Correlations between Hospitals' Social Media Presence and Reputation Score and Ranking: Cross-Sectional Analysis. *Journal of Medical Internet Research*, 20(11), e289. <http://dx.doi.org/10.2196/jmir.9713>.
49. Visser, L., Bleijenbergh, I., Benschop, Y., Van Riel, A., & Bloem, B. (2016). Do Online Communities Change Power Processes in Healthcare? Using Case Studies to Examine the Use of Online Health Communities by Patients with Parkinson's disease. *British Medical Journal*, 6, e012110. <http://dx.doi.org/10.1136/bmjopen-2016-012110>.
50. Welch, M., & Jackson, P. (2007). Rethinking Internal Communication: a Stakeholder Approach. *Corporate Communications: An International Journal*, 12(2), 177-198. <https://doi.org/10.1108/13563280710744847>.
51. Yeob, J., Hawkins, R., Baker, T., Shah, D., Pingree, S., & Gustafson, D. (2017). How Cancer Patients Use and Benefit from an Interactive Cancer Communication System. *Journal of Health Communication*, 22(10), 792-799. <https://doi.org/10.1080/10810730.2017.1360413>.
52. Zerfass, A., & Viertmann, C. (2017). Creating Business Value through Corporate Communication: A Theory-based Framework and its Practical Application. *Journal of Communication Management* 21(1), 68-81. <https://doi.org/10.1108/JCOM-07-2016-0059>.