

COMMUNICATION STRATEGIES FOR MARKETING HEALTH PRODUCTS AND SERVICES

A Case Study by Inegbenebor, Ute , Nigeria
(MPH, PhD in Health Education Student of Texila American University)
Email: druteinegbenebor@yahoo.com

ABSTRACT

Health services are intangible products, which need marketing strategies to optimize benefits to the individuals, families and the community. Like every product, tangible or intangible, an optimum marketing mix involving pricing, product quality, product promotion and product packaging or merchandising, can improve consumer satisfaction and their patronage of health products and services. Apart from training of trainers' programs and specialized health education programs, the audience for a health service is generally heterogeneous, uncontrolled and diverse. There is a need for marketing research in order to select or segment an audience so that health services and products can be, designed in such a way that they are, affordable, accessible, comprehensible, user-friendly and attractive to consumers. Research must be targeted at defining community needs and perspectives while messages concerning health services and products must have clearly defined objectives. In addition, expected benefits from the health products and services must be clearly stated to the target audience. However, marketing policies should be implemented against the background of the humanitarian nature of health services and fundamental human rights.

KEYWORDS Communication Strategies, Marketing, Health Products, Services

INTRODUCTION

Communication is a two way process of exchanging or shaping ideas, feelings and information. The ultimate goal of communication is to bring about a change in the desired direction of the person who receives the message. Ability to influence others depends on communication skills in speaking, writing, reading and reasoning. Communication may also occur without words. These include body movements, postures, gestures and facial expressions. (Park, 2007) It is probably through these non-verbal interactions, such as smile, frown and shrugging of shoulders, that health service consumers are able to detect and interpret the emotional feelings (care, confidence, or indifference) exhibited by the health service provider.

Communication channels include interpersonal communication, mass media and folk media. The communication channel, which will be most effective in delivering a message, depends on the type of audience, their level of sophistication and geographical spread. (Park, 2007)

Audience may be homogenous or heterogeneous. Homogeneous audience is a standardized group which is held together by a common interest. Examples include a group of health educators attending a conference or training of trainers' program and pregnant women in the health education session of an antenatal clinic. Such a group facilitates effective communication. A heterogeneous audience is a gathering of people who have joined the group out of curiosity and with different motives. An example is a gathering of people at the village or market square on hearing the sound of the music of a dance troupe hired by health educators to mobilize people towards the arena of delivery of a health message. Such a group poses a challenge in terms of getting them to listen, understand and give a feedback to the health educator. This is particularly difficult when there is a high level of illiteracy in the audience. Diversity of dialects and languages may also pose a problem. Segmenting the audience in terms demographic, psychosocial, behavioral and geographic variables or combinations of these and other variables may solve the problem of heterogeneity. (Weinstein, 1994; Boslaugh et al., 2007)

One of the key steps in the health communication and social marketing process is identifying the population segments that can benefit from a specific health behavior. (Kreuter, 2003) The more one knows about the primary segment, the better one can reach them with messages, activities and policies. The upfront research includes understanding the needs and wants of the target audience (Pickton and Broderick, 2005) on a more personal level, and their motivations and lifestyles so that one can be truly engaged with them. This effort will pay dividends later when one begins preparing campaign activities, health messages, channels and campaign materials.

The medium of communication depends on the geographical spread of the target audience. A message to a large community or country may have to be communicated through the print and electronic media. The advantage of the print and electronic media over the word of mouth is that distortion of messages is avoided. However, distortion may occur when such messages are reverberated by word of mouth.

Innovatory approaches to health communication based on social marketing techniques are now being used in projecting health messages in order to promote health. Social marketing can be defined as a systematic application of marketing along with other concepts and techniques to achieve specific behavioral goals for a social good (Gordon, 2006; McDermott et al., 2006). It is a process of creating, communicating, and delivering value in order to influence target audience behaviors in ways that benefit society (Kotler and Lee, 2008). Social marketing is the application of marketing principles and techniques to achieve social goals such as effective health communication.

The process involves

- Clearly defined measurable goals such as promotion of the use of insecticide treated nets or condoms.

- Research to define community needs and perspectives such as determination of what people want or need and what they are prepared to buy and at what price.
- Optimization of product design based on research findings such as packaging contraceptives in attractive packages that can easily enter women's purse and producing condoms with attractive and pleasant scent.
- Effective communication of expected benefits of a health service or product such as explaining the benefit of birth spacing in managing limited financial resources for children education . (Lucas and Gilles, 2006)

DEFINING MEASURABLE GOALS

The goal of a health service must be clearly defined. It should be specific, measurable, attainable, realistic and time bound. (Araoye, 2004) It should be able to evaluate the output and the impact of a health service. For example, it should be able to determine the increase in the number of condoms bought by or distributed to the target community three months after a health talk on birth spacing in a rural community and also determine the number of women who have spaced their child birth by at least two years, five years after the introduction of family planning service in the community.

DEFINING COMMUNITY NEEDS

Community needs may be felt or unfelt. They are felt when they are perceived as necessary by individuals, families and communities and unfelt, when they are not perceived as necessary. Needs may be unfelt because of social-cultural and psychological barriers of ignorance, prejudice and misconceptions of a health problem (Park, 2007) For example, pipe borne water may be unavailable in a community, which has a number of unprotected sources of water such as streams and ponds. Most members of such a community may not perceive the need for pipe-borne water, even when there are several cases of guinea-worm (*dracunculus medinensis*) infestation in the community.(Biswas et al., 2013) Community research by a health educator is able to determine the link between the guinea-worm infestation and the lack of pipe-borne water.

The health educator then proceeds to give a health talk to the community on the need for pipe-borne water. He uses the health message, information, education and communication materials to increase the community awareness to the point that they are able to perceive the need for pipe-borne water. Through reinforcement in subsequent health talks, he is able to influence the community to see the need for pipe-borne water as a felt need. Intensifying the felt need in the community, through further dissemination of the health message by health service providers and members of the community, through formal routes and informal routes (the grapevine), leads to a demand for community or government action. This makes the pipe-borne water available. The marked decrease or eradication of guinea-worm infestation (Biswas et al., 2013) in the community confirms the worth of the health message and gives rise to further reinforcement of the need to use pipe-borne water by members of the community and even beyond.

HEALTH AS A PRODUCT

Health services may be tangible or intangible. Tangible services are those services that are tied to a physical product. Clinical medicine seeks to restore health through the use of drugs and surgical treatment. Drugs are tangible products while the surgical treatment is intangible in that it is not a physical product. (Kotler, 1999) Public health includes medical interventions with the use of immunization and chemoprophylaxis but more importantly, it emphasizes control of the environment and of human behavior. (Lucas and Gilles, 2006). The product is the desired behavior, as well as key perceived benefits for adopting the behavior, and any tangible objects or services that add value. (Kotler and Lee, 2008)

Communication is a necessary tool for making health services effective and efficient. Without communication, awareness of health services is not possible. There is therefore a need for developing communication strategies for the optimum delivery of health services. An innovative strategy for promoting health care delivery is borrowed from the marketing field and may be named health marketing mix. The components of this mix include Product quality, Pricing, Promotion, Placing, Packaging and People. (Kotler, 1999)

QUALITY OF HEALTH SERVICES AND PRODUCTS

Quality is no doubt the most important attribute of a health service or product. However, health service consumers may perceive quality of a health service in different perspectives. Some may see health service as effective in the sense of providing the expected remedy but some others may consider the approach of the provider to the clients. In addition to providing quality service or health products, health service providers must show care, confidence and charisma. They must explain the benefit of the service to the consumer. Benefits are reasons the target audience might be interested in adopting the behavior or what might motivate them to do so. (Kotler and Lee, 2008)

The language must be understood by the consumer and use of medical jargons and slangs must be avoided. Health Educators must avoid smoking, chewing gum and eating while communicating with the client. Health service providers should reinforce the formal teaching in health education by their own example. (Gilles and Lucas, 2006) The members of the community observe the behavior of health workers and compare it with what they have learnt from posters, lectures and other forms of health education. Therefore health care providers must maintain good social habits, high standard of personal hygiene and environmental sanitation of health centers, clinics and institutions. Diets served in hospitals must have semblance with the balanced diet so often recommended to health service consumers. Every contact with the health care provider must be a continuous exercise in health education.

OPTIMIZING A HEALTH SERVICE/PRODUCT DESIGN

The manner of presentation of a health message and the packaging of the supporting health products may affect the perception of consumers and make or mar the consumer acceptance and

usage. The location of the venue for delivering a health message must be easily identifiable, convenient and accessible. Sitting arrangement must be comfortable. Health messages should be delivered in short time duration otherwise they become boring. They should be delivered in a language that the target audience understands. Medical jargons should be avoided. The mannerisms of the health educator should be such that they connote interest and concern about the community welfare. He must not engage in distractions like answering phone calls during the health message or paying unnecessary attention to whimpering and whisperings. Products displayed must be attractive and user friendly and not be presented in numbers and colors that are culturally offensive. To some communities, red may mean danger while black signify demons or death. Many Caucasians attach a jinx to number thirteen.

APPROPRIATE PRICING OF A HEALTH SERVICE OR PRODUCT

Health products and services come with a price which is dependent on the cost of raw materials, technology, transport and packaging. No matter the quality of a product, pricing may determine its usage. A high price may lower the demand and a low price may increase demand. In addition, a high price may be used to discourage undesirable lifestyles such as tobacco or alcohol abuse while a low price may be used to encourage desirable practice such as contraception. (Kotler and Lee, 2008) However, providing a health service or a product at a low price does not necessarily increase demand. Sometimes, a very low price may cause rejection of a health service (Taylor, 2012) as members of the community may read negative meanings (substandard product, expired product, lure for sterilization) to the excessive subsidy. The Alma–Ata declaration specified a cost at which individuals, families and communities can afford in the spirit of self reliance and social justice. (International Conference on Primary Health Care, 1978) Community research must therefore be carried out to determine the price that can be paid for a product or service before it is introduced. In doing this, cognizance must be taken of the cost to the provider. The health care provider can reduce cost by sourcing from manufacturers or by mass production. In the case of a health service, he can increase the number of recipients in order to reduce unit cost. He can also charge higher fees to paying clients in order to cater for the poor. In many cases, government or donor subsidy may make a service or product affordable. For example, certain non-governmental organizations like Bill and Melinda Gates foundation are funding the treatment and control of Acquired Immune Deficiency Syndrome (AIDS) in many parts of Africa and Asia (Tran et al., 2013) while the Carter foundation is funding Guinea-worm eradication program. (Ruiz-Tiben, E. and Hopkins D. R., 2006)

Pricing-related strategies to reduce costs and increase benefits include the following: (Kotler and Lee, 2008).

- Increased monetary and non-monetary benefits for the desired behavior.
- Decreased monetary and non-monetary costs for the desired behavior
- Increased monetary and non-monetary costs for the competing behavior.

PROMOTING COMMUNITY HEALTH SERVICES

Health services may be promoted through word of mouth, folk songs, print and electronic media. Information on product benefits and features, fair price and easy accessibility need effective and efficient communication to bring to the target audience and inspire action. Promotion strategy is needed to maximize the success of communication. The development of these communications is a process that begins with the determination of key messages, continues with the selection of messages and communication formats and channels, moves on to the creation of communication elements and ends up with the implementation of those communications. (Cheng et al., 2009) In most countries there is legislation against advertisement of medical services by appropriate medical councils. Unfortunately this is not the case with unorthodox health practices by charlatans, religious leaders and quacks. These quacks and charlatans are allowed to advertise through loud speakers in moving vehicles to unsuspecting ignorant and poverty stricken members of the community. In some countries like Nigeria, trade fares are organized for herbalists and telecasted to members of the public (Personal observation.) Religious leaders openly boast of having cures to cancers and Acquired Immune Deficiency Syndrome and tell members of the public that treatment of sexually transmitted diseases in one person can immunize the partner, thereby perpetuating the ping-pong phenomenon of sexually transmitted diseases. In spite of legislation, health services can be promoted by sponsoring community events in which the health service is discussed by a charismatic speaker and free or subsidized services are offered to the audience and interested members of the community. Notable musicians and inspirational artists may be invited to such occasions and made to sing about or demonstrate the theme of the health message. The presence of such artists and musicians can improve the attendance and motivate the audience to listen and remember health messages. The number of attendees in a health promotion event featuring a musician as popular as late Michael Jackson in the demonstration of condom use to the youths is better imagined. In traditional settings, local dance troupe may be equally effective. This strategy has been referred to as 'edutainment' (Cheng et al, 2009)

Several health services including primary health centers are government owned. It is a paradox that though the government has established the use of these primary health centers for public use, many potential clients who live close to the health centers are unaware of the available health facilities. Many of these facilities were put in place without community involvement in the planning and implementation. The government should involve members of the community in every stage of the planning process to the implementation of the program. (Gilles and Lucas, 2006) Such health services should be inaugurated with community participation and involvement and a form of social gathering in which some health service providers are introduced to the members of the community.

LOCATING A HEALTH SERVICE (PLACE)

Research should be carried out to determine the place for a health service. Place is largely where and when the target audience will be encouraged to perform the desired behavior and/or to

obtain tangible products or services associated with a health campaign. (Cheng et al., 2009) This will remove socio-cultural and religious barriers to the usage of the health service. A health service must not be sited in an area of dispute between neighboring communities or a sacrilegious location. Opinion leaders and community heads in the catchment area of a health service must be consulted before locating a health service. An attempt should be made to locate a health service in an accessible location which should preferably be relatively equidistant from user communities in the catchment area. Timing of a health service should also be based on research. Taking a health message to a local community during their cooking hours will exclude women from such health services.

COMMUNICATING EXPECTED BENEFITS OF A HEALTH SERVICE OR PRODUCT

To ensure compliance, the audience of a health message should be informed about the expected benefits. In doing so, the health educator must divulge only those benefits that are certain and avoid benefits that are equivocal. While it is true that insecticide treated nets prevents malaria, it cannot prevent malaria if people spent a greater part of their evenings telling folk tales in their unprotected verandah. Condoms may prevent pregnancy but appropriate, consistent and regular usage before their expiry dates must be ensured to provide the expected benefits. Health educators should bridge the gap between consumer perceptions and reality in delivering health messages. Use of seat belts may prevent chest injuries in road traffic accidents. However, excessive speed may facilitate a chest injury from the seat belt, when brakes are suddenly applied. Provision of pipe borne water in a community can only prevent guinea worm if the members of the community stop drinking other sources of water such as unprotected ponds and pools of water from a stream. Thus expected benefits must be presented with specifications.

CONCLUSION

Health services and products need effective communication strategies based on research to be of benefit to consumers. Like other services and products, it is necessary to devise innovative health marketing strategies, if a health service must be effective and efficient in the modern world of technological breakthroughs, free market enterprise and human rights. (Vienna Declaration, 1993)

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