

Healthcare Systems and Corporate Social Responsibility Communication: A Comparative Analysis Between Malta and India

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ABSTRACT

This article aims to analyze corporate social responsibility (CSR) communication in today's health care systems. The authors investigate the importance of CSR communication and the use of both traditional and interactive technologies for healthcare CSR communication, adopting quantitative research methodologies. In order to understand different applications of the topic, the article examines and compares best practices regarding CSR communication between two extremely different countries and contexts: namely Malta and India. Results emphasize a growing attention on healthcare CSR communication in both countries. The key finding observed is that healthcare organizations are using a mixed strategy to communicate their CSR activities. Indeed, interactive technologies enable several advantages to organizations than traditional tools (such as better dialogue and interaction with different stakeholders, speed, low costs, easy access to information), as well as they require investments and costs in infrastructures and skills/competencies for their implementation.

KEYWORDS

CSR Communication, Corporate Social Responsibility, Healthcare Communication, Traditional Vs. Interactive Technologies

INTRODUCTION

The concept of Corporate Social Responsibility (CSR) refers to the responsibilities of enterprises that go beyond the mere economic aspect of maximizing profits. These responsibilities should be directed towards the society, the environment and the different stakeholders (Carroll, 1999; Davis, 1992; Hart, 1997; Shamir, 2005).

Today CSR is a "hot topic" for organizations of all types and across all sectors, not only private and for-profit companies, but also public and non-profit organizations (Kakabadse & Rozuel, 2006). In particular, CSR is crucial to the healthcare sector in that healthcare systems are currently facing new challenges, rapid technological advances and are functioning against a background of financial, economic and sustainability pressures (Tomaselli et al. 2015). They are required to provide high clinical quality, a high level of functional quality and cost-effective patient care with the limited resources

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that they are allocated (Fottler & Blair, 2002). Moreover, public scrutiny pressures and related ethical and reputational issues lead health sector organizations to pay particular attention to CSR (Collins, 2010) and, particularly, to the communications of CSR and the tools adopted for this concern. The importance of communicating CSR lies in the fact that it may influence leaders and public opinions, as well as their behavior (Tomaselli & Melia, 2014). According to Watts and Holme (1999), public opinion does not trust organizations whose efforts are not directed in observing CSR-related issues. Moreover, public opinion has an important role in regulating healthcare organizations behaviors (Esrock & Leichty 1998). Thus, CSR communication has a key role in influencing stakeholders' relations (Arvidsson, 2009) and helps organizations increasing their image, reputation and credibility (Dawkins, 2004; Hooghiemstra, 2000; Chaudhri & Wang, 2007).

Healthcare organizations communicate CSR through both traditional and interactive technologies. Traditional tools include reports, codes of ethics and standards for certification; interactive technologies include corporate web sites, social media, blogs, mobile apps. In the last decades, the advent and availability of Information and Communications Technology (ICT) totally revolutionized the healthcare sector, allowing healthcare organizations to have access to several new technologies to facilitate their routine practices.

In this context, the research presented in this paper aims to: 1) analyse CSR communication in the healthcare context; 2) investigate the use of both traditional and interactive technologies for healthcare CSR communication (as well as differences and similarities); and 3) compare CSR communication between two countries with extremely different contexts, Malta and India. We adopted quantitative methodology in order to understand the different perception and applications of CSR communication between the two contexts analysed.

The work is structured as follows: First, we discuss the peculiarities of the Maltese and Indian healthcare systems and CSR application in both countries. Then we review literature dealing with healthcare CSR communication and the tools (both traditional and interactive technologies) used by healthcare organizations to communicate their CSR activities. The following sections outline the study design and discussion of results. We conclude the paper by discussing the implications, main limitations and further research directions.

MALTESE AND INDIAN HEALTHCARE SYSTEMS

The study presented in this paper analyzes and compares CSR communication in the Maltese and Indian healthcare sector. Two different countries with extremely different contexts related to their population, size, Gross Domestic Product (GDP), healthcare systems, healthcare industry and CSR application.

Malta is a small state located in the Mediterranean Sea and is an archipelago composed by three main islands: Malta, Gozo and Comino. It is an EU member since 2004 and is the most densely populated country with the lowest total population compared to other EU member states (Europa.eu, 2016). Malta population is estimated to be 419,531 people and its density is 1,311.0 people per square kilometer on a total area of 320 Km². Total life expectancy (both sexes) at birth is 79,7 years and 94.15% of adult population (aged 15 years and above) in Malta are able to read and write. Malta GDP is 22,779,91 USD (World Bank, 2013) while its unemployment rate in 2016 is 4,8% (EUROSTAT, 2016).

Maltese healthcare system has universal coverage and is free at the point of use. It is primarily financed through taxation. Maltese citizens are not obliged to have health insurance; however, all workers are required to pay National Insurance contributions on a weekly basis. All residents have access to the Maltese National Health system and migrant residents in Malta are covered by the Maltese social security system (Grech et al, 2014). The National Health Service (NHS) allows some free medicines and access to certain medical devices for individuals with low incomes. The Maltese NHS is inspired by the British one and provides comprehensive health packages to citizens (Buttigieg,

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