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Book of Abstracts

INTERNATIONAL HELLENIC
UNIVERSITY, DEPARTMENT OF
FINANCE AND ACCOUNTING,
KAVALA, GREECE



UNIVERSITY OF FLORENCE,
DEPARTMENT OF EXPERIMENTAL
AND CLINICAL MEDICINE,
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ΤΟ ΒΟΟΚ ΟΦ ΑΒΣΤΡΑΚΤΣ ΕΙΝΑΙ ΧΟΡΗΓΙΑ ΤΩΝ ΕΚΔΟΣΕΩΝ ΠΡΟΠΟΜΠΟΣ, ΣΤΙΣ ΟΠΟΙΕΣ ΠΑΡΑΧΩΡΟΥΝΤΑΙ ΤΑ ΔΙΚΑΙΩΜΑΤΑ ΓΙΑ ΤΗΝ ΕΚΔΟΣΗ ΤΟΥ. ΚΑΜΙΑ ΠΛΕΥΡΑ ΔΕΝ ΒΑΡΥΝΕΤΑΙ ΜΕ ΟΙΚΟΝΟΜΙΚΕΣ ΑΠΑΙΤΗΣΕΙΣ.

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COMMUNICATION'S STRATEGY IN THE HEALTHCARE ORGANIZATIONS DURING COVID19 CRISIS: INSIGHT FROM THE ITALIAN CONTEXT

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ABSTRACT

Crisis communication seeks to find solutions to practice issues, and rigorous systematic research is needed to develop a more in depth understanding of the communication strategies adopted during crisis, such as the COVID19 pandemic, especially by healthcare organizations (HCOs). Given the pandemic, HCOs are under pressure to provide an effective response to the health needs from the community's perspective as well as from the employees' one. In turns, internal and external stakeholders are key actors to contribute to an effective crisis management. Based on the above premise, this paper aims at analyzing how COVID19 crisis affected the communication strategy toward internal and external stakeholders in the HCOs. To fulfill the aim of the study, qualitative research has been designed. The Italian context has been chosen as the study setting considering the accessibility criterion to the field from the researchers' perspective, and being Italy the first European country to be deeply affected by the pandemic in 2020. Considering the key role of the HCOs' General Directors (GDs) to define the strategies to react to the challenges posed by the pandemic, data have been gathered through semi-structured interviews from a sample of 49 GDs of HCOs related to different Italian regions. The data saturation principle has been adopted while collecting data (Saunders et al., 2018). Data have been analyzed through a content analysis using NVivo software. Focusing on internal stakeholders, two main communication strategies were detected: those GDs that preferred collective communication channels and those GDs who preferred to establish a personal contact with healthcare professionals. In the first typology we include those GDs who used the intermediation of trade unions to approach salient topics such as the reorganization of tasks for the personnel or safety issues, and those GDs who used collective chats and emails, newsletter, and social media to favor the emergence of a collective sense-making about the crisis and to enforce the organizational culture and alignment to organizational goals. In the second typology we comprehend those GDs that used a communication approach mainly based on emotional levers; in this group, the sharing of feelings, as well as acting as role-models going directly on field, were shown to be emotional levers to support healthcare professionals in the management of Covid19-related emergency. Focusing on the external stakeholders two main strategies were detected: those GDs that adopted a centralized approach to control the flow of information to the stakeholders and establish a direct contact with local actors to manage the healthcare assistance on the local territory, and those GDs who preferred coordinated communication strategies in which professionalism and transparency were valorized, so that the managerial expertise of the GD was flanked by those of healthcare professionals to provide a "technical" response to stakeholders' information needs. In this regard, empowering traditional channels and establishing new communication channels were the main approaches to manage the information requirements from stakeholders.

KEYWORDS

Crisis communication, Healthcare organizations, COVID19, General directors, Strategies.

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