



"...Not just an ordinary hospital, we are committed to making our patients have value for their money": a qualitative analysis of social media use in Nigeria's public and private hospitals

Silas Udenze¹, Uwalaka Temple²

¹Humanities and Communication, Universitat Oberta de Catalunya

²Arts and Communication, University of Canberra, Bruce Campus

Abstract:

In this study, we comparatively investigated the extent to which government and private-owned hospitals use social media. Using the constant comparison approach for analysing qualitative data, the study analysed data from multiple focus group discussions with 12 social media handlers from both government and private-owned hospitals in Abuja and qualitative content analysis of Facebook posts and tweets from the hospitals in Abuja. Contrary to previous findings, which assert that government hospitals use social media to propagate government information and private hospitals use social media from the business/capitalist perspective, we discovered they both use social media for marketing purposes- to enhance their corporate image and interact with their clients. The data further revealed that the topic of health education is common; that is, both the private and the public hospitals engage in disseminating health education content. By implication, this research draws healthcare institutions' consciousness, especially government-owned hospitals, to the importance of social media in the health sector.

Keywords: Social media, Nigeria, Public hospital, Private hospital, Health public relations, Marketing-communication

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Corresponding author:

Silas Udenze

Doctoral Grant Holder, Humanities and Communication

Universitat Oberta de Catalunya, Rambla del Poblenou, 156, 08018 Barcelona, Spain

E-mail: sudenze@uoc.edu

Introduction

Globally, the utilisation of information and communication technologies has impacted the health sector. Social media are essential platforms that have transformed the delivery of information (Udenze, 2022), and the use of social media, namely, Twitter, Instagram, Facebook, YouTube, and WhatsApp, have become popular. The adoption of social media in healthcare delivery is realised both at the organisational and personal levels (Heldman et

al., 2013; Desai et al., 2015; Udenze, 2020), and the objectives of healthcare organisations and individuals' use of social media and social media's effect on individuals and organisations are distinct. Health institutions, namely hospitals and clinics, have increasingly adopted social media techniques, which involve creating an organisational presence on platforms such as Twitter, Facebook, Instagram, and YouTube (Kordzadeh & Young, 2015). As of January 2015, according to Bennett (2014), more than 1,500 hospitals in the United States actively used social media

platforms and maintained officially sponsored accounts. For instance, Kordzadeh and Young (2015) argue that 93 hospitals in Texas and 119 hospitals in New York, both in the United States, have institutionally-sponsored social media accounts. The scholars further opine that the famous John Hopkins Hospital has a robust social media presence on YouTube, Twitter and Facebook. The hospital's YouTube channel has more than 12,000 subscribers; its Twitter handle has 275,000 followers and above 245,000 subscribers on its Facebook fan page. In Europe, the utilisation of social media by health institutions is burgeoning. Van de Belt et al. (2012) survey of 873 European hospitals indicates that 67 per cent of hospitals have a Facebook account, and in 2010 only 10 per cent of hospitals had a Facebook account. In Kenya, Muinga et al. (2020) note that using social media in private hospitals is burgeoning. These statistics indicate hospitals' increased dependence on social media for health-related publications and communication purposes.

Social media have critical advantages for health institutions. First, it strengthens the market status of healthcare outlets and engenders brand perception (Williams, 2011; McCaughey et al., 2014; Ventola, 2014). Besides, it has other benefits such as minimising the cost of healthcare, enlightening patients and facilitating the interaction between patients and healthcare providers, increasing cooperation among healthcare professionals, sharing health information, and publicising health campaigns (Alsughayr, 2015; Saleh et al., 2012; Van de et al., 2012). Notably, in Nigeria, Batta and Iwokwagh (2015) argue that teaching hospitals (hospitals affiliated with institutions of higher learning) predominantly leverage social media for image-building and public relations purposes.

Hence, healthcare organisations can potentially improve their image and attract new clients by leveraging social media. Additionally, by analysing comments posted by health consumers on social media platforms, healthcare institutions can assess the quality of the services they provide to their customers (Griffis et al., 2014). Despite other scholars' efforts to understand studies on hospitals' use of social media, thus far, only a few studies have focused on the subject matter. Besides, to our knowledge, there is a massive vacuum in hospitals' study of social media in Nigeria. Hence, this study seeks to fill this gap by comparatively investigating public and privately-owned

hospitals' use of social media to improve the literature in the study domain. Specifically, this study sought to answer the following research questions (1) How do private and public hospitals in Abuja use social media? (2) What is the predominant social media platform utilized by public and private hospitals in Abuja? And (3) What categories of information are disseminated on the social media of both public and private hospitals in Abuja?

Engendering Health Communication in the 21st Century: The Role of Social Media

Studies in health institutions' use of social media are growing gradually as patients increasingly seek health information online (Vance et al., 2009; Antheunis et al., 2013). Hospitals and clinics' well-defined online communication management techniques involve the need to know the audiences and their discussion spaces and endow their human relations with validity and reliability (Moorhead et al., 2013). That is even more the case in today's changing circumstances, where society wishes not to be spoken to but to be heard, participate appropriately, and meet its needs (Kietzmann et al., 2011). Besides, Richer et al. (2014) argue that 97 per cent and 66 per cent of hospitals in the US have Facebook and Twitter accounts, respectively. This revelation implies that one in five hospitals uses Facebook or Twitter, to communicate with patients.

Understanding the adoption of social media in healthcare has recently become of interest to scholars in different research domains. Primarily, the main purpose of some of the studies that have focused on this emerging research area has been to identify how specific healthcare organisations utilise social media platforms (Angelle & Rose, 2010; Anderson, 2011). Secondly, how hospitals in different parts of the world, namely, Spain (Heras-Pedrosa, 2020; Bermudez-Tamayo et al., 2013) the United States (Griffis et al., 2014), and Turkey (Tunceli et al., 2014; Çerçi, 2017). Thirdly, what social media platform, for instance, Instagram, Facebook, Twitter, WhatsApp are primarily used by health institutions and for what purposes (Rhoads, 2012), and finally, how the adoption and use of social media are diverse across different types of hospitals (Thaker et al., 2011; Griffis et al., 2014).

Some studies have explored the features of hospitals that rely on social media. The findings of those studies showed that social media are more likely to be adopted and utilised by hospitals and clinics that are large, urban, non-profit, and

have medical education missions (Thaker et al., 2011; Richer et al., 2014). In addition, Facebook, Twitter, Blogs, and YouTube are the most widely adopted social media websites (Rhoads, 2012; Griffis et al., 2014; Richer et al., 2014; Cordos et al., 2017), with Facebook and Twitter being the most popular ones. In the United States, Richer et al. (2014) found that 97 per cent and 66 per cent of a sample of 471 hospitals had an account on Facebook and Twitter, respectively, while almost 100 per cent of hospitals out of 337 surveyed by Griffis et al. (2014) in the U.S use either Facebook or Twitter. Elgin & Ugurluoglu's (2019) purposive qualitative study of fifteen communication managers in Turkish private hospitals found that the most used social media platforms include Facebook, Twitter, and Instagram. These platforms are mainly being used to share health-related information by the hospitals. The study also found that hospitals had increased recognition as an advantage of social media, but difficulty deleting comments related to the hospital was a disadvantage.

Researchers have also assessed the primary objectives of utilising social media by hospitals. For instance, Thaker et al. (2011) observed American hospitals' use of social media. The authors realised that hospitals primarily utilise social media platforms to target the general public, publicise the hospitals' public image, and engage in public relations, news and events, and health promotion. The above assertion is in tandem with Batta and Iwokwagh's (2015) quantitative exploration of social media use by Nigerian teaching hospitals. The scholars note that Nigerian teaching hospitals use social media mainly for publicity and propagation of self-image, articulating their vision and mission statements, and disseminating information on administrative and personnel structures. Conversely, they underutilize it for health promotion initiatives financial transactions, and interactive engagement with clients. Bermudez-Tamayo et al. (2013) study of Spanish hospitals and clinics revealed that healthcare institutions adopt social media to publish news items, educate users, establish and manage discussion groups, create community exposure, and promote specific and essential services offered by a hospital. Similarly, in Spain, Medina-Aguerreberre (2018) considers hospitals' social media use a potent institutional communication tool that creates reputable brands, fostering relationships with various audiences. However, only half of the hospitals use Facebook, Twitter, or YouTube as communication channels (Costa-Sánchez et al., 2016), and large government

hospitals have the most outstanding online presence (Bermúdez-Tamayo et al., 2013). Besides, the open nature of social media could harm health organisations. The audience can publish on social media in opposition to or disregarding the institution, which can harm the hospital's reputation (Lagu et al., 2016).

Adopting a mixed-method approach, Heras-Pedrosa (2020) analysed hospital communication through social media from the patient's perspective. Twenty research participants from the national, regional and local patients' associations were assessed on their interaction with hospitals via social media. The study's findings revealed that public members appreciate hospitals' communication potential through social media, although they need to be made aware of how it works. The participants aver that, aside from the lack of interaction, it is difficult to comprehend certain messages, and some publications present a biased impression.

CSC's Global Institute for Emerging Healthcare Practices study of 36 United States health institutions (Rhoads, 2012) uncovered that hospitals and clinics use social media for the following purposes: health promotion, wellness and healthy behaviours, advertising/marketing purposes, personnel recruitment, customer relations, corporate image/brand management, and for educational purposes. Further, the study found that the healthcare organisations' primary objectives for using social media are engaging patients/consumers, building wider brand recognition, attracting new clients, and increasing communication among groups, among other objectives. These findings are consistent with the results of similar studies (Thaker et al., 2011; Medina-Aguerreberre, 2018) in that product and service marketing/advertising and human relations building and maintenance with clients through education and communication. Also, staff recruitment is the main reason healthcare institutions utilise social media (Medina-Aguerreberre, 2018).

Despite the increasing research on the utilisation of social media by hospitals, more is needed to know about the use of social media by government and private-owned hospitals and the differences in the content and social media characteristics of the different hospitals. Among the few studies that have explored the research, Ilgun and Ugurluoglu (2019) investigated Turkish hospitals' use of social media. The study interviewed fifteen communication managers at the corporate level of the hospitals and found

that social media enhanced the corporate image of the hospitals, and they are used to disseminate health-related information to the public. Nonetheless, the study focused on only privately owned hospitals; it did not compare public and private hospitals. Besides, from the literature review, it is evident that there needs to be more literature from the African context, precisely Nigeria. Consequently, we conducted a comparative study of online observation of six hospitals' (six private hospitals and six government hospitals) Facebook and Twitter pages, and a focus group of twelve social media handlers in hospitals (six government-owned hospitals and six privately-owned hospitals). Despite the deliberate selection of social media handlers for our study, the present research is anchored in the qualitative research concept of information power as articulated by Malterud et al. (2016). In essence, we conducted an in-depth exploration of the investigative phenomenon, unearthing a wealth of qualitative data.

Literature Review

Social Media: A Business and Health Communication Discussion

Extant literature indicates that social media are used for marketing/advertising, corporate branding, and human relations. Because the audience of social media is vast, it is pertinent to delve into social media's business and health perspective. The argument lies in how to use this media for commercial and marketing purposes (Kaplan & Haenlein, 2009). There are success stories of firms using social media strategies for advertising and marketing purposes (Udenze & Aduba, 2020). Hospitals are not an exception; they use it for health communication and social marketing (Uittenhout, 2012).

For health promotion and communication, several studies have already been described in the literature (Rhoads, 2012; Griffis et al., 2014; Richer et al., 2014; Cordos et al., 2017). These studies suggest that social media can improve communication between health organisations and their customers, enhance hospitals' corporate image, and disseminate critical information, among other uses. Hence, hospitals and other health organisation can reach their customers by maintaining an active presence on social media. In that case, hospitals can counter misleading and erroneous information spread by the audience of social

media. Credible sources are often preferred when people seek health information online (Eysenbach, 2002; Pew Internet, 2009); hence, affording social media users an alternative to finding evidence-based information from hospitals that maintain robust social media presence rather than getting erroneous information from other online sources (Young, 2011).

In addition, social media allow health institutions to replace their websites with web 2.0 services, enabling more direct interaction, connection, and engagement with the audience, engendering the institution's marketing and boosting its corporate image. Also, these changes benefit clients because of their interaction with health organisations. This form of communication may be called tailored-health information (Uittenhout, 2012). However, scholars (Thackeray et al., 2012) reiterate that health organisations still need to fully harness social media's economic and business potential. Medina-Aguerreberere (2018) argues that despite the extensive commitment to using social media in many endeavours, hospitals need to be more communicative with their corporate image, with a few varieties in the range of social media used and poor content and applications.

Theoretical Framework

The current study is underpinned by Daft and Lengel's (1984) Media Richness Theory (MRT). The theory is also known as the Information Richness Theory. The theory explores communication mediums in terms of their effectiveness and evaluates communication channels within organisations. MRT ranks and evaluates the richness of specific communication media. For instance, a medium such as radio may not engender media-richness because it is just an audio medium. In contrast, Facebook and Twitter, with their multiple media functions, would be media-rich. Going by the tenets of the theory, there is no doubt that social media platforms such as Twitter, Facebook, YouTube, Instagram, and WhatsApp are media-rich mediums. The use of these mediums will improve organisations' and individual interactions. Hence, Healthcare organisations are harnessing the benefits of these new communication channels to communicate with their customers. Nevertheless, additional factors, including the communicator's available resources, frequently influence these choices (Daft & Lengel 1984). Daft and Lengel's assertion presupposes that managers primarily prioritize

task efficiency, focusing on achieving communicative goals with maximum efficiency. Based on these new channels of communication, that is, social media, scholars have conducted studies to assess the use and impact of these channels utilising MRT to proffer explanations. He et al. (2013) used MRT to examine privacy invasion issues, communication process and performance, and organisational and social impact. MRT's idea of richness in a communication channel or media-richness is the capacity of a communication channel to convey precise information (Trevino et al., 1987).

With the emergence of the Internet, new communication channels have surfaced, and these mediums of communication are fast becoming the latest means organisations employ to communicate with their clients. MRT opines that communication channels that can transmit messages to others in a conspicuous and timely manner are said to be media-rich (Salleh & Moghavvemi, 2014). The multimedia capabilities of most social media platforms are in tandem with the MRT. These platforms have multiple media functions. They incorporate images, audio and video calls, document sharing (PDF and Word), text functionality, and location mapping. These applications also boast numerous emojis. This explains the reason for underpinning the study on Media Rich Theory. Boyinbode et al. (2017), in their analysis of social media platforms through MRT, found that WhatsApp performs better than Email, SMS, BBM, and Twitter in terms of content richness. The present study sought to explore how the media-rich features of social media are employed in healthcare organisations for communication purposes.

Method and Procedures

This work adopted an entirely qualitative approach, with the use of online observation and focus group discussion. From February 20, 2020, to August 15, 2020, we manually observed and identified publicly available Facebook posts and Tweets from the selected government-owned and private hospitals (six private hospitals and six government hospitals). Also, We purposively recruited six social media handlers from public hospitals and six social media handlers from private hospitals- summing the number to 12 participants from different public and private hospitals. Researchers (Krueger, 1994; Morgan, 1997) believe three to six persons in a focus group sessions is adequate. The

smaller number of participants was purposively decided to manage the groups and the discussions effectively. We employed the purposive and snowballing sampling methods to recruit the participants since the focus group depends on the research participants' capability to proffer critical information (Morgan, 1988).

From September 2020 to December 2020, we conducted two different sessions of focus group discussions with each of the groups at different locations in Abuja, Nigeria. Ultimately we conducted four meetings. Adopting recurring and multiple focus groups allowed us to explore rich qualitative data (Braun & Clark, 2021), that is, information power (Malterud et al., 2015), exposure (Small, 2009), or depth (Lareau & Rao, 2016) of the discussion. Besides, We adopted focus group discussion for the current study because the research participants in the different hospitals have the same characteristics; they manage hospitals' social media accounts and work in the hospitals. Focus groups are largely based on group dynamics and synergistic relationships among participants to generate data (Green et al., 2003; Kitzinger, 1994; Thomas et al., 1995).

The process starts with identifying the main objective of this study and its research objectives. Based on this, a list of questions (facilitator's guide) was prepared as a guide for each focus group session. The participants' ethical clearance was sought. In collecting data, we used an audiotape recorder. However, we paid rapt attention to note-taking and observation. Besides, we elicited the support of two trained research assistants. The research assistants took notes, created a conducive environment for the discussion, attended to latecomers, provided seats for the discussants, and arranged for refreshments. Besides, they observed non-verbal cues and the effect of the group dynamics. They recorded the general content of the discussion, thereby supplementing the textual data and providing thicker descriptions and interpretations. Non-verbal data rely on the participants' behaviour and actions before the focus group discussion, during and after the discussions. The focus group discussions lasted a maximum time of one hour and thirty-six minutes. Analysis of multiple focus groups permitted us to ascertain data saturation across the groups, assess the importance of the themes, and fine-tune themes (Charmaz, 2000). Thus, we used the multiple groups and constant comparison approach to investigate if the themes that emerged from a group were also found in other groups.

According to Onwuegbuzie et al. (2009), the constant

comparison approach could be called emergent-systematic focus group design because emergent refers to the focus group discussions adopted for exploratory reasons, and systematic refers to the focus groups adopted for corroborative purposes. At the end of the discussion, the participants were offered incentives- call credits for their time; besides, they were treated to some light refreshments after the discussions. The group discussions were held at the convenience of the participants. They unanimously agreed on the venues of the meetings. Besides, they were comfortable and familiar with the chosen locations.

We used the tape-based analysis method to analyse the data from the discussions (Onwuegbuzie et al., 2009). We listened to the tape of the focus groups and then created an abridged transcript. This method yields a much shorter transcript than transcript-based analysis. Notwithstanding, this approach is helpful because it enabled us to focus on the research question and only transcribe the significant parts in actualising the study's crux. Additionally, the short transcripts were analysed alongside other documents: field notes and other notes retrieved from the research participants' debriefing.

Specifically, we employed the constant comparison analysis method (Glaser, 1992; Glaser & Strauss, 1967; Strauss, 1987) and Hsieh and Shannon's (2005) qualitative conventional content analysis. We followed the three stages of the constant comparison approach (Straus & Corbin, 1998). At the initial stage, open coding, we grouped the data into small units and added codes to each unit. Secondly, we grouped these codes into categories. Lastly, in the final stage, we created one or more themes from the categories that express the content of each of the groups. At this stage, we engaged in focused coding, where we eliminated, combined and subdivided the coding categories identified in the first two stages to arrive at a theme. These themes represent distinct subheads which form the discussion. To buttress points of the themes, we included excerpts from the transcript and online observation in writing our findings. We used letters as pseudonyms for ethical purposes and to conceal the participants' identities. The 12 participants were tagged A to L. Additionally, the study's report was shared with the research participants. This process afforded the discussion participants favourable circumstances to check for correctness, thereby increasing the study's credibility and validity and resonating with their experiences.

Findings

For the manipulation check, Having concluded the data analysis, we present the findings from the focus group discussion with the research participants and data collated from Facebook posts and tweets from government-owned hospitals. The focus group analysis revealed some dominant themes: *Emphasised Government Information, Health Promotion/Education, Neophyte Handlers, and Drowsy Accounts*. In no particular of the research questions of this paper, we discuss these themes.

Emphasised Government Information: Our analysis revealed that most social media handlers in government-owned hospitals propagate government messages. Our online observation and the two discussions with this set of participants uncovered how a large chunk of government-related information is propagated in social media. For instance, Mrs. D from the first group referenced how she shared the government Roll-Back malaria programme on social media platforms to create broader awareness about the disease. Also, Mrs J enumerated the importance of disseminating health information, such as the government family planning programme- The National Family Communication Plan (NFPCP). According to Mrs. J, "Through social media, particularly on Facebook, I have had interactions with people about our country's national family planning programme, that is, NFPCP..." The latter assertion reiterates Daft and Lengel's (1984) argument about Media Richness Theory (MRT), that considering the communicative decisions made by individuals, the array of resources at the disposal of the communicator routinely exerts a substantial influence on such choices. In this case, the affordability and ease of use of social media allowed the social media handler to interact with people on Facebook. Another discussant, Mr. B says thus: "...there is the challenge of child immunisation in Nigeria". "Parents must take advantage of our campaign as the government is committed to making it affordable". By the nature of these specific findings, we argue that the participants from the public hospitals follow a pattern of directives from their superiors on the type of information they share on social media. These bureaucratic and hierarchical characteristics might cage the social media manager and hinder their creative minds.

Health Promotion/Education: The data analysis found that the government hospital social media handlers disseminate

more information about promotion and enlightenment. Excerpts from the initial themes revealed how they referenced the roll-back Malaria, family planning, and child immunisation programmes. As predominantly government employees, this set of participants believe they are responsible to the government. One of those responsibilities is to align the type of content they share on social media with the government's objectives. Mr K, for instance, narrated how he managed a health education programme in a secondary school. "...of course, this is the computer age; the student was able to follow up and learn more about HIV/AIDS on our Facebook page..." Similarly, our observation of these hospitals' social media accounts, especially private hospitals, further corroborated the findings. We found that these hospitals publicise breastfeeding, child and family nutrition, ante-natal and post-natal care, STD prevention and education, physical exercise, and smoking cessation, among other health promotion/education messages.

Neophyte Handlers: Observation plays a considerable role in unearthing certain findings in qualitative studies. Through observation and field notes, we discern that government-owned hospitals' social media handlers are novices and inexperienced. Unlike the social media handlers in private hospitals, which expressed a significant level of confidence and professionalism, this set of handlers exemplified the lack of technical jargon synonymous with social media. Additionally, an examination of their social media accounts revealed unprofessional management of some posts. For instance, we discovered that some pictures were uploaded upside-down, and some captions needed to be grammatically correct. The cyberspace is an essential environment for most human endeavours. Most socio-economic and health activities have moved online. Besides, many individuals are domiciled online; thus, there is a need to maintain professional and attractive social media accounts. Public hospitals must intentionally invest in hiring and training social media managers to engender an active and robust online presence.

Drowsy Accounts: Overall, our investigation revealed that the public-owned hospitals do not harness the potential of social media. Social media are interactive media that enable users to communicate conveniently despite the distance, and to a considerable extent, utilising social media is affordable. This is why most organisations leverage these characteristics of social media to reach their teaming

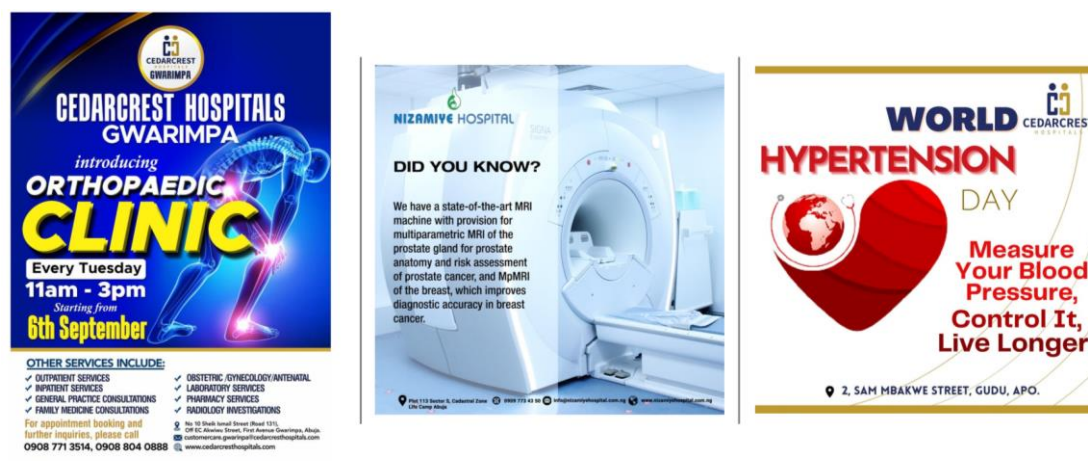
audience, and government-owned hospitals should not be an exception. However, our data show that because these hospitals are state-funded, they ignore the need to grow their social media client base. Besides, their staff are remunerated by the government monthly; hence, they are not under pressure to professionally manage their social media accounts. In other words, government subventions would keep them afloat whether they make profits.

At this juncture, we present the findings from the privately owned hospitals. The findings from the private hospitals are, to a significant extent, opposite of the public-owned hospitals. Our analysis discovered four overarching themes: Marketing Communication-Oriented, Professional Handlers, Robust Social Media Presence, and Health Education.

Marketing Communication-Oriented: Unlike the government-owned hospitals that predominantly use crafted government information, private hospitals are more into marketing their corporate image. Nonetheless, since they are hospitals, we believe that they were set up for profit purposes; this is why most of the respondents' assertions in this group tilted towards customer relations, advertising, corporate communication, and public relations. In the words of Mr E, "...not just an ordinary hospital, we are committed to making our patients have value for their money". This statement has some capitalist connotations. In other words, the hospitals strive to ensure they offer professional and satisfactory services to its customers, considering that the customer pays for it. The aim here is to make a profit by offering these services. Another participant, Mrs. C, avers thus: "Check our Twitter page, and you will see that we use social media very well. We use it to communicate with our customers and inform them about our latest additions, like new equipment and other things". The latter statement reinforces how these hospitals have adopted social media to enhance their corporate image. Consciously, they know they are into business and are competing with their opponents; thus, they need to use social media strategy to boost their corporate image and remain in business. Also, a private hospital, Nizi Hospital tweeted a marketing communication thus, "In this new month, make a resolution to know your health status. Get a 30% discount on a medical check-up at Nizi Hospital". Figure 1 below shows marketing communication-related tweets and posts from the hospitals in Abuja, Nigeria.

Figure 1

Sample marketing communication-oriented tweets and Posts



Professional Handlers: To a large degree, private-owned hospitals' social media managers are core professionals. They expressed a very high level of confidence and professionalism during the focus group sessions. Besides, this group of respondents displayed their knowledge of social media and the technical jargon synonymous with the medium. Our exploration of the organisations' social media pages corroborated their professionalism and courage. From this finding, we argue that private hospitals are harnessing the prowess of social media in this digital age, where a large portion of businesses have moved online. These hospitals believe that maintaining professional social media pages is a sine qua non to growing their hospitals. Additionally, the hospitals may have outsourced or hired the services of professional social media handlers; thus, their social media accounts are managed professionally. Krest Hospitals tweeted, "Krest Hospitals are orthopaedic specialists and was originally registered as Krest Orthopaedic Clinics Ltd when it started operations in January 2008". This tweet shows the handlers' professionalism and what they were trying to achieve. The handlers describe the hospital most professionally, telling their prospective patients what they do and who they collaborate with.

Robust Social Media Presence: e observed that private hospitals maintain a robust and active presence on some social media. From our discussion, we decipher that these hospitals have Twitter, Instagram, Facebook, YouTube, and WhatsApp accounts, whereas public hospitals mostly have accounts on Facebook. It is critical to state that these hospitals' most used social media is Twitter, followed by Facebook. According to Mrs G, "...through Twitter, I share

our content to our Facebook and Instagram pages. This helps us to reach a wider audience". Similarly, Mr. J reiterates the importance of actively maintaining an online social media presence: "We just have to upload continuously, tweet, share, follow and even comment on these social media because it allows us to interact with a wider public". Additionally, we discovered that the hospitals have an online presence through online search and observation of their respective social media handles. As previously stated, these hospitals are abreast with the workings and importance of maintaining an active online presence. They may have recruited the services of professional social media managers; hence, their online social media presence is robust and active.

Health Education: his theme dovetails with the findings of the public-owned hospitals. Similarly, our analysis revealed that private hospitals engage in health education. Overall, hospitals, no matter the form of ownership, engage in health education. They believe that as a critical institution in society, they are responsible for educating society on health and wellbeing issues. Many of the research participants in this group, namely, participants A, C, G, I, B, L, and D, narrated their health education experiences on their respective hospital social media accounts. We searched some of their social media accounts to verify their claims, and our findings corroborated their assertions.

The social media pages of the private hospitals were awash with health education tweets and posts. For example, Krest posted, "Today we raise awareness on the importance of our kidneys. Kidney diseases are silent killers which can largely affect your quality of life. Keep your kidney

healthy". Another of the tweets read thus, "Krest Hospitals has well-prepared antenatal sessions and professionals to guide you during and after your pregnancy journey". On their part, Nizi Hospital posted, "Doctors can detect an illness before it becomes serious with routine checks". These education posts and tweets show that private hospitals in Abuja, Nigeria, not only used the social media platforms effectively but also used them to educate their prospective patients on how they could better manage their health.

Discussion

This study comparatively analysed social media in Nigeria's public and private hospitals. Specifically, the study answers three research questions: How do private and public hospitals in Abuja use social media? (2) What is the predominant social media platform utilized by public and private hospitals in Abuja? And (3) What categories of information are disseminated on the social media of both public and private hospitals in Abuja? Some findings from this study are in tandem with previous studies reviewed in the literature, but there is a significant difference.

Overall, the study uncovered that public and private hospitals use social media differently. While private hospitals, to a considerable extent, are appropriating and harnessing the potential of social media, public hospitals still need to catch up in this regard. This study revealed that public-owned hospitals do not maintain active and robust social media accounts; their social media handlers are not seasoned professionals, and they lack content and technological savviness that will help them hospitals break through the clutter. This finding contradicts Bermúdez-Tamayo et al. (2013) argument, which asserts that large government hospitals have a great online presence (Bermúdez-Tamayo et al., 2013). In the case of this study, it is essential to reiterate that government hospitals are significant, and yet they do not have an outstanding online presence. Many of the large public hospitals lacked social media presence and were almost invisible online. This is particularly surprising given that Nigerian patients reportedly use social media platforms to seek solutions for their health-based issues. For example, lactating mothers in Nigeria reportedly use social media to plan their exclusive breastfeeding (Uwalaka & Nwala, 2020).

This was also the case in other studies such as Medina-Aguerreberere (2018) and other studies (Thaker et al., 2011;

Rhoads, 2012; Ilgun & Ugurluoglu, 2019). They found that hospitals use social media for corporate communication, fostering relationships with various audiences, advertising/public relations. The private hospitals in this study use social media from the same angle, that is, a business/capitalist perspective. Our findings uncovered that they adopt social media for marketing and corporate communication purposes: customer relations, advertising, corporate communication, and public relations. Additionally, private hospitals maintain an active and robust online presence with a variety of social media. Conversely, public hospitals mostly use social media to disseminate and propagate government messages. Besides, these hospitals, public hospitals are not on varieties of social media, and their pages could be more professional. The latter assertion corroborates Medina-Aguerreberere's (2018) study in Spain which found argument that hospitals under-communicate their corporate image, with very few varieties in the range of social media used, coupled with poor content and applications.

In terms of the most used social media platforms, our study found a striking difference in public and private hospitals' social media use. We found that public hospitals most used social media is Facebook, while private hospitals tilted towards Twitter. These findings are in tandem with previous studies, which found that Facebook and Twitter are the most used social media platforms by health institutions. For instance, Richer et al. (2014) and Griffis et al. (2014) ascertained that a more significant percentage of hospitals in the United States had an account on Facebook and Twitter. Similarly, Rhoads (2012) and Condos et al. (2017) found that Facebook and Twitter are the most popular social media among hospitals and other health institutions.

The current study found that health promotion and education are paramount in the health sector, regardless of whether public or private hospitals. Hospitals and related health organisations are essential to society; their importance cannot be underestimated. As a critical institution, they are responsible for educating society on health and wellbeing issues. We found that both the private and public hospitals engage in one form of health education, other the other. For instance, government-owned hospitals, through social media, publicise health issues such as the Roll-Back Malaria programme, family planning, and child immunisation programmes. Similarly, private hospitals promote health topics on fibroid, sickle cell, male infertility,

and Polycystic Ovarian Syndrome (PCOST), to name a few. However, our finding does not corroborate Batta and Iwokwagh (2015) who found that Nigerian teaching hospitals predominantly leverage social media for image-building and public relations purposes.

As stated in the theoretical framework section, the study is guided by the Media Richness Theory (MRT), also called the Information Richness Theory. The MRT assesses organisational communication in terms of effectiveness and evaluates communication channels within organisations. In the current study, we argue that these hospitals used social media because of their media-richness. A critical example is the use of well-curated images on the Facebook and Twitter pages of the observed private hospitals. Besides, The predominance use of Facebook and Twitter by the public and private hospitals, respectively, connotes the communication richness of the mediums. To the hospitals, a medium such as radio may not engender media-richness because it is just an audio medium, whereas social media platforms, namely, Twitter, Facebook, Youtube, Instagram, and WhatsApp, are media-rich due to their multiplicity of functions- video, audio, text, and document. For instance, on Twitter, the hospitals could upload videos, audio, text and even interact with their patients or customers through direct messages (DM). Media-richness is the ability of a communication medium to transmit unambiguous messages. In line with He, Zha, and Lee (2013) and Boyinbode et al. (2017), this study asserts that MRT improves organisational communication and social impact through social media. We argue that the interactive and instantaneous features of social media, as seen in this study, corroborate the media-richness theory.

Limitations

This study did not consider all public and private hospitals in Nigeria; thus, its findings cannot be wholly generalised. However, considering that this is qualitative research, generalisation is within the context of this study. Further, the generalisation of findings in qualitative studies is a meaning-making process that considers diverse factors (Smith, 2018; Braun & Clark, 2021). Besides, the study is limited by the population of the social media handlers of the selected hospitals. For this reason, future studies must explore the views of customers and other administrators of both hospitals. In addition, this study followed the

qualitative approach. Thus, it is advised that future research consider quantitative perspectives or both qualitative and quantitative methods, and a larger sample size may also be considered. Despite these shortcomings, we advise hospitals, especially government-owned hospitals, to improve their social media handling according to the findings of this study.

Conclusion

The utilisation of social media by healthcare institutions is on the rise, transforming it into a multifaceted platform for engagement with customers, employees, and the general public. Despite this trend, the extent and nature of hospitals' engagement with social media remain underexplored in the context of our study. To address this research gap, we conducted a comparative analysis to assess the degree of social media utilisation by both public and private hospitals. Surprisingly, our study reveals a dichotomy in their approaches: public hospitals predominantly employ social media as a conduit for disseminating government information. In contrast, private hospitals adopt a business-oriented perspective, utilising social media primarily for marketing endeavours to bolster their corporate image and engage with patients. Interestingly, a common theme emerges as private and public hospitals actively disseminate health education content. This implies a shared commitment to promoting public health awareness regardless of the hospital's ownership structure. Consequently, this research serves as a clarion call for heightened awareness among healthcare institutions, especially those in the public sector, regarding the pivotal role of social media in the healthcare domain. Recognizing the diverse purposes social media serves for hospitals, from governmental communication to corporate branding, underscores the need for a nuanced and strategic approach to leveraging these platforms effectively. As social media continues to evolve, healthcare institutions must adapt their practices to harness their full potential, fostering improved communication, public engagement, and disseminating vital health information.

Conflict of interest

The author(s) declare that no competing interests exist.

Data Availability

The data of this study is available on request from the corresponding author, upon reasonable request.

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