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RESULTS OF MEDICAL INTERACTION ANALYSIS EMPLOYEES WITH MASS INFORMATION MEDIA (FROM CLAIMS TO UNDERSTANDING)

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Introduction. *The mass media is neither an instrument of destruction nor an instrument of progress. Their positive or negative consequences depend on which social forces are used and for what. The power of mass media is manifested in the ability to create one or another image of a medical organization, which can be destroyed by a small detail that even medical experts do not see.*

The ability to communicate with the patient is one of the most valuable qualities of any medical worker, it depends on the effectiveness of the treatment and diagnostic process, the patient's satisfaction with the help provided to him and the patient's assessment of the professionalism of medical specialists.

The purpose of the study is to analyze the occurrence of conflict situations during the interaction of medical workers with mass media.

Materials and methods. *The research used methods characteristic of medical science: dialectical, systemic-structural approach and content analysis, which made it possible to analyze the legal reality of the conflict between medical workers and the mass media.*

Results and discussion. *It was established that in case of conflict situations between the doctor and the mass media, it is necessary to follow certain tactics. Dialogue with media representatives is built taking into account medical confidentiality. It is important to inform journalists that the law provides limited opportunities for a doctor to provide information without the patient's consent. If a journalist is interested in a specific patient and a media representative asks to provide information about this patient, then before providing such information, the medical professional must talk to the patient and find out whether he agrees to provide information about his health or other information that known to employees of the medical organization.*

Conclusion. *On the basis of the conducted research, it was established that the conflict in the implementation of medical activity and the coverage of its problems by means of mass information is a dynamic process, and its existence means the need to study the prerequisites for its occurrence in medical activity, the nature of the conflict situation itself and the content of the conflict in order to prevent its likelihood or weaken its possible negative consequences.*

РЕЗУЛЬТАТИ АНАЛІЗУ ВЗАЄМОДІЇ МЕДИЧНИХ ПРАЦІВНИКІВ ІЗ ЗАСОБАМИ МАСОВОЇ ІНФОРМАЦІЇ (ВІД ПРЕТЕНЗІЙ ДО ПОРОЗУМІННЯ)

A.C. Бідучак, Н.В. Гонко, В.В. Горачук

Ключові слова: *конфлікт у медицині; засоби масової інформації; пацієнт; медичні працівники.*

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Вступ. *Засоби масової інформації не є ні інструментом руйнування, ні інструментом прогресу. Їхні позитивні чи негативні наслідки залежать від того, які соціальні сили використовуються і для чого. Сила ЗМІ проявляється в можливості створити той чи інший образ медичної організації, який може бути зруйнований маленькою деталлю, яку не бачать навіть медичні експерти.*

Уміння спілкуватися з пацієнтом – одна з найцінніших якостей будь-якого медичного працівника, від неї залежить ефективність лікувально-діагностичного процесу, задоволеність пацієнта наданою йому допомогою та оцінка пацієнта професіоналізму медичних фахівців.

Мета дослідження – проаналізувати виникнення конфліктних ситуацій під час взаємодії медичних працівників із засобами масової інформації.

Матеріал і методи. *У дослідженні використано характерні для медичної науки методи: діалектичного, системно-структурного підходу та контент-*

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аналізу, які дали змогу проаналізувати правову реальність конфлікту між медичними працівниками та засобами масової інформації.

Результати дослідження та їх обговорення. Встановлено, що у випадку виникнення конфліктних ситуацій між лікарем та засобами масової інформації необхідно дотримуватися певної тактики. Діалог з представниками засобів масової інформації будується з урахуванням лікарської таємниці. Важливо поінформувати журналістів, що законом передбачені обмежені можливості лікаря надавати інформацію без згоди на це пацієнта. Якщо журналісту цікавий конкретний пацієнт і представник засобів масової інформації просить надати інформацію про даного пацієнта, то медичному працівнику, перш ніж давати таку інформацію, необхідно поспілкуватися з пацієнтом та з'ясувати, чи згоден він надати відомості про стан свого здоров'я чи інші відомості, які відомі працівникам медичної організації.

Висновок. На підставі проведеного дослідження встановлено, що конфлікт у здійсненні медичної діяльності та висвітленні її проблем засобами масової інформації є динамічним процесом, а його існування означає необхідність вивчення передумов його виникнення у медичній діяльності, характер самої конфліктної ситуації та зміст конфлікту з метою запобігання його ймовірності або послаблення можливих негативних наслідків.

Introduction. Currently, the number of cases reducing the honor and dignity of medical workers has increased significantly. At the same time, in the vast majority of such situations, medical workers do not try to exercise their rights to protect honor, dignity and professional reputation, which is due to a low level of legal literacy and unwillingness to spend time on such proceedings [1].

This threatens a significant decrease in society's respect for medical workers, disappointment in their own profession, and an increase in conflict situations in the «doctor-patient-patient's relatives» system.

A doctor on duty communicates a lot and often with patients. Unfortunately, various offenses are often observed on the part of the patient: rudeness towards the medical worker, aggression, and disrespect.

The vast majority of medical workers believe that they do not have rights, and if they do exist, it is impossible to realize them. A medical worker does not have a special legal status, he is only a subject of labor law.

The purpose of the study is to analyze the interaction of medical workers with mass media in case of conflict situations.

Research material and methods. The research used methods characteristic of medical science: dialectical, systemic-structural approach and content analysis, which made it possible to analyze the legal reality of the conflict between medical workers and mass media.

Research results. If the medical organization is unexpectedly visited by representatives of the mass media, it is very important to follow the correct algorithm of interaction from the first minutes of communication. According to the law on mass media, journalists have the right to visit medical organizations and the right to collect information in any way prescribed by law. Representatives of the mass media may submit requests for the collection of information, but nothing prevents the correspondent from exercising his right to visit the medical organization directly. At the same time, the journalist has an obligation established by law to present an official ID. It is

recommended to start face-to-face communication with a journalist by checking his official ID [2]. Next, it is necessary to understand what information the journalist wants to receive. Experts identified two groups of problems that arise when media workers and medical workers interact:

- the first includes situations when a journalist collects information related to patients or the activities of a medical organization;

- the second – a situation when the object of attention is the medical worker himself.

In each case, it is necessary to follow certain tactics. If we are talking about patients, then the conversation with representatives of the mass media is built taking into account the fact that the medical organization is entrusted with the duty to protect medical secrecy – that information that became known to medical workers when the patient applied to the medical organization, which includes a fairly large volume various types of information [3].

It is important to inform journalists during the conversation that, according to the law, medical professionals are limited in their ability to provide information without the patient's consent. Moreover, consent is typically done in writing. Thus, if a journalist is interested in a particular patient and a representative of the mass media asks to provide information about this patient, then the medical professional, before giving such information, must talk to the patient and find out whether he agrees to provide information about his state of health or other information known to employees of the medical organization.

What is the best way to do it? We recommend holding a joint conversation between the doctor, the journalist and the patient – to inform the patient about the interest of the mass media representative and, if the patient agrees to communicate, to hold the conversation together, i.e. in the presence of a medical professional. The presence of a doctor during such communication is important because during the conversation the patient may tell about things

that do not correspond to reality. In this case it is better to give reliable information to the press immediately before publication.

If, for example, the patient is physically unable to communicate personally with the mass media because his condition or illness does not allow him to do so, it is still necessary to obtain his written consent. The consent must be drawn up either in a separate form or as a record in the medical records that the patient trusts medical professionals and allows them to communicate with representatives of the mass media and provide information about the state of his health, etc. It is desirable to create in a medical organization a concise form of consent of a patient of a medical institution to publish information in the mass media about a medical event related to its participation. For example: «I, (Surname, Name), allow to provide information about my state of health, (indicate the amount that he allows to provide), to representatives of mass media based on their legal requirements» [4].

Another way to prevent the appearance of unreliable information is to ask journalists to send the text of the interview for approval. A journalist has no obligation to agree with medical professionals on the information he has received. However, there is an obligation to check the authenticity of the information. In a conversation with representatives of the mass media, experts recommend that doctors inform the journalist that they are ready to communicate and provide information, but only on the condition that it passes the approval procedure before publishing the material [5].

Any order of relations between different subjects of law must be regulated. And if it is not regulated directly by legislative norms, it can be regulated by means of the adoption by the medical organization of a local normative legal act, which will prescribe the rules of communication with journalists. Heads of medical organizations are recommended to relieve ordinary doctors of this obligation and entrust communication with the press to a specific person – by analogy with the press services that exist in various organizations. At the same time, all personnel of the medical organization must be instructed that they do not conduct any communication with the press representatives on their own, but requests are addressed to a specific person.

If inaccurate information nevertheless appeared on the pages of mass media, then the medical organization (medical worker) has every right to appeal to the mass media that published this material for a refutation. For this, it is necessary to indicate in the request those circumstances that are unreliable, give them your assessment and ask to publish a refutation. In this case, it is also recommended to get the patient's consent to share information, if the article is about the patient – to take the patient to allies. In addition, the patient can also request a rebuttal on behalf of the patient [6].

The mass media are obliged to publish a rebuttal if the information is unreliable and a year has not passed since the publication – according to the law on the mass media, a rebuttal can be published within a year from the moment the article appeared. If the media refuses to publish a

rebuttal, this can be enforced through the courts. In this case, it is recommended, despite the fact that the plaintiff does not have the burden of proof, to gather evidence that the posted information does not correspond to reality.

Also, for example, if any information is approved in the mass media during the legal process regarding a medical worker, but there is still no evidence that the information is true, then this can also be considered as spreading information that does not correspond to reality. In this situation, we recommend using the so-called right of reply – according to the law on mass media, which states that a citizen or an organization about whom the mass media has spread information that does not correspond to the truth or infringes on the rights and legitimate interests that humiliate honor, dignity and business reputation, have the right to a response (comment, reply) in the same mass media. In other words, if a message is published in the mass media, with which a medical organization does not agree, it can express its point of view on this issue, but without disclosing medical secrecy [7].

Of course, there are situations when the patient, his representatives, being in conflict with the medical organization/doctor, are the initiators of the appearance of negative information in the mass media and are not ready to cooperate. In this case, unfortunately, there is only one way out – it is necessary to use the right to rebut in court, since one of the principles of civil proceedings is publicity, i.e. openness of the judicial process.

At the same time, the refutation is relevant in those cases when it is not possible to submit an application for the removal of material with inaccurate information, for example, when it is published in the printed mass media. If the material is published, for example, only on the Internet, it is better to send a request for its removal. The removal procedure is simpler, not strictly regulated by legislation. For example, if the site publishes inaccurate patient reviews, even if the site itself is a private resource, not accredited as a mass media, then if the information is unreliable, the administration of this site should remove the «false» reviews [8].

In this case, the first step is to write to the administration of this site, requesting the removal of inaccurate information. If the administration does not respond to such a request, then it is really necessary to write a statement to the Cyber Police Department of the National Police of Ukraine. In turn, the body will send a request to the site administration, and if it is not fulfilled, this resource will be blocked. Therefore, we recommend that when contacting the site administration for the first time, it should be indicated that if the inaccurate information is not deleted, the applicant will contact the Cyber Police Department of the National Police of Ukraine to block the site [9].

In addition to the fact that the mass media sometimes publish materials with unverified information, journalists publish their works that can be classified as containing defamation. And here we are talking about the offense provided for in Article 151.1 of the Criminal Code of Ukraine – «Defamation». A typical example, when an article uses a cliché that has already filled the eyes –

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«murderer doctor». Murder – Article 115 of the Criminal Code of Ukraine clearly indicates that there is intentional harm to another person. The doctor wants the death of the patient. After all, according to the content of the criminal legislation, when performing his professional duties, a doctor can be a murderer only in two cases: when it comes to euthanasia, the intentional taking of another person's life, and when killing with the aim of removing the victim's organs and tissues for further use [10].

In all other cases, it is about causing death due to negligence. Therefore, calling a doctor a murderer when his patient died is 99.99% slander. Articles with wording such as «due to the low qualifications of doctors, the patient was harmed» can also be included here. The issue of medical qualifications is clearly regulated by legislation. And those persons who meet the qualification requirements have the right to perform medical activities. In such cases, you can not only contact the mass media with a request to remove this information or publish a refutation, but also to the prosecutor's office with a request to initiate a criminal case under Article 151.1 of the Criminal Code of Ukraine – «Defamation» [11].

In case of publication of articles with unreliable information, false reviews, etc. medical workers are also entitled to compensation for moral damages. The appearance of «accusations» in the mass media before the court is also a reason to demand compensation for moral damages. For example, a medical worker is being prosecuted, and the media has already accused her of being guilty of a crime. There is a documentary position of the Criminal Code, provided for in Article 17 of the Criminal Procedure Code of Ukraine «Presumption of Innocence», that the accused is considered innocent until his guilt in the commission of a crime is proven in the manner prescribed by this Code and established by a court verdict that has entered into force [12].

However, it is necessary to prove that moral damage was caused by the publication. For example, when after reading angry comments after such a post, health problems arose. This fact can be recorded by seeking medical help. For example, if the blood pressure has increased, a hypertensive crisis has occurred, it is necessary to seek emergency medical care, obtain a sick leave, etc. In the case of a private clinic, the doctor may associate the publication of false information about himself with the number of patients he receives.

It is important to remember that compensation for moral damage does not apply to legal entities and organizations. If an organization wants to file a claim, it can file a claim for lost profits. The reason for such a lawsuit may be a decrease in the flow to specialists after an exit with unreliable information.

Video recording or photography is often carried out in medical organizations. These actions should be very strictly regulated. It is important to know that video recording, photography and audio recording of a medical worker performing his professional duties is possible only with the consent of the medical worker himself as the subject of personal data. This follows from Article 303 of the Civil Code of Ukraine, which states that an individual

is the owner of his personal papers, in particular photographs, and Article 307 of the Civil Code of Ukraine, an individual may be photographed, filmed, televised or videotaped only with his consent. The person's consent to filming is assumed if the filming is carried out openly on the street, at meetings, conferences, rallies and other events of a public nature. Personal data of persons participating in the provision of medical services (these are medical workers) must be kept confidential. They are protected by Law of Ukraine № 2494-IX dated July 29, 2022 «On the Protection of Personal Data». As it follows from the clarifications of the law, personal data includes not only surname, first name, patronymic, passport data, but also the image of a citizen, his voice. And the processing of this data is possible only with the consent of the subject of personal data. If consent is not received, it will not be processed [13].

Of course, you cannot prohibit journalists from filming in a medical organization, it is a public place, and, with the exception of certain cases, when it comes to counter-terrorism, filming in such places is allowed. But it is important to understand who is being filmed and why.

Medical personnel may be removed only with the consent of the medical personnel themselves. Filming is not carried out without their consent. As for patients, the medical organization must inform them that journalists are filming, which is carried out in accordance with the law on mass media. The patients themselves have the right to decide whether to get into the camera's lens or «go behind the scenes». If this is not done, then the medical organization can be accused of having contributed in one way or another to the disclosure of medical secret information.

If we are talking about filming a specific patient in a medical organization, permission from the patient to film him is obtained by the organization itself, which sends the correspondents on the assignment. It is advisable to have a copy of such permission in the medical organization.

There are nuances associated with shooting with a hidden camera. Such actions are possible, but their publication must be carried out in accordance with the law on mass media. Article 11 of the Law of Ukraine «On Information» states that the distribution of messages and materials prepared using covert audio, video recording, film and photography is allowed in three cases: if it does not violate the constitutional rights and freedoms of a person and a citizen; if it is necessary to protect public interests and measures are taken against the possible identification of third parties (third parties, if they get into the frame, they should not be identified); if the demonstration of such a hidden recording is carried out by a court decision [14].

In a situation where a similar image or video material is placed in the mass media and the material is targeted (that is, if a specific citizen was filmed without his consent), the mass media can be prosecuted and demanded to remove this image, video, as well as receive compensation for moral damage.

At the same time, we recommend that when journalists with video or photo cameras appear in a medical

institution, do not hide or avoid them. There are certain open information, such as the price, information about the certificates of doctors who work and conduct receptions, etc., journalists have the full right to familiarize themselves with them. In this situation, it is recommended to invite the head of the organization to communicate with the press, show the authorized documents and calmly continue communication.

It is important to remember that in each medical organization, there is a visiting regime, and the relevant documents must indicate the premises that cannot be entered without special preparation or treatment, and journalists cannot be admitted, for example, premises that require special sanitary conditions. In addition, it is possible to reflect specific cases and times when journalists can be in the premises of a medical organization in the internal rules of the organization.

Conclusion. The professional activity of a doctor, regardless of his experience and specialization, is characterized by increased conflict during the provision of medical care with subsequent coverage in the mass media. This is due to a large number of potential reasons because there are patients who are dissatisfied with the medical services provided, despite the continuous improvement of treatment and the latest treatment methods.

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