The use of social media tools has become increasingly widespread over the past decade and has caused a paradigm shift in the way people communicate. Because of its simple and easy access, social media platforms have become the major source by which many people participate in and keep informed about news of ongoing developments, discussions and discoveries in the world around them. However, in recent years, the rapid adoption of social media has significantly blurred the boundary between personal and professional life. At a UK university 96% of medical students had Facebook accounts, 52% acknowledged that photos of self on Facebook existed that they considered embarrassing. And 54% reported observations of unprofessional behaviours in colleagues on Facebook.

The professional standards of healthcare professionals and students are based on the expectations of the society and peers which forms the basis of quality patient care. Professionalism has been the topic of much discussion in the literature. Most authors agree on the central idea of professionalism that it is ‘sustaining the public’s trust in the healthcare profession’. However, societal changes have brought a threatening change in the expectations of professionalism, especially with web 2.0 (also known as “social media” or the read-write web) hence the term Professionalism 2.0.

Web 2.0 refers to those resources in which self-created content by users is made and posted for public dissemination by means of online sharing platforms. Chretien and colleagues reported the experience of medical students posting inappropriate material online, including profanity, bad language, pictures of alcohol intoxication, and sexually suggestive content. This “always-on/always-on-us” relationship with web 2.0 has particular implications for healthcare professionals and the construct of professionalism. The literature describes four ways in which web 2.0 tools are undermining the social contract of the healthcare profession:

I. Social media blurs the personal-professional divide
II. Social media content can colour personal and professional reputations
III. Social media can have an undermining effect via the dangers of self-expression in social media
IV. Lack of patient confidentiality in a multi-media world

Although principles of professionalism already exist since a very long time, it is believed that many healthcare professionals and students may have difficulty applying these principles to their online presence for at least three reasons. First, some healthcare professionals/students may not realise that images of off-duty or off-campus drinking on a social networking site may raise questions from the public about unprofessional behaviour. Second, disclosure of confidential information (including pictures of patients), or displaying speech and behaviours that are disrespectful to colleagues or patients and their families. Thirdly a slip made online can have far greater impact than one made over an informal discussion with a colleague.

The traditional model of professionalism has not yet fully integrated web 2.0 and the healthcare community is most of the time left to act using their own intuition. Many senior academics and clinicians, the so called digital immigrants (people born before the advent of digital technology) who have not used or have limited presence in social media may teach professionalism “largely in the context of the physician-patient relationship”, and may not be fully equipped for teaching the younger generation (digital natives – the generation of people born during or after the rise of digital technologies) about professionalism in a social media context.

It is highly recommended to set high privacy settings on social media accounts. Keeping in mind that anything posted on social networking can be shared by any of the Facebook friend(s) – and by their friend(s) so on. It is clear that there is a degree of urgency about raising awareness of the risks and benefits of social media.
for professional practice. Considering how universal the use of social media is in our lives, it would be unworkable to suggest that professionals stop using social media altogether. Nevertheless, academics and students need to be made aware of the online risks they may be exposing themselves to. We need to empower academics and students about their choices and options when online so as to protect their own reputation, the profession itself and the interests of the public at large. Professionalism 2.0 teaching should be part of the curriculum for students and more evidence-based research on Professionalism 2.0 is needed.

REFERENCES