The role of pediatricians in social media: digital identity. Good practice recommendations

Fernando Lamas[a], Laura Krynski[a], Hernán Rowensztein[b], Ignacio Maglio[c]

ABSTRACT

The digital revolution resulting from the emergence of the Web 2.0 and the arrival of social media have changed how human beings communicate, and the physician-patient relationship is not an exception to this new environment. The origin of a digital identity is critical for our participation in social media as social communicators, but digital professionalism should be framed within good practice recommendations with well-defined legal and ethical outlines.

The objective of this article is to provide tools for the adequate use of social media and digital presence, taking the protection of personal image and disseminated information into consideration.

Key words: social media, Web 2.0, digital identity, digital professionalism, pediatrics.

a. Subcommittee on Information and Technology. Sociedad Argentina de Pediatría.
b. Hospital de Pediatría S.A.M.I.C. "Prof. Dr. Juan P. Garrahan," Autonomous City of Buenos Aires, Argentina.
c. Comprehensive Care Team of Hospital de Infecciosas "Francisco Javier Muñiz," Autonomous City of Buenos Aires, Argentina.

E-mail address:
Fernando Lamas:
doctorlamas@gmail.com

INTRODUCTION

Looking at the history of humankind, after the Industrial Revolution, no other challenge has been as important as that resulting from the use of computers and the Internet. Toward the end of the 20th century, such event has ushered in the digital revolution (also called Fourth Industrial Revolution), a phenomenon that has accelerated and intensified in recent years with the advances in technology used in smart phones and other devices.[1]

With the emergence of the Web 2.0 in 2004, we have witnessed the possibility of users connecting via social media.[2] Over a short period of time, this caused a paradigm shift in relation to the digital world, so that our presence in the Web became massive, public, and interconnected. Now, with the Web 3.0, this has widened and, with a smarter Internet, users may make more direct searches and become more connected via different platforms and devices. Access to information and interconnectivity are smooth and accurate.[3]

Professional practice has been both a party and a witness of this journey, generating, over a short period of time, an exponential change in the communication between pediatricians and their patients' families.[4]

Nowadays, the reach of a pediatrician's digital identity extends far beyond the office setting. Followers may be numerous and heterogeneous in terms of beliefs and knowledge. Content dissemination via social media implies a big responsibility and this should not be overlooked. We believe it is critical to follow good practice recommendations. The objective of this article is to

provide tools for the adequate use of social media and digital presence, taking the protection of personal image and disseminated information into consideration.

SOCIAL MEDIA: DEFINITION AND CHARACTERISTICS

Internet social media (ISM) are defined as virtual communication platforms based on information dissemination through networking and interaction via digital identities, placing the end user at the center of content production and dissemination.

Internet social media have certain common characteristics inherent to their definition: platforms allow interacting with users; support video, chat, and article posting; and are based on communities grouped by interests or because they follow the same person or group.[5]

Danah M. Boyd and Nicole B. Ellison (2007) defined social network sites as web-based services that allow individuals to construct a public or semi-public profile within a bounded system, articulate a list of other users with whom they share a connection, and view and traverse their list of connections and those made by others within the system.[6]

Facebook® was launched in 2004 and currently has 2740 million users, followed by YouTube® (2000 million users), Instagram® (1000 million users), and more recently, TikTok®, which was created in 2017 (800 million users). At this moment, 4.6 billion people use the Internet.[7]

Each of these platforms has its own characteristics and convenes people with varying interests and from different age ranges.

PRACTICE YOUR DIGITAL IDENTITY
DEVELOPING IDENTITY

According to Kaczmarczyk et al., digital professionalism may be defined as the attitudes and behaviors that reflect traditional professionalism paradigms, but are manifested through digital media. From this perspective, it extends far beyond known digital communication etiquette rules because it involves any information affecting or modifying professional identity, attitudes, and behaviors.[8]

Digital identity or identity 2.0 may be therefore understood as "everything an individual shows in cyberspace, including both their actions and how they are perceived by other network members".[9,10]

It is a broad concept, including personal profiles in social media, comments published in any online platform (forums, blogs, social media, etc.) and the contact network profiled in the digital world.

It is important to understand the difference between these related concepts: digital reputation and personal brand. Whereas digital reputation is related to identity and the opinion the Internet community has about a health care provider, a personal brand consists in self-promotion, as if you were a trademark.

Considering these concepts, when generating a professional digital identity, health care providers should take their digital reputation into account and where they want to take their personal brand; they should also be aware of the characteristics of each social network and the type of communication offered.

Content: what, how, for whom

From the perspective of information exchange, social media communication may be classified into 2 large groups: synchronous or asynchronous, based on the simultaneity of message exchange.

Synchronous communication is that where users, through a telematic network, communicate at the same time with one another via text, audio and/or video. Both sender and receiver should be connected at the same time.

With asynchronous communication, times are different. The receiver may read the message at any time after the sender posts it, without communication occurring at the same time.

Sometimes, both types of communication coexist. For example, a live session in social media generates a synchronous dialog with the audience and, in turn, offers an asynchronous channel for messages to continue with the conversation.

Initially, our task is to choose the best platform depending on our proposed personal objective and the audience we want to reach, considering the different social groups using the different types of networks. It is important to understand which is the most adequate content for each so that we are consistent with the selected audience.

Then, we should establish a strategy to select the material we will post online to keep our networks active and warrant daily visitors. In addition, our strategy will allow us to plan the best time slot for material posting in order to reach the greatest audience possible (measured as higher number of views, likes, etc.). If the adequate search algorithms and tags are considered, the material will increase its reach.

With this plan, a calendar of events and topics to be published over the month should be developed. This will allow us to ensure material is available to keep our network active. In turn, health care providers should continually stay abreast of updates because any new relevant scientific information should be disseminated primarily in a clear and objective manner. The relationship between a health care provider with presence in the social media and recognized medical associations offers public reliability, supports their ongoing training, and validates their medical knowledge.[11,12]

Outcome assessment

In the third place, we should consider the analysis of our impact. Every social network has specific analytical parameters that are measured with different tools. Such information is necessary to know if the proposed objectives are met or a change in strategy is required.

Different parameters may be analyzed to measure the impact of a post:

Number of followers: It reflects the number of members of that social network over time.

Reach: It is defined by the number of single users who interact with your posts.

Impressions: It refers to the number of times a user watches a story, an Instagram TV video or a post.

Engagement: This term has been historically used in marketing to define the extent of involvement consumers have with a brand. In the world of digital marketing, engagement is related to the interaction with a specific post: it may be measured as number of clicks, likes, comments or the times a material was shared with other users. By measuring engagement, it is possible to establish which posts are more successful so that we can understand and meet the interests of our own audience.

GOOD PRACTICE RECOMMENDATIONS

In spite of the apparent benefits, being present in social media also entails potential risks for patients and health care providers. This has called for the development of institutional guidelines to prevent such risks.[13,14]

Although using a medical picture as a clinical case of interest, with the patient's authorization, may be useful to disseminate information, the risk of displaying information without the proper consent may have unintended consequences.

In addition to protecting our patient's image,

we should also look after our own image. In this regard, some recommendations were published last year.[15] Professionalism is one of the 6 basic skills established by the Council for the Accreditation of Post-Graduate Medical Education.[16]

As an example, Hospital de Pediatría S.A.M.I.C. "Prof. Dr. Juan P. Garrahan" recently published the Rules for an Adequate Social Media Use, which recommend the following:

About confidentiality and professional secrecy

Ethics. Social media require the same ethical conduct as professional relationships with patients and colleagues in everyday life. An inadequate use of social media may blur the limits between public and professional life.

Privacy. Confidentiality should be maintained at all times, including in texts, images and geolocation of comments that may identify any patient. Patient confidentiality is also implemented online and in other media.

About professional image

Regulation. When identifying as a health care provider member of an organization, social media management rules should be followed, even if such use takes place outside the organization.

Consistency. Before posting a text, it is necessary to analyze if it will pass the test of time and will not harm your professional image and/or that of the facility you are working for.

Respect. It is necessary to be respectful during interaction with colleagues and/or when commenting about them. It would not be adequate to make informal, personal or derogatory remarks about patients or colleagues in online public forums.

Presence. You should be aware of your own digital presence and proactive to remove any content that may be seen as unprofessional.

About the professional relationship with patients

Professionalism. Your personal life should be separate from your professional life. The recommendation is that health care providers, including students, should never accept friend requests from current or former patients or their family.

Generalization. Comments about symptoms or treatments should be generic, never about a particular patient, even if such patient is questioning you in social media.

MEDICAL-LEGAL RECOMMENDATIONS

The participation of health care providers or institutions in social media has brought about tangible benefits. In spite of this, sometimes such involvement may pose certain risks and affect both the digital identity and reputation of health care providers and the integrity and privacy of patients.

Professional digital identity may be affected by the use of different profiling strategies, defined as the way a person may be identified based on refined processes of automatic personal data management.[17]

In relation to health care providers, profiling may affect their digital reputation and may also be used deficiently, for example, for marketing purposes by certain industries attempting to have a direct incidence on medical prescriptions or indications.

On their side, patient profiling based on health sensitive data capture and processing may lead to risks for stigmatization and discrimination both in relation to employment and health insurance, among others.[18]

Because of this, it is critical to know the concept of profiling, the way digital data are processed and its objectives.

The risks of profiling imply accepting the need to establish and promote the right not to be profiled, including, among other variables, rejecting any type of decision made based on data collected from digital profiles obtained through social media interaction and such data processing using artificial intelligence (AI) systems. Profiling should also be rejected if based on the processing of sensitive data or information related to ethnicity, religion, gender, and, especially, health and/or disease.

Therefore, health care providers' participation in social media will necessary require knowing exactly, through platforms' terms and conditions, if they auction data or profiles so that each user knows the conditions and objectives and can exercise the right not to be profiled based on personal and sensitive data processing.

Although there is no specific regulation about profiling in Argentina, Law No. 25326 for Personal Data Protection, enacted in October 2000, has established the right to information self-determination, including the right to access, correct, and remove any personal or sensitive data.[19]

Health care providers with a frequent online presence should check the Internet regularly to ensure the quality, transparency, and reliability of their professional information and profiling.

In terms of social media participation and involvement, the following are basic ethical and legal preventions and protections:[13]
a) Ensure the due protection of patient personal and sensitive data.
b) Do not freely accept contacts, followers, and friend requests without first analyzing the type of relationship resulting from such connection.
c) Avoid giving medical advice, recommending specific treatments, and promoting drugs or medical technology procedures.
d) Strictly follow codes of medical ethics, as applicable to social media use.
e) Establish clear and accurate conditions for use about the extent of participation in each social network.

Final considerations

When considering the possibility of being present in a social network, please review the following items:
- Define the objective of your presence in social media.
- Choose a social network based on such objective.
- If a health care provider is a member of an organization, they should comply with its professional standards, as well as its digital presence regulations and policies.
- Always consider privacy and personal data protection policies in social media, in relation to both patients and health care providers.
- Content should be understandable, clear, and consistent with the audience.
- Information posted online should be scientifically validated and periodically updated.
- An adequate author quotation is a good practice recommendation when sharing content.
- Negative, aggressive, and inadequate comments should be managed with caution.
- Consider that support from a sponsor may affect your personal and professional image and distort your initial objective.
- Search the web for references to your own identity; this will help you understand your digital image and the aspects you need to change or reinforce.
- The recommendation is that professional and personal information should not coexist in the same account.

CONCLUSION

Social media reach a very high, growing number of users; therefore, any action taking place in these settings have a high impact in the short, medium, and long term, both in the personal and professional fields.

Developing a digital identity and keeping a good image are daily tasks that should be undertaken in a responsible manner.

Therefore, it is a priority to open an ongoing discussion about the role of health care providers in social media, both in relation to organizations and scientific societies, which play a critical leading role in professional training across generations. ■

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