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Why Do Health Professionals Create Content on Social Media? Uses and Gratifications of Egyptian "Physician Vloggers" on YouTube

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This article explores the uses (or motivations) and rewards (or gratifications) health professionals associate with using YouTube to publish video content, or vlogs, about health information. We applied reflexive thematic analysis to data from in-depth interviews and focus groups with 12 popular Egyptian 'physician vloggers' (i.e., physicians, pharmacists, and psychologists with many YouTube subscribers). Informed by Uses and Gratifications Theory (UGT), we examined what motivated these health professionals to vlog on YouTube and the rewards they received from doing so. Physician vloggers used YouTube to achieve self-focused goals, such as to develop their professional brands and save time at work, as well as society-focused goals, such as to spread medical awareness, address cultural and social stigma around mental health, and offer free medical advice to those who need it. In return, vlogging on YouTube gratified participants with a sense of influence, recognition, and professional fulfilment, as well as opportunities to build digital communication skills and deepen medical knowledge. Findings extend work on UGT to a context in which users create and share content, not just to consume it and, in doing so, furthers our understanding of what motivates health professionals to share content on YouTube.

Keywords: YouTube, uses and gratifications, doctors, health, Egypt

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On YouTube, health-related videos can engage large audiences (Harrison et al., 2016). While such videos can have serious shortcomings (Godskesen et al., 2021), those produced by medical physicians tend to be of high quality (Jildeh et al., 2021). Such high-quality health vlogs may be most valuable when access to public healthcare remains limited and citizens must find alternative ways to learn about their health and wellbeing. One such context is Egypt, a country characterized by a lack of affordable medical services, and, at the same time, intense social media usage (ICT Indicators Bulletin, 2020; UNESCO Institute for Statistics, 2021). Many

Egyptians rely on the internet as a primary source of health information (Ghweeba et al., 2017).

Yet, while the potential for audiences to benefit from health vlogs is obvious, it is unclear what would motivate health professionals to create such vlogs, and what those vloggers would themselves gain from providing social media users with health information. This study contributes to filling this gap through interviews and focus groups with 12 Egyptian health professionals who use YouTube to share health-related vlogs. Applying a framework of Uses and Gratifications Theory (UGT), we examine the goals, or 'uses,' that motivate these health professionals to use YouTube, as well as the rewards, or 'gratifications,' they receive from doing so.

LITERATURE REVIEW

Health Professionals' Use of Social Media

A growing body of research has investigated the multiple ways in which health professionals across the world use social media in their professional lives—typically through online surveys that document the frequency or type of social media use among different groups of professionals (e.g., Alanzi & Al-Yami, 2019; Ghalavand et al., 2021; Giustini et al., 2018; Khan et al., 2021; McGowan et al., 2012). Importantly, many of these studies focus predominantly on physicians' use of social media to communicate with their peers (e.g., Ghalavand et al., 2021; McGowan et al., 2012) rather than to engage with patients or other non-specialist audiences. Collectively, these studies suggest that social media use is relatively common among health professionals, although there are differences across specializations and geographic and cultural contexts. For example, a survey study found that Egyptian cardiothoracic surgeons reported spending significantly more time on social media than their colleagues in other countries (Elkhayat et al., 2018).

Knowledge of health professionals' social media use is more limited within the Egyptian context. When it comes to social media-based health communication specifically, a scoping review of literature focused on middle and low-income countries identified just two studies published about the Egyptian context between 2010 and 2017 (an additional 6 identified studies were "not geographically specific"; Hagg et al., 2018). A few locally relevant papers have been published since Hagg et al.'s, (2018) review, most of which are

small survey studies. Kamel et al.'s (2020) findings provide some of the first insights into how Egyptian physicians perceive digital communication tools, like social media, as useful for their professional roles. This cross-sectional study found that 94.8% of 188 Egyptian psychiatrists surveyed believed introducing Electronic Mental Health (EMH) services into the healthcare system would benefit patients, especially those based in rural areas of the country and particularly for the purposes of documentation, patient education, and communication (Kamel et al., 2020). However, the concept of EMH is much broader than social media, including all "mental health services and information delivered or enhanced through the internet and related technologies" (Kamel et al., 2020, p. 2).

Further insights can be gleaned from Younis et al. (2017), who found that a majority of 116 female Egyptian dermatology residents surveyed were hesitant to use social media platforms for professional-patient communication, although almost all of them used Facebook in their personal lives. Despite their hesitancy, half of the residents reported that they had received questions from patients about digital means of contact, and almost three-quarters felt that it was their professional duty to correct online health misinformation.

With the spread COVID-19 pandemic, health professionals have been exposed to an influx of information from medical sources (e.g., researchers, health organizations, pharmaceutical companies) and social media, which has increased scholarly interest in exploring community engagement with health information (Mansour et al., 2022). These studies suggest that the pandemic may have further increased health professionals' use of social media, with one cross-sectional study finding that 70 percent of Egyptian physicians surveyed reported using social media to obtain information about the virus (Taie et al., 2022). At the same time, Egyptian citizens relied more heavily on physicians for COVID-19-related insights than on any other source, including the World Health Organization (Abdel Wahed et al., 2020). That is, the pandemic highlighted the important role health professionals can play in public communication as well as the usefulness of social media as a source of health information.

Broadly, the existing body of literature suggests that Egyptian health professionals value the accessibility and ease of communication of online forms of health communication (Ghweeba et al., 2022) and that their audiences are receptive to such communication

(Ghweeba et al., 2017). Yet, existing research has not yet explored the motivations that drive health professionals to create content on social media, nor the gratifications they receive as a result. Clearly, there is a gap in understanding what motivates physicians to vlog. This study aims to fill this gap through the lens of UGT.

Uses and Gratifications Theory in the Social Media Age

Many scholars from within psychology and other social sciences have theorized about what motivates behaviors. Most famously, Maslow (1943) proposed that human needs include both deficiency needs (i.e., psychological, safety-related, and social needs) or growth needs (i.e., for knowledge and self-actualization). Maslow's Hierarchy of Needs has also been used by Alderefer to develop ERG Theory, in which human needs are categorized as being related to Existence, Relatedness, and Growth (Alderfer, 1969; Caulton, 2012).

With the rise of social media, new theories have been proposed to examine motivations for using these virtual networks. For instance, the Social Skills Hypothesis suggests that individuals who are incapable of making friends in real life take to social media to build their social circles, and continue to be on social media for the satisfaction they feel after they meet their online friends (Valkenburg & Peter, 2007). More recently, the Social Capital Theory of social media proposes that the need to generate and maintain social capital is a main driver of usage, as social media platforms allow individuals to interact with others, share updates about themselves, and get information about their acquaintances (Ellison et al., 2014). On the other hand, Uses and Media Effect Theory emphasizes that a single medium can have different effects on people depending on both the content and the way it is used in a social and cultural context (Valkenburg et al., 2016). Yet another theory, the Social Media Engagement Theory, regards people's behavior on social media as a complicated process of both social action and technological features and has proven useful for examining specific contexts, such as organizational communication (e.g., Di Gangi & Wasko, 2016) and marketing (e.g., Dolan, 2015).

While each theory has its strength and particular contexts for application, we selected one of the earliest theoretical explanations of media consumption: Uses and Gratifications Theory (UGT). UGT provides a framework for understanding why people choose one medium or piece of content over another, by linking this choice to the desire to satisfy certain *needs.* UGT first emerged in the 1940s-following a series of studies

investigating the motivations and benefits associated with consuming media content, such as quiz programs, morning soap operas, and comics (Herzog, 1940; Suchman, 1942; Wolfe & Fiske, 1949). The theory was refined during the following two decades by Elihu Katz and colleagues (Blumler & Katz, 1974; Katz, 1959; Katz et al., 1973), who proposed that audiences select mediums and content that benefit them. While many theories explain human behavior on (social) media in relation to individual needs, UGT also considers how such media use may benefit an individual's position within society. This more holistic conceptualization of user motivations is ideally suited to our study aims, as it enabled us to examine why health professionals use YouTube for vlogging (i.e., by identifying the personal or professional needs they hope to fulfill), but also why they continue to use it (i.e., by documenting the personal or social gratifications they receive from doing so).

Katz et al. (1973) initially proposed 35 basic needs that audiences seek to fulfill through consuming media. These needs can be broken down into four categories: *cognitive* (related to information and knowledge), *affective* (related to aesthetic, pleasurable, and emotional experiences), *integrative* (related to strengthening credibility, confidence, and contact with family, friends, and the world), and *tension-release* (the need to temporarily give up of the one's social roles (Katz et al., 1973). However, scholars have noted that Katz et al.'s list of needs requires revision (Bracken & Lombard, 2001).

In particular, with the rise of social media platforms and the rapid increase in the number of individuals who use them, some scholars have argued that the scope of UGT should be expanded (Ruggiero, 2000). Platforms such as YouTube can be used to consume and engage with content but also to create and distribute it (Pires et al., 2021), resulting in a hybrid form of media engagement that Bruns (2007) terms "produsage" that is not accounted for in the original UGT. To better capture the multiple and overlapping ways in which individuals use social media, a modern-day version of UGT should examine the needs, goals, and gratifications that motivate social media users to create and share content, and not just consume it.

UGT is highly flexible, as it "does not assume a pre-defined set of motivational factors, but instead lets factors emerge from data" (Gruzd et al., 2018, p. 48). This flexibility has enabled UGT to remain a solid standpoint to study motivations for using media in the digital age. It has been used in combination with other modern theories, such

as Social Capital Theory (Kwon et al., 2013; Papacharissi & Mendelson, 2011), and has been applied and adapted to develop new needs, uses, goals, and gratifications that better reflect the reality of a media landscape that increasingly includes social media as a content source (e.g., Chan, 2020; Gruzd et al., 2018; Ratcliff et al., 2017; Vaterlaus & Winter, 2021). However, few studies have used UGT to examine the motivations or rewards of YouTube content creators (see Buf & Ştefăniţă, 2020; Wang, 2014 for exceptions), and even less is known about the uses and gratifications of health professional vloggers in particular. This study is a first step towards filling this gap by examining the following research questions: 1) What motivates health professionals to start vlogging on YouTube? and 2) What rewards do health professionals receive through vlogging on YouTube?

METHODS

This study is part of a larger research project that was conducted between February and September 2021 and was exempted from further review by the university's IRB; all participants gave both written and verbal consent to participate. In this article, we report only those findings from the project that are relevant to the current research questions.

This study relied on a multi-methods qualitative approach involving two forms of data: in-depth interviews and focus groups. Using more than one form of data was expected to allow for different angles and nuances to become visible (Essén & Sauder, 2017), as participants had the opportunity to interact with the researcher who conducted the interviews and facilitated the focus groups, as well as with fellow health professionals during the focus group discussions. In addition, the use of these two forms of data collection allowed for participants to provide perspectives at two different points in time; the in-depth interviews were conducted in April 2021, the focus groups in September of the same year. The time gap was expected to let participants continue to develop their thoughts on using YouTube following their initial interview, allowing for more depth in the data.

Sample Selection

We used a purposive sampling approach to identify health professionals of diverse specializations who vlog in Arabic and enjoy a high level of visibility on YouTube.

Participants were selected using to the following criteria: *Content Type*: the participant must produce vlogs; *Topic(s)*: the participant's vlogs must be health-related; *Platform*: the participant's vlogs must be shared through YouTube; *Health professional:* the participant must self-identify and be certified as either a medical physician, pharmacist, or psychiatrist; *Language*: the participant's vlogs must be in Arabic (Egyptian dialect); *Originality*: the participant's vlogs must be created by the participant themselves; *Clarity*: the participant's vlogs must be tailored to a non-specialist audience (i.e., vloggers who produced only professional or academic medical lectures were excluded); and *Visibility*: the participant's YouTube channel must have at least 100K subscribers or more to be included in the study.[1] We developed a list of 42 individuals who fit these criteria by searching for health-related videos on YouTube using Arabic search terms (e.g., words such as 'doctor', names of common medical specializations). In doing so, we took a broad view of "health" that encapsulates physical and mental wellbeing. Therefore, although we refer to these participants as "physician vloggers" for convenience, this term encompasses not only physicians, but also psychologists and pharmacists, as all three groups are professionally certified to provide advice on health issues.

We visited the channels that distributed the videos we identified, saving those channels that met our inclusion criteria in a spreadsheet. We then identified publicly available contact information for the vlogger behind each channel (e.g., by looking at the About section of their YouTube account, searching for other online profiles). We invited vloggers to participate in batches, first emailing 5 vloggers, then moving on to others depending on how many agreed to take part. We determined that we had reached *a priori* thematic saturation (Saunders et al., 2018) by considering the physicians who agreed to participate in the study and confirming that they were diverse in age, gender, specialization, and number of followers. This approach left us with a final sample of 12 physician vloggers. This sample skewed female (4 men, 8 women) and was comprised mostly of participants in their 30s (see Table 1 for detailed demographic information).

[1] This minimum number of subscribers was selected to allow for the inclusion of newly-created YouTube channels while still ensuring an intermediate level of visibility for the participant's content.

Table 1
Demographics of Participating Physician Vloggers

Participant	Specialization	Gender	Age Group	Number of Subscribers on YouTube*
P1	Pharmacist	F	20-30	500K-1M
P2	Pharmacist	M	31-40	Less than 500K
P3	Psychologist	F	31-40	500K-1M
P4	Psychologist	F	41-50	Less than 500K
P5	Gynecologist	F	31-40	500K-1M
P6	Gynecologist & Obstetrician	M	41-50	1M-2M
P7	Orthopedic Surgeon	F	41-50	Less than 500K
P8	Pediatrician	M	31-40	500K-1M
P9	Pediatrician	M	31-40	Less than 500K
P10	Physiotherapist	M	20-30	More than 2M
P11	Internist & nephrologist	M	31-40	500K-1M
P12	Surgeon & Therapeutic Nutritionist	M	50 +	More than 2M

Notes. YouTube subscriber numbers as of February 2022

In-depth Interviews

Conducting in-depth interviews is an effective method for getting participants' perspectives on using a medium (see, for example, Bautista & Lin, 2017; Tajeddini et al., 2022; Whiting & Williams, 2013; Yücel & Çapraz, 2022). Individual in-depth interviews took place over WhatsApp or by phone in April 2021 and lasted between 40 and 55 minutes each. Interviews were semi-structured and conducted in Egyptian Arabic by the lead researcher, who is fluent in the dialect. Participants answered a range of questions about their vlogging work, two of which were directly relevant to this study: "Why did you start creating video content on YouTube?" and "What makes you continue vlogging?" All participants were asked the same questions, in addition to follow-up inquiries.

Participants were also encouraged to share relevant information and elaborate further explore topics emerging from their answers. This flexibility has been shown to enrich and deepen interviews, as it did in this case (Eppich et al., 2019).

Focus Groups

In September 2021, participants were invited to take part in one of two focus group discussions titled *Can Physician Vloggers Mediate Health Research to Social Media Users?* The focus groups had identical structures and were organized to collect participant feedback on the preliminary results of the research. Instead of gathering all participants in one large group, we created these "mini-focus groups" of four or five vloggers each (Krueger, 2000), because it allowed us to offer different focus groups at different times, accommodating the physician vloggers' busy schedules. Mini-focus groups are also often more comfortable than larger ones, offer more opportunities for individuals to participate, and enable participants to explore topics in greater depth (Anderson, 1990; Kamberelis & Dimitriadis, 2005; Krueger, 2000). Small groups are particularly effective when participants possess a high level of expertise, as they allow more time for in-depth reflection (Hague, 2022).

Of the 12 participants who were invited to participate in the focus groups, 9 attended. Two physician vloggers were not able to join at either time and were interviewed individually; another participant was unresponsive. The focus groups and the two individual follow-up interviews were hosted on Zoom and again conducted in Egyptian Arabic. Each focus group lasted approximately 90 minutes and consisted of two parts; first, a presentation by the researcher of the preliminary results from the interview analysis, followed by a facilitated discussion structured around three questions: What do you think about these results? What do you agree/disagree with? In your case, have these goals been achieved? The individual interviews with the two participants who were unable to attend followed the same structure as the focus groups and included the same basic content and questions.

Data Analysis

All interviews were recorded, transcribed, and coded using Microsoft Word. We used an inductive approach to condense extensive and varied raw text data into a brief, summary format (Thomas, 2006). Data relevant to our research questions were first

grouped into three categories: 1) *Motivations* for vlogging on YouTube, 2) *Gratifications* or benefits gained from vlogging, and 3) *Medium assessment,* comments about the nature of YouTube itself. Within each of these overarching categories, we derived themes using reflexive thematic analysis (Braun & Clarke, 2019), a specific form of analysis that focuses on identifying shared meanings and which recognizes the researchers' active role in interpreting and generating themes (Braun & Clarke, 2022, 2023). This approach was selected because of its usefulness for examining the perspectives of different research participants on one topic.

RESULTS

The physician vloggers we spoke with described a variety of objectives that motivated them to vlog on YouTube, as well as a range of gratifications that made their vlogging rewarding. Every participant expressed at least two of the motivations and gratifications described in detail below.

The Uses: What Motivates Health Professionals to Start Vlogging on YouTube?

Participants offered a range of answers to the question "Why did you start creating video content on YouTube?" These responses were grouped into several subgoals and two overarching themes: *self-focused* and *society-focused*. These goals are described in detail below and summarized in Table 2.

Table 2
Uses and Gratifications of Using YouTube for Health Vlogging

Uses		Gratifications
Self-focused	Society-focused	
Self-promotion Saving time	Spreading medical awareness Addressing health-related cultural and social issues Offering free medical advice	Recognition Influence Professional fulfilment Learning (medical knowledge, digital skills)

Physician vloggers reported using YouTube to support their own career progression through two key self-focused goals:

Self-promotion. Physician vloggers reported using YouTube to build an image for themselves as skillful health professionals. Participants considered such an image, or professional brand, to be essential for their career advancement, as it allowed them to attract patients to their (offline) medical practices. As one participant said during a mini-focus group: "Do you think patients nowadays recommend doctors based on the number of certificates they have or their years of expertise? No, they trust the doctor if his workplace looks fancy, and if he is a good communicator."[2]

All other participants in the focus group supported this statement and agreed that they used YouTube to showcase their professionalism. In line with this goal, most participants included a logo with their name and specialization in their videos or gave themselves catchy titles. For example, one pediatrician adopted the vlogger name of "The Kid's Uncle" to showcase their ability to communicate with infants and make them feel comfortable. Other participants branded their channels with names highlighting their credentials. Examples include channel names such as "Muscle Clinic" for a physiotherapist and "My Doctor" for a gynecologist.

Saving Time. Several participants said that they used YouTube to share vlogs answering frequently asked patient questions. Physician vloggers could then refer their patients to these vlogs, saving time and energy. This was particularly the case with the gynecologists and pediatricians we spoke with, as they were often asked for general health advice. For instance, one gynecologist said:

> I get almost the same questions from women during their pregnancy. Yes, every case is special, but there are general instructions and warnings that apply to all. I vlogged the answers to the most common questions in a series of videos on YouTube and made them into one playlist, and referred every patient in her early pregnancy to them during her first visit to [my clinic]. This was time-saving for me, besides being more educational for the patients, as in the videos I can elaborate more than I can during my practice due to time limitations.

Other physician vloggers agreed that making a playlist available to patients could save time by replacing some of the in-person communication they had with patients. For example, one pediatrician used this approach to answer common questions about teething:

[2] All quotes were translated from Arabic to English by the lead author.

"Teething and all its signs and symptoms… Many new mothers worry about them and call me specially to ask what to do. Now, I can advise them to watch my vlogs about teething."

In addition to these self-focused goals, participants reported using YouTube to fulfill goals related to physician vloggers' perceived role in society. These society-focused goals can be grouped into three themes: spreading medical awareness, addressing cultural or societal issues associated with health and wellbeing, and offering free medical health advice to those who could not access it otherwise. Each of these goals is outlined in detail below.

Spreading Medical Awareness. Physician vloggers said they were motivated to vlog by an overarching goal of spreading medical awareness. For example, participants reported wanting to teach their YouTube audiences about how to prevent common illnesses, detect early symptoms of medical conditions, and adopt lifestyle advice that could help them cope with chronic illnesses. Some were also aimed at explaining treatment procedures involved in common operations (e.g., artificial insemination, spinal correction), while others wanted to combat health misinformation (e.g., by spreading credible medical information by recommending evidence-based pharmaceutical remedies for different ailments). As one of the pharmacists explained:

> My main motivation to vlog was to share my personal experiences about skincare. Through my participation in Facebook groups about cosmetics and skincare, I found the participants recommending products, or sharing their home recipes. But I knew from my pathological studies that most of these treatments were either ineffective or skin-damaging. Hence, I want to create credible content to confront this misinformation.

Addressing Cultural and Social Issues. In addition, participants described a goal related to changing audience members' perspectives on particular health and wellbeing issues, such as the stigma surrounding certain mental health conditions. This goal was expressed by the two participating psychologists, who both said that they aimed to use YouTube to eliminate social stigma for mental illness and to encourage audiences to consult psychologists when needed. As one psychologist participant explained:

I inform my audiences about mental problems, how they could develop, and what suffering they create, what motivates them to seek professional support from a psychologist. In fact, the possibility of having an online consultation session helps, it is a

first step towards liberating from the social stigma of mental illnesses, because they can see a psychologist without leaving their rooms, nobody will know.

Offering Free Medical Advice. Finally, physician vloggers were motivated to empower audience members to handle minor health conditions and medical emergencies. For example, participants provided guidance on dealing with choking children or addressing minor injuries at home. Others offered advice for treating and managing common medical conditions, such as how to monitor blood glucose, deal with constipation and diarrhea in children, or recover from food poisoning. Underlying this goal was an awareness that not all of the participants' viewers would be able to access professional medical support immediately, or, in some cases, at all. As one physician vlogger said:

> I had a friend who was residing in Riyadh, his child was sick and the parent did not have enough money to visit the doctor and dispense the medicine. Certainly, I helped him as much as I could, by giving advice through video calls. I am sure there were so many cases like my friend, and that is why I became a vlogger.

The Gratifications: What Rewards do Health Professionals Receive through Vlogging on YouTube?

In addition to allowing them to pursue their self- and society-focused motivations, participants reported that vlogging on YouTube provided them with rewards, or gratifications. These are described in detail below and summarized in Table 2.

Recognition. Many participants described receiving recognition for their YouTube vlogging. Such recognition often came in the form of positive audience feedback communicated through positive comments on participants' videos, metrics suggesting the wider circulation of their content, and subscriptions to their YouTube channels. For example, one gynecologist reported that they "receive many thank-you-comments from the audience who take my advice and notice improvement of their health." Similarly, one participating psychologist reflected that:

> The messages I am getting from teenagers who watch my [mental health] vlogs let me know I changed their lives through the content I am presenting on social media. Maybe they are exaggerating the impact, but just reaching this slice of the audience and influencing them is definitely a success for me.

Physician vloggers also appreciated the recognition they received from YouTube. One example of this type of recognition was the YouTube Creator Award[3], a play button-shaped award that is delivered to YouTube creators whose channels have many subscribers. A silver award is granted to those with 100,000 subscribers, a gold award to those with 1 million, and a diamond award for those with 10 million. Several participants said that these three tiers of awards motivated them to continue to vlog on YouTube. All of the physician vloggers participating in this study had received at least a silver YouTube Creator Award, and two of them had received gold awards as well.

Another example of recognition was the NextUp prize[4], offered to promising YouTube channels that provide quality content but have as less than 100K subscribers. As part of this prize, YouTube supports vloggers to develop their channels by recommending the channel to relevant users; providing one-on-one advice from a dedicated channel coach; and offering vouchers for video-making equipment. Receiving the NextUp prize had been very gratifying to one participant, whose channel boasted over 2 million subscribers at the time of the interview:

> In 2019 and after 6 months of vlogging, I was certain about the quality of content, and the number of subscribers was steadily growing. However, I felt disappointed, maybe I needed to feel appreciation. Then I got a call from YouTube's regional office to inform me that I had won YouTube NextUp, which was a real boost to my channel and my morale.

Influence. Physician vloggers were also gratified by a sense that they were making impactful content, a gratification evoked by cues accessed through YouTube's social functionalities. For instance, participants enjoyed receiving user feedback (i.e., comments and messages) about the impact that their vlogs had made on audiences' lives, such as improvements in wellbeing or adoption of a healthier lifestyle. In addition, using YouTube made participants feel like influencers because it allowed for the wider circulation of their vlogs. Many physician vloggers said they enjoyed encountering their content on other

[3] https://www.youtube.com/creators/how-things-work/programs-initiatives/awards/
[4] https://www.youtube.com/nextup/

social platforms, particularly Facebook. As one participant described: "When I find my vlogs shared to Facebook groups for motherhood, I feel I have achieved something, I feel I am a real influencer… nobody was to share something with others unless they are influenced by it."

Additionally, YouTube provided physician vloggers with demographic data about their viewership, which made them feel impactful beyond their geographical location. The platform also offered the option to add subtitles to videos, which vloggers said made them feel that they had achieved wider outreach, especially if the translation was added by an audience member. As one participant proudly stated: "many of my vlogs get translated into Russian, Persian, and Urdu by volunteers."

Professional Fulfillment. Physician vloggers' feelings of recognition and influence were complemented by a sense of professional fulfillment gleaned from their YouTube activities. For example, all 12 participants reported that they sometimes met patients offline who had decided to come to them for treatment after being alerted to early symptoms by one of their own videos—an experience that was extremely gratifying to the physician vloggers. The sense of professional fulfillment was especially strong in cases where vlogging had helped the participant increase their number of (in-person) clients. YouTube success also encouraged some doctors to start offering paid video call consultancies. Another participant recalled, "I get reservations for phone consultations from around the globe. I would not have had that without being visible [on YouTube], which is an advantage acquired from vlogging."

Moreover, YouTube had become a source of passive income for all the physician vloggers. The platform's AdSense program monetizes video viewership by allowing content creators to host advertisements in exchange for payment[5]. Thus, every time a video is watched, revenue is generated for the content creator. Several vloggers mentioned this financial reward as an additional gratification of their vlogging activities.

Learning. Finally, using YouTube to create and share vlogs had the unexpected benefit of helping doctors enhance their digital and medical knowledge. Participants described how using YouTube pushed them to continue improving their digital skills; using the platform motivated them to learn how to use it more effectively, which, in turn,

was rewarding to participants. For example, a number of physician vloggers said that they had taken courses in content making, search engine optimization (SEO), and digital marketing, especially in the early days of starting their channels.

The process of making a video about health also involves a lot of research, which pushed physician vloggers to continue developing their medical knowledge. As one participant explained:

> The preparation of one video not only requires consulting medical research, but also watching the existing video content about the subject, selecting a new angle to address the topic, finding the best way to explain the information, and putting all of that together in a video that matches YouTube's search algorithm.

DISCUSSION

This study is among the first to examine the motives that drive health professionals to create content on YouTube for vlogging and gratifications they obtain through this activity. Through a series of in-depth interviews and focus groups, we examined why 12 Egyptian health professionals create content on YouTube by identifying a combination of uses and gratifications related to professional fulfillment, social recognition, influence, personal development, public benefit, and professional and economic opportunities. The participants created vlogs to achieve both self-focused goals—such as promoting themselves and saving time at work—as well as society-focused goals—such as spreading medical awareness, addressing cultural and social issues related to health and wellbeing, and offering free medical advice to those who do not have access to universal health insurance. Notably, the same set of needs was shared among all participants despite their varied specialties, ages, and number of followers. This was also true of the benefits participants reported receiving from vlogging; when presented with these gratifications during the focus groups, all the participants agreed they accurately represented their experience.

This case study of Egyptian health professionals who vlog illustrates how, in a society with limited access to health services, physicians have an opportunity to meet a demand for the online health information, and that doing so through vlogging proved to be gratifying for them. We found that YouTube provided participants with both emotional

[5] https://support.google.com/youtube/answer/9914702?hl=en

rewards (i.e., encouraging viewership statistics, audience interaction, positive feedback) and material rewards (i.e., money, Play Button awards). In this way, YouTube may differ from other social media platforms, as it provides opportunities for content monetization (i.e., through a percentage of revenue generated from displaying ads before, during, or after videos). However, vlogging on YouTube also provided health professionals with gratifications that extended into their professional lives and did not depend on this unique feature of the platform. It enabled them to build their client base by attracting audience members to their offline practices and serving clients through paid online consultations. Furthermore, participants' understanding of the social media community they were building around their YouTube channels appeared to further increase the gratification they received through vlogging. Similar there is evidence that physician vloggers were able to win credibility through their awareness of their audiences' needs and diversity (Atef, 2022) and of their ability to deftly emphasize different personal attributes in their videos (Atef et al., 2023).

At the same time, we acknowledge that our results are based on self-reported motivations and rewards and are therefore influenced by societal expectations of what is considered appropriate social media use for health professionals, as well as legal restrictions on such use. Therefore, the findings of this research should be regarded in relation to the social context in which it was conducted. Economic and cultural variables such as the status of communication infrastructure, level of internet penetration, and quality of health services in Egypt could impact the uses and gratifications we identified. One such contextual variable is the legal environment for medical professionals using social media. In many parts of the West, physicians' use of social media is regulated by professional and institutional guidelines (Dizon et al., 2012; Nguyen et al., 2020); yet our participants reported that this was not true in the Egyptian context. The lack of legal and organizational restrictions on the Egyptian physicians, pharmacists, and psychologists' social media use may have encouraged them to use YouTube in ways that would not translate to health professionals living in countries with stricter regulations. Future research is needed to examine the degree to which our findings generalize to other samples of physician vloggers in other cultural and geographic contexts.

Theoretically, this study extends the limited body of research that has applied Uses and Gratifications Theory to YouTube *production* and *distribution*, rather than *consumption*. In line with previous studies, the content creators who participated in this research were motivated to make themselves known to others and were rewarded for their use through gratifications such as recognition, skill development, and opportunities for remuneration (Buf & Ştefăniţă, 2020; Wang, 2014). However, this study also identified motivations and rewards not found in earlier research, such as the goals of saving time or spreading medical awareness.

Our findings reflect an encouraging departure from previous research examining health professionals' attitudes toward social media as a means for public engagement. While Younis et al. (2017) found that most of the female Egyptian dermatology residents surveyed were hesitant to use social media for patient communication, our predominantly female sample of physicians, psychologists, and pharmacists regularly and enthusiastically used YouTube to share health content that they hoped would benefit potential patients and other members of the public. Given that physicians and social media are important sources of health information for many citizens (Abdel Wahed et al., 2020; Ghweeba et al., 2017), motivating more health professionals to take advantage of digital platforms for public outreach could help to fill a societal need for accessible, high-quality digital health content. This is particularly true given health professionals' commitment to benefit society, for example, by medical awareness and addressing online misinformation (Younis et al., 2017). As such, the multiple rewards of vlogging identified in this study could be used to help other health professionals overcome their hesitation to use social media for patient communication and, ultimately, elevate the quality of online health information.

In addition, the findings suggest that professional rewards may be another type of gratification to consider alongside the cognitive, affective, integrative, and tension-release gratifications originally proposed by Katz et al. (1973). Further studies are needed to extend our understanding of such professional gratifications, both within and beyond the health vlogging context. Such studies could also help to illuminate the degree to which physician vloggers achieve the society-focused goals that they described in this study, as well as how their vlogging activities influence their offline relationships with their

patients. To this end, it would also be beneficial to examine how vlogs were valuable to their viewers (i.e., content consumers), in addition to the perspectives of content creators that were the focus of this study. Although the high viewer counts the vlogs received, and the large subscriber bases of their creators, suggest that audiences can find this content valuable, more work is needed to understand if the vlogs are fulfilling the society-focused goals physician vloggers describe. Finally, future research is needed to address challenges and ethical considerations associated with health vlogging, such as maintaining patient confidentiality and avoiding conflicts of interest.

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