

Tack: the challenges of hyper-social organizations

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Purpose of the research – Social media tools are becoming an important presence in healthcare. This paper analyses together social media and health, to address the question of how social networks may, with knowledge sharing to patients, doctors, health care stakeholders, provide a new vehicle of communication. Today, social media open new organizational scenarios also in the healthcare systems, which announce important changes in managerial imperatives, structures, processes and organizational cultures; that is new systems that have to be able to penetrate in emotionality of persons (Normann, 2006). Social media allow an instant sharing of ideas, opinions, knowledge and experiences, creating a new “space-time” dimension that would translate in a new way (additional) to "cure" the patient (Hawn, 2009). The health care organizations, complex adaptive systems, are becoming open and collaborative systems, capable of developing deep partnerships with patients, their families. In this way they offer new services, improving thus the effectiveness and efficiency of medical care. To achieve this, it is necessary to create places, especially virtual, where new “distinctive” knowledge is created, a knowledge that spreads through relational assets that are established between the human components.

Theoretical background - Starting to the idea that the ambiguity related to legal and ethical issues (for example patient privacy) of social media contains the enthusiasm related to the potentialities that they offer, we have developed an overview of six European countries to bring out the real use of social media in Hospitals. Considering that "the key to success is the intelligent use of the relationship with the customer" (Normann, 2000:22), this paper investigates the perception of the use of Facebook by patients and doctors and, in particular, it explores Facebook users' awareness of the perceived benefits and if these will outweigh the observed risks.

We apply a method, based on difference measurement (Krantz et al., 1971; Roberts, 1979), fitted on the perceptual preferences of patients and doctors of Facebook communication.

The Maximum Difference Scaling (MDS) was adopted for developing an unidimensional scale of benefit or drawback importance. It is a research method (Chrzan & Golovashkina, 2006), which analyzes both the best and the worst choice from a list containing multiple items.

A set of items to be investigated was selected and we have presented the sets one at a time to respondents. In each set, the group was asked to examine the most salient or important attribute (the best) as well as the least important (the worst). Ratings of each item were established on a five-point scale of Extremely Important, Very Important, Somewhat Important, Not Very Important, and Not at All Important.

The group was asked to select the pair with the largest perceptual difference (Maximum Difference). MDS requires an experimental approach where each item is shown at least three times (Orme, 2005).

The data were collected through a pilot project at the European level, which involved 30.000 (5.000 for each country) people, including doctors, members of different health care organizations, and patients.

Research gap. The pilot project, starting from the existing data in the literature on the use of virtual communication and of social networks in health care organization, identify to what extent European hospitals use social media and if the use of social networks such as communication systems in health care organization improves the human relationship and communication between the patient and the health care system. There is few research on this topic, so it can be usefull for healthcare organizations to understand which is the european situation and if these tools are perceived as benefits by patients and doctors. In this way healthcare organizations can understand expectations of their stakeholders and developing the ability to give a voice to patients, to communicate fast, to be near to the patients, to develop a "new image" of "Hyper-social hospitals" .

Main results – This paper puts in evidence the need to reaffirm and reshape "the closeness and distance" between healthcare organizations and individuals. Patients today have a "digital identity", spend their free time online in social networks, they have energy, enthusiasm and ability to find on-line solutions to their pathologies, they speak the language of the computer, they love the virtual interaction. And it's the same for doctors: a new generation, "always on-line" (Veen and Vrakking, 2010) who is connected, content-centric, computerized, community oriented. In this scenario hospitals seem to be becoming aware of the benefits social media could offer but they are still rather sceptical about how Facebook can be used. The challenge is due and it must be not only organizational but, above all, cultural (Normann, 1996).

Keywords – Hyper-social organization, social networks, health care organizations, new organizational models of health organizations.