

THE MUSEUM AS INSTITUTIONAL ACTOR: STRATEGIC COMMUNICATION AND NARRATIVE IDENTITY IN THE MEDICAL UNIVERSITY

Xenia Negrea

University of Medicine and Pharmacy of Craiova, Romania

Abstract

This article proposes an analysis of the role played by the university museum in constructing and communicating institutional identity, starting from the concept of the “museum-actor” – an entity that does not confine itself to preserving heritage, but actively participates in the production of meaning, in symbolic legitimisation, and in the narrative articulation of organisational values. The theoretical anchoring integrates actor-network theory (Latour, 2005), dramaturgical analysis (Goffman, 2007), the theory of symbolic capital (Bourdieu, 2013), models of corporate communication (Cornelissen, 2011; Capriotti, 2013) and the sociology of medical professionalism (Freidson, 1970; Montgomery, 2006; Gropman, 2007). The case study, focused on the Museum of the History of Medicine of the University of Medicine and Pharmacy of Craiova, examines how a museum space can function as a narrative platform, as an instrument of institutional legitimisation, and as a vector of identity cohesion in the contemporary medical-academic context, while simultaneously responding to the tensions between scientific authority and the humanistic dimension of the medical profession.

Keywords: institutional identity, museum-actor, strategic communication, symbolic capital, institutional narrative, medical professionalism, medical heritage, ANT

1. Introduction. Institutional Identity: A Negotiated and Communicated Construct

1.1. Defining the Concept

Institutional identity designates the body of meanings, practices, values and narratives that confer coherence and continuity upon an organisation (Albert and Whetten, 1985; Cornelissen, 2011). Far from being reducible to brand elements or visual identity, the concept encompasses a process of social construction that is constantly communicated and reaffirmed both inside the institution – through organisational culture, rituals and norms – and in its interaction with the external environment, by means of public communication, partner relations and community engagement (Hatch and Schultz, 2002; van Riel and Fombrun, 2007).

In the case of a medical university, identity is articulated around a twofold responsibility: scientific and humanistic. The training of health professionals and the assumption of a benchmark social role generate a productive tension between tradition and innovation, between conservation and transformation – a tension reflected in the way the institution constructs and communicates its identity (Whitehead, Mason and Eckersley, 2015).

1.1 Medical Professionalism and the Identity Specificity of the Medical University

In order to understand why the museum becomes such a relevant actor within the space of a medical university, it is necessary to examine the specificity of the medical profession in relation to the construction of identity. As early as the 1970s, in his foundational work *Profession of Medicine: A Study of the Sociology of Applied Knowledge* (1970), Eliot Freidson set out the sociological coordinates of this profession. Freidson identifies several distinctive features: a body of highly specialised knowledge that allows for the diagnosis, treatment and prevention of disease; professional autonomy, through which the profession establishes its own standards of practice and codes of ethics; and social responsibility, a moral commitment to the public good that includes a status of trust granted by society (Freidson, 1970).

In Freidson’s view, the authority of the medical profession derives from two complementary sources: institutionally validated expertise – doctors are trained and validated through a rigorous educational system, which confers professional legitimacy on them – and the role of guardians of health, with the unique capacity to define what counts as “normal” or “pathological”. This authority rests upon the trust of patients and on social recognition, but also on control over knowledge, maintained through licensing processes, professional regulation and continuing education.

The sociologist nevertheless also anticipates the tensions that can erode this authority: economic interests, access to healthcare limited by purchasing power, interdisciplinary competition and, as we may reformulate it today, the illusion of knowledge generated by informational obesity – a false competition that produces real

effects, colliding with the kind of applied knowledge that medicine entails and eroding the credibility of the profession (Freidson, 1970).

This complexity has been further deepened by subsequent authors. Atul Gawande (2002), through testimonies from inside the profession, teaches us to accept imperfection even when medical science is involved: the medical act involves not only an in-depth understanding of human biology, but also a capacity for continuous adaptation to uncertainty, in which success often depends on the doctor's ability to think critically and to take courageous decisions in extreme situations. Kathryn Montgomery (2006), in *How Doctors Think: Clinical Judgment and the Practice of Medicine*, argues that medicine is far from being merely a science based on strict rules – it is, in fact, a practical science, closer to the arts and humanities than to the exact sciences, requiring practical reasoning and the explanatory force of narrative (Montgomery, 2006). Jerome Groopman (2007) completes the picture, demonstrating that diagnostic errors are often the result of cognitive mechanisms – confirmation bias, anchored thinking – and that the remedy lies in flexibility, in the capacity for self-questioning, and in collaboration (Groopman, 2007).

These perspectives converge towards a conclusion that is essential for the present study: the institutional identity of a medical university cannot be built solely upon scientific knowledge and clinical reputation; it must also integrate the humanistic, emotional and narrative dimension of the profession. Ambiguity, uncertainty, courage and empathy are constitutive parts of medical identity, and the museum – as a space in which these tensions can be made visible, narrated and assumed – thereby acquires an entirely distinctive identity-related function.

Recent research on museum-based education for health professionals reinforces this argument. Tackett et al. (2025) demonstrate that the arts and humanities are fundamental to health professions education and can substantially enhance clinician empathy, tolerance for ambiguity, and openness to new perspectives. Museum-based education for health professionals has particular potential to achieve these aims, suggesting that the university museum is not merely a heritage space, but an active instrument in the formation of professional identity (Tackett et al., 2025).

1.3. Dimensions of Institutional Identity

The specialist literature identifies several complementary dimensions of institutional identity. The symbolic dimension comprises the visual, architectural and ritual elements that reflect the values and history of the institution: logos, coats of arms, emblematic spaces such as the aula or the museum (Balmer and Greyser, 2002). The cultural dimension refers to shared values, behavioural norms, founding myths and stories transmitted informally among the members of the community – academic staff, students and alumni (Schein, 2010). The communicational dimension reflects the way in which the institution expresses its identity and communicates it to internal and external publics, through discourses, publications, events, campaigns or narrative spaces (Cornelissen, 2011; Capriotti, 2013).

The museum, as a space of institutional memory, operates at the intersection of these dimensions and can become a strategic platform for communicating identity. As Kozak (2016) underlines, university museums hold a remarkable potential to reflect the presence of the parent institution, to articulate narratives of their collections, and to render visible the role of the university in disciplinary development.

This perspective has been further developed by Plaza Salgado and Narbona Medina (2025), who demonstrate that archives within university science museums hold substantial potential for constructing institutional memory, enhancing material collections, and enriching exhibitions and educational activities. Their study of Chilean university museums reveals that these institutions, often locally situated and diversely approached, offer invaluable insight into both the scientific and institutional history of their parent institutions. This finding lends additional support to the argument that the university museum functions not merely as a repository, but as an active agent in the articulation of institutional identity.

1. Method

2.1 Erving Goffman – Identity as Performance

In the view of the sociologist Erving Goffman (2007), identity is not a stable essence but a result of social interaction, performed before others much like a piece of theatre. His dramaturgical framework distinguishes between a front stage, on which social actors present controlled versions of identity, and a back stage, where the preparation of the performance takes place away from the audience's gaze (Goffman, 2007; Shulman, 2016).

Transferred to the institutional level, this model allows us to understand how universities “play” their identity through a set of public gestures – from the staging of academic ceremonies to the arrangement of symbolic spaces. Within this logic, the museum becomes an institutional stage on which the university performs its history,

its values, and its place in the world. The narratives on display and the scenography of the museum space constitute the equivalent of the “desirable impression” (Leary and Kowalski, 1990) that the institution projects towards its publics.

2.2. Pierre Bourdieu – Symbolic Capital and Institutional Habitus

For Bourdieu (2013), institutions function through the accumulation and conversion of different forms of capital: economic, cultural, social and symbolic. Institutional identity is closely linked to symbolic capital – the recognition and prestige that an institution acquires through its history, its distinctions and its affiliation with professional elites. Just as an academic qualification operates as an institutionalised form of cultural capital, conferring formal recognition upon competences (Bourdieu, 2013), so too does the university museum operate as a depository of heritage and a space of historical legitimacy, contributing directly to the accumulation of the institution’s symbolic capital.

At the same time, the museum participates in the formation of an institutional habitus – a set of perceptions, dispositions and practices learned by the members of the academic community, which shapes the way in which they understand and reproduce the values of the institution (Bourdieu, 1974; Nash, 2002; Reay, David and Ball, 2005). The visit to the museum, the encounter with founding objects and narratives, become moments of institutional socialisation, in which the student internalises his or her belonging to the academic community.

2.2 Institutional Communication – A Narrative Approach

In the recent literature on institutional communication (Cornelissen, 2011; Christensen and Cornelissen, 2011; Cheney et al., 2004), the emphasis falls on narrative as an essential instrument of coherence and identity-building. Institutions do not merely communicate information; they construct stories about themselves which they propagate to different audiences. The institutional image is determined less by internal reality and more by the way that reality is perceived through narrative, visual and behavioural cues (Abratt and Kleyn, 2012; Cornelissen, 2004).

The museum thus becomes a narrative node in which institutional stories are archived, illustrated and performed visually and symbolically. The story of the evolution of local medicine, of the founders, of the key moments in the life of the university – all participate in the construction of a coherent and convincing identity. Recent studies on strategic communication in museums (Capriotti, 2013; Kjeldsen, 2012; González Liendo and Gómez Nieto, 2024) confirm that the transition from information to dialogue with internal and external publics remains the great challenge facing cultural institutions.

This shift from monologue to dialogue in museum communication is examined in greater depth by Zhu and Nam (2025), who analyse museum communication strategies and identify a progressive move towards participatory and dialogic engagement with audiences. Their findings underscore the importance of strategic intentionality in museum communication: rather than merely disseminating information, museums must cultivate two-way interactions that enable publics to co-construct meaning. For university museums, this implies that institutional narratives need not be transmitted unidirectionally, but can be enriched through active audience engagement, thereby deepening the sense of belonging and shared identity.

2.3 Narrative as a Form of Legitimation

2.4 The Founding Story and Institutional Mythology

In the construction of institutional identity, narrative plays an essential role, not only as a form of communication but also as a mechanism of legitimisation. Every institution, including academic ones, grounds its authority and its continuity upon a “founding story” – a symbolic account of its origin, mission and values. This story becomes the source of an institutional mythology, which is not necessarily fictional, but which is configured and transmitted in such a way as to create meaning, belonging and loyalty (Humphreys and Brown, 2002).

In the case of universities, institutional mythology typically includes the evocation of visionary founders, of moments of resistance or transformation in the face of difficult historical contexts, and of exceptional contributions to scientific progress or to the public good. These stories provide members of the academic community with a symbolic framework through which they understand their place and role within the institution. They likewise offer a coherent discourse to the outside world, justifying the institution’s presence and relevance in the contemporary educational and social landscape.

2.5 The Museum as Institutional Storyteller

Within the narrative process, the museum can become a privileged medium for the expression and transmission of the institutional story. More than a depository of objects, the museum can be an authoritative narrator – it organises memory, structures narrative, and confers symbolic legitimacy through its very form of presentation (Hooper-Greenhill, 2000; Wróblewska, 2019).

This narrative function is achieved through three interdependent components. Selection presupposes a strategic choice: out of all possible events, characters and objects, only some are selected for display. This selection is never neutral; it reflects a vision of the institution's identity – what is deemed valuable, which aspects of the past deserve to be transmitted, which figures are celebrated. Display transforms raw memory into narrative experience: the objects are grouped thematically or chronologically, and the explanatory texts, the lighting and the scenography contribute to the staging of a coherent and emotionally resonant narrative (Falco and Vassos, 2017). Curatorship binds selection and display together within a unifying narrative vision: the curator becomes an architect of institutional memory, deciding not only what is said, but how, to whom, and to what end (Mason, 2006).

Through selection, display and curatorship, the museum fulfils a fundamental narrative role: it symbolically legitimises the institution and creates a bridge between past and present, between memory and aspiration.

2.5. The Notion of “Museum-Actor” in the Strategic Communication of Universities

2.6 Narrative Museology and Heritage Communication

Contemporary museology has moved beyond the classical view of the museum as a static depository of objects. Today, the museum is understood as a discursive space in which heritage is not only preserved but also reinterpreted, contextualised and brought into dialogue with the present (Hooper-Greenhill, 2000; Poulot, 2009). Objects no longer speak “by themselves”, but are accompanied by narratives, mediated through scenography, technology and museum pedagogy. The museum thus becomes an active educational medium, in which the visitor is invited to participate in the process of understanding, interpreting and even contesting history.

In a university setting, this educational function is amplified. The museum of a medical university must not be merely an annex of professional history, but an alternative didactic resource, complementary to formal learning. Here, students can explore not only medical instruments and techniques, but also shifts in mentality, professional models, ideals and ethical dilemmas in the history of medicine (Kozak, 2016). In addition, the museum functions as a visual institutional discourse that appeals simultaneously to reason and emotion, reinforcing the idea of belonging to an academic community with both roots and vision.

This function takes on a particular significance when read through the lens of the complexity of the medical profession, as theorised by Freidson (1970), Gawande (2002), Montgomery (2006) and Groopman (2007). If medicine is, as Montgomery argues, a practical science closer to the arts and humanities than to the exact sciences, then the museum becomes the space in which this duality can be made visible. Period medical instruments are not merely technical objects, but witnesses to a time in which uncertainty, the unforeseen, and professional courage were inseparable parts of the medical act. The museum offers, in Groopman's terms, a space for reflection on emotions in the white coat – on vulnerability, on doubt as an obligatory intellectual exercise, and on the need for cognitive flexibility in the face of the unknown.

Furthermore, the narrative potential of the museum can be substantially enhanced through digital technologies. Ren et al. (2025) argue that the preservation of cultural heritage in the digital age should seek to combine digital technologies with physical heritage, thereby enriching the multiplicity of narratives in thematic museum exhibitions. For the medical university museum, this suggests that the integration of digitised archives, interactive displays or multimedia testimonies could amplify the emotional and educational resonance of the exhibition, allowing multiple layers of professional identity – historical, ethical, humanistic – to coexist within the same narrative space.

2.5.2. The Concept of the “Museum-Actor”: From Actor-Network Theory to Institutional Practice

In the specialist literature, the concept of the “museum-actor” appears with increasing frequency, in the sense of an entity that does not merely reflect, but actively participates in the construction and communication of an organisation's identity. This concept, derived from Bruno Latour's Actor-Network Theory (ANT), assumes that the museum is a meaningful agent in the symbolic ecology of the institution – it produces meaning, influences perceptions and shapes discourses (Latour, 2005; Callon, 1986).

ANT proposes that both human and non-human entities act within social networks on equal footing: objects, spaces and artefacts are not merely passive supports, but actors that participate in the production and stabilisation of social order (Latour, 2005; Law, 1992). In the museum context, the theory has been applied to demonstrate that the distinction between the “hard” and “soft” components of curatorial practice is difficult to sustain: the object “under curation” becomes inseparable from the experimental framework and from the identity of the one who exhibits it. Central to ANT is the concept of translation – the process through which innovators create a forum, a central network in which all actors agree that the network is worth being built and defended (Callon, 1986).

Applied within the university space, the concept of museum-actor captures the museum's capacity to move beyond the role of mere passive recipient of objects and to become an actor of institutional communication, an integral part of the narrative strategy of the modern university. For a university, a well-conceived museum becomes an instrument of strategic positioning that contributes to: the consolidation of the institutional brand, through the evocation of history, tradition and academic contributions; the increase of prestige and public trust, through the leveraging of symbolic capital and heritage; the development of a cohesive organisational culture, in which students, teachers and visitors can find themselves within a shared story; and the support of internationalisation and academic cooperation, in which museums can become points of attraction and intercultural dialogue (Kjeldsen, 2012; de las Heras-Pedrosa et al., 2023).

This active, agentic conception of the museum is further substantiated by recent developments in Critical Museum Studies. Eckersley (2026) argues that museums are not merely sites for knowledge transfer or public history, but inherently political spaces – microcosms of political encounter where influence, power and status are both embodied by the institution and exercised through its practices. Applied to the university context, this perspective reinforces the argument that the museum-actor does not simply preserve and display, but actively shapes institutional discourse, mediates power relations between past and present, and participates in the ongoing negotiation of what the institution means and for whom.

3. Findings. The Museum of the History of Medicine, UMF Craiova

2.7 History and Evolution

The “Victor Gomoiu” Museum of the History of Medicine and Pharmacy in Craiova, an integral part of the University of Medicine and Pharmacy of Craiova, represents one of the oldest and most valuable museum institutions with a medical profile in Romania. It was founded in 1974, as a result of an initiative supported by a series of local figures: Dr Marius Constantinescu, Pharm. I.C. Pop and Dr Mihail Șcheau, with the decisive support of Dr Viorica Gomoiu, wife of Professor Victor Gomoiu, who donated a substantial part of his collection.

The context of its founding was favoured by a twofold motivation: on the one hand, the desire to preserve the regional medico-pharmaceutical heritage and, on the other, the recognition of the merits of Professor Victor Gomoiu, a leading figure in Romanian medicine, surgeon, organiser of the medical system and founder of the Romanian Royal Society for the History of Medicine and Pharmacy.

Across the decades, the museum has gathered objects of remarkable historical value: medical instruments, equipment, furniture, photographs, diplomas, medals, official documents, pharmacy-related items, health-education materials, and rare publications. Among the noteworthy exhibits, one finds period microscopes, mercury sphygmomanometers, surgical and dental instruments, pharmaceutical prescriptions, interwar pharmaceutical preparations, photographs of celebrated physicians such as Jianu, Laugier and Gomoiu, royal distinctions, patents, letters and archival documents.

In 1997, the museum was forced to leave its previous premises, following the restitution of the building. The exhibits were initially stored at the Casa Universitarilor, the Victor Gomoiu Foundation, the New Faculty of Medicine and the lecture hall of the Old Faculty of Medicine. In the year 2000, most of the exhibits were transferred to Târgu-Jiu, to the “Constantin Brâncuși” University, in the context of a project to establish a faculty of medicine – a project that, however, never materialised. At present, most of the exhibits are still located at the “Constantin Brâncuși” University in Târgu-Jiu, in a space that has not been arranged for display and is not accessible to the public.

It was from this reality that the rethinking and repositioning of the concept of the museum within the contemporary medical-academic context took its starting point. The conceptual and museographic reconfiguration aimed at modernising the exhibition space, thematically reorganising the collections and integrating the museum into the communication and educational strategy of the university. The redesign of the exhibition placed the emphasis on the clarity of the narrative path, on the visibility of the founding figures, and on the creation of an attractive and accessible space for students, visitors and institutional partners.

Today, the museum is repositioned as an active space for cultural mediation, for intergenerational dialogue and for the consolidation of local collective medical memory. It supports both the educational mission of UMF Craiova and its identity-related mission, being conceived as a vector of prestige and a marker of symbolic continuity within Romanian medical culture.

2.8 The Narrative Structure of the Museum

The narrative constructed by the museum is one of continuity, professionalism and local medical excellence, but also one of humanism and dedication to the patient. The story begins with the founding figures of medicine in Oltenia – Ion Jianu, Charles Laugier, Victor Gomoiu – whose exemplary careers are presented not only through objects, but also through photo albums, biographical fragments, diplomas, correspondence, badges and medals.

These outline a local institutional mythology that conveys values such as excellence, professional courage and an innovative spirit.

Thematically, the museum is structured into several narrative zones: the pioneering period of local medicine, the development of healthcare institutions in Oltenia, the profile of the great founding physicians, representative medical objects and instruments, and the evolution of medical education. This structuring allows for a layered reading, at once historical and identity-oriented.

The language of the exhibition is sober but accessible, relying on clear explanatory labels, occasionally accompanied by descriptive panels or multimedia materials. The scenography showcases authentic objects in clean display cases, with focused lighting and a chronological-thematic arrangement. The story told by the museum is addressed to several target audiences: students, as a space for complementary training and for reflection on the medical mission; teaching staff, as a pedagogical resource and identity reference; the general public and institutional partners, as a means of presenting academic prestige; and the local community, as a space of collective memory and of participation in university culture.

2. Discussion and Interpretations

3.1 The Identity-Related and Strategic Function of the Museum

The Museum of the History of Medicine of UMF Craiova acts as a genuine symbolic actor within the script of institutional identity. Through the selection of objects, the organisation of narrative and the staging of founding values, it contributes to the articulation of a coherent discourse about who the university is, what it has achieved and where it is heading. More than a space of memory, the museum becomes an instance of symbolic validation of institutional prestige.

Interpreted through the lens of ANT, the museum is not merely an object, but an actant within the institutional network – it produces meaning, influences perceptions and contributes to the stabilisation of the symbolic order of the university. Each display case, each document, each biography on view constitutes a “translation” in Callon’s terms (1986): a process through which values, histories and identities are translated into an accessible language and aligned within a coherent network of institutional meanings. At the same time, the museum is a living narrative platform, capable of being adapted and continued: through new acquisitions, artistic interventions, digital integration or educational activities.

Moreover, in the specific case of the medical university, the museum responds to a need that the sociology of professions identifies with great clarity: the need to rebalance the professional authority of medicine – founded on expertise and specialised knowledge, as Freidson (1970) described it – with the humanistic, narrative and emotional dimension claimed by Montgomery (2006) and Groopman (2007). In an age in which the illusion of knowledge, fed by informational obesity, erodes the credibility of the medical profession, the university museum becomes a space of re-legitimation: it shows not only what medicine has achieved, but also under what conditions of uncertainty, sacrifice and professional courage these achievements were obtained. In this way, the museum celebrates not only excellence, but also the vulnerability and humanity of the medical act – dimensions that Gawande (2002) considers essential for an honest understanding of the profession.

This theoretical argument finds empirical support in the work of Balhara et al. (2024), whose five-year retrospective study of museum-based education programmes at Johns Hopkins University demonstrates that such programmes, designed for various learner levels – from pre-health undergraduates to clinical medical students – effectively foster the development of clinically relevant skills and attitudes, as well as professional identity formation. Their findings confirm that museum-based education is not a marginal supplement but a meaningful component of medical training, one that cultivates precisely those humanistic competences – empathy, reflective practice, tolerance for ambiguity – that the present study identifies as constitutive of the identity of the medical university.

3.2 Tensions and Limits

The identity-related function of the museum may generate tensions. A first tension is the one between heritage and innovation: how can a space dedicated to the past sustain a current, future-oriented discourse? A second tension operates between authenticity and instrumentalisation: at what point does the museum become a tool of institutional marketing, risking the loss of the critical depth of its cultural endeavour? Lastly, there is a tension between the mythologisation of the past and the need for critical reflection, especially in an academic context that presupposes analysis, not merely celebration.

Even so, the Museum of the History of Medicine remains a space of belonging. For students, it offers a bridge of connection with the values of the profession. For academic staff, it constitutes a form of symbolic recognition.

For the community, it is a cultural and educational resource. And for the institution as a whole, it is an identity reference and a platform for legitimising professional, cultural and social continuity.

3. Conclusions

The medical university museum is no longer merely a historical annex, but a strategic institutional actor, with narrative, educational and symbolic functions. In an academic context placed under the pressure of change – digitalisation, internationalisation, competition – the museum can become a point of identity stability: a visual and discursive anchor around which the institution's values, mission and prestige are gathered.

Consequently, the Museum of the History of Medicine of UMF Craiova is not merely a symbolic annex, but a strategic actor in the process of constructing university identity, an active narrative space, and a catalyst of living memory and professional commitment. It demonstrates that the notion of the “museum-actor”, theoretically grounded in ANT and validated through institutional practice, offers a fertile analytical framework for understanding the way in which heritage spaces actively participate in the strategic communication of universities.

By comparison with international examples, the Museum of the History of Medicine of UMF Craiova has the potential to become a platform for interdisciplinary dialogue, a space of belonging, but also a benchmark of contemporary university communication.

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