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Ebola on Instagram and Twitter: How health organizations address the health crisis in their social media engagement

Jeanine P.D. Guidry^{a,*}, Yan Jin^b, Caroline A. Orr^a, Marcus Messner^c, Shana Meganck^c^a Virginia Commonwealth University, Department of Social and Behavioral Sciences, P.O. Box 980149, Richmond, VA 23298, United States^b University of Georgia, Grady College of Mass Communication and Journalism, 120 Hooper St., Athens, GA 30602, United States^c Virginia Commonwealth University, Richard T. Robertson School of Media & Culture, P.O. Box 824034, Richmond, VA 23284, United States

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ABSTRACT

Although social media have been used by public relations practitioners as a key vehicle for crisis communication, little is known about how these platforms were utilized by public health organizations in infectious disease outbreak situations and how this may have shaped the publics' responses to the outbreak on and off social media. Taking the approach of strategic health risk communication, this study examined Ebola-related social media posts by three major health organizations, Centers for Disease Control and Prevention (CDC), World Health Organization (WHO), Médecins Sans Frontières (MSF, also known as Doctors without Borders), on Twitter and Instagram, focusing on the types of communication that were used during the outbreak, the content and context of these communications, and the responses they elicited from the publics. While both platforms were utilized by all three health organizations, the results suggest that Instagram may be a particularly useful platform for establishing meaningful, interactive communication with the publics in times of global health crises, as evidenced by significantly greater levels of engagement on the part of health organizations and the publics. Furthermore, our findings indicate that social media messaging may be most effective when it is used by health organizations that are familiar with and to the publics, and when it is based on the strategic use of risk communication principles such as solution-based messaging, incorporation of visual imagery, and acknowledgement of public fears and concerns. We discuss the results in the context of strategic health risk communication guidelines and implications for public relations practice.

1. Introduction

The world's worst known Ebola outbreak, which began in the West African nation of Guinea in December 2013 and infected at least 28,600 people before coming to an end in January 2016, offers many critical lessons for healthcare organizations and health public relations practitioners alike. Throughout the epidemic, public health and nonprofit health organizations struggled to address mounting public concerns as well as the need for accurate information about a disease that was often portrayed as an unavoidable killer. As demonstrated during the outbreak, social media and mobile technologies are playing an ever-increasing role in the dissemination of information to and from these organizations, leading many public relations practitioners to view these platforms as both an effective and essential avenue for strategic health communications. However, little is known about the content of the online social media discussions that took place throughout the recent Ebola outbreak.

* Corresponding author.

E-mail address: guidryjd@vcu.edu (J.P.D. Guidry).<http://dx.doi.org/10.1016/j.pubrev.2017.04.009>

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Over a decade ago, [Wise \(2001\)](#) advocated for opportunities for public relations research in public health. [Wise \(2001\)](#) noted that “While communication researchers have developed a solid body of knowledge in the health field, we know little about the activities of public relations practitioners in public health bodies” (p. 475). One of the key functions of public health is to prevent epidemics and the spread of disease, as well as, to respond to disasters and assists communities in recovery ([Wise, 2001](#)). Therefore, public relations play an essential role in informing, educating, and empowering publics about health issues ([Wise, 2001](#)). Crisis-related research, issues management, and technology were named by [Wise \(2001\)](#) among top areas for public relations research in the public health context. Thus far, only a few studies researched on public health threats or crises in the perspective of public relations. For example, [Tirkkonen and Luoma-aho \(2011\)](#) examined online authority communication in Finland during the 2009–2010 swine flu epidemic. [Liu and Kim \(2011\)](#) examined how organizations framed the 2019 H1N1 pandemic using social media and traditional media. They found that a general health organization relied more on traditional media than social media when framing a health crisis. [Freberg, Palenchar, and Veil \(2013\)](#) studied how public relations practitioners used social media bookmarking services to manage and share H1N1 crisis information, where CDC was found to be the most popular reference for health crisis information. [Woods \(2016\)](#) studied how two hospitals responded to Ebola from issue management standpoint.

Therefore, to further examine crisis communication in public health domain, using Ebola crisis as a focal case, the current study analyzed the ways in which the major health organization bodies, Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO) and Médecins Sans Frontières (MSF, also known as Doctors without Borders) addressed the Ebola crisis on Twitter and Instagram, contributing to a scarcely studied field in public relations research on how health organizations exert vision and communication leadership ([Wise, 2012](#)) in times of global health crises. Key variables from risk communication theories, in particular the risk perception model, were identified and introduced to strategic health risk communication framework, in order to assess how Ebola risk content had been communicated or not to these health organizations’ external publics via their official social media channels.

2. Literature review

2.1. History and description of Ebola

Ebola, named after the Ebola River in the Democratic Republic of Congo, is a rare and deadly virus transmitted via blood and other bodily fluids. Symptoms of the disease, which include fever, headache, vomiting, diarrhea, stomach pain, and unexplained bleeding, can appear anywhere from 2 to 21 days after exposure to the pathogen. On average, about 50% of infected patients will die from the disease, but some outbreaks have reported case fatality rates as high as 90%. There is no known cure, and during the most recent outbreak a vaccine was not available although one has recently been approved.

The most recent Ebola outbreak began in December 2013, though it was not officially declared an outbreak until March 2014, when the WHO confirmed the first cases in Guinea, West Africa. By the time the epidemic finally came to an end in January 2016, the virus had resulted in more than 28,600 infections and 11,300 deaths in the three hardest-hit nations, making this by far the largest and deadliest Ebola outbreak since the virus’ discovery in 1976 ([CDC, 2015](#)).

2.2. Strategic health risk communication theory

[Palenchar and Heath \(2007\)](#) posited that strategic risk communication adds value to society via transparency, trust building, acknowledging uncertainty and narrative enactment. [McKie and Heath \(2016\)](#) articulated the important role of public relations in approaching uncertainty. [Tirkkonen and Luoma-aho \(2011\)](#) argued that in risk and crisis communication surrounding a health threat, public relations plays a critical role in managing risks and crises and social media could contribute to real-time dialogue, building trust, and motivating publics to take actions.

The successful control and containment of any type of health crisis depends at least in part on effective communication with the public about associated risk- and protective factors. At the same time, these types of situations are often characterized by high levels of uncertainty and strong negative emotions such as fear, distrust and anger, which in turn form considerable barriers to effective communication ([Covello, Peters, Wojtecki, & Hyde, 2001](#)). During such situations, the field of risk communication can greatly assist public relations practitioners as they work to develop messages that address these emotions while also delivering critical information to the public. The field of risk communication is based on several different models, including the Risk Perception Model, the Mental Noise Model ([Baron, Hershey, & Kunreuther, 2000](#); [Fischhoff, 1989](#)), the Negative Dominance Model ([Covello, 1998](#); [Maslow, 1987](#)) and the Trust Determination Model ([Chess, Salomone, Hance, & Saville, 1995](#); [National Research Council, 1989](#)). These models together explain how risk information is processed, how risk perceptions are formed and how risk decisions are made; in turn, these insights can be used to inform the development of more effective risk-based communication strategies.

According to the Risk Perception Model, risks that evoke fear, terror or anxiety will be perceived as greater than risks that do not; risks associated with institutions or organizations that are lacking in credibility and trust are perceived as greater than risks associated with trustworthy entities; and risks that produce fatalities or have irreversible, catastrophic consequences are perceived as greater than risks that have less catastrophic effect potential ([Covello et al., 2001](#)). These subjective evaluations of risk, in turn, influence individuals’ attitudes and subsequent behavioral responses to the threat. Importantly, these types of risks are often accompanied by so-called mental noise, a phenomenon that occurs when people feel threatened and are in a state of high concern ([Glik, 2007](#); [Baron et al., 2000](#)). This mental agitation can significantly impair information-processing, decision-making, memory, and other key mental processes involved in communication ([Cairns, de Andrade, & MacDonald, 2013](#); [Covello et al., 2001](#); [Glik,](#)

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