The influence of social networks on the work of information professionals specializing in health. The Case of Spanish Official Medical Associations

Influencia de las redes sociales en el trabajo de profesionales de la información especializados en salud. Caso de los Colegios Oficiales de Médicos de España

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ABSTRACT
Introduction. The progress produced in the freedom in the informative content that flows through digital social networks and greater participation of users in them, play a key role in health-related communication, particularly in that generated by information professionals specialized in the health field due to the labor adaptation process that they have contemplated and which they have to attend to according to the evolution of a changing virtual scenario. This article focuses on the activity via social networks of the more than fifty Official Medical Colleges (C.O.M.) that exist in Spain. The main objective is to analyze how these channels influence the construction of the messages that are emitted from the institution to the population. **Methodology**. The research is based on the development of a quantitative methodological technique through a questionnaire answered by specialists in health information from the referred groups. Results. Responsible for preparing and managing the information issued by the C.O.M. value the communication that is exchanged on digital social networks and consider that Twitter (81.3%) and Facebook (50%) are the most relevant according to their interests, focused on health promotion. About the digital social media accounts

used by C.O.M. as information sources, it is those of hospital entities that deserve the most credibility, although most do not reflect it in the construction of their own content. **Conclusions**. The capacity of social networks is valued, as communication channels to inform, establish relationships with different stakeholders and listen to the demands of users to feedback the discourse on networks.

KEYWORDS: healthcare communication; corporate communication; social networks; hospitals; health; Medical Association.

RESUMEN
Introducción. Los avances producidos en la libertad en el contenido informativo que fluye a través de las redes sociales digitales y una mayor participación de los usuarios en las mismas juegan un papel clave en la comunicación relacionada con la salud, en particular en la que generan los profesionales de la información especializados en el ámbito sanitario por el proceso de adaptación laboral que han contemplado y al que han de atender de acuerdo a la evolución de un escenario virtual cambiante. Este artículo se centra en la actividad vía *social networks* del más de Colegios Oficiales de Médicos (C.O.M.) de España, siendo el objetivo principal analizar de qué forma éstas influyen en la construcción de los mensajes que se emiten desde la institución a la población. **Metodología**. La investigación se basa en el desarrollo de una técnica metodológica cuantitativa a través de un cuestionario contestado por especialistas en información sanitaria de los colectivos referidos responsables de elaborar y gestionar la información emitida por parte de los C.O.M. valoran la comunicación que se intercambia en redes sociales digitales y consideran que Twitter (81,3%) y Facebook (50%) son las más relevantes de acuerdo con sus intereses, centrados en la promoción de la salud. Sobre las cuentas en redes sociales digitales utilizadas por los C.O.M. como fuentes informativas, son aquellas de entidades hospitalarias las que mayor credibilidad les merecen, aunque la mayoría no lo refleje en la construcción de su propio contenido. **Conclusiones**. Se pone en valor el potencial de las *digital social networks,* como canales de comunicación de gran utilidad para las organizaciones sanitarias para informar, establecer relaciones con diferentes públicos y escuchar las demandas de a los usuarios para retroalimentar el discurso en redes.

PALABRAS CLAVE: comunicación sanitaria; comunicación corporativa; redes sociales; hospitales; salud; Colegios Oficiales de Médicos.

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1. Introduction

Today, health communication plays an important role for citizens (Swan, 2009) and, therefore, contributes to social sustainability. Society increasingly uses the internet to obtain health information, share experiences related to pathological processes, or find people with similar physical or psychological conditions (Swan, 2009; Van de Belt et al., 2013). Since information and communication technologies are used in the health field, terms such as e-patient or e-health are widely used, which shows the increasingly relevant role that users play in decision-making about their well-being (Tonia, 2014; Prasad, 2013).

Terrón (2007) offers his perception from an anthropological point of view. In his opinion, interest in health information in a country like Spain has significantly increased due to the growing need for lifestyles that lead to greater social well-being. This idea is reinforced by the supply and demand for information: interest in what is communicated grows as more information is offered (Terrón, 2007; Vance, Howe, & Dellavalle, 2009).

The Internet has become the most important "speaker" of the expectations and demands of patients. This encourages the emergence of associations that support the rights of patients to make their voices heard (Terrón, 2007, 24). As a result, this makes patients feel more empowered, being members of a collective support platform in which they can express their needs and those of their environment. Digital social networks play a prominent role in this regard, with a progressive increase observed in terms of use in the health field (Tonia, 2014; Ventola, 2014).

1.1. Health digital social networks. Advantages

Factors such as accessibility, immediacy, or the ability to favor two-way communication between different audiences allow active communication (Mangold and Faulds, 2009). Health entities, aware of the potential of social networks, use them to promote interaction and collaboration between patients, families, and professionals (Sánchez et al., 2012).

Besides arousing more dynamic audiences, the advances made in freedom of informational content through digital social networks (De las Heras-Pedrosa en al., 2019) in the health field, these channels have caused content to be more credible when different audiences are at the same level of interaction. Greater communicative power is conferred on both citizens and health professionals when their messages reach a greater number of people (Andersen, Medaglia, and Enriksen, 2012; Bierglund-Andersen and Söderqvist, 2012).

These channels have become the communication instruments for healthcare corporations, by facilitating participation and collaboration with their stakeholders and allowing, thanks to two-way communication, quality control and the efficiency of the institution (Griffis et al., 2014; Vance, Howe, and Dellavalle, 2019), but also for the education of citizens with new healthy lifestyle habits (Merchant, Elmer, and Lurie, 2011; Kass-Hout and Alhinnarni, 2013). Furthermore, it is a key tool for communicating health alerts and creating networks of groups of patients with the same pathologies or professionals for research purposes (Roman, 2014; Bierglund-Andersen and Söderqvist, 2012).

Another advantage of the accounts of health entities in digital social networks (Gomes and Coustasse, 2015; Ventola, 2014; Bernhardt, Alber, and Gold, 2014) attends to their economic benefits, not only because their configuration is free, but because a greater interaction between healthcare professionals and patients can avoid face-to-face visits to healthcare centers. Besides, digital social networks also act as tools to promote corporate activity. Thus, they represent a very effective multidimensional communication instrument to ensure interaction with interested parties, in this case, health professionals and patients (Blázquez, Cantarero, & Pascual, 2015).

The most popular accounts of health entities in digital social networks are those specifically aimed at people who suffer from some pathology (Swan, 2009; Chou et al., 2009). De la Peña and Quintanilla (2015, 495) describe their role for citizens as "a virtual community where they can find stimulation, get answers to specific health-related questions, and a place to share success stories", and Koteyko, Hunt, and Gunter (2015) add that this tool has great potential to promote initiatives.

However, other sectors of the population are also recipients of the content that circulates in these networks, becoming stakeholders of these communication channels. In fact, Swan (2009) suggests that, in the health field, professionals destined to attend to patients, researchers, and other agents involved in this area could participate more actively (Chou et al., 2009) in them.

From the patient's point of view, social networks are the best instrument for real-time interaction, allowing the exchange of information and participation, not only as patients or users, but also as groups or associations (Krowchuk, Lane, and Twaddell, 2010). In the case of professionals, they are mainly used for results dissemination, research, and networking, or teaching, among other uses (Chretien and Kind, 2013).

The scientific literature related to health communication highlights the need for professionals who practice it to adapt to the changes caused by the rapid invasion and evolution of digital social networks. It is necessary to design new strategies and challenges to face the emergence of a new style of real-time network communication (Brandtzaeg et al., 2015). Health professionals can use the new communication scenarios and their position as authoritative and credible sources to promote and defend health (Leask, Hooker, and King, 2010).

Digital social networks provide these health communication specialists with valuable information about patient experiences, with which they can monitor public reaction to health problems. It also stands out the potential of such information for the development of health policies (Moorhead, et al., 2013). An example is medical blogs, which are frequently visited by the most important media (Kovic, Lulic, and Brunini, 2008).

1.2. Health digital social networks. Disadvantages

The democratization of communication through social networks entails, in some cases, a lack of veracity and control of the information (Bernhardt, Alber, and Gold, 2014). Anyone can cause unrest in society with their opinions or communication of unconfirmed facts (Vance, Howe, & Dellavalle, 2009), as well as harmful criticisms or falsehoods directed at health professionals or institutions (Castilla, 2016). Legal problems, such as the lack or violation of patient privacy, damage to the professional image, etc. cannot be ignored. (Chretien and Kind, 2013; Ventola, 2014; Bernhardt, Alber, and Gold, 2014), as well as the loss of privacy or security in shared information (Antheunis, Tates, and Nieboer, 2013; Joseph Mattingly, 2015), and the lack of specialized training both in health and in the management of social networks by communication professionals (Rando-Cueto and De las Heras-Pedrosa, 2014; Rando-Cueto and De las Heras-Pedrosa, 2016).

To solve problems such as these, health entities and professional organizations, such as Official Medical Associations, have developed prevention guidelines and good practice guides (Ventola, 2014) aimed at protecting institutions, those professionals who care for and assist patients, researchers, and other agents involved in this field at the legal, clinical, and organizational levels (Lambert et al., 2012; Househ, 2013; Dizon et al., 2012; Childs and Martin, 2012).

Medical associations, together with health institutions, play a crucial role in the development of recommendations for the use of social networks. For this reason, the work of professionals with an expert profile in communication and health is essential.

Leask, Hooker, and King (2010) also highlight how the role of ~~the specialists in charge~~ those responsible for health communication is losing relevance. This incurs the disappearance of basic technical knowledge necessary to transmit health information correctly. One of the new challenges is

to develop tools to verify content, given the risk of spreading inaccurate or missing information generated by the increasing speed with which information emerges (Brantzaeg et al., 2015).

Rumors, contradictory news, speculation, are characteristics of the messages that circulate on social networks. In this sense, it is not conceivable that the health communicator depends on sources that act as funders and other informants with different interests, to reliably communicate to society and not be detrimental to their well-being or quality of life (Gavilán and Iriberri, 2014). Therefore, ethics and responsibility at work, as well as a commitment to society, are key elements of the communicator. In this way, better care is offered to the population (Barrero and Palacios, 2015). This work is reflected when organizational interests are transferred to reinforce the well-being or quality of life of citizens.

Although the veracity of the information rests with the communication professional, the determination of the correct information is currently complicated due, among other aspects, to the large amount of information generated by social networks. Knowing them and knowing how to use them for professional purposes is not an easy task and requires new forms of reasoning. Despite this, authors defend this new scenario because the communicative potential of social networks is not negligible, "far from being negligible" (Kaplan and Haenlein, 2010, 67).

1.3. The C.O.M in official accounts of digital social networks

Besides the verification and credibility of the information disseminated through social networks, other aspects that the analyzed studies expose are the effects that these produce in professional practice (Hermida, Lewis, and Zamith, 2014); the use that professionals make of them (Paulussen and Harder, 2014), and their importance for communicators or the weight they have regarding information (Lariscy et al., 2009).

The modification of hierarchical structures regarding the organization of information through spaces for conversation, connectivity, and community creation that digital social networks have caused is one of the changes highlighted by Hermida, Lewis, and Zamith (2014) in the exercise of communication professionals who work on the content of official accounts on social networks. There is no longer a single paradigm for the structure of news, but there are many different ways to develop content.

Lariscy et al. (2009), not only emphasize the attention that corporations must have on the content that is disseminated through social networks. They also point out that one of the tasks of professionals is to closely monitor the information issued by the entities for which they work and possibly involve those who originate that content (Russell and Lamme, 2016), considering that digital social networks contribute to the construction of the media agenda.

Insisting on the importance of monitoring information, digital social networks are considered an alternative instrument to promote communication between public administrations and different stakeholders (Păun, 2009).

Specifically, in the sector of communication via digital social networks in the field of specialized health care, scientific publications that focus on the professional practice of communicators specialized in health are scarce (Rando-Cueto, Paniagua-Rojano, and De las Heras-Pedrosa, 2016; Antheunis, Tates, and Nieboer, 2013).

Professional associations play a key role in the communication they promote. The sector of professional associations in Spain is of great importance for the country's economy, mainly due to

the degree of qualified employment and their impact on the quality of business services. Professional services have an unquestionable economic weight, they generate around 9% of the GDP and represent around 6% of total employment and 30% of university employment. On the other hand, the relevance of professional services lies in the protection of the rights and interests of the citizens who receive them.

Throughout various regulations on professional associations in Spain since 1974, the sector has undergone different transformations but maintains the same structure as it originally had. The law defines professional associations as Public Law corporations, protected by Law and recognized by the State, with their own legal personality and full capacity to fulfill their purposes, which empowers them as entities that represent and defend the profession that each association has, and indicates the mandatory registration for professional practice regulated by law.

In the present case, the Spanish (C.O.M.) encourage the scientific work of doctors and serve as a bridge between said group, patients, and society in general. But, above all, with their ethical committees, they monitor that health institutions adhere to and comply with the rules. For this reason, this study focuses on the degree of knowledge that such professional associations have regarding current communication tools, among which social networks play an influential role that affects the information that reaches citizens and patients, in particular. Therefore, it is considered essential that there are professionals specialized in communication and that they are at the forefront of the new communication mechanisms and languages that are currently being developed. The C.O.M. must continue to convey reliable information using appropriate language for the entire population.

2. Methodology. Objectives and hypothesis

The main objective of this study is to analyze the influence that digital social networks have on the exercise of the Spanish Official Medical Associations. It is studied how the professionals responsible for the communication of these entities use them in the construction of the messages they disseminate, as well as the value that is given to what is published in other networks, which they use as a source for the elaboration of informative content.

The research of the use that communication professionals who work in the communication departments or agencies of said Associations make of social networks is based on the following hypotheses:

H1. There are professionals specialized in communication in the C.O.M. who perfectly know the new communication trends. There are currently 52 Official Medical Associations in Spain with a territorial structure and grouped around the so-called General Council of Official Medical Associations, whose function is the exclusive representation of these at the national and international level, as well as the organization and defense of the medical profession.

All territorial delegations of medical associations have an organized communication department in which one to three people work, whether they are specialists in the field or graduates in Public Relations and/or Journalism. Furthermore, these are organized in a communication network of Official Medical Associations to exchange experiences and even organize an annual congress to present and share their initiatives. For example, in 2012 they dedicated this meeting to social media strategies and have also worked in recent years in the fight against the spread of fake health news or crisis communication.

H2. The communication professionals of the Spanish Official Medical Associations use digital social networks for their work, both as a source of information and verification, as well as to establish relationships with other professionals and become familiar with the advances in their field. Concerning the first hypothesis and as a result of the previously reported scientific literature, the participation of these agents in the social networks scenario currently has a great impact. Unlike at the beginning of the decade, when the presence of the Official Medical Associations in Spain was insignificant, today their activity is remarkable. This is evident in the significant increase both in the number of followers of their social networks and in the volume of information they generate. The voice of the professionals of these entities in social networks acquires special relevance to promote accurate information that preserves the quality of life and well-being of citizens.

H3. For the professionals of the Official Medical Associations, the contents shared in the official accounts of the digital social networks of the health centers are those that deserve greater credibility among those they consult. However, they rarely reproduce these messages on their own digital social networks. The contents shared in the official accounts of the hospital centers are not considered valuable among the professionals of the Official Medical Associations, since they do not address the demands of the public. Despite the use of social networks carried out by the communication professionals of the aforementioned entities, as indicated in the second hypothesis, in the case of corporate hospital accounts, they lack impact regarding the content of the information published by medical groups. This premise also implies a lack of interaction between hospitals and medical associations through digital social networks.

A greater volume of information aimed specifically at meeting the information or communication needs of audiences, such as professionals from Medical Associations, would lead to a wider audience and more effective dissemination of its contents, something that would be especially useful for society in cases of health alerts, for example, or situations that require a quick reaction from citizens, regarding health issues.

To deepen the use that communication professionals specialized in health, make of social networks, a systematic review of the international scientific literature published in the last decade was carried out.

At the same time, the study is supported by a survey, "one of the most used techniques in social research" (Ruiz-Olabuénaga, 2012, 72), which consists of asking questions systematically organized, which can be open or closed, with single or multiple responses, and offers data and information homogeneously. This allows, according to Igartua (2006, 231), "obtaining data on objective (facts) and subjective (opinions, activities) aspects based on the information (oral or written) provided by the subject" (Álvarez González, and Cea D'Ancona 1997; Neuendorf, 2017).

In this sense, Malhotra (2006, 115-168) considers that the surveys are questionnaires posed to a large number of people. To do this, a pre-designed questionnaire is used, to obtain specific information. This type of methodology analyzes attitudes that cannot be observed directly, thus facilitating descriptive discoveries. Macionis and Plummer (2012) define surveys as a set of questions written by a researcher and sent to subjects to answer these questions (Piñuel, 2002; Riffe, Lacy, and Fico, 2005).

The questionnaire designed for this study focused on professional routines, use of social networks: time invested, frequency of employment, reasons, preferred accounts, and, finally, assessing aspects of the importance of these communication channels at work, credibility, content, and information needs.

The questionnaire consisted of seven blocks, of which an attempt was made to identify how digital social networks influence the work carried out by health information professionals of the Official Medical Associations of Spain. In the first part, it was asked about age, grade, and ~~some~~ data on functions and tasks, as well as work seniority, based on a tool validated by European Monitor Communication studies (Zerfass et al., 2018).

From here, different questions were included about the use of social networks by those responsible for communication in their daily work. There were six closed-ended questions and three multiple-response cases (that is, with more than one possible answer).

Although firstly, the interest was to know the frequency (number of hours a day) with which the professionals went to the referred communication channels to carry out their work, then they were consulted about the main reasons why they use professional networks in their professional routine: as a source of information, to interact with specialized journalists, as another communication channel, to establish professional relationships, to search for stories related to their work topic, or contrast information.

Third, communication managers were asked about the importance they give to social networks in the sector -whether relevant or irrelevant-. Subsequently, it was wanted to know their opinions on how they contribute to the construction of the agenda-setting in the health sector. At this point, the demands for information on social networks from those responsible for communication were identified: information on services, research, general information on health, information on hospital activity, or information on health promotion.

Finally, a question was asked regarding the profiles of the target audiences of the information that professional associations share in social networks (health networks or groups of hospitals, patients and families, hospital staff, and citizens) and the importance of communication in social networks with each of them.

The referred questionnaire was sent to all 52 C.O.M. of Spain. They addressed the person in charge of communication and if they did not appear in the public information of the Association, the Dean, as the highest representative. The data were collected during November 2017 and January 2018, through a database on which the interpretation of results was carried out. It is important to note that not all C.O.M. have a communication department, and some hire outsourcing service companies, so it can be stated that the number of respondents, 38, (73'07%) maintains the level of statistical reliability and the recommended margin of error for this study.

More specifically, the respondents answered questions related to the use that they make of social networks as part of their work (objectives they pursue when consulting them or their relevance in the construction of their informative agenda) and the consideration they deserve as an information source and in their work productivity. Furthermore, they were asked to suggest improvements that they considered relevant in communication via social networks in order to optimize their professional work.

With the answers obtained, an X-ray of the influence that health social networks exert on the exercise of communication professionals in content production or the anticipation of their agenda-setting has been drawn.

3. Results

The results analyzed in the study corroborate and complete the hypotheses raised at the beginning of the research. Regarding the first of the indicated hypotheses, the results provide a clear profile of the health specialist who works in communication of institutions or professional associations, which, both due to his years of experience in the health communication sector, as well as his activity in digital social networks, validate his extensive knowledge in the field. This person has more than 30 years and more than 5 years of professional experience; works mainly in professional associations in the health sector; and is indisputably active on social networks.

More than half of the sample, 57.1%, are between 30 and 39 years old, while the rest are over 40 (21.4% are between 40 and 49 years old, and the same percentage, between 50 and 65 years old). All of them were part of the working-age population when social networks appeared, according to the mapping of birth with their evolution that Boyd and Ellison did in 2008 (Boyd and Ellison, 2007; Colás-Bravo, González-Ramírez, and De-Pablos-Pons, 2013).

The number of years of professional experience also deserves attention. More than half of the professionals have worked for more than ten years (57.1%), and the rest have worked between five and nine years (42.9%). This is significant if we consider that specialization in the health sector, which since the 1990s has been affected by an "information glut" (Mercado, 2013), involves years of professional experience to provide quality information.

In terms of usability, the recurrent use of social networks as a working instrument exposed in the aforementioned scientific literature is ratified in the results obtained in the questionnaire. The fact that all respondents use social networks in their professional activity could affect how managers of health institutions perceive these corporate channels, since, at some point during the day, they could be exposed to the media (see graph 1).
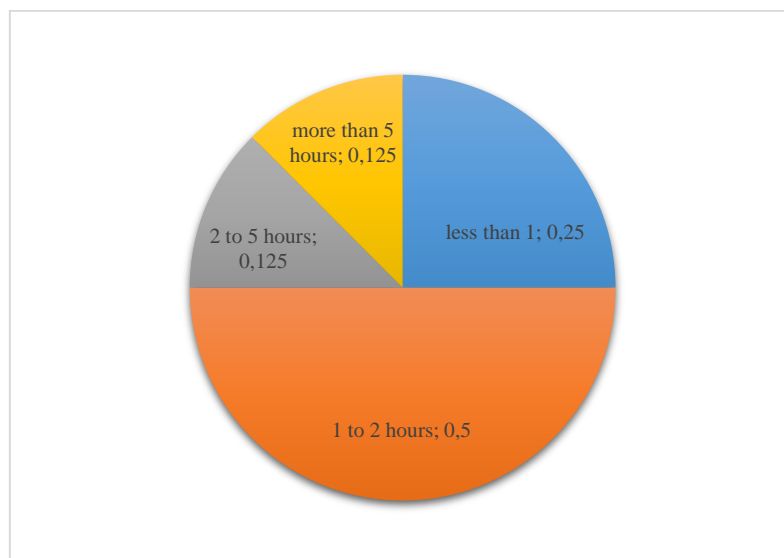
Graph 1. Use of social networks per day.
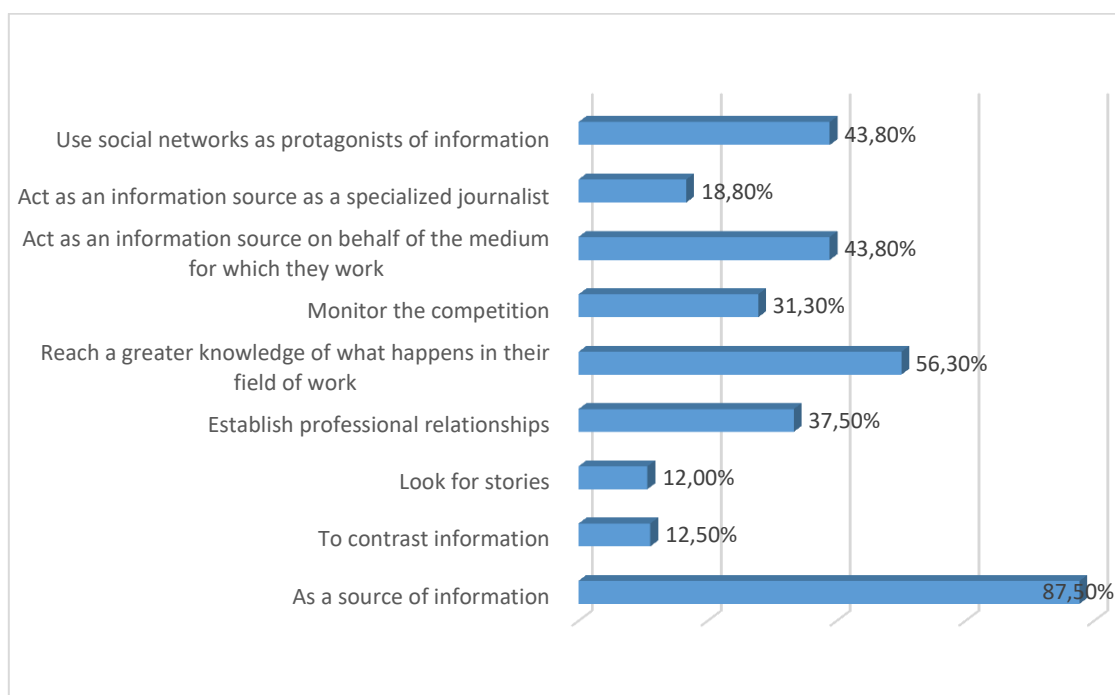Source: Self-made.

In particular, of the social networks used, professionals specialized in health at the national level go more frequently to Twitter (87.5%) and Facebook (81.3%).

Regarding the use of digital social networks by the surveyed professionals, the results show a greater casuistry than the possibilities raised in the second hypothesis of the study. To the reasons stated above, the use of social networks as a source of information and verification and as a way to establish relationships with other professionals to learn about the advances in their field, other factors are added. Thus, professionals also highlight the monitoring of competition and location of testimonials related to health.

In the case of social networks as a source of information, the difference between the percentage of Twitter and Facebook users increases, so that Twitter is positioned as the social network chosen in the first place by specialized professionals as an information source (with 81.3% of the responses obtained, compared to 50% granted to Facebook).

In any case, digital social networks have become a source of relevant information (25% of those surveyed consider it this way) or very important for the majority of professionals (62.5%).

In fact, 87.5% of those surveyed use social networks "as an information source", as one of the main objectives of their interaction with them. 56.3% highlight as a purpose of use that of "knowing what is happening in their work environment". In order of importance, it is followed by the interest in: "acting as an information source for the medium for which they work"; "Use social networks as protagonists of the informative content itself"; "Establish professional relationships"; "Monitor competition"; "Act as an information source as a specialized journalist"; "Contrast information"; and "look for stories" (see graph 2).

Graph 2. Main objectives in the use of Social Networks.
Source: Self-made

It is significant that, despite the importance that respondents give to health communication via digital social networks, they recognize that this content does not have enough value to be part of their agenda. As indicated in the third hypothesis, what is published through the aforementioned channels does not satisfy the demand for health information expressed by society.

Regarding the authorship of the social networks, all the consulted people who visit accounts related to the health sector access the corporate social networks of the hospitals, qualifying their content as "important" followed by "very important", "not very important", and "neutral" (See graph 3). None of the respondents described the content found on hospital social networks as "not important".
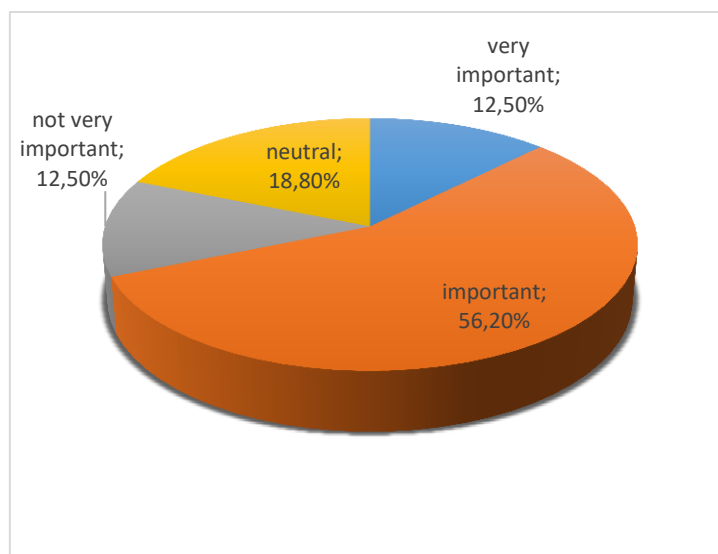
Graph 3. Importance of Social Networks related to the health sector.
Source: Self-made.

The monitoring of health social networks by specialized health professionals whose management is not the responsibility of an institution, but their managers are health professionals and researchers (56.3%) is notable. 31.3% of those surveyed mention groups of patients who also communicate through these channels.

However, network accounts from health corporations are the ones that deserve the greatest credibility with 87.5%. In terms of credibility, this percentage is followed by the accounts of health professionals and researchers in the health sector with 31.3%. If the public and private sectors are considered separately, the accounts of the public health sector enjoy greater credibility than those of the private sector: 18.8% versus 12.5%, respectively; This last percentage is the same as that granted to the accounts of patient groups (12.5%). The accounts of citizens who express themselves about health and who are not members of associations do not enjoy credibility in the study.

The argument that the people consulted give for their answers revolves around scientific rigor (18.75%), which they consider higher in the case of health institutions. The reliability of the information that is poured into this type of social network would be supported by the institution it represents and the professionalism of its specialists.

On the relationship between the information offered by hospitals and how it is perceived by the professionals of the Spanish C.O.M., analyzed to support the third hypothesis, different results are obtained. One of the comments refers to the partiality of the content of the information offered by the public sector. Thus, public hospitals would be publishing biased content in their accounts by "not openly exposing controversial issues" and referring only to "data of political relevance" or presenting topics "that may have a political payoff".

However, when assessing the credibility of hospital center accounts from 1 to 10, with 10 being the highest rating, more than half of the professionals, 68.75%, approve of hospital social networks in terms of reliability, although the rest grant them a failure or do not follow them. According to the presented results, comments that allude to the lack of this credibility refer to the bias that the contents that reflect a partial vision of reality may have.

It should be noted how, even though 18.8% of those surveyed consider that digital social networks hinder their work because too much information is poured into them and, on occasions, this produces intoxication in the content, 75% of those surveyed think they facilitate their work and lead them to other sources of information.

Despite this data, concerning the construction of the agenda-setting, a large majority (93.3%) state that the content of hospital social networks makes up less than half of the information they produce daily. This percentage is very revealing when it comes to describing how the media use the content that is published in them (see graph 4).
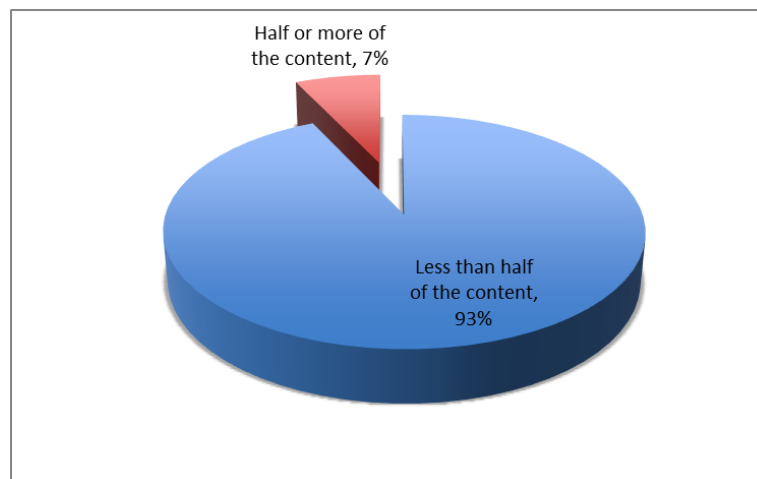

Graph 4. Contribution of hospital Social Networks to the agenda-setting.
Source: Self-made.

In their responses, professionals suggest general changes in the content of social networks, which is linked to the argument presented in the third hypothesis.

66.7% of the participants in the survey consider that they would modify hospital social networks as they are today and, of this percentage, 88.9% would make changes regarding the information disseminated on them. In most cases, the content published by the hospital's social networks does not meet the professional goals of those responsible for the communication departments.

Less than half see fulfilled the goals they pursue when they consult a hospital social network (46.7%). The contents that most interest them are those related to health in general, followed by those about health promotion, research, service information, and, finally, information about the hospital's activity (see graph 5).
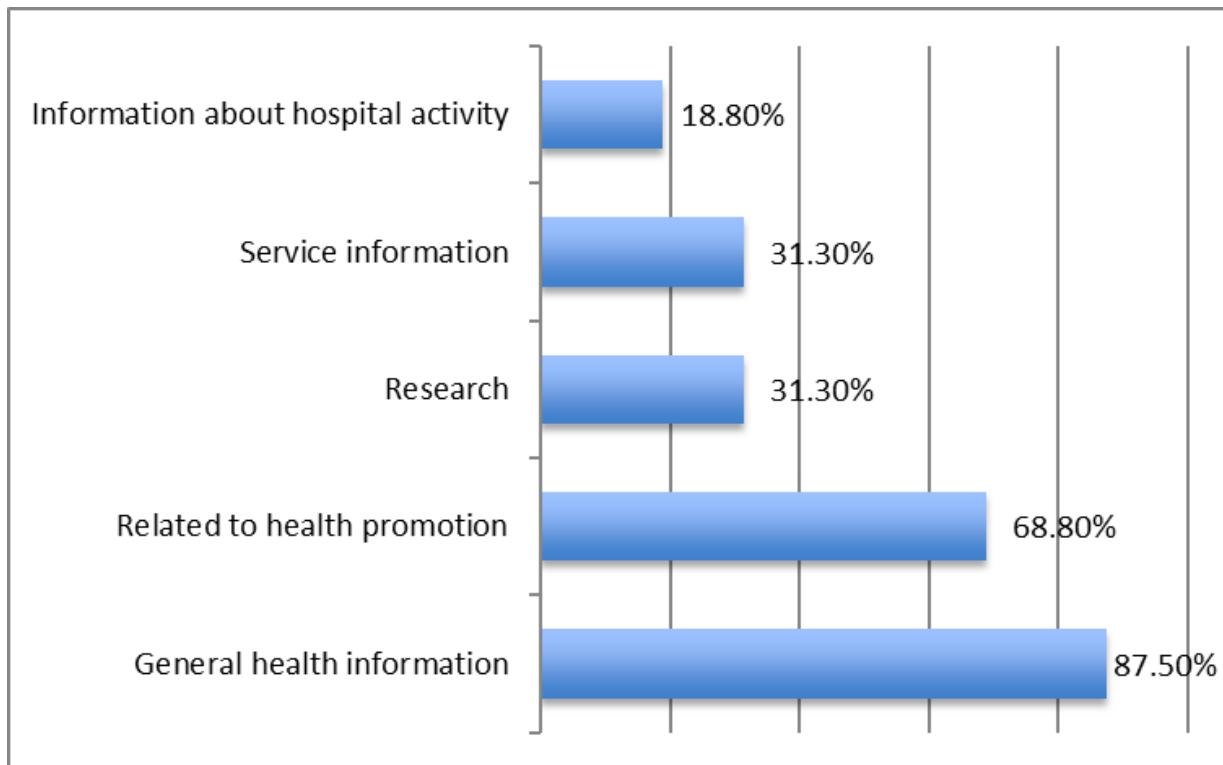
Graph 5. Goal fulfillment after consultation in Social Networks.
Source: Self-made.

In turn, the actors that arouse the most interest in communication professionals, in order of importance, are the hospital workers themselves, followed by the hospital itself as an institution, patients and family members, citizens in general, and, finally, the health network or hospital group (see graph 6).
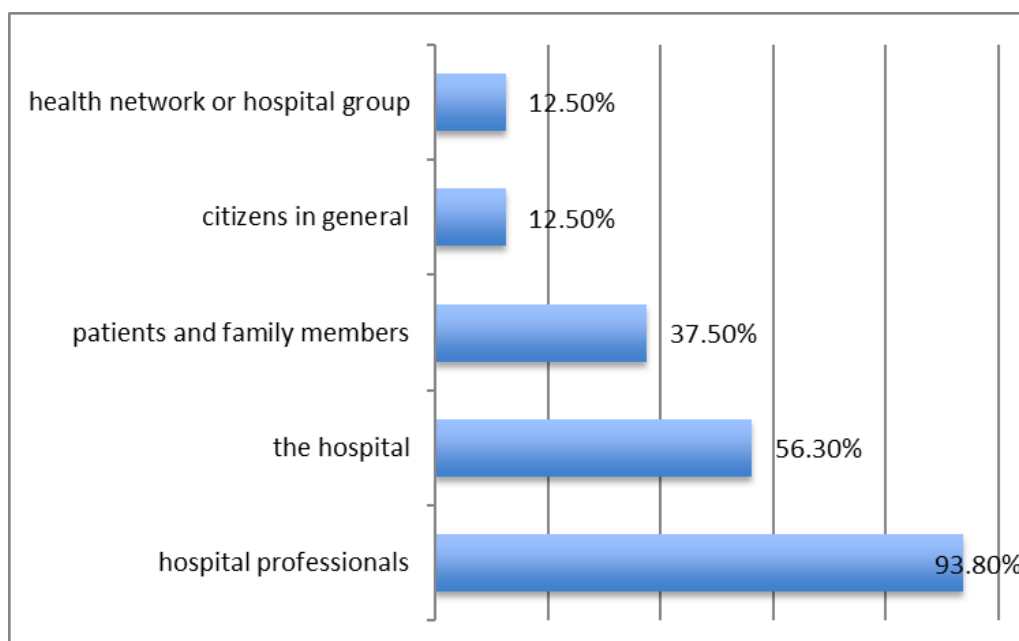
Graph 6. Importance of primary audiences.
Source: Self-made.

Other aspects that communication professionals would modify are those related to the aspect of the communicative capacity between the parties involved in it. However, none of the responses obtained have reflected concrete improvement considerations.

In their responses, professionals from the specialized health media mention how institutions avoid managing communication through social networks in the event of a health crisis. It is widely recognized that social networks offer an immediate circulation of messages, which validates them for such professional communication.

The speed with which information can be disseminated through social networks in emergencies, catastrophes, and socially critical events or socially important events that cause a public health alarm, makes these channels essential for professionals. This group has the capacity and the power to become speakers of the hospital centers in their role as official sources on health matters, using corporate social networks at times when citizens demand a continuous supply of news.

4. Conclusions

It can be concluded that communication is essential for the Official Medical Associations (C.O.M.). As we have seen, the C.O.M. have communication specialists with extensive knowledge in the work that they develop as part of their staff. This is how the study participants have expressed themselves, representing 69.2% of these entities in the Spanish environment. This confirms the first indicated hypothesis.

The second hypothesis is also confirmed because all the communication professionals who have answered use social networks as a work tool. Twitter and Facebook are the most used, although it is true that, as a source of information, the former is more popular (81.3%) than the latter (50%).
Regarding the third hypothesis, when evaluating the communication that other health entities, such as hospitals, develop through their corporate social networks, it has been productive to analyze how the content disseminated through them influences the daily practice of health specialized professionals who work in the communication departments of the C.O.M. The contribution of these as interest groups of specialized health care centers, intermediaries between the institution and society, and in turn, a part involved in the construction of reality, has served to glimpse strengths and weaknesses of the official accounts of hospital centers in digital social networks.

Active listening by health institutions, specifically hospital communication managers, about the needs encountered by professionals in professional associations of the health sector at the national level, is posed as a challenge to bring closer and get more out of professional relationships between both parties.

Respondents demand changes in the social networks of hospitals, among which the following stand out: the offer of non-biased content according to corporate interests; more health information, in general, and about its promotion that can be transmitted to the public; as well as a greater role of the professionals who work in the hospital, instead of the entity addressing society as an institution.

The participants in the study consider that social networks are relevant, that is, they know their potential and value the volume of information they find in them, although their content shape a minimal part of the agenda-setting that they manage. In this sense, a majority consider social networks as facilitators of their task, as another tool to use in their professional practice, but few openly include them as a source in their informative content.

The necessary adaptation of institutional social networks to the objectives of specialized health professionals would reverse the percentages indicated in this regard.

The credibility of corporate social networks, based on the veracity of the information they publish, is highly valued by the professionals of the C.O.M. However, it is significant that a percentage of the respondents, even though less than half, find that the content referred to is not satisfactory, because it is not complete and offers information following the interests of the hospital entity.

For the professionals participating in the survey to change their view of the aforementioned information sources, the communication established in the accounts of health centers, such as hospitals, in digital social networks must be based on truthful content, without bias, and be transmitted by agents who perform a central role in informational content. The main axis cannot always be to publicize the activity of the hospital center or the sale of a product or service, but the common thread of the information must be focused on promoting health and citizen well-being.

Those responsible for establishing the health agenda setting have expressed that in such circumstances they would be more permeable to information from hospital social networks, which would play a more prominent role as relevant information sources.

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