Managing Social Media for Making Cancer Hospitals' Brands More Human: A Proposal Model based on a Literature Review

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Abstract

Managing social media constitutes a challenge for cancer hospitals: internal processes, quality information, and the role of employees. These organizations resort to social media to enhance their relations with stakeholders and promote their brands at the same time. This paper analyzes how cancer hospitals could use social media to associate their brands with human values (patients' rights, honesty, integrity, kindness, compassion), and become more credible institutions. To do that, we conducted a literature review on cancer hospitals' communication initiatives on social media: we considered three databases, four keywords, and six inclusion/exclusion criteria to gather papers published on this topic between 2011 and 2020. We identified 114 papers. Based on that, we developed the *PET Branding Model*, an online communication model that these hospitals can implement to associate their brands with human values. We concluded that cancer hospitals need to implement a Social Media Unit that employs people from different professional backgrounds and work according to protocols; prioritize a public health approach focused on satisfying stakeholders' needs in terms of information; and train the hospital's employees on how to use social media professionally.

Highlights

- The professional management of corporate communication positively influences hospitals' internal processes as well as patients' healthcare outcomes
- Before implementing any corporate communication initiative, cancer hospitals define their brand's architecture: identity, values, mission, vision, and culture

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- Cancer hospitals resort to social media platforms to implement different branding strategies
- Oncologists can use social media platforms for health education initiatives
- Cancer hospitals' branding strategies on social media require five main protagonists to be involved: doctors, nurses, administration employees, patients, and patients' relatives.
- Communicating with patients through social media is consistent with the traditional mechanisms of knowledge diffusion in medicine
- Cancer hospitals resort to social media to become a more dynamic organization, engage with their stakeholders, and associate their brands with human values

Content

Introduction

Managing corporate communication professionally has become a priority for organizations interested in establishing good relationships with their stakeholders (employees, clients, public authorities, etc.), and this way promote their brands (Zerfass, Viertmann, 2017). Health organizations, such as hospitals, patients' associations, or public health authorities, develop this area to reinforce their scientific credibility and promote their brand (Kreps, 2020). To do that, they resort to communication plans, protocols, and key performance indicators allowing them to align their brands with their stakeholders' needs (Belasen, Belasen, 2019). In this framework, more and more cancer hospitals invest in corporate communication to build a credible brand and improve their relations with patients (Medina Aguerrebere, Gonzalez Pacanowski, Medina, 2020). Cancer patients face demanding situations (pain, uncertainty, chronic diseases) that lead

some of them to actively search for medical information and regularly interact with health professionals (Blanch-Hartigan et al., 2016). When patients are diagnosed with cancer, they face high emotional stress that leads many of them to contact doctors on social media platforms: they need emotional support as well as medical information (Braun et al., 2019). Many patients ask doctors to share information about treatment protocols, side effects, medication, medical caregiving strategies, and alternative therapies (Gage-Bouchard et al., 2018). Oncologists share this information through different platforms such as social media, WhatsApp, patient portals, and mobile apps (Prochaska, Coughlin, Lyons, 2017). However, the explosion of data on these technological platforms, hospitals' privacy requirements, and patients' lack of skills in health literacy makes it difficult for some of them to understand cancer-related information (Dizon et al., 2012).

These patients resort to complex information systems about treatments and diseases (Han et al., 2017) and ask

doctors to participate in some medical decisions concerning their treatments (Beesley et al., 2017). To help patients, cancer hospitals implement different communication initiatives on social media platforms (Namkoong, Shah, Gustafson, 2017). However, managing these platforms professionally constitutes a challenge for these organizations. That is why, cancer hospitals should revisit their standards of cancer care, which includes integrating social media platforms and telemedicine tools into their internal protocols (Tsamakis et al., 2020). Besides, they must provide patients with quality information and psychosocial support (Paulo et al., 2018), and train doctors and nurses on how to use social media for medical purposes (Epstein, Duberstein, Fenton, 2017). Unfortunately, many doctors have never received education on how to use social media, and do not even know their hospital's policies in this area (Low, Tan, Joseph, 2020). Which is why these organizations should invest more to train doctors and nurses on how to use these platforms for medical and branding purposes. Hospitals' corporate communication departments should interact with doctors and help them develop different skills in this area: how to publish corporate content, how to interact with different kinds of patients, or how to respect some legal issues, etc. (Medina-Aguerrebere, Gonzalez-Pacanowski, Medina, 2020).

These organizations need to reinforce their presence on these platforms to enhance their relations with different stakeholders (Apenteng et al., 2020). When interacting with them, cancer hospitals face a dilemma: should they prioritize their branding objectives (long-term approach) or their marketing goals (short-term approach)? In some hospitals, CEOs and managers focus on marketing initiatives to accelerate the hospital's business processes and attract patients (Wu et al., 2019), which is why they use social media as a marketing tool to disseminate commercial information about the medical treatments (Triemstra, Stork, Arora, 2018). However, in other hospitals, building a reputed brand is more important than marketing goals (Kemp, Jilipalli, Becerra, 2014), which leads these organizations to use social media to promote patients' care, medical research and health education (Kotsenas et al., 2018). Reinforcing the hospital's brand helps the organization to achieve its midterm and long-term objectives (Becerra, Reina, Victoria, 2015), that is why hospitals should find a way to make compatible their marketing and branding initiatives. To efficiently integrate both elements (marketing and branding), hospitals need to consider human values as a key part of their strategic thinking.

Medicine, humanity, and communication are inseparable: if health professionals are not familiar with patients' concerns and behaviors, they will never be able to satisfy their physical and emotional needs (Li, Xu, 2020). In other words, hospitals cannot only focus on their business interests: they must consider some values such as patients' rights, honesty, integrity, kindness, and compassion to make their communication initiatives more meaningful. On the other hand, when doctors and hospitals integrate human values into their daily professional logic, they establish trust relationships with stakeholders (Asan, Bayrak, Choudhury, 2020) and develop more efficient marketing initiatives (Maier, 2016).

This paper aims to better understand how cancer hospitals could use social media platforms for associating their brands with human values (for example, patients' rights, honesty, integrity, kindness, and compassion), and this way reinforce their reputation. To do that, we conducted a literature review about cancer hospitals' branding strategies (brand, communication challenges, branding strategies) as well as their initiatives on social media platforms (main goals and strategies). To carry out this research, we focused on three main databases (*Scopus*, *Web of Science*, and *Google Scholar*) and we resorted to four main keywords (*cancer hospital*, *corporate communication*, *brand*, and *social media*) to gather scientific papers published these last ten years (2011–2020) by journals specialized in communication, marketing, and public health. We focused on these 10 years because we aimed to analyze how all initiatives led by social media companies in this period (new platforms, services, formats, etc.) have changed health professionals' mentalities about this important communication tool. We combined these four words in the different databases by using "OR" to broaden our results. On the other hand, we did not include the expression "human values" because it referred us to many papers that were not directly related to corporate communication in hospitals. That is why we only focus on the 4 keywords directly related to our research objectives. We found 304 papers, but we only considered those respecting three main inclusion criteria: a) papers based on scientific references as well as quantitative or qualitative methods; b) main topic directly or indirectly related to cancer hospitals and communication on social media platforms; and c) papers that mainly analyzed cancer hospitals from Western countries. Besides, we applied 3 exclusion criteria: a) papers that were not published in English or Spanish; b) corporate reports developed by private organizations; and c) papers

published by journals that were not ranked in any scientific database. Based on that, we selected 114 papers, that we analyzed to identify different concepts and trends useful for our research. For each paper, we read its title, abstract, keywords, introduction, and conclusion to make sure it fulfilled our exclusion and inclusion criteria; then, for every paper selected, we read the full content to identify the most important ideas that we could use to develop our literature review. Most papers selected were published by reputed scientific journals, such as the *Journal of Health Communication*, *PLoS ONE,* or *Health Marketing Quarterly*; they focused on different areas – cancer hospitals, health communication, public health, social media-; and they resorted to different methodologies (surveys, content analysis, etc.) to analyze communication initiatives implemented by cancer hospitals in western countries, such as the United States, Canada or Spain. Finally, based on our literature review, we proposed the *PET Branding Model*, an online communication model that cancer hospitals can implement to associate their brands with human values and promote their corporate reputation in a more credible. We hope this communication model will help cancer hospitals' Communication Directors, as well as healthcare professionals working in these organizations, to better understand what health communication is and why it is so important to evolve from a marketing approach to a new one based on human values.

Cancer Hospitals' Branding Strategies

Branding refers to the different initiatives that hospitals implement to promote their values, objectives, and brand positionings, and this way influence their stakeholders' perceptions (Kemp, Jilipalli, Becerra, 2014). To do that, these organizations analyze their main stakeholders' opinions about different issues (company, employees, services, etc.), and based on that, they build their brand (Odoom, Narteh, Odoom, 2019; Mazor et al., 2016). On the other hand, some organizations resort to emotional brand attachments to improve their relations with some stakeholders (Bian, Haque, 2020). Hospitals need to promote their brand for enhancing their corporate reputation (Veltri, Nardo, 2013), reinforce their employees' engagement (Zerfass, Viertmann, 2017), and face different corporate communication challenges in a more efficient way.

Companies implement different initiatives to professionally manage corporate communication because in organizations everything communicates: employees' behaviors, clients' reactions, corporate policies (Rodrigues, Azevedo, Calvo, 2016). Hospitals organize training activities allowing employees to improve their skills in communication (Jahromi et al., 2016) and become brand ambassadors able to influence stakeholders' perceptions (Hannawa et al., 2015). According to Becerra, Reina, and Victoria (2015), the hospital's brand determines patients' behaviors when these last ones choose a doctor, a hospital, or a medical treatment. The brand should be consistent with some social values such as ethics and trustworthiness because patients appreciate both values, and because they determine brand's reputation (Trong, 2014). On the other hand, employees, managers, and CEOs need to understand the social impact of brands (Pinho, Rodrigues, Dibb, 2014) and evaluate this intangible quantitatively and qualitatively (Veltri, Nardo, 2013).

Before implementing any corporate communication initiative, cancer hospitals define their brand's architecture (identity, values, mission, vision, and culture): this intangible element determines the hospital's strategic decisions concerning corporate communication (Medina Aguerrebere, Gonzalez Pacanowski, Medina, 2020). The company's *identity* can be defined as the tangible and intangible elements that describe what the company is and why (He, Balmer, 2013). *Corporate values* are intangible assets that help employees understand the company's identity and this way work in a consistent manner to achieve the organization's goals (Sheehan, Isaac, 2014). The *mission* refers to the company's midterm objectives (Cady et al., 2011). The *vision* specifies the company's long-term objectives and constitutes a true source of motivation for employees (Singal, Jain, 2013). Finally, the *culture* can be defined as the unique style in which employees work to help the organization becomes a unique brand (Nelson, Taylor, Walsh, 2014). These five brand elements (identity, values, mission, vision, and culture) should be compatible with some human values, such as patients' rights and health professionals' integrity.

Once cancer hospitals have defined their brand architecture (identity, values, mission, vision, and culture), they design and implement a communication plan to promote their brands and influence stakeholders' perceptions. When hospitals implement a consistent branding strategy, they can better adapt to the constantly changing context (Kemp, Jillapalli, Becerra, 2014). Besides, the brand plays

a key role in cancer hospitals' internal functioning: when these organizations disseminate brand content that is useful for stakeholders, these companies' brands become more credible, and this credibility allows them to face different changes in a more efficient way (internal crisis, patients' new needs, etc.). Thanks to branding initiatives, hospitals influence patients' perceptions, which is essential since these last ones are true opinion leaders able to determine other stakeholders' opinions about the hospital (Brent, 2016). On the other hand, thanks to branding initiatives, hospitals can trigger a positive word-of-mouth about the company, its employees, and its services (Esposito, 2017). To implement branding campaigns, hospitals prioritize two main principles: a) they involve health professionals and train them in corporate communication skills so that they can efficiently interact with stakeholders (Kotsenas et al., 2018); and b) they prioritize meaningful content useful for stakeholders, rather than promotional information about the hospitals' treatments (Medina Aguerrebere, 2020).

Cancer hospitals, as well as other general hospitals that are not specialized in treating this kind of patients, implement similar initiatives to promote their brands These organizations mainly resort to five branding strategies. First, *brand ambassadors*. Hospitals ask some key employees (doctors, nurses) to actively collaborate with different communication initiatives (corporate magazines, events, press conferences) to disseminate the company's brand architecture through their behaviors and experiences in the company (Trepanier, Gooch, 2014). Second, *scientific source of information*. These organizations focus on scientific papers published by their health professionals: this way they reinforce the hospital's scientific credibility (Gombeski et al., 2014). Third, *public health engagement*. Hospitals collaborate with regional, national, and international public health authorities to launch health education campaigns and help stakeholders, especially patients, to adopt more healthy habits (Moran, Sussman, 2014). Fourth, *corporate events*. These organizations organize events addressed to different targets such as health professionals (scientific conferences, workshops), patients (learning initiatives in the hospital), or public health authorities – health promotion campaigns (Falisi et al., 2017). And fifth, *hospitals rankings*. Hospitals collaborate with external agencies specialized in publishing national and international rankings of hospitals and research centers (Cua, Moffatt-Bruce, White, 2017).

Cancer Hospitals' Branding Strategies on Social Media

Social media have become an essential tool for hospitals interested in building a credible brand. Thanks to these platforms, doctors and patients can establish a dialogue before, during, and after their consultations at the hospital (Wu et al., 2019); moreover, patients can participate in online consultations with doctors and reinforce their empowerment (Huo et al., 2019). On the other hand, social media have become an essential platform to make hospitals' education initiatives more efficient (Ratzan, Sommariva, Rauh, 2020): for example, these organizations can organize online communities where patients and doctors interact and share information and experiences (Myrick et al., 2016). Social media allow hospitals to make their communication initiatives more creative (Shieh et al., 2020), promote the role of doctors as brand ambassadors (Sotto, Sharp, Mac, 2020) and associate their corporate brands with human values.

On the other hand, thanks to these platforms, cancer hospitals share accurate information addressed to patients (Miller, Guidry, Fuemmeler, 2019); reduce social inequalities in terms of access to public health information (De las Heras Pedrosa et al., 2020); and improve their financial performance by using social media as a low-cost platform for customer services (Apenteng et al., 2020). Finally, these platforms allow some health professionals, such as nurses, technicians, and assistants, to directly interact with patients and reinforce the hospital's added value (Trepanier, Gooch, 2014). In other words, thanks to social media, cancer hospitals prove their engagement with the human value of honesty because, rather than focusing on business interests, they help patients reinforce their empowerment, protect their rights and improve their medical outcomes.

Nevertheless, when cancer hospitals use social media platforms, they also face some risks: stakeholders can criticize the hospital and damage its reputation (Taken, 2017), or even disseminate fake news about its treatments and services (Guidry et al., 2016). Regardless of these advantages and disadvantages, cancer hospitals can use social media platforms to implement four main branding strategies: a) promote online dialogues between oncologists and patients, b) provide patients with online medical treatments, c) lead health education campaigns, and d) launch online patients' communities.

Dialogues between oncologists and patients. Health professionals play a key role in cancer hospitals' strategies on social media platforms because they represent the company's scientific credibility (Medina Aguerrebere, 2020). Doctors resort to these platforms to disseminate scientific knowledge, but also to provide patients with emotional support (Yeob et al., 2017). Their use of social media directly influences stakeholders' perceptions about the hospital (Cua, Moffatt-Bruce, White, 2017). When managing social media, doctors should focus on patients' needs (manage uncertainty, participate in collective decision-making processes) rather than the hospital's medical services (Blanch-Hartigan et al., 2016); besides, they should only share accurate, credible information enabling patients to improve their knowledge about treatments and diseases (Sedrak et al., 2017). Doctors base this dialogue with patients on accurate information, but also on psychosocial aspects. On the one hand, doctors provide patients with an emotional support that helps them to accept their diseases and adhere to treatments (Namkoong, Sha, Gustafson, 2017); and on the other hand, doctors control their *own emotions* (sadness, anxiety, etc.) to establish a friendly atmosphere allowing patients to explain their feelings and concerns (Janz et al., 2016; De Vries et al., 2018). Thanks to this integrated approach, patients reinforce their empowerment (ask questions, request clarifications, etc.) and establish better relationships with doctors (Brand, Fasciano, Mack, 2017; Epstein, Duberstein, Fenton, 2017).

Online medical treatments. Cancer hospitals resort to social media platforms to propose online medical treatments adapted to patients, which contributes to improving the hospital's brand reputation. Health professionals use machine learning and natural language processing techniques to analyze social media platforms and extract meaningful insights allowing them to better understand patients' needs (De Silva et al., 2018). Based on this knowledge, doctors propose different medical services tailored to each cancer patient (Yeob et al., 2017). When presenting medical treatments to patients on these platforms, oncologists use three main tools. First, *artificial intelligence tools* allowing doctors to analyze medical indicators about patients' needs (Asan, Bayrk, Choudhury, 2020). Second, *mobile health applications* for screening, early diagnosis, treatment, and end-of-life care (Prochaska, Coughlin, Lyons, 2017). And third, *big data-related initiatives* that enhance patients' understanding of medical decisions and improve their adherence to treatments (Pope et al., 2019). These technological tools (big data, mobile health applications, artificial intelligence, and social media platforms) contribute to improving patients-doctors' relations: oncologists have more time to focus on the human aspects (understanding, listening), develop empathy, and promote compassion (Kerasidou, 2020). Thanks to these tools, cancer hospitals also reinforce patients' empowerment, which positively affects the hospital's brand credibility (Brand, Fasciano, Mack, 2017). When patients understand medical internal protocols and participate in collective making-decisions processes, they reinforce their engagement with doctors and these strong relations between them make hospitals' brands more credible (Esposito, 2017).

Health education campaigns. Oncologists can use social media platforms for implementing health education initiatives (Medina Aguerrebere, Gonzalez Pacanowski, Medina, 2020). These activities must be based on previous research about patients' needs in terms of medical information (Vraga et al., 2018). Cancer hospitals can implement different initiatives, such as courses, conferences, or workshops: these actions help patients to be protected against misinformation about cancer (Kotsenas et al., 2018; Yang et al., 2018). To efficiently develop this area, cancer hospitals can resort to different platforms, such as *Twitter*, *Youtube*, or *Pinterest*. On *Twitter*, hospitals can use several formats (videos, text, hashtags) to help patients find accurate, reliable resources about treatments and diseases. Cancer hospitals' profiles on this platform can become a true public health tool for patients: share medical information, interact with health professionals, learn from other patients' experiences, etc. (Sutton et al., 2018). On *Youtube*, cancer hospitals can create channels and lists about different treatments and diseases, as well as live sessions with doctors and patients (Míguez-González, García Crespo, Ramahí-García, 2019). Lastly, on *Pinterest*, these organizations can disseminate visual information about cancer to some particular targets, such as teenagers and children (Miller, Guidry, Fuemmeler, 2019). When cancer hospitals use social media for health education campaigns, they prove that they prioritize patients' needs (education, knowledge) rather than the company's business interests (Myrick et al., 2016).

Online patients' communities. Cancer hospitals organize online patients' communities specialized in different diseases (melanoma, sarcoma, carcinoma) to promote their scientific credibility and reinforce their brands (Basch et al., 2015). Thanks to these communities, patients share their personal experiences and integrate emotional support networks

Figure 1. *PET Branding Model*
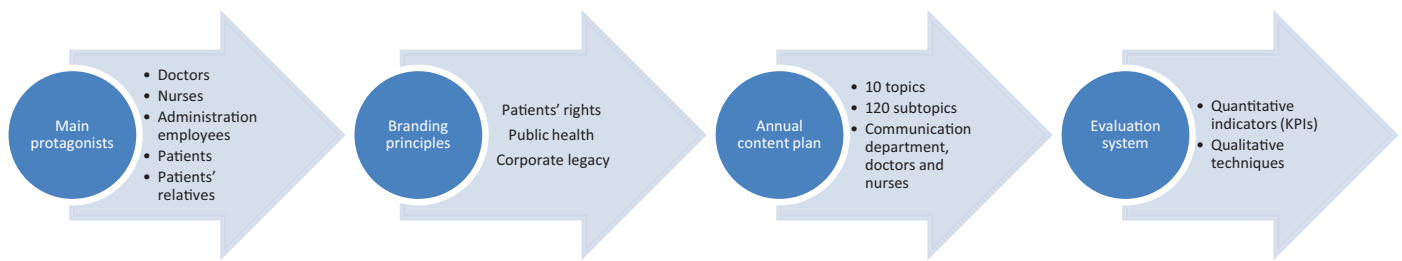
(Falisi et al., 2017). Besides, they access quality information about cancer, which helps them to better understand their medical treatments (Rupert et al., 2014). These online communities enhance patients' perceptions about the hospital's brand (Laroche, Habibi, Richard, 2013). Which is why more and more hospitals manage these platforms professionally: they ask their health professionals to actively participate in these communities (Liu et al., 2014), they focus on meaningful content that fully satisfies patients' needs in terms of information (De Las Heras Pedrosa et al., 2020), and they avoid commercial messages about the hospital's treatments and services (Vraga et al., 2018). Finally, cancer hospitals train doctors in different skills such as interpersonal communication, emotional intelligence, and branding to help them true become brand ambassadors (Sedrak et al., 2017).

An Online Communication Model for Making Cancer Hospitals' Brands More Human

Companies need to develop an integrated corporate communication plan to disseminate meaningful content, sustain their communication narratives, and align their communication strategies with their organizational goals (Belasen, Belasen, 2019). Health organizations develop and implement customized communication plans, as well as internal protocols, to optimize their internal and external communication efforts (Gage-Bouchard et al., 2016). Based on the literature review that we carried out about cancer hospitals, corporate communication, branding, and social media platforms, we developed a communication model whose main objective is to help cancer hospitals to improve their communication initiatives on social media platforms and associate their brands with human values. This model is called *PET*

Branding Model and can be implemented by cancer hospitals all over the world.[1] It includes 5 main protagonists who respect 3 branding principles when they use social media platforms to communicate about 10 topics and 120 subtopics: finally, this model proposes different criteria to evaluate the impact of these branding activities. This model is based on four main stages as shown in Figure 1.

Main Protagonists

Cancer hospitals' branding strategies on social media platforms require five main protagonists to be involved: doctors, nurses, administration employees, patients, and patients' relatives. When *doctors* communicate with patients or other stakeholders, they prioritize human values such as honesty and kindness, rather than technical aspects (Brent, 2016). Identifying patients' concerns allows doctors to establish better communication relations with patients (Janz et al., 2016). That is why, before using social media, doctors should be trained in interpersonal communication skills, emotional intelligence, and empathy (De Vries et al., 2018). With respect to *nurses*, these professionals should always be respectful to patients (Moreland et al., 2015) and reinforce their own skills in emotional intelligence (Moore et al., 2018). This way, they can efficiently help patients become more proactive (Brand, Fasciano, Mack, 2017). Concerning *administration employees*, they also participate in cancer hospitals' branding initiatives on social media platforms: these employees should also be trained on health communication skills (Nazione et al., 2013), emotional intelligence (Gage-Bouchard et al., 2016), and information management (Burleson, 2014). These three targets (doctors, nurses, and administration employees) lead the change and promote corporate communication among other employees working in the hospital: health assistants,

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[1] PET refers to authors' names: **P**ablo, **E**va and **T**oni.

technicians, therapists, experts in different technological areas (artificial intelligence, big data, radiology, etc.). This way, these last ones can improve their communication relations with patients and patients' relatives.

Thanks to doctors, nurses and administration employees' involvement in online branding initiatives, cancer hospitals' brands become more credible (Medina Aguerrebere, Gonzalez Pacanowski, Medina, 2020). As to *patients*, they respect some values when interacting with doctors, such as politeness, transparency, and accuracy (Al-Abri, Al-Balushi, 2014). Patients resort to social media to enhance their communication relations with doctors and establish a symmetric dialogue focused on human aspects rather than technical information (Smailhodzic et al., 2016). Thanks to this approach, patients reinforce their empowerment and become experts on some health-related issues (Becerra, Reina, Victoria, 2015). Finally, *patients' relatives* also play a key role in cancer hospitals' branding processes. They help patients to accept their diseases, adhere to treatments and interact with doctors (Badr, 2017). When patients' relatives use social media for enhancing patients' access to social support networks, they improve patients' welfare (Namkoong, Shah, Gustafson, 2017) as well as their engagement with doctors (Kourkouta, Papathanasiou, 2014).

Branding Principles

The traditional mechanisms of knowledge diffusion in medicine are consistent with hospitals' initiatives on social media (Kotsenas et al., 2018). These platforms help hospitals to implement a patient-centered communication strategy that reinforces health professionals' engagement and patients' empowerment (Haluza et al., 2016). In other words, social media platforms are crucial for improving hospitals' reputation (Triemstra, Stork, Arora, 2018; Costa-Sánchez, Míguez-González, 2018). However, when many employees in the same organization interact with different external stakeholders at the same time, these organizations can face inconsistency-related problems that affect their brand identity (Govers, 2020). To avoid that, health organizations need to integrate their communication initiatives and define plans and protocols (Elrod, Fortenberry, 2020). Besides, they have to define different communication principles allowing employees to use social media platforms consistently and this way build an unambiguous brand. Based on our literature review, we proposed three main principles that help

cancer hospitals to efficiently associate their brands with human values.

Cancer hospitals must respect *patients' rights*. These last ones have different rights such as access to quality information, dignity, and privacy (Pelitti, 2016). When hospitals respect these rights, patients can efficiently participate in collective decision-making processes along with healthcare professionals (Lim, 2016). Patients are free to ask questions to doctors, express their preferences and require different documents related to their treatments (Epstein, Duberstein, Fenton, 2017), that is why hospitals' social media platforms should provide patients with tools (online consultations, mobile apps, etc.) allowing them to efficiently interact with doctors. In other words, thanks to social media, hospitals can protect patients' rights because these last ones access to quality information and this way protect their own health (Braun et al., 2019). However, some patients do not accept doctors to be "friends" in some platforms such as *Facebook*, and even criticize these professionals: in these cases, hospitals need to dialogue with patients and avoid crisis that can go viral (Peluchette, Karl, Coustasse, 2016)

Besides patients' rights, cancer hospitals must follow a *public health approach*. These organizations use social media to disseminate public health-related content that is useful for different stakeholders, especially patients, journalists, and public health authorities (Fischer, 2014). To do that, the first step consists of researching different topics such as stakeholders' perceptions and health trends (Cho et al., 2018). Based on that, cancer hospitals develop meaningful content for their social media platforms that satisfies stakeholders' needs in terms of information (Yeob et al., 2017).

Along with patients' rights and public health, cancer hospitals must protect their *corporate legacy*. When using social media for branding purposes, these organizations must respect their brand legacy, their history, their values (Blomgren, Hedmo, Waks, 2016) as well as the corporate guidelines developed by the Communication Department to help employees use these platforms in a consistent way (Peluchette, Karl, Coustasse, 2016). To do that, this department should regularly analyze stakeholders' perceptions about the hospital's legacy and implement action plans when some brand-related problems arise. On the other hand, health professionals should use social media to promote a dialogue that helps patients to reinforce their empowerment (Park, Reber, Chon, 2016) and understand the hospital's

social engagements with different social groups (Rando Cueto, de las Heras Pedrosa, 2016).

Annual Content Plan

With the aim of associating their brands with human values, cancer hospitals should propose *medical education* initiatives such as online consultations with doctors (Visser et al., 2016); enhance patients' access to *emotional and social support networks* (Myrick et al., 2016); respect patients' beliefs related to *religion and spirituality* (Medina Aguerrebere, 2020); reinforce *patients' empowerment* through different learning initiatives (Jiang, Street, 2016); share with stakeholders *testimonies and stories* from patients, doctors and nurses (Quintero, Yilmaz, Najarian, 2016); put stakeholders in contact with *patients' associations* specialized in health-related issues (Fernández-Gómez, Díaz-Campo, 2016); explain how *social issues*, such as Law, History or Philosophy, determine healthcare practices in hospitals (Hannawa et al., 2015; Salmon and Bridget, 2017); analyze the impact of *health trends* (management, technology, etc.) on cancer medical services (Jones et al., 2015); inform stakeholders about the hospital's *corporate social responsibility* initiatives (Zerfass, Viertmann, 2017); and describe the hospital's *brand architecture* (Maier, 2016).

To promote all these elements and make the cancer hospital's brand more human, these organizations' Corporate Communication Department should implement an *Annual Content Plan* including 10 topics and 120 subtopics (see Table 1. *Annual Content Plan*). We chose these topics and subtopics based on our literature review about cancer hospitals' corporate communication initiatives on social media platforms. Thanks to the main ideas explained in the 104 papers selected, we developed an annual content plan that balances cancer hospitals' needs, stakeholders' interests, and human values. This plan can be implemented by cancer hospitals all over the world, but each hospital must adapt this plan considering various aspects: the number of social media platforms they use, their communication priorities, their economic and human resources, and the national legal framework. Doctors, nurses, and administration employees should actively collaborate with the hospital's Corporate Communication Department and this way help the organization establish a true dialogue with different stakeholders. This dialogue is based on 10 topics and 120 subtopics, and should be consistent with the three branding principles previously explained.

Evaluation System

When hospitals resort to social media platforms for branding purposes, they face some reputation risks (Lagu et al., 2016), that is why these organizations should monitor conversations to make sure the content share on these platforms is respectful and based on quality standards (Abramson, Keefe, Chou, 2015). They should also valuate audiences' behaviors when interacting with this content (De Las Heras-Pedrosa et al., 2020). Thanks to evaluation systems based on metrics, organizations can strongly engage with their stakeholders (Garga et al., 2020); detect in real time the posts that catch these last ones' attention (Prochaska, Coughlin, Lyons, 2017); prove quantitatively the positive impact of corporate communication in terms of reputation, brand, identity, leadership and employees' motivation (Zerfass, Viertmann, 2017); and legitimize the role of the Corporate Communication Department within the organization (Moreno, Wiesenberg, Verčič, 2016).

To evaluate cancer hospitals' branding efforts on social media platforms, these organizations resort to different key performance indicators (see Table 2. *Indicators on Facebook, Twitter, and Youtube*). Nevertheless, these organizations should also evaluate their social media presence according to qualitative criteria. To do that, they can conduct different initiatives such as focus groups with patients, deep interviews with doctors, or content analysis to determine whether the different posts published on these platforms were positive, negative, or neutral. Thanks to both quantitative and qualitative indicators, cancer hospitals can efficiently evaluate whether their doctors, nurses, and administration employees respected the three branding principles when communicating about the 10 topics and 120 subtopics with the hospital's stakeholders.

Discussion

Health communication combines expertise from different fields such as communication sciences (rhetorical studies, journalism), social sciences (psychology, sociology), and physical sciences (pharmacology, medicine) to examine the powerful influences of communication on health and illness (Kreps, 2020). Integrating humanities in health organizations' communication initiatives allows these companies to establish better relations with their stakeholders

Table 1. *Annual Content Plan* (back to text)

	January	February	March	April	May	June	July	August	September	October	November	December
Medical education	Diseases	Treatments	Use of medicines	Diagnostic tests	Hospital's internal functioning	Doctors' role	Nurses' role	Patient's role	Cyberhealth	Health and mobile apps	Health and social media	Internet and medical information
Emotional and social support networks	Patients' friends	Psychological support	Therapy groups	Hobbies and leisure	Cultural events	Social visits	Transport help	Financial help	Accommodation for relatives	Translation services	Legal support	Social integration
Religion and Spirituality	Spiritual support	Spiritual practices	Readings	Visit to holy places	Network with patients sharing the same spiritual values	Spiritual dimension of cancer	Spiritual dimension of pain	Spiritual dimension of medical treatments	Role of the family	Role of friends	Role of God	Death
Patient's empowerment	Patient's role in cancer treatments	Patient's role in medical research	Patient's role in the hospital's internal functioning	Patient's role in health technology	Patient's role in the history of medicine	Patients' rights and duties	Patient's role in public health authorities	Patient's role in schools of medicine and nursing	Patient's role in pharmaceutical companies	Patient's role in the public opinion	Patient's role in international NGOs (WHO, ICRC, etc.)	Patients' role in local communities
Testimonies and Stories	Cancer patients	Cancer patients' relatives	Children suffering from cancer	Cancer survivors	Doctors	Nurses	Researchers	Hospital's administration employees	Hospital's managers	Hospital's Medical Director	Hospital's CEO	Hospital's Board of Trustees

Table 1. *Annual Content Plan* (back to text)

	January	February	March	April	May	June	July	August	September	October	November	December
Patients' associations	Events	Learning initiatives	Research initiatives	Social initiatives	Public health campaigns	Patients' rights	Legal support	Social support	Leadership in the local community	New policies	Relations with public authorities	Relations with media companies
Social issues	History and medicine	Anthropology and medicine	Philosophy and medicine	Sociology and medicine	Law and medicine	Communication and medicine	Linguistics and medicine	Arts and medicine	Music and medicine	Theatre and medicine	Literature and medicine	Cultural elements and medicine
Health global trends	Diseases	Treatments and medicines	Cyberhealth	Social media and mobile apps	Legal framework	Patient's rights and duties	Patient's behaviors	Hospitals' business models	Healthcare management	Hospitals' global leadership	Health policies	Medical ethics
Hospital's corporate social responsibility	Engagement with patients	Engagement with patient's relatives	Engagement with patients' associations	Engagement with the hospital's employees	Engagement with unions	Engagement with shareholders	Engagement with suppliers	Engagement with public authorities	Engagement with media companies	Engagement with NGOs	Engagement with the local community	Engagement with environmental issues
Hospital's brand architecture	Identity	Corporate value 1	Corporate value 2	Mission	Vision	Corporate culture	Identity	Corporate value 3	Corporate value 4	Mission	Vision	Corporate culture

Table 2. *Indicators on Facebook, Twitter, and Youtube*

Social media platform	Key performance indicators	Source
Facebook	• Number of fans • Follower demographics • Page views by sources • Actions on page • Reach by post type • Post engagement • Click-through-rate (CTR) • Ad impressions & frequency • CPM & CTR of Facebook ads • Cost per conversion	Datapine (2021a)
Twitter	• Average amount of link clicks • Average engagement rate • Average amount of impressions • Top 5 tweets by engagement • CPM of Twitter ads • Results rate of Twitter ads • Cost per result of Twitter ads • Interests of followers • Number of followers • Hashtag performance	Datapine (2021b)
YouTube	• Total watch time • Total amount of video views • Viewer retention • Video engagement • Number of subscribers • Daily active users • Traffic source • Subscribers' demographics • Top 5 videos by views	Datapine (2021c)

(Li, Xu, 2020). This involves doctors and nurses should actively participate in the hospital's branding communication initiatives: to do that, these professionals need to reinforce their skills in emotional intelligence and empathy (Driever, Stiggelbout, Brand, 2020), and help patients to participate in collective making-decision processes (Rodrigues et al., 2020; Peterson et al., 2016). In other words, health professionals need to prioritize some human values, such as compassion, to satisfy all stakeholders' needs in terms of information and emotional support. When hospitals focus their branding strategies on humanities, education, and social engagements, they can build a credible brand because patients do not need only health information: they also need a psychosocial support (Ancker, Grossman, Benda, 2020). This corporate credibility based on human values is essential for implementing communication processes allowing the hospital to build its brand in a collective way along with its stakeholders (Jenkins et al., 2020).

Our results proved that some of the best academic journals in the world promote cancer communication as a research field (see Table 3 below). After analyzing 114 papers related to this area, we can highlight some important trends. *First*, cancer communication is covered by journals specialized on different fields such as communication (*Health Communication*, *Journal of Health Communication*), health education (*Medical Education*, *Patient Education and Counseling),* public health *(Canadian Journal of Public Health, Public Health Research and Practice),* technology (*JMIR*) and cancer research *(Journal of Cancer Research, Jama Oncology),* which contributes to developing a multidisciplinary approach for this area. *Second*, authors publishing papers about this area resort to different methodologies (online surveys, interviews, content analysis, etc.), analyze different kind of cancers (breast

Table 3. *Main topics about cancer communication* (back to text)

Year	Journals	First Authors	Main topics
2020	*Health Marketing Quarterly, Journal of General Internal Medicine, Journal of Brand Management, Cogent Social Sciences, Patient Education and Counseling, Canadian Journal of Public Health, BMC Health Services Research, International Journal of Information Management, Place Branding and Public Diplomacy, JMIR (2), Bulletin of the World Health Organization, International Journal of Nursing Sciences (2), Singapore Medical Journal, Observatorio OBS Journal, Profesional De La Información (2), Journal of Public Health Policy, Public Health Research and Practice, Investigación y Educación en Enfermería, Interactive Journal of Medical Research, MedEdPORTAL, Oncology Letters.*	Apenteng, Ancker, Asan, Bian, De las Heras Pedrosa, Driever, Eghtesadi, Elrod, Garga, Govers, Jenkins, Kerasidou, Kreps, Li, Low, Medina Aguerrebere (2), Mheidly, Ratzan, Rodrigues, Shieh, Sotto, Tsamakis, Xifra.	Reputation, health literacy, health communication, health crisis and communication, artificial intelligence in healthcare, hospital marketing, hospital's brand, interpersonal communication in healthcare, social media and hospitals, cancer hospitals and social media.
2019	*International Journal of Strategic Communication, Journal of Cancer Research Clinical Oncology, Cancer Control, Cuadernos.info, Health Education and Behaviour, Journal of Healthcare Management, Translational Behavioral Medicine, JMIR, International Journal of Environmental Research and Public Health.*	Belasen, Braun, Huo, Míguez-González, Miller, Odoom, Pope, Wu, Zhu.	Corporate communication, hospital's brand, cancer hospitals and online initiatives, cancer patients and social media, mobile apps and cancer.
2018	*Management Communication Quarterly, JMIR (2), Profesional de la Información, PloS One, Psychooncology, Journal of Cancer Education, Journal of American College of Radiology (2), Cochrane Database System Review, Annals of Oncology, Journal of Health Communication, International Journal of Environmental Research and Public Health.*	Banghart, Cho, Costa-Sánchez, De Silva, De Vries, Gage-Bouchard, Kotsenas, Moore, Paulo, Sutton, Triemstra, Vraga, Yang.	Hospital's brand, interpersonal communication and cancer, social media and health, cancer patients and social media.
2017	*Acta Oncologica, Support Care Center, American Journal of Medical Quality, Jama Oncology, Health Marketing Quarterly, Journal of Cancer Survivorship, Journal of Health Communication (2), Health Communication, American Society of Clinical Oncology Educational Book, Medical Education, Future Oncology, Services Marketing Quarterly, Journal of Communication Management.*	Badr, Brand, Cua, Epstein, Esposito, Falisi, Han, Namkoong, Prochaska, Salmon, Sedrak, Taken, Yeob, Zerfass.	Corporate communication, hospital's brand, cancer communication, interpersonal communication and cancer, marketing and social media, cancer patients and social media, mobile apps and cancer.
2016	*European Journal of Surgical Oncology, Journal of Cancer Survivorship, International Journal of Strategic Communication, Health Communication (7), Cuadernos.info, Electronic Physician, Breast Cancer Research and Treatment, Journal of Hospital Medicine, Marketing Intelligence & Planning, Qualitative Research Reports in Communication, Patient Education and Counseling, Comhumanitas, Journal of Health Communication, Question, Health Marketing Quarterly, Preventive Medicine, Opción, Millenium, BMC Health Services Research, British Medical Journal.*	Beesley, Blanch-Hartigan, Blomgren, Brent, Fernández-Gómez, Gage-Bouchard, Guidry, Haluza, Jahromi, Janz, Jiang, Lagu, Lim, Maier, Mazor, Moreno, Myrick, Park, Pelitti, Peluchette, Peterson, Quintero, Rando Cueto, Rodrigues, Smailhodzic, Visser.	Corporate communication, health communication, hospitals' internal communication, interpersonal communication and cancer, social media and hospitals, cancer patients and social media.
2015	*Journal of Health Communication (3), JMIR, Prisma Social, Health Communication, Asia Pacific Journal of Human Resources.*	Abramson, Bach, Becerra, Hannawa, Jones, Moreland, Thornthwaite.	Health communication, hospital's brand, interpersonal communication in hospitals, cancer patients and social media.

Table 3. *Main topics about cancer communication* (back to text)

Year	Journals	First Authors	Main topics
2014	*Oman Medical Journal, Journal of Business and Technical Communication, Journal of Nonprofit & Public Sector Marketing, Health Marketing Quarterly, Journal of Services Marketing, Mater Socio Medica, Smart Health - International Conference, Health Communication, The Health Care Manager, Journal of Management Development, Patient Education and Counseling, Strategy & Leadership, Nurse Leader, Management Research Review.*	Al-Abri, Burleson, Fischer, Gombeski, Kemp, Kourkouta, Liu, Moran, Nelson, Pinho, Rupert, Sheehan, Trepanier, Trong.	Corporate communication, hospital marketing, health promotion strategies, interpersonal communication in hospitals, ethics in health communication, social media and hospitals, hospital's brand, patient satisfaction.
2013	*European Journal of Marketing, International Journal of Information Management, Journal of Health Communication, Strategic Change, Corporate Communications: An International Journal.*	He, Laroche, Nazione, Singal, Veltri.	Corporate communication, brand, social media and brands, health communication.
2012	*Journal of Oncology Practice.*	Dizon.	Cancer patients and social media.
2011	*Organizational Development Journal.*	Cady.	Brand.

cancer, melanoma) and many of these researchers refer to human values, such as patients' rights and doctors' integrity. Third, from 2011 to 2020, the main research topics on this area have evolved from a basic approach (brand, corporate communication, health communication) to a more developed one (social media and cancer patients, cancer hospitals and social media, mobile apps and cancer).

Social media have become an essential tool for cancer hospitals' branding initiatives. However, these organizations need to manage these platforms in a professional manner, which involves three main decisions. First, *implementing social media policies*. Digital ubiquity and penetration across spatio-temporal boundaries force organizations to define in a perfect way where personal, professional, and public communication initiatives begin and end (Banghart, Etter, Stohl, 2018). Companies need to implement transparent social media policies that are consistent with employment laws, human resource policies, and employees' private lives (Thornthwaite, 2015). These policies should also help organizations to make their branding initiatives more dynamic (Costa-Sánchez, Míguez-González, 2018). Second, *flexibility*. Health organizations need to innovate and integrate new social media platforms, as well as disseminate content in different formats (Apenteng et al., 2020). To do that, they can resort, for example, to *TikTok*: this platform allows health organizations to use different formats that are appreciated by patients, such as videos containing cartoons or documentary-style contents (Zhu et al., 2019). Besides, this social media facilitates employees' communication efforts when promoting health behaviors among patients (Eghtesadi, Florea, 2020). And third, *integrating social media into crisis communication strategies*. During the Covid 19 outbreak, hospitals faced a medical, organizational, and communication crisis that negatively affected their corporate image. This situation could have been avoided if hospitals had continued to communicate on different platforms, including social media (Xifra, 2020), if they had used an empathic style focused on peoples' needs rather than organizations' interests (Mheidly, Fares, 2020), and if they had integrated nurses and doctors into the hospital's online communication initiatives (Rodrigues et al., 2020).

This paper aimed to better understand how social media platforms can help cancer hospitals to develop a more human brand focused on stakeholders' needs. To do that, we recommended these organizations to promote health education initiatives, integrate doctors and nurses into the hospital's corporate communication initiatives on these platforms, and analyze stakeholders' needs in terms of information and psychosocial support. Moreover, we also recommend hospitals' CEOs and shareholders to invest in this area and provide doctors with professional training sessions on branding, even if many of these organizations do not have enough economic ressources to do it. Thank to this approach, cancer hospitals can build a more reputed brand. On the other hand,

this approach focused on human values, health education and stakeholders' needs can also be applied by other kinds of hospitals. We consider that this paper can help different hospitals all over the world to evolve from marketing to corporate communication, and this way develop more credible brands based on human values.

Despite the different interesting proposals presented in this paper, we must highlight some limitations. Our inclusion and exclusion criteria, as well as the keywords considered, led us to focus especially on quantitative and qualitative papers published by journals specialized in communication and public health; which means that we did not consider journals focused on other areas such as artificial intelligence, big data and other technological tools implemented by healthcare organizations. Besides, we could not access cancer hospitals' corporate communication departments to check to what extent they consider human values when they define their branding strategies on social media. Lastly, we could not find quantitative data about how human values disseminated by cancer hospitals determine patients' perceptions and decisions. We recommend researchers interested in developing this area in the next years to focus on different topics: how to train doctors and nurses on corporate communication skills adapted to social media platforms; how to integrate social media platforms into the cancer hospital's medical protocols; and how to use mobile apps as a branding communication tool.

Conclusion

Cancer hospitals resort to social media platforms to become more dynamic organizations, engage with their stakeholders more efficiently, and associate their brands with human values (patients' rights, honesty, integrity, kindness, and compassion). In other words, these organization interact with patients before, during, and after their consultations at the hospital, and resort to different formats (texts, videos, pictures) and contents (education, emotional support) to provide them with dynamic experiences allowing patients to actively participate in these online conversations. Nevertheless, cancer hospitals are also submitted to a highly economic pressure from shareholders, competitors, and public authorities, which forces many of these organizations to use social media platforms for marketing purposes, rather than for branding initiatives. This dilemma between the company's brand (long-term approach) and its marketing objectives (short-term approach) makes it difficult for cancer hospitals to efficiently implement an online branding strategy based on human values. This paper aimed to analyze how cancer hospitals could use social media platforms for making their brands more human and become more credible companies. After conducting our literature review about cancer hospitals' communication initiatives on social media platforms, we proposed the *PET Branding Model* as a corporate communication tool that these organizations can use to efficiently associate their brands with human values and this way improve their reputation.

To conclude this literature review paper, we showcase three last ideas or managerial implications that cancer hospitals worldwide can adopt to efficiently implement the *PET Branding Model*. *First*, these organizations must implement within their Corporate Communication Department a Social Media Unit integrated by employees having diverse backgrounds (communication, public health, medicine, engineering, economics, and social sciences) who respect annual plans, protocols, and key performance indicators. *Second*, the Social Media Unit's Manager must adopt a public health approach focused on satisfying stakeholders' needs in terms of information and emotional support, and promoting the hospital's brand as a cultural asset between the organization and its stakeholders. And *third*, the Social Media Unit's Manager should implement a corporate training program allowing doctors, nurses, administration employees, but also patients and patients' relatives, to learn how to use social media platforms in a professional, corporate way to become the true protagonists of the hospital's branding strategy.

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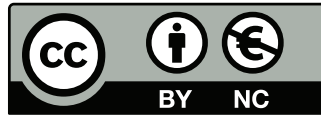
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