

**Factors Affecting the Performance of the
Communicator in Health Media and its Digital
Platforms and the Attitudes of the Public Towards
it: A Field Study**

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• **Introduction:**

Communicator is considered one of the basic elements of the communication process as he plays an effective role in the production of the media message. In addition, his ability to perform his role does not come out of thin air but is the result of many factors, including those related to his personal values and the status of the newspaper or media outlet if he is under many pressures that restrict his independence, freedom, and performance. Such pressures may restrict his ability to deploy all his energy to being a professional, as there are many pressures that affect the possibility of his adapting to this profession. Although the communicator plays a strategic role in the communication process as he leaves his mark on the media message, and shapes it according to institutional standards and pressures, he ultimately becomes the sender who is responsible for what reaches the public. By selecting and omitting news, the communicator depicts the social and cultural reality in which the whole community lives. Moreover, the communicator plays a major role in presenting news knowledge, data, and various types of information to the public. Thus, he becomes the supervisor of the process of media message production and occupies a strategic position, qualifying him to shape and direct public opinion through the presented media outputs. The professional communicator is the person who possesses the superpower of controlling code processing and uses that power to establish contact between specific people or groups. Furthermore, he is one who breaks the codes, knows certain actions and concerns of a group, and renders them in an alternative form to another group by using understandable and convincing terms. Such a role is played both vertically and horizontally to achieve communication between the elite and professional communicators of any organization or group and the general public⁽¹⁾.

Here, it could be argued that the media content is heavily influenced by the communicator's professional practice attitudes and characteristics. On the other hand, the communicator's professional practice is influenced by a variety of factors, including institutional administrative management, scientific and professional qualification, and the functional and social relationship attitudes of colleagues⁽²⁾.

The social system in which the media operates is one of the main forces affecting communicators. This is due to the fact that any social system based on values and principles seeks to adopt them and to be accepted by citizens. This is associated with “socialization”⁽³⁾.

Consequently, the communicator remains the most important part of the communication process and the main element of it both internally and externally. If he is satisfied with all aspects of the institution, including wages, promotions, and relations with other colleagues, the communicator develops his professional performance and improves his social relations represented in human relationships with journalists on the one hand, such as the desire to belong to the team work, and with the administration on the other hand, such

as authority, achievement, and responsibility in addition to work motivation which is the amount of benefits and advantages that an individual gets from his job if it satisfies his needs and aspirations⁽⁴⁾

Factors Affecting the Communicator:

Firstly: Community Standards, Values, and Traditions:

Any system based on values and principles seeks to adopt them and be accepted by citizens. This is associated with socialization. The researcher Warren Braid believes that in some cases, the communicator may not provide a complete coverage of the events going on around him, and this is not due to a failure or a negative action. Moreover, the communicator may sometimes neglect to cover some events due to his sense of social responsibility and his desire to preserve some of the individual or community virtues. The media may forego the scoop and neglect some of its responsibilities to provide all news to the public. This results from its desire to support the values and traditions of society and to protect the prevailing cultural patterns in that society⁽⁵⁾.

Secondly: Subjective Criteria of the Communicator

The characteristics and personal traits of the communicator play an important role in practicing the role of the media gatekeeper, such as gender, age, income, social class, education, intellectual or ideological affiliations, and self-esteem. Experts have paid attention to the semantic framework and experiences of the communicator, which affect his ideas and beliefs, determine his expected behavior in different communication situations, and determine what should and should not be done.

Thirdly: Professional Standards of the Communicator

The communicator is exposed to a range of professional pressures that affect his work and lead to compatibility with the policy pursued by the media institution to which he belongs. Such standards include the policy of the media channel, the available news, and work relationships and pressures. The technical standards include the policy of the media channel, available news sources, work relationships, and pressures, which are as follows:

-The Policy of the Media Institution: The action pursued by the media institution may put pressure on the communicator and requires him to pursue a particular professional thought. These pressures can be divided into external and internal factors. The external factors refer to the status of media channels in the existing social system and the extent to which the institution is connected to certain interests. All these factors play an important role in the form of the content presented to the public and end up with the communicator until he becomes an integral part of the public entity of the institution.

As for the internal factors, they include proprietary systems, methods of control, management systems, and pressure production. All these factors play an important role in the form of the content presented to the public and end up with the communicator until he becomes an integral part of the public entity of the institution. Thus, we find that many journalists consider themselves employees in the bureaucracy of news gathering, as they do not express their

ideas but the ideas of the owner of the media institution. Sources of Information: Most studies indicate that the communicator can dispense with his audience but not with his sources. Moreover, many studies have proven the strength of journal sources to the extent that they fully confine the communicator and emphasized that a journalist's attempt to become independent from news sources becomes a very hard process⁽⁶⁾

Fourthly: Audience Standards

Many researchers, such as Atil Demolabol and Schollman, have observed that the public affects the communicator just as much as he affects the public itself. In addition, the communicator's perception affects the type of news that he provides. Moreover, studies have shown that the media should satisfy their audience. Such studies conclude that communicator is in deep need to identify his audience accurately, and that his perception affects his decisions to a great extent⁽⁷⁾

Review of Related Literature:

The First Focus Point: Studies related to factors affecting the performance of communicators

- 1- A study conducted by Safaa Mohammed Al-Zoury (8) in 2019, titled "Factors Affecting the Performance of Communicators in Saudi Cinema: A Field Study". This study aimed at discovering the factors affecting the performance of communicators in Saudi cinema. The study adopted the descriptive and analytical survey approach to perform a survey on a sample of communicators in Saudi cinema in order to identify subjective factors, professional standards, and community factors affecting them. The study was based on the theory of the media gatekeeper in order to analyze and explain the factors affecting the performance of communicators in the Saudi cinema, which were identified in the standardized interview form in order to explain the results of the study within its framework. The research population consisted of: (authors, actors, directors, photographers, and producers) in the Saudi cinema who had participated in films. The study tried to make a list of them in all regions of the kingdom (the Eastern region, the Central region, the Western region, the Southern region, and the Northern region) and relied on choosing an intentional sample from them. Among the most important results of the study was that the study population determined that Saudi cinematic production falls under two types: narrative and documentary. In addition, there are three predominant types of Saudi cinematic production, which are arranged according to their importance as follows: drama (71.44%), comedy (21.43%), and crime (7.13%). As for the impact of community factors on the performance of a cinematic actor, the results also showed that the study population respondents diverged in their opinions, as 50% of the

sample believed that customs and traditions had a positive impact on actors' performances, 28.57% believed that they had no impact, and 21.43% indicated that customs and traditions had a negative impact on their performances. Moreover, the results showed that the individuals in the sample diverged in their opinion regarding the strongest impact order of the factors affecting cinematic performance. Although there is a consensus on the importance of such factors in terms of their impact, some argue that in some cases the subjective factors come in first place by 50%, while others believe that the economic factors come in first place by 21.43%. Some argue that society and its habits come first by (14.29%), while others say that professional standards have priority by (7.14%), and the audience by (7.14%). It seems that all factors (society and its habits, subjective factors, professional standards, the public, and economic factors) have an important impact on cinematic performance, except the political factors, which have no priority in terms of their impact strength.

- 2- A study conducted by Muhammad Aqlah Abu Ghazlah ⁽⁹⁾ in 2022, titled “Jordan Journal of Islamic Studies”. This study aimed at identifying the formative factors affecting the performance of the communicator and their role in convincing the public of the content of the communication message by studying these factors in the light of the Holy Quran and recent media studies. The two researchers adopted the inductive approach based on the induction of the vocabs from their scientific, legitimate, and connectivity sources. In addition, they adopted the comparative deductive approach that tends to analyze legitimate texts with communication connotations in order to deduce the formative factors of the communicator and to compare the semantics of texts with what is confirmed by the emerging communication studies. The research has concluded many results, including: There are five factors that have a direct impact on the performance of the communicator: the communicator's intention, skills, reliability, level of knowledge, and ability to be a role model for the receiver; the skill of coding in modern media terms corresponds to the skill of rhetoric in the Holy Quranic concept; the impact of the discord between credibility and the idea put forward to the public could be reduced by certain actions; the effects and interests of the social system could influence the credibility of the communicator; and other findings and recommendations.
- 3- A study conducted by Sumayya Kamel Abu Madi ⁽¹⁰⁾ in 2015, titled “Factors Affecting the Professional Performance of the Communicator While Covering the Issue of the Palestinian Division: A Comparative

Analytical Field Study”. This study aims at exploring the most important factors influencing the professional performance of the communicator in the Palestinian daily newspapers while covering the issue of the Palestinian division. In addition, the study aims at identifying the obstacles facing the communicator while obtaining information. Furthermore, the study aims at exploring the nature of the language used in the journalistic topics published in the newspapers that form the sample of the study, and analyzing the typographical elements used in highlighting the news, as well as the journalistic forms inside the newspapers subject to this study. This study is considered descriptive and analytical research in which the researcher used a survey as a methodology through which she surveyed the styles of media practices. The data of the field study was collected through a survey sheet, and a content analysis approach was adopted while collecting the analytical data of the study through the tool of content analysis. Moreover, the researcher adopts a comparative approach based on making a comparison between the two newspapers to discover the similarities and differences. The data were collected using two tools: a content analysis form and a survey sheet. The sample included Alhayat Aljadeeda and Palestine newspapers between 14\7\2007 and 14\7\2009. The analytical sample was randomly selected using the industrial week's systematic random sample, and the communicator sample was selected using the comprehensive inventory method. The most important findings of the study are: Firstly: The analytical study: 1. The results show that political issues dominate the coverage of both newspapers. 2- The results show that the general direction of Alhayat Aljadeeda and Palestine newspapers does not offer any solutions that would help ease the Palestinian political division. 3- The results show that there is a difference between the languages used by both newspapers. Instigation is the number one feature of both newspapers.

- 4- A study conducted by Hazem Mohiuddin Saleh Al-Hilw ⁽¹¹⁾ in 2018, titled “Factors Affecting the Performance of the Communicator in the Palestinian Press: A Field Study on Gaza Governorates”. The study objective is to identify the factors affecting the performance of Palestinian press employees by investigating the reality of press communicators. Study Tools: The researcher relied on two tools for collecting data from the study population: a questionnaire including factors affecting the communicators and an interview. Study Sample:

The study sample was the same as the study population. It includes all newspapers and magazines published in Gaza Strip on a regular basis and can be classified as magazines or newspapers and are not public relation releases or publicity and advertising magazines. Methodology of the Study: This study is considered descriptive research, in which the researcher adopts a media survey approach through applying professional practices methods survey. Study Theory: The researcher used the communicator theory, which is based on improving the communicator's performance and aims at examining his/her work conditions, in addition to other professional and ethical aspects that the journalist imposes on himself/herself. The most important results of the study: 1- The study showed that 30.9% of the study population respondents strongly agree that customs and traditions hinder the freedom of publishing some issues; 52.7% agree, 12.7% are neutral, and 3.6% disagree. 2- The study showed that 85.5% of the study population respondents always relied on technology to improve their professional performance. 3- It revealed that 94.5% of the respondents considered the editorial policy of the institution as one of the most influencing factors in publishing press contents. 4- It showed that 3.6% of the respondents marginalize important news conflicting with the agenda of the public, 10.9% marginalize the desire of the public, 85.5% make a balance between the presentation of important topics and the desire of the public, and 3.6% apply other methods when the news conflicts with the agenda of the public. The Most Important Recommendations of the Study: 1- Those in charge of Palestinian press institutions in Gaza Strip should neglect thoughts and community customs that hinder journalists' work and help them publish the truth. 2- They should also improve the work conditions of communicators within the institutions in a way that maintains their functional and financial rights. 3- Palestinian Journalists' Syndicate in Gaza Strip should reclaim its position, defend journalists' rights, and protect them.

The second Focus Point: Health Media Studies

- 1- A study conducted by Hanan Mujahid (12) in 2021, titled "The Role of Health Media in Crises Management: COVID-19 Pandemic as an Example". Health media is considered a form of specialized media.

Through audio-visual, written, and electronic media, it attempts to disseminate health culture and raise awareness of medical and health concepts and behaviors that help individuals avoid a lot of accidental and chronic diseases. Thus, it tries to raise the awareness of individuals to eliminate misconceptions and unhealthy behaviors. Through this article, we will try to reveal the role of health media and its importance in managing the COVID-19 outbreak crisis that has engulfed the world.

- 2- A study conducted by Fadheelah Salman Al-Basri ⁽¹³⁾ in 2021, titled “A Strategy for Building Health Media Through Creating Awareness and Entrepreneurial Culture in Institutions: A Theoretical Study”. The media has come to play an important role in receiving information at the level of individuals, societies, and institutions. Thus, this study aims at employing different forms of media and enhancing them to address health issues and to create health awareness and education properly for institutions in order to be an integral part of achieving the all-round development of the country. Therefore, it is necessary to highlight the pioneering efforts and active initiatives of individuals and institutions working in the field of health and to encourage media workers to achieve innovation and progression in the field of health media. This study focuses on how to build a health media strategy through creating awareness and an entrepreneurial culture in industrial and service institutions to achieve safety and security for their workers. This can be done when institutions promote and determine their health responsibilities towards workers and customers. The two researchers developed Carroll’s Model of Social Responsibility to be a comprehensive one through the priority setting of its elements in order to be (health, economic, social, legal, and ethical responsibility), as it lacks health responsibility. The study also provides the most important dimensions that contribute to building an entrepreneurial culture in institutions. A matter that allows building a health media strategy for institutions through awareness creation by health and media institutions to spread health awareness. Thus, successful institutions can face and avoid viruses including COVID-19 through their employees’ health awareness, which is contributed by satellite channels, radio and media, or bulletins and posters in the squares or on billboards in institutions. The institutions can achieve this through the culture of the institution, which instils in its workers the common values and habits that help prevent any epidemic, or through making use of their various media to improve the quality of work life in the institution by spreading health awareness and preventive health information. In addition, the institution can improve and develop the skills of health workers to avoid negatives and mistakes while working.

- 3- A study conducted by Dalia Othman Ibrahim ⁽¹⁴⁾ in 2019, titled “Egyptian Women’s Attitudes Towards Using Digital Media in the Health Field”. The study revealed the attitudes of Egyptian women towards the use of digital media in the health field. It adopts a survey approach. The study tool was the questionnaire form, and it was applied to an intentional sample of 266 Egyptian women and girls using digital media through which they are exposed to health content. The results of the study showed that the more the respondents read about health topics and issues through digital media, the more they benefited from digital health content, and vice versa. It also revealed the existence of statistically significant differences between the groups of respondents in the age group 18 to 35 years and the group of respondents older than 50 years in two directions towards the digital health content, while there are no statistically significant differences between the rest of the groups. The study recommended the need to train those in charge of preparing and implementing health contents and digital health campaigns and to determine the most important objectives to focus on and the conditions to meet for successful health media. It also recommended putting emphasis on the necessity of integration between media professionals and doctors in the field of health media. This abstract is written by Almandumah in 2022.

- 4- A study conducted by May Abdul Wahid Al-Khaja ⁽¹⁵⁾ in 2018, titled “Health Media in the UAE from Academic and Medical Perspectives: A Field Study Survey”. Health media seeks to raise public awareness of the health issue, influence people’s behaviors and dispel misconceptions. The objectives of health media can be realized only if media institutions adopt a clear strategy for health awareness. In addition to disseminating health awareness, the UAE health media needs to adopt a good health media strategy. Thus, the study tries to identify the main features of good health media in the UAE from academic and medical perspectives. It concludes that there is agreement among respondents to focus on specific diseases in the UAE, the importance of prevention by spreading awareness, and encouraging people to adopt good health behavior by using the available media. Moreover, it concludes that the subjects of health programs and media campaigns must stem from UAE society.

Problem of the Study

The global interest in studying the professional and ethical orientations of the communicator in general has increased, and this has been relatively reflected in the kingdom as a result of the emergence of new media outlets. In addition, the new challenges imposed by such media on the concepts and controls of freedom, objectivity, neutrality, and standards and ethics of journalism in

general as a result of reacting to events, conflicts, problems, and cultures that accompanied globalization and its media values.

This causes the communicator to experience an ongoing situation of uncertainty, waiting expectation, despair, frustration, victory, defeat, fatigue, and exhaustion, and has led to the emergence of new occupational diseases and the increase of psychological and nervous pressures in addition to their repercussions on the performance of the media professionals themselves as one of the most important external factors affecting the health media policy through which the communicator works, which in turn is reflected in the performance of the communicators' professional and functional roles.

Limitation of the Study:

- Firstly: Objective Limits:

- a) The communicator in health media and its platforms.
- b) Dependency of the Egyptian public.

- **Secondly: Time Limits:** The results of this study are based on the time period during which the study is applied, and the factors affecting the communicator in the health media and its platforms, and the attitudes of the Saudi public are tested through the distribution of the questionnaire form during the time periods of August, September, November, and March 2022, after completing the theoretical framework of the study.

- **Thirdly: Spatial Limits:** This study is limited to a sample of communicators in the health media and its platforms, and the Saudi public using health media and its platforms via the distribution of electronic forms.

• Study Variables:

- **Independent Variable:** The communicator in the health media and its platforms, and the Saudi public.
- **Mediator Variables:** The social level, economic level, gender (male or female), and the study (theoretical or practical).
- **Dependent Variable:** The attitudes of the Saudi public towards health media and its platforms.

Importance of the Study

The attempt of the study is to provide media institutions with a diagnosis and treatment of a common condition mentioned frequently in recent times, namely the decline in the professional values of media professionals and the absence of

moral and legal responsibility for media workers. Thus, the importance of the **study lies in the following:**

- The lack of Arab research and studies investigating the communicator and his relationship to the changes taking place in the Arab countries, with a focus on the Saudi society, as these changes are considered one of the factors affecting the professional performance of the communicator.
- The study aims at dealing in an objective and realistic way with the communicator in the health media, as he represents a group whose problems, constraints, concerns, pressures, and obstacles must be identified before condemning such a group and asking it to fulfil responsibilities beyond its professional and media reality and its social context in general.
- This study focuses on the communicator considered the core of the communication process.
- Raveling factors affecting the communicators and their working conditions.
- Identifying the general features and characteristics that distinguish radio communicators and understanding the nature of their relationship with their subordinates.

Objectives of the Study: The main objective of this study is to identify the factors affecting the communicator in the health media and its platforms and the attitudes of the Saudi public, in addition to a set of sub-objectives which are as follows:

- Highlighting the pressures and problems facing the communicator in the health media and its platforms and hindering his professional performance.
- The nature of the communicator's relationship with his colleagues and superiors in the health media and its platforms
- The impact of the editorial policy of the health media and its platforms on the communicator
- Pressures on the communicator in health media and its platforms
- Difficulties or problems experienced by communicators in the health media and its platforms
- Exploring factors affecting the performance of communicators and the nature of the relationship between the communicator and the superiors.
- **Study Questions:**

1. The level of job satisfaction of communicators in health media and its platforms.
2. The nature of the communicator's relationship with his colleagues and superiors in the health media and its platforms.
3. The impact of the editorial policy on the communicator in health media and its platforms.
4. Pressures and obstacles facing the communicator in health media and its platforms.

Methodology of the Study:

The study adopts the **survey approach** considered a systematic and scientific method for collecting data, information, and descriptions of the phenomenon or a group of phenomena under analysis ⁽¹⁶⁾. It is one of the most prominent approaches used in the field of media studies, as it is not limited to the use of one method in the process of data collection, but resorts to the use of various methods such as surveys, in-depth interviews, standardized observations, and other methods for collecting data and information ⁽¹⁷⁾. The survey approach is considered a standard model for collecting data from human inputs specifically and exclusively for purposes related to the total sum of these inputs or some of this total through dealing with the whole community or selected samples of it ⁽¹⁸⁾. Therefore, the study adopts the survey approach to perform a survey on the communicator and the Saudi public representing the sample of the study.

Study Tools:

Survey Sheet

The study uses the survey form in the field study of the communicator and the Saudi public to identify the extent to which they depend on the health media and its platforms to obtain information and to answer other questions that the study raises, taking into account the relative distribution of different variables such as gender, educational level, and monthly income level of respondents to identify their views on the subject of the study.

Identifying the Concepts of the Study:

The Communicator: The communicator who provides media production plays a critical and direct role in the creation of the media message and in the comprehension and prediction of the impact of communication. The perception of the recipient of the communicator or the source plays an essential role in determining the results of the persuasion process ⁽¹⁹⁾.

The Study Population

The study population consists of the communicator and the Saudi public.

Study Sample

Scientific research is usually conducted on samples representing the whole community under research, as it is impossible in most cases to conduct research on the whole community. When the samples are selected properly, they provide results with a level of accuracy equal to what we get when the research is conducted on the whole community.⁽²⁰⁾

Thus, the sample is a set of units under analytical study that shall typically represent the original community, and its results can be generalized to that community⁽²¹⁾.

The answers are analyzed quantitatively, and a set of objective and scientific results are derived from them. At the end of this research, the researcher comes up with a set of scientific recommendations.

Due to the nature of this research conducted in terms of the subject, methodology, and research population, and due to the lack of a detailed data on the communicator and Saudi public, an intentional sample of 400 individuals from users of journalistic and social media websites.

Reliability and Validity Tests:

Reliability and validity tests are conducted on the questionnaire, as it is presented to a jury of professors of media, and modifications are reviewed according to the jury's view⁽²²⁾.

Reliability Test: The researcher conducts the reliability test for the questionnaire by applying the reliability re-test test. The pretest is applied to a sample of (20) individuals out of the sample of the Saudi public and the communicator. Then the test is reapplied to the same sample two weeks after the pretest is applied. The correlation coefficient between the first and second application is calculated, and the reliability coefficient is 0.89, which indicates the reliability of the questionnaire.

Theoretical Frameworks of the study:

This study adopts "Media Dependency Theory" which assumes that media messages can achieve a wide range of cognitive, emotional, and behavioral effects when media systems provide distinct and vital information services. The possibility of influence increases significantly when there is a high degree of structural instability in the community due to conflict and change, and the public's dependency on the media sources increases during times of conflict and social change. Thus, it is assumed that the dependency of the public on media information sources in communities with developing media systems increases during times of increased instability or conflict, i.e., The intensity of an individual's dependency is positively linked to the perception of threats.

The dependency on media increases if the ability to receive the needed information through personal sources of communication is restricted⁽²³⁾. The media system is important for the community, and the degree of the community's dependency on it increases when it satisfies the needs of the public and decreases when alternative channels of information are found⁽²⁴⁾. In order to work efficiently, mass media depend on resources controlled by other political, economic, and social systems, and this can be described as an interdependent relationship as media and other organizations cannot work efficiently without depending on each other⁽²⁵⁾. The public differs in the degree of its dependency on media as a result of differences in interests, goals, and individual needs⁽²⁶⁾. Individuals who depend on a particular type of media are better able to extract information from their exposure to such media. The greater the type of dependency, the greater the degree of cognitive effects, level of attention and emotional excitement, and love or hate for the content provided during exposure.

The dependency on mass media results in several different cognitive, affective, and behavioral effects that represent different attitudes toward change in cognition, emotion, or behavior⁽²⁷⁾. Public dependency on mass media occurs due to the pursuit of three main objectives: understanding, guidance, and entertainment.

The more complex the community, the more personal goals, requiring access to information sources through the media, are achieved, and dependency on mass media is not equally achieved among the members of a particular community. The social structure of individuals is a key factor in understanding the differences among models of dependency on mass media, and the structure of the community is determined by class variables, social status, power, and structural location, including variables such as: income, education, age, and gender as income may limit access to certain media and education may limit the ability of individuals to process information from mass media⁽²⁸⁾.

One of the criticisms of the theory is that it does not examine the role of personal communication channels such as communication within a group or communication within organizations, although the attitude is increasing towards maximizing the amount of information received by the individual from personal communication networks, and the theory lacks objective supporting evidence. This is due to the difficulty of conducting a large-scale study that includes all the variables of the theory⁽²⁹⁾. The application of this theory requires, first and foremost, agreement on terminologies, determination of the important ones, and application of them; correlation of different models in order to create a perfect relationship between them and the meanings derived from the content to which the individual is exposed; shifting the focus from the individual to the relationship of application; and creation of a perfect relationship with the largest social systems. This requires too much scientific

effort from experts and researchers to expand the theory and its applications in order to examine its relationship to the impacts of mass media on the individual first and then on the community ⁽³⁰⁾. Media dependency theory is based on triangular relationships consisting of the social system, mass media, and the public. However, most research examine the dependency approach only at the level of individuals, or individual.

Thus, it examines the dependency dimensions and effects resulting from the dependency of individuals on different forms of mass media without focusing on the social system and groups. Consequently, its reliance on the experiences of a community with structural and functional features may limit its ability to be generalized to other communities in international environments. Moreover, the theory does not determine the relationship between every element of the community and the media system.

For example, what is the extent of the effects of economic conditions? What is the impact of political philosophy on the formation of the media system? ⁽³¹⁾. The rationale for adopting Dependency Theory in this study and the method of its application in the field study is that the theory includes cognitive, affective, and behavioral effects. The study has benefited from this model of impacts that determines the extent of the factors affecting the performance of the communicator in health media and its digital platforms, and the attitudes of the public towards it: A field study. Since this study includes cognitive, affective, and behavioral effects, this indicates the suitability of Dependency Theory for this study, as it helps identify the resulting impacts on the public due to this dependency.

As a result, one finds Mass Media Dependency Theory is considered appropriate for this study.

Results of the Study

Firstly: Results of the Study (the communicator)

Table No. (1) shows the reasons that prompted you to work in health media and its digital platforms

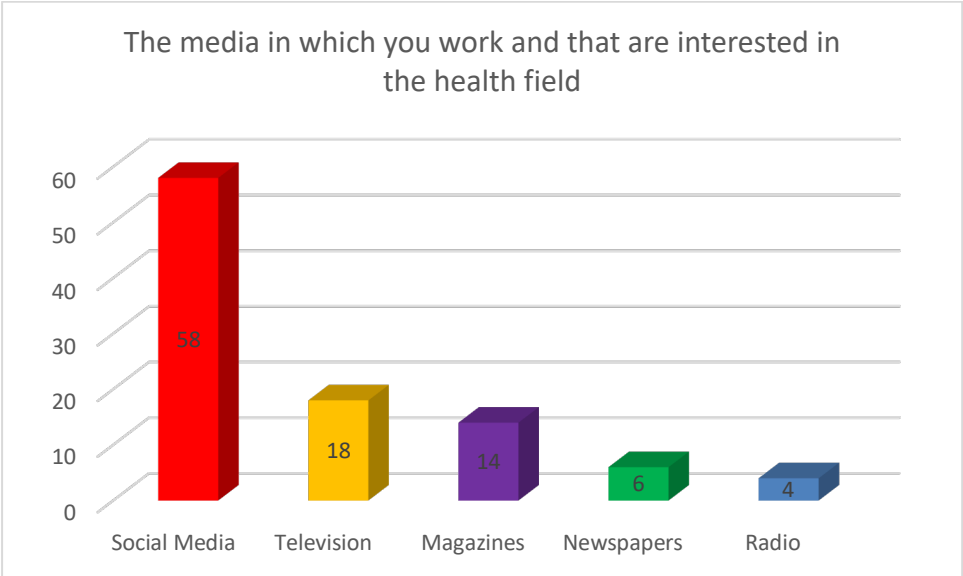
Reasons that prompted you to work in health media and its digital platforms	Numbers	%
Fits your preferences	38	76.0
Influenced by a successful media figure	38	76.0
There's no other job for me	36	72.0
Fits your specialty	31	62.0
A nice little earner	30	60.0
Provide fame and prestige	24	48.0
Total	⁽³²⁾ .	

It is clear from Table No. (1) that “fits your preferences” and “influenced by a successful media figure” ranked first with a percentage of 76.0% among the reasons that prompted you to work in health media and its digital platforms. In the second rank came “There's no other job for me” with a percentage of 72.0%, and in the third rank came “Fits your specialty” with a percentage of 62.0%, then came the rest categories in different percentages. This is due to the issues related to health information and the public's reliance on multiple sources in the search for health information, improving individual and community health and reducing the incidence of disease, disability, and mortality.

Table No. (2) shows the media in which you work and are interested in the health field

The media in which you work and that are interested in the health field	Numbers	%
Social Media	29	58.0
Television	9	18.0
Magazines	7	14.0
Newspapers	3	6.0
Radio	2	4.0
Total	50	100.0

Figure No. (1) shows the media in which you work and are interested in the health field



It is clear from Table No. (2) that “Social media” ranked first with a percentage of 58.0% among the media in which you work and are interested in the health field. In the second rank came “Television” with a percentage of 18.0%, and in the third rank came “Magazines” with a percentage of 14.0%, then came the rest categories in different percentages successively. This may be due to the ability of social media platforms to attract users because of their capabilities

and features that led to their spread, such as their interactive and mass features and transcendence of geographical borders. This made it one of the most prominent sources to obtain information during periods of crises and the spread of epidemics in different countries of the world. The results of this study are consistent with the study conducted by Ali (33) in 2017, which found that social media platforms represented by Facebook contribute to the dissemination of health information issued by official authorities and deepen the degree of communication between users and health authorities.

Table No. (3) shows the characteristics that must be met by the communicator in health media and its digital platforms

The characteristics that shall be met by the communicator in health media and its digital platforms	Numbers	%
Ability to integrate into the community, recognize its details, and seek out problems	39	78.0
Ability to work under pressure in the institution	37	74.0
Highly cultured	31	62.0
Having the ability to use Arabic properly and strongly	25	50.0
Gaining a specialized qualification	20	40.0
Total	(34).152	

It is clear from Table No. (3) that “Ability to integrate into community, recognize its details and seek out problems” ranked first with a percentage of 78.0% among the characteristics that shall be met by the communicator in health media and its digital platforms. In the second rank came “Ability to work under pressure in the institution” with a percentage of 74.0%, and in the third rank came “Highly cultured” with a percentage of 62.0%, then came the rest categories in different percentages successively.

Table No. (4) Shows the administrative and technical factors affecting the performance of the communicator

Administrative and technical factors affecting the performance of the communicator	Numbers	%
- My work in the health institution enhances <i>my social status</i>	38	76.0
- Administrative and moral appreciation	30	60.0
- Provides the opportunity for promotion in health work	27	54.0
- Source of news or information	27	54.0
- The constitution guarantees my rights and duties as a media professional	27	54.0
- Lack of desire among employees to keep up with the technical development	26	52.0
My family problems are affecting my work	26	52.0
My salary is commensurate with my living requirements	23	46.0
Material incentive or motivation	23	46.0

Media Policy	21	42.0
My salary differs from that of those working in other institutions	21	42.0
Work ethics	20	40.0
Organizing structured and specialized training sessions to improve performance	17	34.0
Insufficient attention of the site management to the content of the provided material	16	32.0
Adherence to the standards of accuracy and objectivity	14	28.0
Decision-making bias in the institution's sites	10	20.0
Lack of professional skills of workers	10	20.0
Being influenced by the directives of superiors while drafting the communication message	7	14.0
Total	(35).	383

It is clear from Table No. (4) that the “Administrative and moral appreciation” ranked first with a percentage of 76.0% among the administrative and technical factors affecting the performance of the communicator. In the second rank came “My work in the health institution enhances my social status” with a percentage of 60.0%, and in the third rank came “Provides the opportunity for promotion in health work” with a percentage of 54.0%, then came the rest categories in different percentages successively. This may be due to the fact that workers are considered the core component of health services and contribute to the well-being of communities. As for workplaces in the health services sector, they are complex and potentially dangerous environments at times.

In addition, unsafe working conditions can lead to a decrease in the workforce in the health services sector. Appropriate working conditions in this sector shall take into account the health and welfare of workers, as the quality of care provided by health workers depends partially on the quality of their work environment.

Table No. (5) shows the factors affecting the performance of the communicator

Factors affecting the performance of the communicator	Numbers	%
Adherence to the standards of accuracy and objectivity	45	90.0
Organizing structured and specialized training sessions to improve performance	45	90.0
Insufficient attention of the health media and its platforms to the content of the provided material	40	80.0
Decision-making bias in the health media and its platforms	35	70.0
Decision-making bias in the health media and its platforms for which I work provides me with a sense of accomplishment	34	68.0
Difficulty of my work in the health media and its platforms which takes a lot of mental and physical energy	33	66.0
Attitudes of the direct superior	32	64.0
Media policy of health institution	30	60.0

Being influenced by the attitudes of your superiors while drafting the communication message in the health media and its platforms	27	54.0
Work ethics	27	54.0
Source of news or information	16	32.0
Funding sources	16	32.0
Total	⁽³⁶⁾ .380	

It is clear from Table No. (5) that “Adherence to the standards of accuracy and objectivity” and “Organizing structured and specialized training sessions to improve performance” ranked first with a percentage of 90.0% among the factors affecting the performance of the communicator. In the second rank came “Insufficient attention of the health media and its platforms to the content of the provided material” with a percentage of 80.0%, and in the third rank came “Decision-making bias in the health media and its platforms for which I work provides me with a sense of accomplishment” with a percentage of 68.0%, then came the rest categories in different percentages successively. This may be due to the concerns of governments, institutions, and individuals all over the world. In addition to the consequences of quarantine, and the exceptional restrictions on some rights for a purpose related to human dignity.

Table No. (6) shows the economic factors affecting the professional performance of the communicator

Economic factors affecting the professional performance of the communicator	Numbers	%
The wages in the health media and its platforms for which I work differ from that of those working in other media	45	90.0
My salary is commensurate with my living requirements	39	78.0
My salary is commensurate with the work I'm doing in the health media	33	66.0
Total	⁽³⁷⁾ .117	

It is clear from Table No. (6) that “The wages in the health media and its platforms for which I work differ from that of those working in other media” ranked first with a percentage of 90.0% among the economic factors affecting the professional performance of the communicator. In the second rank came “My salary is commensurate with my living requirements” with a percentage of 78.0%, and in the third rank came “My salary is commensurate with the work I'm doing in the health media” with a percentage of 66.0%, then came the rest categories in different percentages successively.

Table (7) shows the factors affecting the communicator while doing his criticizing job in the health media and its platforms

Factors affecting the communicator while doing his criticizing job in the health media and its platforms	Numbers	%
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Values, customs, and traditions prevailing in the community	39	78.0
Social interests of the health media and its platforms, and the social forces expressing them	39	78.0
Publication laws and the related governing regulation	32	64.0
The pattern of ownership of health media and its platforms	27	54.0
Characteristics and affiliations of the public of health media and its platforms	27	54.0
The economic interests of the newspaper and its funding sources	16	32.0
Total	(38).180	

It is clear from Table No. (7) that “Values, customs, and traditions prevailing in the community” and “Social interests of the health media and its platforms, and the social forces expressing them” ranked first with a percentage of 78.0% among the factors affecting the communicator while doing his criticizing job in the health media and its platforms. In the second rank came “Publication laws and the related governing regulations” with a percentage of 64.0%, and in the third rank came “The pattern of ownership of health media and its platforms” and “Characteristics and affiliations of the public of health media and its platforms” with a percentage of 54.0%, then came the rest categories in different percentages successively. This may be due to the fact that a man lives in a way that conforms to the living conditions, customs and traditions prevailing in the community. They are things that we used to have in one way or another, despite the antiquity and strangeness of some of them, in addition to our ignorance of the extent to which we need some of them in our lives, and the difficulty of dispensing with them because they have no positive effect on life.

Table No. (8) shows the attitudes towards legal obligations that the communicator shall comply with

The attitudes towards legal obligations that the communicator shall comply with	Numbers	%
Avoidance of lese-majesty or insulting the ruling family	45	90.0
Obligation not to defame religions	39	78.0
Non-disclosure of any military information of the Kingdom	39	78.0
Compliance with good faith regarding the information published	39	78.0
Avoidance of incitement against national unity and social peace	39	78.0
Compliance with professional integrity	33	66.0
Avoidance of publishing anything that affects relations with friendly countries	33	66.0
Compliance with publication bans issued in certain cases	33	66.0
Avoidance of exposure to the private life of a public employee except that related to his job	27	54.0
Avoiding the dissemination of false news	27	54.0
Avoidance of slander and defamation	23	46.0
Non-disclosure of any information related to the secrets of the Kingdom	16	32.0

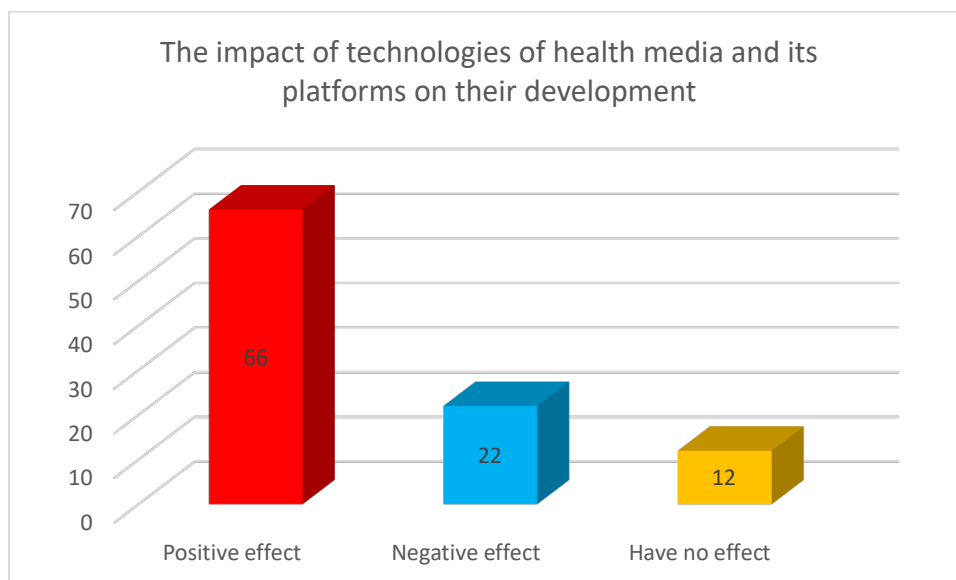
Total	(39).393
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It is clear from Table No. (8) that “Avoidance of lese-majesty or insulting the ruling family” ranked first with a percentage of 90.0% among the attitudes towards legal obligations that the communicator shall comply with. In the second rank came “Obligation not to defame religions” with a percentage of 78.0%, and in the third rank came “Compliance with professional integrity” with a percentage of 66.0%, then came the rest categories in different percentages successively.

Table No. (9) shows the impact of technologies in health media and its platforms on their development

The impact of technologies of health media and its platforms on their development	Numbers	%
Positive effect	33	66.0
Negative effect	11	22.0
Have no effect	6	12.0
Total	50	100.0

Figure No. (2) shows the impact of technologies in health media and its platforms on their development



It is clear from Table No. (9) that “Positive effect” ranked first with a percentage of 66.0% among the impacts of technologies in health media and its platforms on their development. In the second rank came “Negative effect” with a percentage of 22.0%, and in the third rank came “Have no effect” with a percentage of 12.0%, then came the rest categories in different percentages successively. This may be due to the transfer of global experience in health and medicine and highlighting related experiences and issues to benefit from.

Table No. (10) Shows legal restrictions that they find difficult for the communicator to comply with

Legal restrictions that they find difficult for the communicator to comply with	Numbers	%
Publication bans affecting the course of justice	45	90.0
Prohibition of publishing employees' statements without written permission from their superiors	39	78.0
Prohibition of publishing names in divorce, separation, and adultery proceedings	39	78.0
Prohibition of publishing news destabilizing the confidence in the economic situation of the country	33	66.0
Prohibition of publishing names and photographs in juvenile cases	27	54.0
Prohibition of commenting on court rulings	21	42.0
Total	(40).204	

It is clear from Table No. (10) that “Publication bans affecting the course of justice” ranked first with a percentage of 90.0% among the legal restrictions that they find difficult for the communicator to comply with. In the second rank came “Prohibition of publishing employees' statements without written permission from their superiors” with a percentage of 78.0%, and in the third rank came “Prohibition of publishing news that destabilizing the confidence in the economic situation of the country” with a percentage of 66.0%, then came the rest categories in different percentages successively. This may be due to the fact that incitement which by law is a crime. Incitement is the encouragement of a person or persons to carry out acts contrary to the law, and it doesn't matter whether such incitement is direct or not, or whether it has an effect or not. In any case, the law contains provisions for dealing with incitement.

Table No. (11) shows a vision of how to protect yourselves from being under the penalty of the law

A vision of how to protect yourselves from being under the penalty of law	Numbers	%
Understating laws organizing work	34	68.0
Refer to the legal advisor of health media and its platforms if you have a problem	27	54.0
Being accurate when collecting information	23	46.0
Attempting to obtain documents whenever possible	21	42.0
Avoid using vulgar words	21	42.0
Total	(41).126	

It is clear from Table No. (11) that “Understating laws organizing work” ranked first with a percentage of 68.0% among visions of how to protect yourselves from being under the penalty of law. In the second rank came “Refer to the

legal advisor of health media and its platforms if you have a problem” with a percentage of 54.0%, and in the third rank came “Being accurate when collecting information” with a percentage of 46.0%, then came the rest categories in different percentages successively. This may be due to the set of rules regulating the relationships between the employer and the employee. It is a branch of private law concerned with regulating the relationships among individuals.

Table No. (12) shows work pressures affecting the performance of the communicator

Work pressures affecting the performance of the communicator	Numbers	%
Customs and traditions restrict me at work	29	58.0
There is a contradiction between the ethics and codes of conduct followed by health media and its platforms	16	32.0
Stick to my opinions and views when doing my work	16	32.0
Conventions and legislations guide my performance at work	12	24.0
Non-compliance with conventions and legislations is possible to increase the agency's revenues	11	22.0
Sometimes I agree to do a work contradicting with my values and ethics	10	20.0
Total	(42).94	

It is clear from Table No. (12) that “Customs and traditions restrict me at work” ranked first with a percentage of 58.0% among the work pressures affecting the performance of the communicator. In the second rank came “There is a contradiction between the ethics and codes of conduct followed by health media and its platforms” with a percentage of 32.0%, and in the third rank came “Conventions and legislations guide my performance at work” with a percentage of 24.0%, then came the rest categories in different percentages successively. This may be due to the fact that each society has its own nature, characters, melodies, musical instruments and foods, as well as many customs, traditions, and values.

Table No. (13) shows the relationship between the communicator and his colleagues

Relationship between the communicator and his colleagues	Numbers	%
My superior doesn't accept my views and ideas at work	39	78.0
Relations of love and respect are prevalent between my superior and agency staff members.	33	66.0
I feel that there's an unfair competition between me and my colleagues	27	54.0
I exchange pleasantries and social visits with my colleagues out of work	27	54.0
My superior is so irritable in his treatment of me	21	42.0
Relations of understanding, cooperation, and affection are felt between me and my colleagues	21	42.0

Colleagues in health media and its platforms help each other	6	12.0
Total	⁽⁴³⁾ .174	

It is clear from Table No. (13) that “My superior doesn't accept my views and ideas at work” ranked first with a percentage of 78.0% among the relationships between the communicator and his colleagues. In the second rank came “Relations of love and respect are prevalent between my superior and agency staff members” with a percentage of 66.0%, and in the third rank came “I feel that there's an unfair competition between me and my colleagues” with a percentage of 54.0%, then came the rest categories in different percentages successively. This may be due to the fact that dealing with a hard nut to crack superior is a challenge to any person to either prove his efficiency or failure. This, in fact, is worthy of study and application at the same time, as you should first understand the reasons that lead the superior to deal with you and your other colleagues in this manner.

Table No. (14) shows the types of control you are exposed to

Types of control you are exposed to	Numbers	%
self-control	33	66.0
Mass control	27	54.0
Direct control from the superior	21	42.0
Kingdom control through legislation and laws	11	22.0
Total	⁽⁴⁴⁾ .92	

It is clear from Table No. (14) that “Self-control” ranked first with a percentage of 66.0% among the types of control you are exposed to. In the second rank came “Mass control” with a percentage of 54.0%, and in the third rank came “Direct control from the superior” with a percentage of 42.0%, then came the rest categories in different percentages successively. This may be due to the fact that most publishing and printing laws and press legislations impose obligations on the communicator to practice self-control or self-deletion. Thus, the media machine becomes a burden on the community instead of being an effective element contributing to the fight against social scourges, participating in enlightening public opinion, and involving it in resolving many important issues in the community.

Table No. (15) shows the demographic variable (gender) of the sample

Sample Type	Numbers	%
Males	39	78.0
Females	11	22.0
Total	50	100.0

It is clear from Table No. (15) that the sample consists of 78.0% males, and 22.0% females, so that gender can be tested as a mediator variable.

Table No. (16) shows the demographic variable (age) of the sample

Sample (age)	Numbers	%
From 45 to less than 55 years old	33	66.0
From 35 to less than 45 years old	17	34.0
Total	50	100.0

It is clear to us from Table No. (16) that the age that ranked first was “From 45 to less than 55 years old” with a percentage of 66.0%, and in the second rank came “From 35 to less than 45 years old” with a percentage of 34.0%. Thus, age can be tested as a mediator variable.

Table No. (17) shows the demographic variable (education) of the sample

Sample (education)	Numbers	%
Bachelor or licentiate degree	28	56.0
Master’s degree	17	34.0
PhD	5	10.0
Total	50	100.0

It is clear from Table No. (17) that the academic qualification (Bachelor or licentiate) came first with a percentage of 56.0%. In the second rank came (master’s degree) with a percentage of 34.0%, and in the third rank came (PhD) with a percentage of 10.0%. Basic education was neglected in the sample; thus education level can be tested as a mediator variable.

Table No. (18) shows the demographic variable (income) of the sample

Sample (Income)	Numbers	%
More than 5000	39	78.0
From 1000 to 2000	11	22.0
Total	50	100.0

It is clear from Table No. (18) that “more than 5000” ranked first with a percentage of 78.0%, and in the second rank came “from 1000 to 2000” with a percentage of 22.0%, so that the income level can be tested as a mediator variable.

Secondly: Results of the Study (the public)

Table No. (19) shows the extent of using health media and its platforms

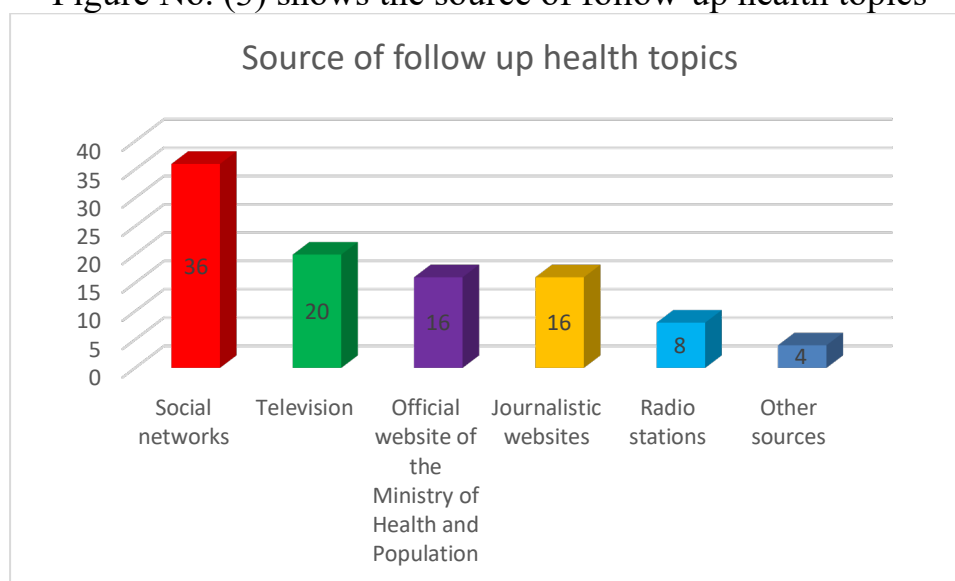
The extent of using health media and its platforms	Numbers	%
Always	224	56.0
Sometimes	96	24.0
Seldom	80	20.0
Total	400	100.0

It is clear from Table No. (19) that “Always” ranked first with a percentage of 56.0% among the extent of using health media and its platforms. In the second rank came “Sometimes” with a percentage of 24.0%, and in the third rank came “rarely” with a percentage of 20.0%, then came the rest categories in different percentages.

Table No. (20) shows the source of follow-up health topics

Source of follow up health topics	Numbers	%
Social networks	144	36.0
Television	80	20.0
Official Website of the Ministry of Health and Population	64	16.0
Journalistic websites	64	16.0
Radio stations	32	8.0
Other sources	16	4.0
Total	400	100.0

Figure No. (3) shows the source of follow-up health topics



It is clear from Table No. (20) that “Social networks” ranked first with a percentage of 36.0% among the sources of follow-up health topics. In the second rank came “Television” with a percentage of 20.0%, and in the third rank came “Official Website of the Ministry of Health and Population” with a

percentage of 16.0%, then came the rest categories in different percentages successively. This may be due to the fact that social media is considered an essential means to raise public awareness of new, emerging, and annual health problems. Raising awareness may be as simple as reminding followers of good practices or addressing the concerns of a healthy and common lifestyle.

Table No. (21) shows the most remembered elements by the respondent

The most remembered elements by the respondent	Numbers	%
The idea	400	100.0
Voice over	400	100.0
Dialogic text	384	96.0
Figures employed	384	96.0
The information received	384	96.0
Soundtracks	368	92.0
Graphic shapes used	80	20.0
Song used	352	88.0
Total	⁽⁴⁵⁾ .2752	

It is clear from Table No. (21) that “The idea” ranked first with a percentage of 100.0% among the most remembered elements by the respondent. In the second rank came “Dialogic text” with a percentage of 96.0%, and in the third rank came “Soundtrack” with a percentage of 92.0%, then came the rest categories in different percentages successively. This may be due to the idea upon which editors, radio or television professionals, or public relations specialists plan to implement their topics, shows, and articles which differentiate between what’s right and what’s wrong.

Table No. (22) shows the reasons behind depending on health media and its platforms

The reasons behind depending on health media and its platforms	Numbers	%
It shapes my attitudes and convictions on health issues and topics	400	100.0
The ability to use it at any time, and anywhere.	400	100.0
It supports topics with texts, images, and videos.	368	92.0
It identifies the health risks and anticipates them before they happen.	368	92.0
It helps me understand and recognize the dimensions of the health issue	336	84.0
It helps me take certain decisions in the health aspect.	336	84.0
It helps me eliminate stress and anxiety	336	84.0
Total	⁽⁴⁶⁾ .159	

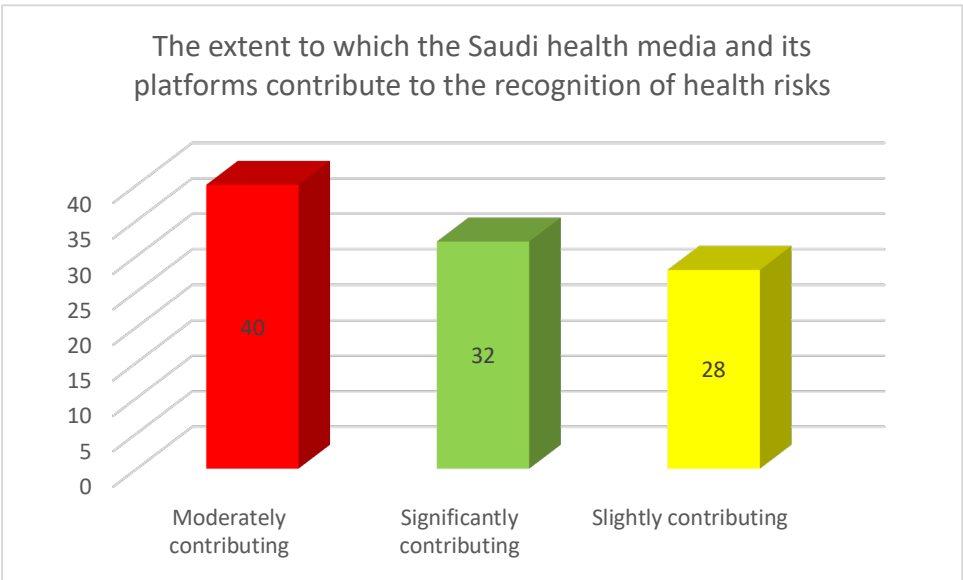
It is clear from Table No. (22) that “It shapes my attitudes and convictions on health issues and topics” ranked first with a percentage of 100.0% among the

reasons behind depending on health media and its platforms. In the second rank came “The ability to use it at any time, and anywhere” with a percentage of 92.0%, and in the third rank came “It helps me understand and recognize the dimensions of the health issue” with a percentage of 84.0%, then came the rest categories in different percentages successively. This may be due to that fact that the media is more influential in the public because of its high credibility, and that this type of media is better able to target the reader's mind to influence his knowledge, logic, views, and attitudes. In addition, the media has played important roles in addressing the wrong behaviors of individuals and their views and attitudes towards many negative phenomena in the field of health.

Table No. (23) shows the extent to which the Saudi health media and its platforms contribute to the recognition of health risks

The extent to which the Saudi health media and its platforms contribute to the recognition of health risks	Numbers	%
Moderately contributing	160	40.0
Significantly contributing	128	32.0
Slightly contributing	112	28.0
Total	400	100.0

Figure No. (4) shows the extent to which the Saudi health media and its platforms contribute to the recognition of health risks



It is clear from Table No. (23) that “Moderately contributing” ranked first with a percentage of 40.0% among the extents to which the Saudi health media and its platforms contribute to the recognition of health risks. In the second rank came “Significantly contributing” with a percentage of 32.0%, and in the third rank came “Slightly contributing” with a percentage of 28.0%, then came the

rest categories in different percentages successively. In fact, this is consistent with the study conducted by Mohammed Talal Abbas Al-Musawi⁽⁴⁷⁾. Respondents' assessments of the success of health awareness campaigns via such media in the Kingdom for the new Coronavirus COVID-19 vary. The majority of respondents (69.3%) stated that the role of the campaigns is “excellent”, then consider it "good" with a percentage of (25.5%), followed by “acceptable” with a percentage of (4.5%), and finally “very weak” with a percentage of (0.5%).

Table No. (24) shows the reasons behind not depending on health media and its platforms

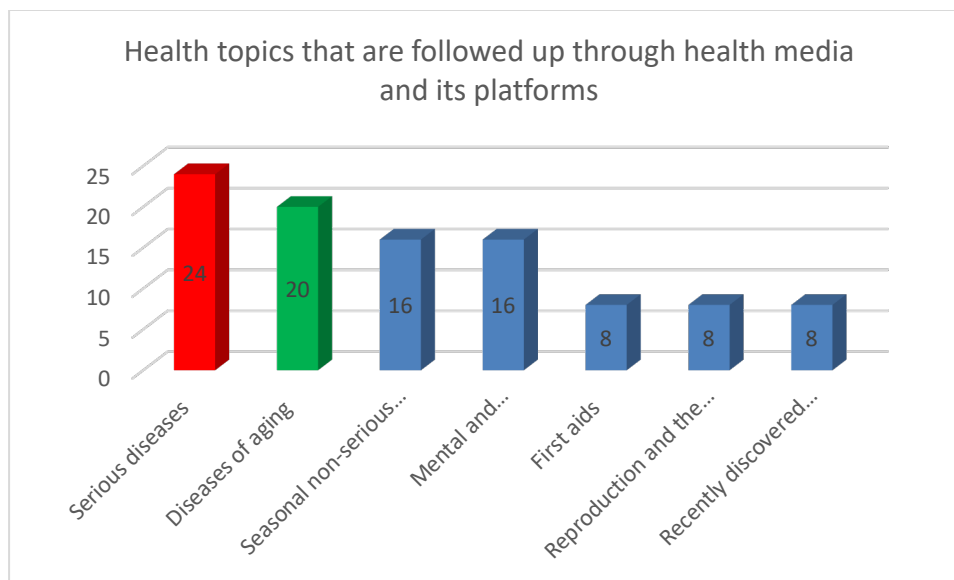
The reasons behind not depending on health media and its platforms	Numbers	%
Not presenting all health and psychological aspects for those who are infected	384	96.0
Not presenting live models for those who are infected	384	96.0
Interested only in presenting symptoms and not in prevention methods	368	92.0
No focus is placed on the violations resulting from the public’s non-compliance with health instructions	320	80.0
All public's questions about their health are not answered	304	76.0
Total	(48).1760	

It is clear from Table No. (24) that “Not presenting all health and psychological aspects for those who are infected” ranked first with a percentage of 96.0% among the reasons behind not depending on health media and its platforms. In the second rank came “Interested only in presenting symptoms and not in prevention methods” with a percentage of 92.0%, and in the third rank came “No focus is placed on the violations resulting from the public’s non-compliance with health instructions” with a percentage of 80.0%, then came the rest categories in different percentages successively. This may be due to the fact that health awareness is considered a tool for enhancing health, as it is one of the important factors helping individuals enjoy good health and the cornerstone of positive change in the behavior of individuals and communities.

Table No. (25) shows the health topics that are followed up through health media and its platforms

Health topics that are followed up through health media and its platforms	Numbers	%
Serious diseases	96	24.0
Diseases of aging	80	20.0
Seasonal non-serious diseases	64	16.0
Mental and psychological health	64	16.0
First aids	32	8.0
Reproduction and the health of women and children	32	8.0
Recently discovered diseases	32	8.0
Total	400	100.0

Figure No. (5) shows the health topics that are followed up through health media and its platforms



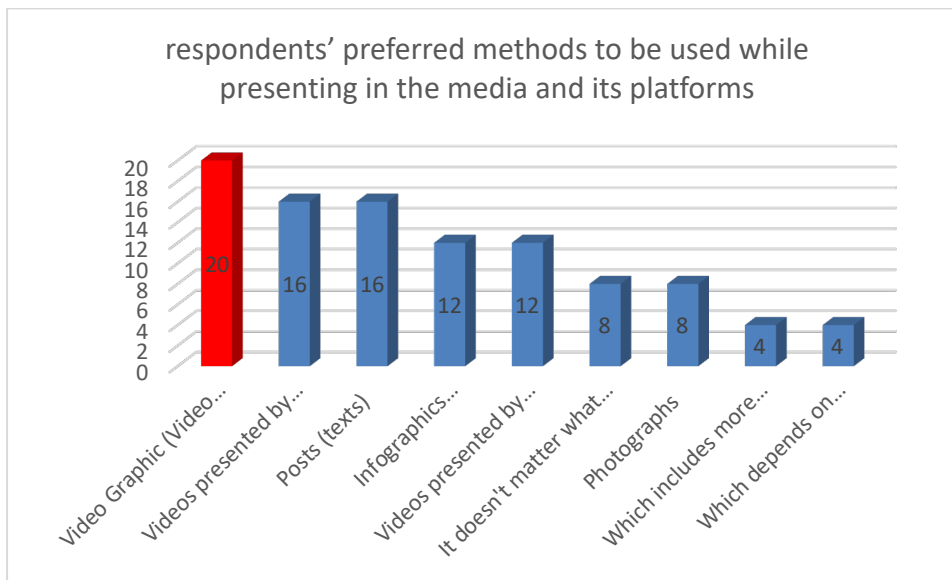
It is clear from Table No. (25) that “Serious diseases” ranked first with a percentage of 24.0% among the health topics that are followed up through health media and its platforms. In the second rank came “Diseases of aging” with a percentage of 20.0%, and in the third rank came “Seasonal non-serious diseases” with a percentage of 16.0%, then came the rest categories in different percentages successively. This may be due to the fact that while communities, despite their different levels of progress or delay, are exposed to waves of chronic diseases and epidemics, the problem of specialized media coverage of health and medical affairs in the Arab world, and the related diseases, injuries, infections, diagnosis, coping with, and treatment. This problem raises a lot of questions worthy of research in order to reach an effective role for the media in addressing this matter in a way that contributes to increasing public knowledge, raising the degree of health awareness, correcting health and medical behaviors, and ensuring a balanced presentation of facts and information, especially at times of crises.

Table No. (26) shows the respondents’ preferred methods to be used while presenting in the media and its platforms

Respondents’ preferred methods to be used while presenting in the media and its platforms	Numbers	%
Video Graphic (Video with Illustrative Information)	80	20.0
Videos presented by doctors and officials	64	16.0
Posts (texts)	64	16.0
Infographics (information with illustrations)	48	12.0
Videos presented by actors and famous people	48	12.0
It doesn't matter what form it's presented in. I focus on the content.	32	8.0

Photographs	32	8.0
Which includes more than one form	16	4.0
Which depends only on numbers	16	4.0
Total	400	100.0

Figure No. (6) shows the respondents' preferred methods to be used while presenting in the media and its platforms



It is clear from Table No. (26) that “Video Graphic (video with illustrative information)” ranked first with a percentage of 20.0% among the respondents' preferred methods to be used while presenting in the media and its platforms. In the second rank came “Videos presented by doctors and officials” with a percentage of 16.0%, and in the third rank came “Infographics (information with illustrations)” with a percentage of 12.0%, then came the rest categories in different percentages successively. This may be due to the fact that motion graphic videos will be the best choice if you want to make an emphasis on a certain fact or present established features, and if you want to strengthen some deep and emotional meanings through promotional video. The content that contributes to e-marketing varies between blogs written about the specialties of the doctor or hospital and about different and modern treatment methods, and videos of all kinds, such as animated graphic videos and life videos, or publishing the content on social media platforms.

Table No. (27) shows the effects resulting from the public's reliance on the health media and its platforms as a source of health information

The effects resulting from the public's reliance on the health media and its platforms as a source of health information	Numbers	%
Increasing my knowledge of health topics and their different dimensions	400	100.0
Increasing my fears of some diseases and epidemics	400	100.0

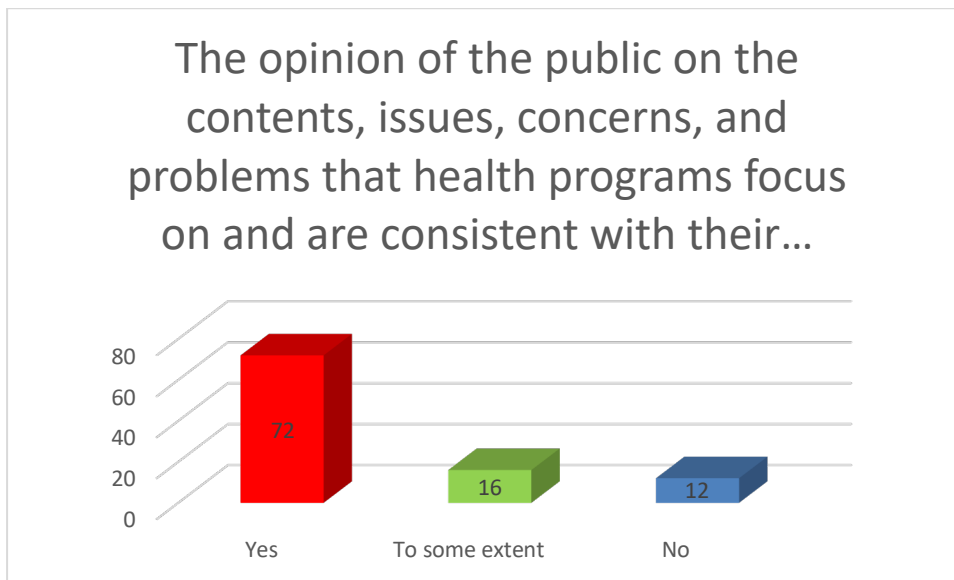
Reassuring me and reducing my fears of diseases and epidemics	368	92.0
Changing some of my useless health behaviors	368	92.0
Providing me with material to benefit from in my discussions with my colleagues	368	92.0
helping me quit negative eating habits	320	80.0
Recognizing the importance of regular examinations and consultations with a doctor	320	80.0
Not trusting in or dealing with what's called traditional medicine	320	80.0
Total	(49).2864	

It is clear from Table No. (27) that “Increasing my knowledge of health topics and their different dimensions” and “Increasing my fears of some diseases and epidemics” ranked first with a percentage of 100.0% among the effects resulting from the public's reliance on the health media and its platforms as a source of health information. In the second rank came “Reassuring me and reducing my fears of diseases and epidemics” and “Providing me with material to benefit from in my discussions with my colleagues” with a percentage of 92.0%, and in the third rank came “Recognizing the importance of regular examinations and consultations with a doctor” with a percentage of 80.0%, then came the rest categories in different percentages successively. This may be due to the recognition of their needs and desires and the provision of some solutions to their problems and diseases.

Table No. (28) shows the opinion of the public on the contents, issues, concerns, and problems that health programs focus on and are consistent with their interests

The opinion of the public on the contents, issues, concerns, and problems that health programs focus on and are consistent with their interests	Numbers	%
Yes	288	72.0
To some extent	64	16.0
No	48	12.0
Total	400	100.0

Figure No. (7) shows the opinion of the public on the contents, issues, concerns, and problems that health programs focus on and are consistent with their interests



It is clear from Table No. (28) that “yes” ranked first with a percentage of 72.0% among the opinions of the public on the contents, issues, concerns, and problems that health programs focus on and are consistent with their interests. In the second rank came “To some extent” with a percentage of 16.0%, and in the third rank came “No” with a percentage of 12.0%, then came the rest categories in different percentages successively. This may be due to the importance of the program’s focus on providing advice and guidance as one of the pillars of health programs, and the importance of human health awareness, as well as the adoption of medical programs by the public as a main source of information for them that can be exploited in the most optimal manner by the state represented by the Ministry of Health and its various bodies in order to implement health programs in the most optimal manner and to raise the level of public health in the community.

Table No. (29) shows the respondents’ opinions on the information provided by health media and its platforms

Respondents’ opinions on the information provided by health media and its platforms	Numbers	%
New information that I don't know before	400	100.0
Provided internal and external information	400	100.0
The information prompted me to read more	368	92.0
Provided enough information	368	92.0
Information known to me	368	92.0
Provided objective information	352	88.0
Its information is repeated, and its presentation style is boring	272	68.0
Provided false information, mostly rumors	304	76.0
Total	(50).2832	

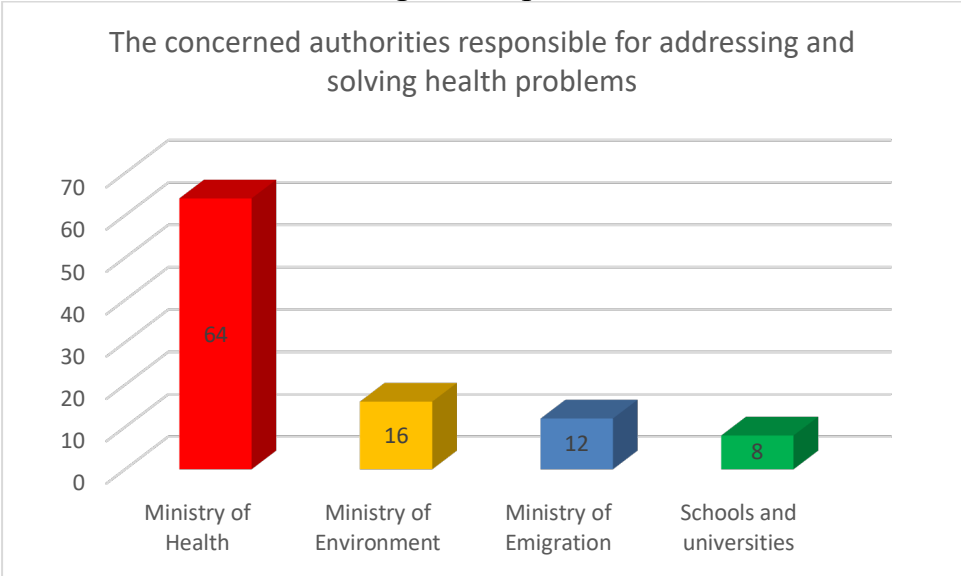
It is clear from Table No. (29) that “New information that I don't know before” and “Provided internal and external information” ranked first with a percentage

of 100.0% among the respondents’ opinions on the information provided by health media and its platforms. In the second rank came “The information prompted me to read more” with a percentage of 92.0%, and in the third rank came “Provided objective information” with a percentage of 88.0%, then came the rest categories in different percentages successively. This may be due to the fact that the media is now one of the most important tools for influence and education, as the media is a means of education and dissemination in all of its forms, as well as a cultural means of exchanging ideas and experiences and spreading health awareness among countries.

Table No. (30) shows the concerned authorities responsible for addressing and solving health problems

The concerned authorities responsible for addressing and solving health problems	Numbers	%
Ministry of Health	256	64.0
Ministry of Environment	64	16.0
Ministry of Emigration	48	12.0
Schools and universities	32	8.0
Total	400	100.0

Figure No. (8) shows the concerned authorities responsible for addressing and solving health problems



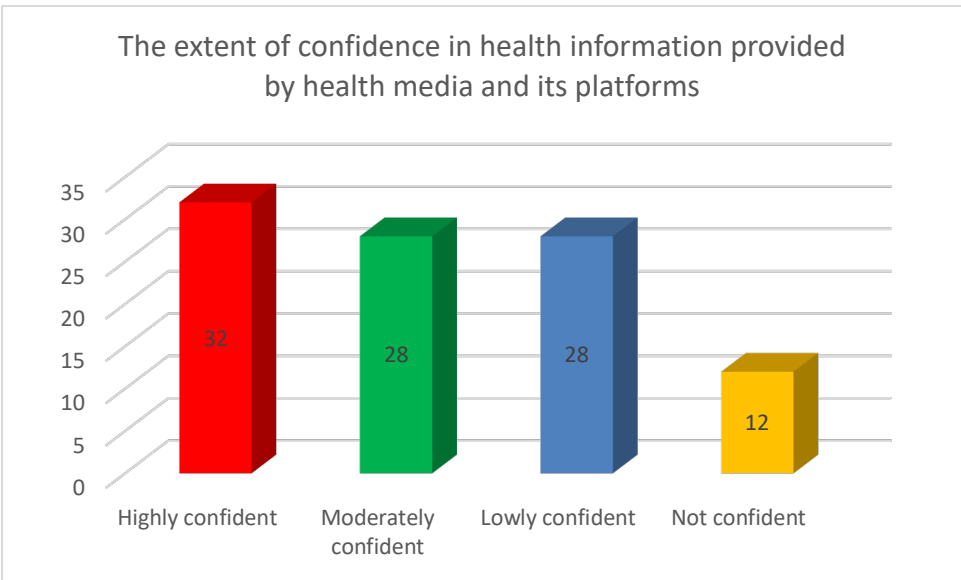
It is clear from Table No. (30) that “Ministry of Health” ranked first with a percentage of 64.0% among the concerned authorities responsible for addressing and solving health problems. In the second rank came “Ministry of Environment” with a percentage of 16.0%, and in the third rank came “Ministry of Emigration” with a percentage of 12.0%, then came the rest categories in different percentages successively. This may be due to the fact that the Ministry

of Health is the body entrusted with establishing and following up on a surveillance system to monitor acquired diseases within health facilities at all levels of health care in cooperation with health facilities. It is also entrusted with developing the general strategies and annual plans necessary to implement the National Program for Disease Control and with employing scientific research to solve problems. The Ministry works in cooperation with all other ministries and concerned authorities to achieve the one-health principle.

Table No. (31) shows the extent of confidence in health information provided by health media and its platforms

The extent of confidence in health information provided by health media and its platforms	Numbers	%
Highly confident	128	32.0
Moderately confident	112	28.0
Lowly confident	112	28.0
Not confident	48	12.0
Total	400	100.0

Figure No. (9) shows the extent of confidence in health information provided by health media and its platforms



It is clear from Table No. (31) “Highly confident” ranked first with a percentage of 32.0% among the extent of confidence in health information provided by health media and its platforms. In the second rank came “Moderately confident” and “Lowly confident” with a percentage of 28.0%, and in the third rank came “Not confident” with a percentage of 12.0%, then came the rest categories in different percentages successively. In fact, this is consistent with the study conducted by Rehab Sami Latif Mohammed ⁽⁵¹⁾, which concludes that the methods of prevention, symptoms, methods of infection transmission, precautionary methods, good health information acquisition, and following-up

on the pandemic updates are the most preferred topics, and physicians come to the top of the non-media sources upon which the respondents depend. Additionally, confidence increases more in official websites than in other new media.

Table No. (32) shows the factors increasing the public’s confidence in health media and its platforms

The factors increasing the public’s confidence in health media and its platforms	Numbers	%
Providing a space for interactions on issues and problems	384	96.0
Freedom of expression during the dialog	384	96.0
Facilitating the dialog with public figures and the elites	384	96.0
Rapid publishing and sharing	368	92.0
Multimedia (video-voice-image)	368	92.0
Providing mechanisms to validate information	368	92.0
Diversity in the presented topics	336	84.0
Total	(52).2592	

It is clear from Table No. (32) that “Providing a space for interactions on issues and problems” ranked first with a percentage of 96.0% among the factors increasing the public’s confidence in health media and its platforms. In the second rank came “Rapid publishing and sharing” with a percentage of 92.0%, and in the third rank came “Diversity in the presented topics” with a percentage of 84.0%, then came the rest categories in different percentages successively. This may be due to the fact that it is a set of media, communication, sensitivity, and educational activities that usually aim to create health awareness among different members of society, in addition to warning people of the dangers of diseases and epidemics and educating community groups on health values inspired by the culture and faith of society, reducing the incidence of disease, mortality, and disabilities, as well as improving the quality of life for both the individual and society.

Table (33) shows the nutrition habits that were modified after the exposure

Nutrition habits that were modified after the exposure	Numbers	%
Eating foods that boost immunity	400	100.0
Eating vegetables and fruits	368	92.0
I don’t know	368	92.0
Healthy eating	320	80.0
Other habits	320	80.0
Avoiding ready-made foods	304	76.0
Drinking hot beverages	256	64.0
Total	(53).2336	

It is clear from Table No. (33) that “Eating foods that boost immunity” ranked first with a percentage of 92.0% among the nutrition habits that were modified after the exposure. In the second rank came “Healthy eating” with a percentage of 80.0%, and in the third rank came “Avoiding ready-made foods” with a percentage of 76.0%, then came the rest categories in different percentages.

Table No. (34) shows the demographic variable (gender) of the sample

Sample Type	Numbers	%
Males	304	76.0
Females	96	24.0
Total	400	100.0

It is clear from Table No. (34) that the sample consists of 76.0% males, and 24.0% females, so that gender can be tested as a mediator variable.

Table No. (35) shows the demographic variable (age) of the sample

Sample (age)	Numbers	%
From 40 to 49 years old	128	32.0
50 years and over	128	32.0
From 18 to 29 years old	80	20.0
From 30 to 39 years old	64	16.0
Total	400	100.0

It is clear from Table No. (35) that the age that ranked first was “From 40 to 49 years old” and “50 years and over” with a percentage of 32.0%, and in the second rank came “From 18 to 29 years old” and “From 30 to 39 years old” with a percentage of 20.0%. Thus, age can be tested as a mediator variable.

Table No. (36) shows the demographic variable (education) of the sample

Sample (education)	Numbers	%
Postgraduate	192	48.0
Bachelor	112	28.0
High school or its equivalent	64	16.0
Less than high school	32	8.0
Total	400	100.0

It is clear from Table No. (36) that the academic qualification (postgraduate) came first with a percentage of 48.0%. In the second rank came (Bachelor) with a percentage of 28.0%, and in the third rank came (High school or its equivalent) with a percentage of 16.0%. Basic education was neglected in the sample, so education level can be tested as a mediator variable.

Table No. (37) shows the demographic variable (income) of the sample

Sample (Income)	Numbers	%
From 10 thousand to less than 15 thousand Riyals	144	36.0
One thousand Riyals and more	112	28.0
From 5 thousand to less than 10 thousand Riyals	96	24.0
Less than 5 thousand Riyals	48	12.0
Total	400	100.0

It is clear from Table No. (37) that “From 10 thousand to less than 15 thousand Riyals” ranked first with a percentage of 36.0%, and in the second rank came “One thousand Riyals and more” with a percentage of 28.0%, so the income level can be tested as a mediator variable.

Table No. (38) shows the demographic variable (place of residence) of the sample

Place of residence	Numbers	%
Riyadh	96	24.0
Hail	96	24.0
Dammam	80	20.0
Abha	80	20.0
Mecca	48	12.0
Total	400	100.0

It is clear from Table No. (38) that “Riyadh” and “Hail” ranked first with a percentage of 24.0%, and in the second rank came “Dammam” and “Abha” with a percentage of 20.0%, so the place of residence can be tested as a mediator variable.

• Discussion of General Findings

- The study aims at determining and analyzing the extent of the factors affecting the performance of the communicator in health media and its

digital platforms, as well as the attitudes of the public towards it: A field study. This is done by conducting the field study during the time period after completing the theoretical framework of the study. The sample of newspapers is selected through:

- Distributing an electronic questionnaire form to a sample of 50 communicators and 400 members of the Saudi public. The researcher adopted the survey method, identified the tool for collecting study material, and used the survey form to collect data from communicators and the Saudi public.
- The Study has concluded many results including:
 - **Results of Studying the Communicator**
 - “Fits your preferences” and “Influenced by a successful media figure” ranked first with a percentage of 76.0% among the reasons that prompted you to work in health media and its digital platforms. In the second rank came “There's no other job for me” with a percentage of 72.0%, and in the third rank came “Fits your specialty” with a percentage of 62.0%.
 - “Social media networks” ranked first with a percentage of 58.0% among the media in which you work and that are interested in the health field. In the second rank came “Television” with a percentage of 18.0%, and in the third rank came “Magazines” with a percentage of 14.0%.
 - “Ability to integrate into the community, recognize its details and seek out problems” ranked first with a percentage of 78.0% among the characteristics that shall be met by the communicator in health media and its digital platforms. In the second rank came “Ability to work under pressure in the institution” with a percentage of 74.0%, and in the third rank came “Highly cultured” with a percentage of 62.0%.
 - “Administrative and moral appreciation” ranked first with a percentage of 76.0% among the administrative and technical factors affecting the performance of the communicator. In the second rank came “My work in the health institution enhances my social status” with a percentage of 60.0%, and in the third rank came “Provides the opportunity for promotion in health work” with a percentage of 54.0%.
 - “Adherence to the standards of accuracy and objectivity” and “Organizing structured and specialized training sessions to improve performance” ranked first with a percentage of 90.0% among the factors affecting the performance of the communicator. In the second rank came “Insufficient attention of health media and its platforms to the content of the provided material” with a percentage of 80.0%, and in the third rank came “Decision-making bias in the health media and its platforms for

which I work provides me with a sense of accomplishment” with a percentage of 68.0%.

- “The wages in the health media and its platforms for which i work differ from that of those working in other media” ranked first with a percentage of 90.0% among the economic factors affecting the professional performance of the communicator. In the second rank came “My salary is commensurate with my living requirements” with a percentage of 78.0%, and in the third rank came “My salary is commensurate with the work I'm doing in the health media” with a percentage of 66.0%.
- “Values, customs, and traditions prevailing in the community” and “Social interests of the health media and its platforms, and the social forces expressing them” ranked first with a percentage of 78.0% among the factors affecting the communicator while doing his criticizing job in the health media and its platforms. In the second rank came “Publication laws and the related governing regulations” with a percentage of 64.0%, and in the third rank came “The pattern of ownership of health media and its platforms” and “Characteristics and affiliations of the public of health media and its platforms” with a percentage of 54.0%.

- **Results of Studying the Public**

- The extent of using health media and its platforms among which “Always” ranked first with a percentage of 56.0%. In the second rank came “Sometimes” with a percentage of 24.0%, and in the third rank came “rarely” with a percentage of 20.0%.
- The sources of follow up health topics among which “Social networks” ranked first with a percentage of 36.0%. In the second rank came “Television” with a percentage of 20.0%, and in the third rank came “Official Website of the Ministry of Health and Population” with a percentage of 16.0%
- “The idea” ranked first with a percentage of 100.0% among the most remembered elements by the respondent. In the second rank came “Dialogic text” with a percentage of 96.0%, and in the third rank came “Soundtrack” with a percentage of 92.0%.
- “It shapes my attitudes and convictions on health issues and topics” ranked first with a percentage of 100.0% among the reasons behind depending on health media and its platforms. In the second rank came “The ability to use it anytime and anywhere” with a percentage of 92.0%, and in the third rank came “It helps me understand and recognize the dimensions of the health issue” with a percentage of 84.0%.

- “Moderately contributing” ranked first with a percentage of 40.0% among the extents to which the Saudi health media and its platforms contribute to the recognition of health risks. In the second rank came “Significantly contributing” with a percentage of 32.0%, and in the third rank came “Slightly contributing” with a percentage of 28.0%.
- “Not presenting all health and psychological aspects for those who are infected” ranked first with a percentage of 96.0% among the reasons behind not depending on health media and its platforms. In the second rank came “Interested only in presenting symptoms and not in prevention methods” with a percentage of 92.0%, and in the third rank came “No focus is placed on the violations resulting from the public’s non-compliance with health instructions” with a percentage of 80.0%.
- “Serious diseases” ranked first with a percentage of 24.0% among the health topics that are followed up through health media and its platforms. In the second rank came “Diseases of aging” with a percentage of 20.0%, and in the third rank came “Seasonal non-serious diseases” with a percentage of 16.0%.

- **Recommendations of the study**

- The necessity for the integration of governmental and private media efforts, as well as institutions and individuals, within a general vision to protect the country.
- Addressing risks at the source during epidemics, as it reduces the likelihood of human-to-human transmission of viruses.
- Detailed options are among the influencing factors, as there are some precautions to be taken to reduce certain risks, even if they affect other aspects of life.
- Focus on technology: Recognizing the role of technology (especially artificial intelligence) while assessing the health risks
- Improving communication means, which necessitates the formation of national and international information and communication units in order to face risks.

Study Suggestions:

- Additional research is necessary to be conducted on the health media and its digital platforms, as they play an important role in searching for public health crisis information. Such a role makes it a useful part of crisis communications for health institutions disseminating information that they seek to share across different channels, media, and platforms.

- Conducting further research to identify the communication strategies used in other countries to face the rapidly spreading crises, diseases, and viruses.
- Conducting several descriptive and experimental studies that aim at obtaining information and discovering its relationship to health crises.
- Conducting studies on how to employ health media and its digital platforms to boost psychological immunity during crises.
- Conducting several studies on the social, economic, and psychological impacts of health media and its digital platforms.

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 Prof. Rizk Saad, Professor of Public Relations and Advertising, Misr International University.
 Assistant Prof. Ali Hammouda Juma, Associate Professor at the Department of Journalism and Publishing, Faculty of Media, Al-Azhar University.
 Assistant Prof. Hani Al-Tayeb, Assistant Professor at the Department of Communication and Media Technology, Faculty of Arts, Imam Abdulrahman bin Faisal University.
 Prof. Ahmed Sami Al-Aidi, Assistant Professor at the Department of Communication and Media Technology, Faculty of Arts, Imam Abdulrahman bin Faisal University.
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- (38) The total number of those who answer this question.
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- (41) The total number of those who answer this question.
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(53)The total number of those who answer this question.