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Yeşil Hastanelerin Covid-19 Pandemisi Sürecinde Sosyal Medya Kullanımı: Türkiye'deki Altı Yeşil Hastanenin Sosyal Medya Hesaplarına Yönelik Nitel Bir Araştırma

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Öz

Amaç: Bu araştırma, Türkiye'deki 6 yeşil hastanenin 1 Mart ve 15 Mayıs tarihleri arasındaki sosyal medya araçları aracılığıyla yaptıkları koronavirüs içerikli paylaşımların incelenmesi amacıyla gerçekleştirildi. Gereç ve Yöntem: Araştırma kapsamındaki paylaşımların incelenmesinde nitel araştırmanın bir yöntemi olan içerik analizi kullanılmıştır. Belirtilen tarih aralığında hastanelerin 587 sosyal medya paylaşımı içerik analizi ile

incelenmiştir. Bulgular: Hastanelerin sosyal medya paylaşımlarını %71,89 oranında Facebook/ İnstagram/ Twitter hesapları aracılığıyla gerçekleştirmeyi tercih ettikleri görülmüştür. Paylaşım içeriği olarak %62,18 oranında bilgilendirme içerikli paylaşımların, paylaşım şekli olarak %42,24 görsel paylaşım şeklinin tercih edildiği belirlenmiştir. Sonuç: Araştırma kapsamında incelenen yeşil hastanelerin koronavirüs sürecinde doğru ve güvenilir iletişimi

sağlamak amacıyla sosyal medya araçlarını amacına uygun, düzenli ve verimli kullandıkları sonucuna ulaşılmıştır.

Anahtar Kelimeler

COVID-19, Koronavirüs, Pandemi, Sosyal medya, Yeşil hastane

<u>Makale Hakkında</u>

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Social Media Use of Green Hospitals During COVID-19 Pandemic: A Qualitative Research Related to Social Media Account of Six Green Hospitals in Turkey

Abstract

Objective: This research aimed to examine in social media account of 6 green hospital shared contents about coronavirus sharings between March 1st and May 15th in Turkey.

Materials and Methods: Content analysis which is a method of qualitative research, was used to examine the shares within the scope of the research. 587 social media sharings of hospitals were analyzed with content analysis within the specified date range.

Results: It was observed that 71.89% of hospitals preferred to share their social media via Facebook / Instagram / Twitter accounts. It was found that 62.18% preferred informational content as the sharing content and 42.24% visual sharing method was preferred as the way of sharing.

Conclusion: It was concluded that the green hospitals examined within the scope of the research were using social media tools appropriately, regularly and efficiently in order to ensure correct and reliable communication during the coronavirus process.

Keywords

COVID-19, Coronavirus, Pandemic, Social media, Green hospital

About Article

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INTRODUCTION

Green Hospitals' Use of Social Media Green Hospitals

Hospitals are today's most complex organizations that produce treatment services within the scope of health services. They are organizations that require the highest specialization due to their structural, technological and environmental features, operate in a dynamic and matrix structure, and are active every day and hour of the year (Gemlik, 2018). Green hospitals are examples of green buildings. Green Building Council of India - IGBC defines green buildings as "a building that uses less water than a traditional building, optimizes energy efficiency, conserves natural resources, produces less waste and provides healthier spaces for users" (IGBC, 2015). In order for buildings to have a green definition, they must have certain standards in areas such as sustainable land planning, natural and recyclable water and energy resources, use of environmentally friendly materials, indoor air quality, human health and comfort, transportation facilities and waste control, acoustics and pollution (Arslan, 2014).

In the light of all these explanations, the concept of green hospital is defined as a hospital that takes initiative to do one or more of the features such as choosing an environmentally friendly place, using sustainable and efficient designs, using green building materials and products, thinking about green during construction, and keeping green. Green Hospitals are built around a facility that recycles, reuses materials, reduces waste and produces cleaner air (Hospital 2020, 2015).

Green hospitals, which strive to protect public health with positive, protective and constructive approaches to people, the environment and natural life, are structures that respect the environment, care about patient safety, and protect public health and global health (Özyaral, 2013). In other words, green hospitals combine environmentally friendly practices with health services (Terekli, Özkan ve Bayın, 2013). Green hospitals, which are an example of green buildings in order to achieve the goals such as providing cost savings, increasing quality, using resources efficiently, meeting people's expectations, and minimizing the negative impact on the environment, are among the innovative applications that have attracted attention in recent years (Özdemir Karaca, Atılgan ve Zekioğlu, 2018).

In short, green hospitals are environmentally friendly structures. Unlike other hospitals, green hospitals, which regulate the areas where they operate within the scope of the concept of green, are structures that aim to organize and maintain the services they provide with the most accurate methods for human, social and environmental health.

Social Media Use in Hospitals

Health communication is an important concept in the protection, improvement and promotion of health, in assessing the quality of health care services and increasing access to health. Health communication includes preventing diseases, responding to emergency health needs quickly, reducing violence in health, protecting public and environmental health, ensuring occupational health and safety, etc. has a wide range of topics (Ilgün ve Uğurluoğlu, 2016). With the development of technology, social media comes to the fore in providing health communication. Social media, which is essentially sharing and communication, are internet platforms through which individuals or institutions can communicate through videos, words, articles, sounds or pictures (Tengilimoğlu, Parıltı ve Yar, 2015).

Today, hospitals are among the institutions that actively use social media. Almost every hospital has official social media accounts, and by sharing these accounts, it has the purpose of informing individuals, receiving feedback from individuals, being preferred by patients, promoting the institution and its service quality, and engaging in promotional activities (Gönüllü, 2019). In terms of public health practices, strong relationships established with the public through social media produce fast and positive results. Social media is used to direct and change the behaviors and habits of individuals on issues such as vaccination, clean water, family planning, control of communicable diseases within the scope of public health practices (Erbay, 2018).

Today, the use of social media in hospitals continues to increase. Hospitals also use social media platforms such as Web Page, Facebook, Twitter, Instagram, YouTube, which are popular all over the world and are widely used (İlgün ve Uğurluoğlu, 2016). The purposes of hospitals to use the mentioned and similar social media platforms can be listed as follows (Tek Doz Dijital, 2013):

- Improving patient and hospital relations
- To announce new developments and news about the hospital
- Increasing the hospital's reputation and popularity
- To establish a communication channel with patients and their relatives
- To create general health information
- To answer the questions asked
- Being able to communicate with other health institutions
- · Raising funds
- To be able to defend the institution in any crisis or problem
- To increase reputation across the country

Hospitals' use of social media provides an advantage for the institution, individuals, patients and patient relatives. While providing marketing and the opportunity to reach large masses for institutions; illness, public health, quality of the institution and service, etc. Provides quick and interactive information about. However, the use of social media by hospitals and healthcare institutions has advantages as well as disadvantages. The information obtained is uncertain, confidentiality and confidentiality is open to tender, wrong health behaviors, sharing wrong information about the hospital, etc. Social media use creates negative results in terms of it. *Use of Social Media in Covid-19 Pandemic and Crisis Communication During the Pandemic Period*

What is a Pandemic?

Epidemic; It refers to the occurrence of more cases than expected in a given area in a certain period of time among a certain group of people, or the occurrence of two or more epidemiologically linked cases or a single case of newly seen / eliminated or eradicated disease with epidemic potential (T.C. Resmi Gazete, 30 Mayıs 2007, Sayı:26537). In other words, an epidemic is defined as the clear higher incidence of an infectious disease than the expected normal frequency in a particular community, region or season. The number of cases in an outbreak may vary depending on factors such as the type of infectious agent, its contagiousness, the characteristics of the exposed population (vaccination status, previous illness status) (Hacımustafaoğlu, 2020). Infectious epidemics are known as epidemics. Pandemics, on the other hand, are contagious, epidemic diseases that spread to a wide geography, sometimes to a continent, even to the whole globe, causing diseases and deaths in humans or animals (Aslan, 2020). The pandemic is announced by the World Health

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Organization (WHO). The fact that the newly emerging virus can spread quickly from person to person is an important criterion in declaring the contagious, epidemic disease as a pandemic. The impact of the pandemic at the community level varies depending on the contagiousness of the virus, the virulence of the virus, the immunity of the individuals in the community, the contact and transportation characteristics between individuals, the presence of risk factors, the health services provided and the climate (Medipol Sağlık Grubu, 2020).

Covid-19 Pandemic

Coronaviruses are a large family of viruses that can cause disease in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe illnesses such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). New Coronavirus Disease is caused by SAR-CoV-2 virus (T.C. Sağlık Bakanlığı, 2020a). The COVID-19 outbreak caused by the SARS-CoV-2 virus, which emerged in Wuhan, China's Hubei province on December 31, 2019, quickly spread to 6 continents and hundreds of countries and went down in history as the first pandemic caused by coronaviruses. The first positive case in our country was identified on March 11, 2020 and the epidemic process started (Uğraş Dikmen, Kına, Özkan ve ark., 2020). The origin of SARS-CoV-2 is still unclear and under investigation. Available data point to wild animals sold illegally in the Huanan Seafood Wholesale Market (T.C. Sağlık Bakanlığı, 2020b).

The disease is mainly transmitted by droplets. In addition, the droplets emitted by sick individuals through coughing and sneezing are transmitted by touching and touching the mouth, nose or eye mucosa after contact with other people's hands (T.C. Sağlık Bakanlığı, 2020b). Although the incubation period of COVID-19 infection is thought to be the first 2-14 days after contact, clinical findings are seen 4-5 days after exposure in most cases (Orhan Kubat ve Şahin, 2020).

Common symptoms of COVID-19 are fever, dry cough, and tiredness. Less common symptoms include general pain, nasal congestion, headache, conjunctivitis, sore throat, diarrhea, loss of taste or smell, redness of the skin, discoloration of the fingers or toes. These symptoms are usually mild and begin gradually. Some people become infected but have only mild symptoms. Most people (about 80%) recover from the disease without needing hospital treatment (WHO, 2020). The people most affected by the disease are those over the age of 60, those with severe chronic diseases (such as heart disease, hypertension, diabetes, chronic respiratory disease, cancer) and healthcare workers (T.C. Sağlık Bakanlığı, 2020a).

Use of Social Media in Crisis Communication During Pandemic Period

Crisis communication is a type of strategic communication developed by organizations for special situations they live or do not experience (Yıldırım, 2019). The main purpose in crisis communication is to minimize the damage the crisis will cause to the institution (Boyacı Özyurt, 2019). Crisis communication includes issues such as taking measures beforehand in order to avoid crises, eliminating the causes that may cause crises, finding solutions for crisis situations and sharing these solutions with the sector and the public. Crisis communication includes studies such as determining the areas and issues that can create a crisis before the crisis, as well as creating and planning crisis scenarios (Öztamur, 2019).

In the public health crises caused by the epidemic, that is, in the period when studies are required to protect the health of the people, the state and relevant institutions should apply to communication to give information, advice and directives if necessary. In such crises, crisis communication is important for raising public awareness, developing behavioral change and sharing the information and data obtained with the public (Gülgün, 2011). The role of social media in crisis communication is increasing due to the increasing number of users and the level of awareness (Bayraktar, 2013). Especially in situations such as public health crises that concern the whole society, social media ensures the implementation of a highly interactive and effective crisis communication in a short time. Social media is of great importance for organizations in crisis communication, creates mutual interaction, and provides unlimited sharing of information at global and local level, supports low-cost communication, creates mutual interaction, and provides unlimited sharing of information (Kalayci, 2017).

In this period of COVID-19 pandemic, states, institutions, etc. In terms of crisis communication, it is of great importance. As the pandemic affects many countries, social media platforms can be used as communication tools that will ensure rapid, effective and highly interactive crisis communication.

MATERIALS AND METHODS

Objective and Type of the Research

Content analysis, a method of qualitative research, was used to examine the coronavirus shares of 6 green hospitals within the scope of the study between March 1, 2020 and May 15, 2020. Content analysis is a qualitative data analysis technique that aims to reach concepts and relationships that can explain the data collected (Siğri, 2018).

The Population and Sample of the Research

Research universe consists of 6 green hospital operating in Turkey. 6 green hospital in Turkey in 2020, they share through social media tools, from March 1 to May 15 at 587 and the coronavirus is the sharing of research sample.

Measures

The observation method, one of the qualitative data analysis techniques, was used to obtain the data within the scope of the research. *Data Analysis*

The data obtained in the study were analyzed by using qualitative content analysis. The coding phase was applied in order to reveal the relationships between the data obtained with the content analysis technique. By determining the common points between the codes; Eleven categories were created: web page, facebook / instagram / twitter, youtube, information, suggestion, warning, other, visual, video, written and sharing date. By combining the categories, themes were created as a social media tool, the content of the sharing, the way it was shared and the week it was shared. Sharing in line with the purpose of the research; The social media tool (web page, facebook / instagram / twitter, youtube) shared, the content of the post (information, suggestion, warning, other), the way of sharing (visual, video, written) and the week it was shared were analyzed.

Due to the fact that hospitals mostly synchronize their social media tools facebook, instagram and twitter accounts, they are considered as a single category. According to the content of the sharing; In the information category, the shares of the hospital about the coronavirus and the information about the service provided by the hospital in this period were examined. In the warning category, the posts stating what should be done during the coronavirus period were examined, and the statements containing definite judgment were taken into consideration in the evaluation of these posts. In the recommendation category, the posts in which recommendations were given to stay healthy during the coronavirus period were examined, and attention was paid to the use of expressions that do not contain a judgment of

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certainty to be applied and followed in the evaluation of these posts. In the Other category, motivational posts, messages of condolence and thanks for the public and healthcare professionals during the coronavirus period were examined. In the form of sharing, the posts are categorized as visual, video and written. However, if more than one type of sharing is used in a share (such as visual and written sharing), attention has been paid to the method of sharing the sharing message.

RESULTS

All shares in the coronavirus 6 green hospital between the dates specified scope of social media tools mentioned were analyzed. In this context, 587 shares were examined and the data obtained as a result of the examinations; Hospital A 120 (20.44%), Hospital B 74 (12.60%), Hospital C 27 (4.59%), Hospital D 152 (25.89%), Hospital E 79 (13.45%) and F Hospital was distributed as 135 (22.99%) (Table 1).

Green hospitals examined within the scope of the research are: Medistate Hospital, Florence Nightingale Hospital, American Hospital, Acıbadem Hospital, Yozgat City Hospital and Memorial Hospital. However, coding was not performed in this order (Çedbik, 2020; Hoşgör, 2014).

Table 1. Distribution of Shares by Hospitals

Hospital Name	Number of Shares	Percent (%)
A Hospital	120	20,44
B Hospital	74	12,60
C Hospital	27	4,59
D Hospital	152	25,89
E Hospital	79	13,45
F Hospital	135	22.99

Within the scope of the research, 587 shares of 6 green hospitals through social media tools were examined. Social media tools are categorized as web page, facebook / instagram / twitter and youtube. Hospitals shared a total of 39 (6.64%) via web pages, 422 (71.89%) via facebook / instagram / twitter accounts, and 126 (21.46%) via youtube accounts (Figure 1).



Figure 1. Analysis of the Coronavirus Shares of Green Hospitals According to Social Media Tools

The coronavirus posts shared by green hospitals on social media tools are categorized as information, suggestion, warning and other according to their content. It shows distribution as 365 (62.18%) shares with informative content, 76 (12.94%) posts with suggestion content, 90 (15.33%) with warning content and 56 (9.54%) with other content (Figure 2). Some examples of sharing contents are as follows:

- What is coronavirus, how is it transmitted, what are the symptoms? (Information)
- Stay Home / Wear a Mask / Pay Attention to Social Distance. (Warning)
- Exercises and activities that can be done at home. (Proposal)
- Condolence, thanks, motivation posts. (Other)



Figure 2. Analysis of the Coronavirus Shares of Green Hospitals According to Sharing Content

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587 sharing examined within the scope of the research was examined as visual, video and written sharing according to the sharing types. Shares; 248 (42.24%) are visual, 236 (40.20%) are video and 103 (17.54%) are written shares (Figure 3).



Figure 3. Analysis of the Coronavirus Shares of Green Hospitals According to Sharing Type

The distribution of coronavirus shares of green hospitals by sharing weeks was examined. When the distribution is examined, the 4th week is the week with the most shares with 84 (14.31%) shares; The 1st week is the week in which the least sharing is made with 1 (0.17%) share. However, since the first case in our country was announced on March 11, after the first case was announced, 38 (6.47%) were shared at least in the second week (Table 2).

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Week	Number of Shares	Percentage of Sharing
1-7 March	1	%0,17
8-14 March	38	%6,47
15-21 March	64	%10,90
22-28 March	84	%14,31
29 March -4 April	65	%11,07
5-11 April	73	%12,43
12-18 April	70	%11,92
19-25 April	61	%10,39
26 April -2 May	46	%7,83
3-9 May	42	%7,15
10-15 May	43	%7,32

DISCUSSION

6 green Research Hospital in Turkey's 2020 determination of coronavirus content sharing in social media from March 1 to May 15th, and was carried out to investigate. Only the coronavirus shares of the hospitals were included in the study, and the posts were determined by examining the concept of coronavirus and the concepts that were on the agenda during the coronavirus pandemic period. For the purpose of research 6 green hospital in Turkey were examined with content analysis and hospital coronavirus shares of shares of social media, content sharing, sharing and sharing time are evaluated according to their shape.

With the content analysis, the coronavirus sharing of hospitals is divided into three categories according to internet sharing platforms. It is seen that hospitals mostly share their shares through facebook / instagram / twitter accounts and then youtube accounts and web pages are preferred as sharing tools, respectively. The main reasons for sharing mostly with facebook / instagram / twitter accounts are that these social media accounts are preferred and used by the masses, thus it is easier and more economical to reach individuals and social media accounts with high interaction.

The coronavirus shares of the hospitals are categorized with information, suggestion, warning and other headings according to their content. During the coronavirus pandemic, hospitals shared most of the posts with informational content. In the information category, hospitals 'posts about the coronavirus pandemic and hospitals' services or service changes in this period were examined. With the announcement of the first case as of March 11 in our country, the first posts of hospitals have generally been informative posts about coronavirus. These shares were generally carried out in the direction of providing information with titles such as what is coronavirus, how it is transmitted, what are its symptoms, how to protect it. As of March 22, informative exchanges have increased depending on the process and the adaptation of the hospitals to the process, and it has started to take place towards the e-health services of the hospitals and the service change in the institutions. Following the informative posts, warning content was shared. It can be said that the reasons such as the coronavirus pandemic being a serious public health problem and the rules to be followed are the main reasons for the warning messages. Hospitals share these messages with warning messages such as "wash your hands", "stay home", "keep your social distance", "wear a mask". The posts with suggestion content were aimed at protecting the physical and psychological health of individuals with the prolongation of the stay at home. The first recommendation message is a post on March 19 that includes advice to strengthen immunity against coronavirus. In the ongoing process, suggestions were made to manage the stress caused by the coronavirus, to stay

psychologically healthy (by separating adults and children) and to evaluate the time spent at home (physically and psychologically). In the other categories of hospitals, they aimed to reduce the psychological effects of the coronavirus pandemic, which is an international problem, and to create a sense of unity. For this reason, motivating posts to motivate the public and healthcare professionals, thank you messages for the help and devoted work made in this period, and condolence messages for those who lost their lives due to the coronavirus pandemic were shared.

The posts made by the hospitals on social media tools were mostly visual shared according to the type of sharing. It is thought that the advantages such as the more interest of the people in this form of sharing, the convenience of understanding the content and the saving of time are effective in the preference of visual sharing. Then, the preferred form of sharing is video and especially the youtube social media tool consisting of video sharing is effective in this case. In the coronavirus period, the videos shared by hospitals, especially through youtube accounts, include hospitals' infectious diseases doctors, clinical microbiologists, general surgeons, psychologists, nutrition and dietetic specialists and physiotherapists. The reasons why this situation is preferred can be said to ensure that the seriousness of the coronavirus pandemic is recognized, the effect on individuals and the interaction through sharing are more. Written sharing is the least preferred form of sharing by hospitals, but it is generally preferred for sharing on web pages.

Examining the weekly distribution of the shares, before and after the announcement of the case in our country, at least the first week and second week; the most sharing was made in the fourth week. While the shares increased from the first week to the fourth week, it decreased after the fourth week, with small increases and decreases in some weeks.

CONCLUSION

The shares of 6 green hospitals whose shares were examined within the scope of the research; He preferred 71.89% facebook / instagram / twitter accounts among the web page, youtube, facebook / instagram / twitter social media accounts, 62.18% of the information, warning, suggestion and other sharing contents were informative, visual, Among the video and written forms of sharing, 42.24% preferred the way of visual sharing and when the number of shares was analyzed by weeks, the results were obtained as a result of the content analysis conducted, with the highest share in the fourth week and the least in the first week.

Green hospitals operate with an understanding that focuses on human and environmental health and prioritizes this perspective in all areas of service delivery. The coronavirus pandemic is a serious public health problem. For this reason, it is thought that green hospitals should be effective and regular while communicating with social media tools in this pandemic process where human and environmental health is important. Many of the scope of the research examined green hospital since the beginning of the pandemic sharing process in Turkey has carried out every day. Hospitals diversified their sharing content in line with the conditions that emerged during the pandemic process; With the prolongation of the process and the increase in the duration of stay at home, exchanges including human psychology and physical health were made. A balance has been achieved in the form of visual and video sharing, which is considered to be the most interesting and preferred form of sharing in social media, and it is thought that the use of hospital doctors in video sharing content increases the effect of the posts. However, it was also observed that the examined green hospitals had deficiencies for the competent use of social media. Although hospitals have realized coronavirus in the world shares heavily after the announcement of the first case in Turkey. At this point the starting process in Turkey hospitals in the light of the information obtained about the process coronavirus and the world, could perform Shares to inform the community with this content. It is also seen that the time of sharing by hospitals is irregular, in order to be more successful in this respect, the posts can be made at certain times of the day. In terms of the content of the sharing, diversification was made, but there was no balance between the posts in the information, suggestion and warning categories. At this point, sharing with suggestion and warning content can be increased in order to create a more successful content; Sharing can be increased and diversified in terms of topics such as hygiene, immunity, evaluating the process of staying at home to stay healthy, protecting psychological and physical health. With the normalization process, while the sharing of promotional content for the hospital's services and practices increased; It is seen that posts containing information, suggestions and warnings about the coronavirus pandemic have decreased. While the pandemic process continues, hospitals can balance the sharing frequency between these sharing issues. In this way, it is thought that hospitals can maintain the balance between their responsibilities towards their institutions and society.

REFERENCES

Acıbadem. https://www.acibadem.com.tr/. Date Accessed: 2020

Amerikan Hastanesi. https://www.amerikanhastanesi.org/. Date Accessed: 2020

Arslan F. Türkiye'de sürdürülebilir doğal kaynak kullanımı arayışlarına bir örnek: Yeşil binalar. *Akademik Sosyal Araştırmalar Dergisi*. 2014;2(1):288-304. doi: 10.16992/ASOS.157

Aslan R. Tarihten günümüze epidemiler, pandemiler ve COVID-19. Ayrıntı Dergisi. 2020;8(85):35-41.

- Bayraktar C. Sosyal Medyanın Kriz İletişimi Aracı Olarak Kullanımı [Yüksek Lisans Tezi]. İstanbul, Türkiye: Marmara Üniversitesi;2013.
- Boyacı Özyurt M. N. Kriz İletişiminin Marka ve İtibar Yönetimi Açısından Değerlendirilmesi: Torku Süt Krizi [Yüksek Lisans Tezi]. İstanbul, Türkiye: Kadir Has Üniversitesi;2019.

Çedbik. Sertifikalı Projeler. https://cedbik.org/tr/sertifikali-projeler. 2020. Date Accessed: 10 July 2020

Erbay E. Hastanelerin Sosyal Medya Kullanımına Bakış Açıları ve Ankara'da Faaliyet Gösteren Özel Hastanelerin Web Sayfalarının İçerik Analizi ile İncelenmesi [Yüksek Lisans Tezi]. Ankara, Türkiye: Gazi Üniversitesi;2018.

Gemlik N. Hastane Yöneticiliği Temel Yaklaşımlar ve Öneriler. 1. Baskı. İstanbul: Nobel Tıp Kitabevleri Ltd. Şti.; 2018.

Gönüllü K. K. Sağlık İletişiminde Sosyal Medya Kullanımı ve Sağlık Kurumu Örneklerinin İncelenmesi [Yüksek Lisans Tezi]. İstanbul, Türkiye: Acıbadem Mehmet Ali Aydınlar Üniversitesi;2019.

Grup Florence Nightingale Hastaneleri. https://www.florence.com.tr/. Date Accessed: 2020

- Gülgün B. S. Halk Sağlığı Krizlerinde Kriz İletişimi ve Kriz Haberciliği: Örnek Olay A/H1N1 (Domuz Gribi) Pandemisi [Yüksek Lisans Tezi]. Ankara, Türkiye: Ankara Üniversitesi;2011.
- Hacımustafaoğlu M. Enfeksiyon hastalıkları pratiğinde salgın tanımlanması. *Journal of Pediatric Infection*. 2020;12(4):172-173. doi: 10.5578/ced.201852

Hospital 2020. Green Hospital. http://hospital2020.org/Agreenhospital.html . 2015. Date Accessed:23 May 2020

- Hoşgör H. Yeşil hastane konsepti ve Türkiye deneyimi. Sağlık Bilimleri ve Meslekleri Dergisi. 2014;1(2):75-84. doi: 10.17681/hsp.67427
- Indian Green Building Council. Green Building Movement in India. <u>https://igbc.in/igbc/getSearchPage.htm?pagePath=aboutus.jsp</u> . 2015. Date Accessed: 23 May 2020
- İlgün G, Uğurluoğlu Ö. Sağlık sektöründe sosyal medyanın kullanımı, yararları ve riskleri. *İş, Güç Endüstri İlişkileri ve İnsan Kaynakları* Dergisi. 2016;18(3):24-48. doi: 10.4026/2148-9874.2016.0322.X
- Kalaycı, B. N. Sosyal Medyada Kriz İletişimi: Turkcell Örneği. İçinde: Öztürk G, Eken İ. 1. Uluslararası İletişimde Yeni Yönelimeler Konferansı. 1. Baskı. İstanbul: Nobel Akademik Yayıncılık Eğitim Danışmanlık TİC. LTD. ŞTİ.; 2017:331-341.
- Medipol Sağlık Grubu. Pandemi Nedir? Corona Virüsü Neden Pandemi İlan Edildi?. <u>https://www.medipol.com.tr/bilgi-kosesi/bunlari-biliyor-musunuz/pandemi-nedir-corona-virusu-neden-pandemi-ilan-edildi</u>. 2020. Date of Access: 25 May 2020
- Medistate. https://www.medistate.com.tr/. Date Accessed: 2020
- Memorial. https://www.memorial.com.tr/. Date Accessed: 2020
- Orhan Kubat G, Şahin C. Koronavirüs hastalığı-2019 (COVID-19) klinik bulguları. *Kulak Burun Boğaz ve Baş Boyun Cerrahisi Dergisi*. 2020;28(ES):14-19. doi: 10.24179/kbbbbc.2020-75703
- Özdemir Karaca P, Atılgan E, Zekioğlu A. Sağlık hizmetlerinde sürdürülebilirlik bağlamında inovatif bir uygulama: Yeşil hastaneler. *Ejovoc (Electronic Journal of Vocational Colleges)*. 2018;8(2):77-87.
- Öztamur K. Kriz İletişiminde Halkla İlişkilerin Fonksiyonel Rolü ve Etkisi [Yüksek Lisans Tezi]. İstanbul, Türkiye: Bahçeşehir Üniversitesi;2019.

Özyaral O. Yeşil Hastane. İçinde: Sur H, Palteki T, ed. Hastane Yönetimi. 1. Baskı. İstanbul: Nobel Tıp Kitabevi; 2013:219-235.

- Sığrı Ü. Nitel Araştırma Yöntemleri. 1. Baskı. İstanbul: Beta Basım Yayım Dağıtım A.Ş.; 2018.
- T.C. Resmi Gazete. Bulaşıcı Hastalıklar Sürveyans ve Kontrol Esasları Yönetmeliği. 30 Mayıs 2007. Sayı: 26537, Başbakanlık Basımevi, Ankara.
- T.C. Sağlık Bakanlığı. COVID-19 (SARS-CoV-2 ENFEKSİYONU) Rehberi. <u>https://covid19bilgi.saglik.gov.tr/depo/rehberler/COVID-19 Rehberi.pdf</u>. 2020b. Date Accessed: 27 May 2020
- T.C. Sağlık Bakanlığı. COVID-19 (Yeni Koronavirüs Hastalığı) Nedir?. <u>https://covid19bilgi.saglik.gov.tr/tr/covid-19-yeni-koronavirus-hastaligi-nedir</u>. 2020a. Date Accessed: 27 May 2020
- Tek Doz Dijital. Hastanelerin Sosyal Medya Kullanım Oranları. <u>http://www.tekdozdijital.com/hastanelerin-sosyal-medya-kullanim-oranlari-infografik.html</u> . 2013. Date Accessed: 23 May 2020
- Tengilimoğlu E, Parıltı N, Yar C.E. Hastane ve hekim seçiminde sosyal medyanın kullanım düzeyi: Ankara ili örneği. *Gazi Üniversitesi İktisadi ve İdari Bilimler Fakültesi Dergisi*. 2015;17(2):76-96.
- Terekli G, Özkan O, Bayın G. Çevre dostu hastaneler: Hastaneden yeşil hastaneye. *Ankara Sağlık Hizmetleri Dergisi*. 2013;12(2):37-54.
- Uğraş Dikmen A, Kına H.M, Özkan S, ve ark. COVID-19 epidemiyolojisi: Pandemiden ne öğrendik. Journal of Biotechnology and *Strategic Health Research*. 2020;1(Özel Sayı):29-36. doi:10.34084/bshr.715153
- World Health Organization. Q&A on coronaviruses (COVID-19). <u>https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses</u> . 2020. Date Accessed: 27 May 2020
- Yıldırım O. Y. Türkiye'de Faaliyet Gösteren Gıda Kuruluşlarının Kriz İletişimi Stratejilerinin Karşılaştırılması [Yüksek Lisans Tezi]. İstanbul, Türkiye: İstanbul Aydın Üniversitesi;2019.
- Yozgat Şehir Hastanesi. https://yozgatsehir.saglik.gov.tr/. Date Accessed: 2020