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Research Paper

Business-Consumer Communication: A Qualitative Study on Brand Equity Approach Maternity Care

Gintarė Žemaitaitienė *
Vestina Vainauskienė **
Auksė Blažėnaitė ***

ABSTRACT

Maternity care communication is a generative topic both globally and nationally. Maternity care research has predominately dealt with mental health or physical environment issues, with little focus on healthcare providers' innovative business-consumer communication or brand management. With the application of brand equity in maternity care communication in social media cases, the purpose of the present study to investigate matching between organizational identity and the represented image. Theoretical grounding elucidates the evidence of digital innovation in action. Qualitative methodology allows eliciting further research directions with relevant research instruments. Two Lithuania-based healthcare sector organization cases with equal value parameters (time, place, activities, and context) are researched. Quantitative and qualitative data analysis, based on virtual observation, is performed. The gap between what organizations want to communicate and what they actually communicate is identified. Managerial and communication actions creating premises for collaborative behaviour and value creation by specific communication tools across such issues as medical influencers, community managers, or readiness for managing healthcare during the pandemic are surveyed. Research limitations due to the narrowness in scope, investigating only two cases within a specific field, are counterbalanced by the completeness of the quantitative and qualitative inquiry into social media data. Despite this, this innovatory study not only expands academic knowledge, suggests an instance of methodology and a research sample, possibly adaptable to varying contexts, but also implies potential issues for communication and management practitioners at healthcare institutions, suggesting apprehensible solutions.

Keywords: Healthcare business-consumer communication, maternity care digital communication, digital healthcare innovations, brand equity approach.

* Mykolas Romeris University, Lithuania. Email: giparaz@mruni.eu

** Kaunas Technological University, Lithuania. Email: vestina.vainauskiene@ktu.lt

** Kaunas Technological University, Lithuania. Email: aukse.blazenaite@ktu.lt

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1. INTRODUCTION

Prior to the pandemic crisis, healthcare politicians in Lithuania were planning strategic top-down changes. Implementation of entrepreneurial principles was foreseen among the top-level leadership of public healthcare organizations, demonstrating politicians' business-like thinking in this sphere (Press report of the Ministry of Health Protection of the Republic of Lithuania, 2022). However, any further strategic change was suspended (Activity report of the Ministry of Health Protection of the Republic of Lithuania, 2020). The present investigation has chosen the application of the bottom-up principle, applied in e-Health research (Easan et al., 2012; Estuar et al., 2013) and an end-user perspective (Biancone et al, 2021) to examine the employment of the brand equity approach in daily digital communication with consumers.

In maternity care research (such as COST action BIRTH (2014), Babies Born Better (2021), works by the Union of Motherhood Care Initiatives (2021) publications in the Health Sciences journal (2022)), most of the investigations during the past five years have dealt with birth-giving and post-birth periods, with little focus on pre-birth preparation and healthcare providers' innovative communication means and channels, brand management, or marketing activities. Extensive podcasts (*Kalba mamos (2022)*, *Mamos be dramoms (2022)*, *Ryšys (2022)*), blogs (*Miesto mamos (2018)*), influencer actions (*Sigita Tyliai, Sumani mama, augantiseima*), NGO initiatives (*Dulos Lietuvoje, Mama mums rūpi, the Union of Motherhood Care Initiatives (2021)*), and mass media engagements mostly acknowledge mental health, positive birth-giving expertise, or effective organization-consumer and doctor-patient relationships (Swordy et al., 2020).

The focus, undertaken by the given work, seems to be important, timely, and contributory to the needs of patients, or consumers (Cronie et al., 2019; Nowotny et al., 2019; Cheng et al., 2020; Kmietowicz, 2020). Crisis situations, emerging conflicts, and complaints are likely to be the result and consequence of the management gap and ignorance of communication among/by mid-management. Ruminating over a widely accepted patient/consumer-centred approach, following a growing array of healthcare innovation (Keating, 2013), and supposing that a well-prepared

pregnant woman is a well-prepared future mother, the researchers in this study see an apparent need to strengthen the consumer-based brand equity of health care organizations providing maternity care services.

Therefore, the focus of the present work is the investigation of adequate consumer-based management, building brand equity as well as an environment for innovativeness and digital transformation as factors to increase brand equity. Since hospitals have already been facing challenges due to the changing demands of patients, decreased funding, or the need to attract patients (consumers) themselves, the determinants of brand equity – brand awareness, perceived quality, brand loyalty, and brand image - seem to require constant monitoring and updating to engage the attention of patients and keep up with their needs. The investigation seeks theoretical and practical significance and novelty. The brand management theory and a social media context suggest a new practical usage sample, extending the application field to health management (Kemp, Jillapalli, Becerra, 2014; Nayal, Pandey, 2021). Consequently, health management (maternity care, in particular) as a practical discipline becomes potentially open to its enrichment with new instances, working settings, and solutions by applying business thinking and management theories.

During the last decade, social media have supported new ways of collaborating, organizing resources, designing products, matching demand, and supply, developing new standards and solutions, or incorporating novel technologies as vital components of business models and operations. Digital technologies have become enablers of private sector activities (Elia et al., 2020). Similarly, a dynamic entrepreneurial process of vision, change, and creation through the application of energy and passion toward the design and implementation of innovative ideas (Kuratko, 2016) has helped transferring solutions from business to health management, the latter embedding digitized physical traditional settings, based on the use of digital media and technologies (Davidson & Vaast, 2010). The problem of health organizations in Lithuania is they have internal communication barriers (Paužuolienė, Januškaitė, 2019), that effect external communication as well and rarely elicit their consumers' feedback consequently, they are neither familiar with the needs, nor able to communicate to consumers how a brand fulfils those (Majorczyk, Kupstienė et al., 2020). Virtual observation results allow identifying what an

organization declares, what it implements, and how a consumer reacts. Virtual observation also determines consequent actions which the organization needs to take: whether the brand is perceived as planned, or whether there are specific perceptual problems that need to be addressed, either by adjusting services, or by adjusting the way this organization communicates the message. This research takes up a purpose to examine how the undertaken digital communication activities match organizational identity and the represented image by raising and achieving research questions to analyze (1) communication management possibilities and (2) relevant application of digital innovations, evaluated in the context of brand equity theory to discover the gap between what organizations want to communicate and what they actually communicate.

On an academic level, the investigation outcomes suggest an instance of methodology and a research sample, possibly adapted to different contexts according to researcher's needs. The results of the study could also impact the academic knowledge of brand managers at similar institutions. On a practical level, the given research results allow communication and management professionals at healthcare institutions foresee possible problematic areas and issues within them and, consequently, find solutions.

2. LITERATURE REVIEW

2.1 Consumer based brand equity approach and digital innovations for its formation

Classical marketing research works dwell upon the welfare that consumer-based brand equity creates for a brand and for an organization: effectiveness and efficiency of marketing programs, opportunities for successful brand development, and long-term consumer commitment to the brand (Keller, 2013; Keller & Swaminathan, 2019; Kapferer, 2012). Thus, a strong consumer-based brand equity positively correlates with luring consumers into using a product (Heiens et al., 2012; Fon & Goh, 2020; Ernawaty et al., 2020).

Keller (1993, 2013) claims that consumer-based brand equity develops in four layers: a brand image, based on brand identity, determines consumer response to marketing actions, whereas a positive consumer response shapes a long-term consumer-brand relationship - brand loyalty. Aaker et al. (2012, 2017) operationalize the approach and specify brand equity as a system with such

interrelated constituents as brand awareness, brand associations, perceived quality, and consumer loyalty.

Brand awareness - brand establishment in the minds of consumers (Keller, 1993; Dew & Kwon, 2010; Kwun & Oh, 2007) - represents two dimensions: brand recognition and brand recall (Woodward, 2000; Dew, & Kwon, 2010; Kim et al, 2008). If a consumer is not aware of the brand, the associations created by an organization do not cling to one's consciousness (Veloutsou et al, 2013). The authors note that brand recognition is not a critical precondition for a strong consumer-based brand equity. A brand must have forcible and unique associations to achieve one. The formation of favourable brand associations is a necessary precondition, when configuring and maintaining a positive brand image (Pitta & Katsanis, 1995). Table 1 systematizes the information on brand associations, analysed in the current research.

The above information in Table 1 provides a holistic view of the phenomenon. Brand association types imply that one of the main tasks of an organization is to form positive, strong, and unique brand associations in the mind of a consumer, which is a major precondition for the formation and support of a competitive brand image, as:

- Associations help a consumer retrieve and process the already assimilated information;
- Multifold - not isolated or discrete - experiences and communication activities form stronger brand associations;
- Associations serve as an important organizational tool to differentiate a product in the market; any identical consumer experience becomes not possible in relation to another brand;
- Brand associations, present in the consumer mind, influence user experience.

Table 1. Typology of brand associations

Type of an Association	Definitions	Sub-types	Preconditions	Sources
Attribute associations of a brand	-	<i>Product-related</i> associations	Physical characteristics of a product	Keller, 2013 Keller & Swaminathan, 2019 Keller, 1993
		<i>Non-product-related</i> associations	Product price; user and usage imagery, brand personality, user experience, etc.	
Benefit associations	Express consumer's belief that a branded product will meet his/her needs and expectations.	<i>Functional</i> associations	Formed by essential product features that meet relatively minimal user needs.	Pitta & Katsanis, 1995
		<i>Experiential</i> associations	Express consumer's feelings about the use of a particular product (e.g., unfamiliarity of the product).	
		<i>Symbolic</i> associations	Relate to social needs of the consumer and the need be respected and recognized. brand benefits to the consumer.	
Attitudes towards a brand	Are the most significant associations formed in the consumer's mind, since it is the positive attitudes about the brand that determine consumer's decision to buy a product of a specific brand.	<i>Cognition</i> component reflects the knowledge and perception, formed by directly interacting with the object (a brand, in this case) and receiving information from various source, related to the object	Causes the consumer to react to environmental stimuli. includes the consumer experience on the basis of which he/she evaluates the brand positively or negatively, "good" or "bad".	Pitta & Katsanis, 1995 Banyte et al, 2007 Castaneda et al, 2009 James, 2005
		Consumer feelings and emotions, related to a particular brand, express an <i>emotional</i> component of attitudes		
		<i>Intention</i> component reflects the likelihood that the user will repeat a particular action		
Organizational associations	Contribute to the formation of the brand image, reflect the status and activities of an organization, regarding organization's perceived social obligations, which are usually unrelated to organization's ability to produce goods or provide services.	Organizational <i>capacity</i> associations	Organization's expertise to develop and deliver products, i.e., employee mastery.	Chen, 2001
			R&D superiority.	
			Useful technological innovation.	
		Industry leadership.		
Organization's <i>social responsibility</i> associations	Environmental friendliness			
	Support for cultural activities.			
	Increasing own visibility by supporting social causes.			
Brand personalities	Set of human characteristics, attributable to a specific brand.		The greater the similarity between the dimensions, characterizing the individual and those characterizing the brand, the greater the brand preference. crucial for shaping the consumer value of service brands.	Keller, 1993 Aaker et al, 2012, 2017 Veloutsou et al, 2013 Swaminathan, 2008
Brand heritage	Used for differentiating a brand and for creating an image of a unique offer to the consumer. cannot be measured or defined directly, as the heritage of an organization or a product may not be the heritage of a brand.	Brand history	Engages users, builds long-term relationships, and supports the organization. long-term consistency and continuity reinforce the brand heritage; core values include consistent major principles that underpin a brand which boasts an exceptionally strong image, perceived quality, and consumer loyalty.	Aaker et al, 2012, 2017 Hakala et al, 2011 Himmes et al, 2007

Source: own compilation based on authors as mentioned in the table 's column 5.

Keller (2013) defines perceived quality as an overall user perception of product quality and superiority, considering its purpose, compared to alternative products. That is, perceived quality provides the consumer with a basis to purchase the product (Dew & Kwon, 2010). A highly perceived product quality ensures price premium creating an opportunity to lead a product category and promote innovation (Aaker & McLoughlin, 2012).

Consumer loyalty is an extensively analysed branding notion, but this case only deals with its essential aspects. According to Mascarenhas et al. (2006), the more consumers are loyal to a brand, the less likely they are to tolerate other brands. Rowley (2005) argues that an organization gains consumer loyalty if, first, consumers prefer organization's brand; second, consumers repurchase the same branded products; third, consumers ignore offers from competing brands.

Theoretical and empirical studies partly confirm a theoretical ply to these relationships with regards to healthcare institutions since brand associations are not indicated as direct influencers of brand equity formation. Chahal & Bala (2010) reveal that brand equity in healthcare institutions is directly affected by consumer-perceived service quality and consumer loyalty. Brand image, created by associations, is a mediating variable between brand loyalty and the overall brand equity. Fon & Goh (2020) confirm that perceived quality and consumer loyalty have a direct impact on overall brand equity. Meanwhile, Piaralal & Mei (2015) identify perceived quality as the highest contributor to brand equity and conclude that hospitals need to consistently ensure an optimal quality of the provided services.

Brand equity in healthcare conveys the necessity for hospitals and health systems to build a strong and long-lasting brand, allowing institutions to survive and flourish. Brand equity in healthcare would be built through a continuous accumulation of thoughts, feelings, opinions, and behaviours related to a hospital or a health system, based on the provided consumer experiences. Consequently, transferring business experiences and actions to management practices at medical institutions effectuates an entrepreneurial principle. Organizations have to select relevant digital means to help implement that. Both applied professional media and scientific literature mention the trends and digital innovations in marketing (Chaturvedi, 2021), such as influencer marketing, contests on social media, insights-driven marketing, gamification, user created content, and virtual reality applications. Also, the improvement of managerial processes dwells upon the application

of storytelling, dealing with user feedback, hiring community managers to establish rituals and habits of listening, and setting high expectations for management team's interaction with customers (Richardson et al, 2019).

Regrettably, the research on the topic has been insufficient and fragmented, mostly targeting healthcare in general. Influencers have been identified as a strategic and powerful avenue for the promotion of products and ideas in the healthcare field (Archer et al., 2021). On the one hand, some authors after the investigation of influencer roles during the Covid period state that a well-researched and effective health messaging campaign, incorporating social media influencers into its tactics, could be valuable. On the other hand, public health communicators have been ignoring the social capital of (traditional and emerging) influencers (Archer et al., 2021). One of the first studies to examine the use of sharable content and influencer marketing for health message dissemination (Kostygina et al., 2020) reveals that innovative strategies have influenced the campaign, reach, and engagement. The quoted investigation also suggests that harnessing cultural elements belonging to social media may be a useful strategy to increase campaign appeal among the youth and young adults in the present media environment. The same study has proven that the use of popular social media memes and subjects can also be an effective strategy to promote reach and engagement with the campaign (Kostygina et al., 2020).

The overview of the research completed by Sardi et al. (2017) on games and gamification has shown that the implementation of gamification techniques in the e-Health realm is a critical and demanding process. The major advantage of gamification in the health context ensuring users' regular engagement and increasing their immersion into the e-Health solution as well as gamification is intended to help users experience positive emotional states, such as satisfaction, relatedness, and self-esteem (Sardi et al., 2017). The idea of using serious games to catalyse better outcomes in health care has gained significant interest among the community of researchers and health care professionals. The importance of creating evidence-based games, purposefully designed to address physical and mental health challenges faced by end users, has also been acknowledged (Verschueren et al., 2019). Finally, such issues as a positive emotional bonding or assistance in physical and emotional health issues are crucially relevant to the particularity of maternity care.

3. METHODOLOGICAL APPROACH

A case study approach application is particularly useful obtaining an in-depth appreciation of an issue in its natural real-life context (Crow et al., 2011). The investigation of a limited system on a microlevel allows determining more accurate case boundaries and a more precise unit of analysis. Under a holistic approach, overcoming limitations is facilitated by triangulating data sources and providing generalizations – patterns and assumption development (Yin, 2014).

Study sample

The article introduces a qualitative case study, comparing two maternity homes, Christian Maternity Home (further referred to as ChMH) and Pranas Mažylis Maternity Hospital (further referred to as PMMH). The cases are methodologically defined with regards to place and time, duration and activities, case details and contexts (Crow et al., 2011; Yin, 2014), thus eliminating possible case study limitations (Yin, 2014).

The two cases match in their geographic location, time and duration, events and set-up. Despite similarities, communicative peculiarities of the studies differ, leaving space for discussion and discovery. The revelations allow learning from mistakes and could serve as models for similar organizations, aiming at developing their communication systems and practices. Table 2 outlines case characteristics.

Table 2. Cases characteristics

Criterion	Case 1 (ChMH)	Case 2 (PMMH)
Geographic	Kaunas (Lithuania), city center	Kaunas (Lithuania), city center
Duration (social network observation)	Period: January 1, 2019- March 16, 2020 (pre pandemic period) Carried out: February 9-11, 2021	Period: January 1, 2019- March 16, 2020 (pre pandemic period) Carried out: February 11-25, 2021
Activities	Day (care) hospital Outpatient services Swimming pool, physical therapy Testing Training	Day (care) hospital Outpatient services Swimming pool, physical therapy Testing Training
Context	About 1000 deliveries per year A Municipal Clinic of a Republican Hospital (a Kaunas University Hospital since 2020)	About 1000 per year (up to 900 in 2019) A Kaunas Clinical Hospital Department
Social media specifications (only for Facebook, as other social networks lie outside the scope of the current investigation)	Facebook (data retrieved May 1, 2021) 3886 liked 4075 followed 871 checked in	Facebook (data retrieved May 1, 2021) 3373 liked 3521 followed 824 checked in
Units of analysis	43 posts	137 posts

Data collection and analysis

In this work, quantitative and qualitative data, collected by virtual observation, are analysed in several perspectives, determined by the aim of the investigation. The material for the case study has been collected from freely available public sources: social media and websites. Primary data comprise reflections and feedback of both organizations themselves as well as organization's followers. It is important to note that confidentiality has been secured by the absence of quotations used here.

The content analysis method is applied for qualitative data assessment and inductive coding; the applied Saldana (2012) detailed focus coding is distinguished for categorizing the templates which appear in the text into sub-topics and for categorizing the codes by thematic or conceptual similarity.

Coding reliability

Validity and reliability are assured applying intra coding. Coder's consistency across time is assured with intervals applied in the coding process and multiple returns to re-check codes, a month break in data analysis and the return to the final interpretation process only after re-checking codes after a break (Lacy et al., 2015).

Securing research ethics

Privacy, anonymity, and confidentiality as well as a rapidly changing social media environment and informed consent are among the key ethical concerns for health researchers using social media (Hunter et al., 2018). Seeking ethical investigation, the following framework, based on Townsend & Wallace (2015), has been built here: first, terms and conditions of the platforms are consulted, then, legal and institutional guidelines regarding the use of social media data are considered. Finally, only publicly available information (posted on Facebook, accepting Facebook terms of use) is used for research purposes in this observation and content analysis. Though research participants can be classified as vulnerable adults, and the subject matter - sensitive,

confidentiality of the commentors (data anonymization) is applied (except for public people - organization’s director or influencers) (Towsend & Wallace, 2015).

Research limitations

A presumable narrowness of the case study methodology is circumvented by the completeness of the study. In this study, 180 posts are analysed and their quantitative (comparison, analogy) and qualitative (content analysis) parameters are explored. A limited variability of social media data over time is a complex issue. On the one hand, virtual observation provides a more complete quantitative picture after a certain time; on the other hand, most data are usually collected within the first few days. Over time, the information may no longer be complete with links deleted, reactions cancelled, and comments edited. Also, in a retrospective study, it might not always be clear when exactly some of the changes are being made.

4. RESULTS AND DISCUSSION

4.1 Unfolding brand equity in maternity care cases on social media

To reach the aim of the current investigation, the case analysis commences exploring the opening information on both sites, comparing their declared identity and their image, formed on social media, based on quantitative parameters (see Table 3). Seemingly, in each institution, six to seven overlapping identity aspects could be found; the assessment of the image creation on social media pertains certain differences.

Table 3. Main research results

Category	Case 1 (ChMH)			Case 2 (PMMH)		
Declared identity	Medical staff, protecting human life from the outset Family rooms Specific attention to families, to the women in crisis Additional services (training, day (care) hospital, pool) A part of a university hospital (relating to education) Newborn-friendly hospital status Established in 1926, functioning under the present name since 1994 – long-term traditions			Qualified medical help, broad range of services for all women Home-like environment N/A Additional services (training, day (care) hospital, pool) Cooperation with institutions of higher education Newborn-friendly hospital Established in 1932, functioning under the present name since 1989 (history) – a separate section about hospital history (fact-based long-term tradition)		
Image, formed in social media	No of posts/average of reactions	Reactions (like/like very much/other)	Comments/Share	No of posts/average of reactions	Reactions (like/like very much/other)	Comments/Share
Medical staff/services	0/2 /73	111/1	2/31	10/1/125	1041/185	131/21
Environment	6/97	420/61/5	95/70	3/69	175/30	1/1
Attention	0			0		
Services	11/34	283/20/1	21/52	27/40	891/66	77/58
Education	0			2	179/13	12/11
Status	0			0		
History/tradition	3/183	404/129/1	14/15	4/22	78/2	3/5

In Case1, regarding the formation of identity at ChMH (webpage of Lithuanian University of Health Sciences, Kaunas Hospital, Clinic of Obstetrics and Gynaecology, Christian Maternity Hospital, 2021), the emphasis seems to be put on medical staff, whereas social media does not hold any posts or pictures, introducing doctors, maternity nurses, or providing names. During the period of observation, two posts were published emphasizing qualified medical assistance, introducing a new look of an operating room (February 22, 2019) and upgraded ultrasonic equipment (January 28, 2019). Also, six notices with photos, videos, or links to a virtual tour were posted to illustrate a pleasant and neat environment for families to stay together. Notedly, a few negative responses to these posts received neither apologies, nor explanations. Supplementary services, such as the access to a swimming pool and training, were mentioned in eleven posts. This kind of information has been noted as most often distributed, but least reacted to. History and tradition were observed in posts three times, attracting huge attention and eliciting high numbers of reactions. Greetings regarding March 11, 2020, and the New 2019 Year, mentioning the numbers of new-borns in Kaunas throughout years, received abundant acclaim and response. These two messages held a huge potential of creating ties with former consumers; the third post (October 9, 2019) shared a publication on ChMH in a local newspaper. Unfortunately, neither of the input were further explored.

One more problematic aspect emerged during the research - the ambiguity of information about this maternity hospital. A debate, whether non-Catholic pregnant women were accepted, started on the Facebook page. Two responses by FB members provided assurance about non-relation between hospital patients/consumers and religion, but the maternity home itself failed to comment. As a matter of fact, the attribute “Christian”, declaring the mission to provide support for women in crisis, has been a part of this maternity home title since 1994, and has been the feature, discriminating Case1 from Case2. During the observation, Christian imagery and lexis were only evidenced in the posted Christmas greetings (December 23, 2019). This has revealed not only a high probability of misinterpretations about the activities of this maternity home, but also a lack of staff involvement, implying insufficient attention the organization pays towards its identity and image in social media. It seemingly did not provide any social media updates

emphasizing the status of a new-born-friendly hospital, or its links to the main hospital and related educational institutions.

In Case2, the evidence at PMMH (webpage of P. Mažylis Maternity Hospital, Kaunas Clinical Hospital Branch, 2021) has disclosed organizational identity formation by emphasizing qualified health care and the services provided. Out of 11 posts, describing added services, ten provided photos of obstetricians, gynaecologists, physical therapy specialists, and even the branch manager. Medical staff provided comments, reactions, greetings, accepted personal compliments and posted pictures from organization's events. Three posts noted Christmas and Easter decorations, implying tradition fostering and pleasant environment creation. Although the conditions for childbirth and the postpartum period were shown as areas of pride and publicity in Case1, they happened to receive negative feedback. In Case 2, physical conditions were not mentioned, but the maternity hospital kept receiving comments about a warm emotional, rather than physical environment. PMMH also posted the schedule of lectures or advertised a swimming pool as added services, in video and photo formats. Their posts, featuring the anniversary of the day (care) hospital, appeared to receive numerous reactions, and were successfully exploited for publicity in different press portals. Case2 also presented more evidence to illustrate cooperation with educational institutions by introducing interns as new employees or announcing participation in a scientific conference. Sadly, neither hospital posted any news, related to the new-born-friendly hospital status.

A reflection on the identity element, related to hospital history and traditions, deserves a special attention. First, PMMH joined the Street Days initiative in May 2019, demonstrating community spirit, collaboration, and goodwill. Then, its social media postings covered consumer visits and excursions and the visit of hospital founder's son, Liudas Mažylis, which appeared to be beneficial to the organization. The published messages could be characterized as sincere, simple, and user-oriented, though often unprofessional, with a dubious quality of videos and photos and incomplete information, which would later raise unanswered questions, or frequent re-postings, not generating attention. Research data shows, that the biggest untapped opportunity to present the staff, environment, and services on social media was inadequate announcement of having taken

part in a television show by Lithuanian national television. In fact, a poor introduction of the broadcast (November 17, 2019) received 7 ‘like’ and 2 ‘share’.

The following comparison of cases reveals strong and unique associations, formed to enhance the brand. In Case1, when reviewing attribute associations on social media, efforts have been made to form product characteristics; however, a lack of posts with information about user and usage imagery, about brand personality, or user experiences was an obvious shortcoming. In the case of brand benefit associations, only functional associations were created by posts, not experiential or symbolic associations.

In relation to attitudes, the abundance of comments, acknowledgments, and sharing with others indicate the implementation of the cognition component through knowledge and perception which have been formed through a direct interaction with an object and the arrival of information from various object-related sources. During the observation period, the total of 43 posts received 2 587 ‘like’, 509/78 – other reactions, 178 comments, and 299 shares. To compare, some of the negative comments were posted only by four dissatisfied consumers, and two negative comments were recurring. The intention component of users to repeated user action, was evidenced by tags, recommendations, and thanks - the total of 72 comments (out of 178), as observed.

In Case2, the review of attribute associations in social media revealed an effort to shape product characteristics through additional services and the professionalism of the staff. With the help of the main posts and a separate set of 50 posts, a #teciomeile (#fatherslove) campaign was created by associations with non-product related features. The consumer and the “picture” of the consumer (user and usage imagery) were not only of a mother and child, but also of a father. Other brand personalities were introduced here - the manager, medical staff members, and user experiences were published. Therefore, in the case of brand benefit associations, functional, experiential, and symbolic associations were created. As for attitudes, the abundance of comments, acknowledgments, and post-sharing can prove the implementation of the cognition component through knowledge and perception, formed by a direct interaction with the object.

Organizational associations were formed only in Case2. The relevant posts covered a professional conference attendance, interviews, and socially responsible contributions to a non-smoking

campaign (June 04, 2019), or the production of educational articles (February 20, 2020) which received more reactions than routine posts, helping develop brand heritage.

The observed media posts received total of 5 835 ‘like’, 1 092/8 different reactions, 376 comments, and 205 shares. There were no negative comments noted, except for one questionable issue, given feedback from the staff. The Case1 average was 83 reactions per post, and Case2 - 55 reactions per post. User intention component got evident in tagging; recommendations or thanking constituted the total of 198 comments (out of 376). In Case1, social media faintly expressed organization's associations, brand personalities, and brand heritage. In Case2, posts in these categories became organization's uniqueness and strength. Case2, however, lost text and image quality even though it had had more opportunities for publicity on national television or in a nationwide survey of maternity homes.

4.2. Environment for innovativeness and digital transformation to increase brand awareness

Only few digital innovations were observed. At ChMH, a maternity nurse, a midwife (@sumanimama; 42 000 likes in 2022 October), offering individual training and carrying out medical influencer activities outside her full-time job, did not relate to the institution in her posts. Then, overtime activities of a maternity home psychologist (Sigita Tyliai; 446 followers on Facebook in 2022 October), such as involvement in media and collaborations, presentations on health topics, or the organized events, suggested her medical influencer potential. However, her capabilities were not exploited for associating those with a particular organization. In Case2, postings revealed real ‘faces’ of the organization: nurses and midwives organizing trainings, featured in media articles, on television, or in social media. However, none of them were noted to have reached the level of an influencer. Also, no instances of gamification or contests were observed on social media during the investigation period.

In this analysis, an important aspect is a virtually unexploited power and benefits of a hashtag (#). The occurrence of a hashtag can be attributed to Case2 as an instance of insights driven marketing. Mothers were invited to share father-featuring photos (November 28, 2019, through January 24, 2020); 50 posts received 2 061 ‘like’, 463 ‘like very much’, 62 comments, and 40 - ‘share’. Classified as stories and patient-consumer narratives, they happened to be less popular, probably, due to a rather poor implementation - messy texts or inconsistent volumes. The second instance

(March 25, 2019) could illustrate an unused opportunity, when eight mothers were asked to share their photos and post memories, but this information was not further shared or utilized.

The current research suggests, a user-generated content has actualized underused innovative opportunities. Such cases were noted only with regards to Case2. They related to patient-consumer narratives, e.g., #teciomeile (#fatherslove) with several posts and photos of new-borns and their mothers (October 16, 2019), later used by television. Speaking about exploited manifestations of a virtual reality, only Case1 analysis revealed a link in the Facebook account to a virtual tour (January 15, 2019) which has been a great boost and readiness to maintain functioning even during the pandemic.

Finally, the question of managerial-administrative innovations, possibly, borrowed from business, should be raised. The application of storytelling, less evident in Case 1, is ostensible in Case2. Personal patient-consumer stories were used both directly and on festive occasions to enrich the contents of holiday greetings. Case2 illustrates storytelling, pointing out the importance of feedback in effective communication with the audience. On several occasions, after real photos of medical staff were posted, the doctors got actively involved, responding, or thanking on social media. In relation to the effectiveness of communication, undoubtedly, both cases have demonstrated a lack of consistency in providing feedback. Most requests were responded to, but in some cases, answers were posted by fellow consumers, sometimes distorting the information. In the context of PMMH, a common problem was an incomplete and low-quality text. There was also a general tendency to ignore dissatisfied patients (consumers) and angry comments. The only good example observed was a heated debate between patients-consumers and the staff, following the announcement of visiting restrictions upon the approach of the pandemic, succeeded by a very polite explanation on behalf of the medical facility (March 16, 2020). This suggests an obvious need of the so-called community manager, or an assignment of this function to employees, managing social media and developing social media curator's competencies.

5. CONCLUSIONS, LIMITATIONS AND FURTHER STUDIES

In this paper, the relationship between the brand equity system components has been revealed against the background analysis of literature review, later confirmed by virtual observation results

in the two selected cases. Brand awareness appears to be the first step in building a consumer brand. Consumer's ability to recognize a product and recreate it in memory is related to brand presence in his/her mind. In consumer minds, brand awareness "connects" a brand to associations and determines their strength. The consumer perceived brand quality is among possible brand associations; consequently, the basis for its formation and strength is the brand awareness. In the instance of maternity care, associations are first formed having in mind a direct stakeholder - a pregnant woman, a mother. It should be noted that her immediate environment (family) and acquaintances are also very important who, according to the present investigation, do play in brand equity theory through consumer intentions. Then, the presented case analysis has shown a discrepancy between a planned identity and the image, created in social media, which would require targeted actions of a social media curator. The investigation has also revealed that the actions on social media, provided by the researched institutions, mostly focused on the formation of associations. However, major efforts of a social media curator need to concentrate on the associations that shape perceived quality, since those build long-term relationships with consumers.

Consumer-perceived brand quality and brand associations stand at the heart of brand loyalty formation. A high degree of consumer's brand perception and positive brand associations favourably influence brand loyalty. The overarching consumer-based brand equity is largely influenced by consumer-perceived brand quality, brand associations, and brand loyalty. Brand awareness is important, but not critical in brand equity formation. It is a consumer-perceived quality that essentially preconditions consumer's positive evaluation of a brand. Consumer-perceived brand quality leads to a more significant brand differentiation. Therefore, the higher the perceived brand quality, the stronger the brand equity. Brand associations provide an opportunity for brand differentiation and for positive brand attitude creation, which is a prerequisite for a stronger brand equity. The analysed cases and their main difference - user and usage imagery, the existence or non-existence of a brand personality - perfectly illustrate brand association benefits. According to the analysis, functional, experiential, and symbolic associations have been created. Loyal consumers respond positively to the brand, conditioning the overall consumer-based brand equity, even if physical circumstances differ, but the organization compensates their scarcity by

ardent and emotional environment. In this study, the two apparently equivalent cases turned out to be essentially different in their digital communication: infrequent, physical environment-oriented high-quality posts in one case *versus* numerous staff-/customer-oriented amateur social media posts, creating organizational associations and historical heritage - in another.

According to the given research, the undertaken marketing activities partially match organizational identity and the represented image. To increase the efficiency and effectiveness of communication management, a detailed strategical review would be suggested, together with specification and prioritization of organizational goals. Based on the research data, it could be argued that isolated, detached, and disconnected digital initiatives are little effective. The field of digital innovation could presumably bring out first-priority company activities, such as the elaboration of Facebook functionality and skills development for the use of social media. Also, cooperation among influencers could be suggested and the attribution of community manager functions encouraged to foster the provision of feedback, a major inadequacy in the cases investigated.

The reviewed situation has shown a greater organizational awareness of the pandemic challenge in Case1, than in Case2. Therefore, conducting continuing observations of communication during different stages of quarantine or other pertinent challenges, possibly, caused by geopolitical dissent, assessing the change and adaptation could be next in the study. An already established observation sheet would suite this purpose. Two more areas of further research would be medical influencers' activities and a quantitative user investigation as well as a scenario development, based on good gaming practices abroad.

Due to the present research limitations of regional- and scope-nature, already mentioned above, this study first of all serves organizations and health institutions in the region. For researchers outside those, this might be a useful example of a methodology, a direction of research that can be adapted to their own contexts. Study results broaden the knowledge and knowing of what is important to consider when managing the brand of this type of an institution. This might encourage marketers (or, in the absence of those at healthcare institutions, communication officers or responsible ones for communication functions) to look beyond healthcare organizations for good examples in brand management. Importantly enough, the present work suggests considering

the practices of highly innovative and entrepreneurial organizations on social media in as many different industries as possible, thus creating an entrepreneurial mindset which might lead to the generation of unique practices for healthcare organizations. Future research in this area is likely to focus on changes initiated during the pandemic and post-pandemic periods and on informed cases in other healthcare institutions in the country or region.

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