

Attitudes About Marketing Among Pennsylvania Family Physicians

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In 1975 the American Medical Association (AMA), under pressure from the Federal Trade Commission, softened the Principles of Medical Ethics prohibition on advertising by physicians, groups, or medical organizations, including specialty academies.¹ Since then, the AMA has permitted advertising, the intent of which is to provide information to the public in an honest and dignified manner while still opposing deceptive "solicitation."²

As a result, since 1975 there has been increasing attention by physicians to the practice management field of marketing. Marketing is defined as the endeavor to adapt the provision of goods or services (in this case, medical care) to suit the customers' (patients') needs. It includes promotional communication, which in this context educates patients about their health care needs and how they can be met.

A number of medical editorialists have written both for^{3,4} and against^{5,6} the use of marketing methods by physicians. Only one published study has measured the attitudes of physicians themselves, however. In that study 87 percent of Texas physicians were opposed to individual physician advertising.¹

A survey of south-central Pennsylvania family physicians elicited their attitudes toward promotional marketing. Results have been reported in summary form elsewhere,⁷ but are reported here in detail. Results of this study are the first published to demonstrate that physicians regard specialty-based marketing more favorably than individual physician advertising. This study is also the first to focus on family physicians.

METHODS

A 25-item questionnaire was mailed in May 1984 to the 266 physician-members of the Southcentral Counties Chapter of the Pennsylvania Academy of Family Physicians (SC-PAFP). The questionnaire measured members' perceptions of their own patients' understanding of family practice, their attitudes about the propriety and effectiveness of specialty-based marketing, and their preferences for and against 15 particular promotional marketing methods ("questions"). Interpretable responses were returned by 111 members (referred to in this report as the questionnaire group), 42 percent of the membership.

An effort was made to ascertain whether the questionnaire group was a biased sample by comparing it with a random sample of the remaining 58 percent of the SC-PAFP members who did not complete the original mailed questionnaire. Seventy-five members were randomly chosen from an alphabetized roster for the validation group, and randomness was confirmed by comparing the validation group with the chapter membership according to community size, years in practice, diplomate status, and proportion responding to the original mailed questionnaire. Three subjects were deleted from the validation group because they moved out of the chapter between the time of the first questionnaire and that of the subsequent telephone survey.

Validation group subjects were asked a subset of five questions from the original questionnaire by one of three interviewers in a single-blind fashion using a standard script. These five questions were selected because they had elicited a representative range of responses from the original questionnaire group, and they appeared to indicate key attitudes. In the validation group, there were 37 who had responded to the original questionnaire, and 35 who had not previously responded.

Respondents reported their subjective degree of agreement with statements using a six-point Likert scale. A weight of 1 was assigned to strongly agree responses, a

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TABLE 1. PROMOTIONAL METHODS MOST FAVORED AND OPPOSED BY QUESTIONNAIRE GROUP PHYSICIANS

Promotional Methods	Score*
Favored (mean score <2.25)	
Academy-sponsored regular news column on health topics	2.12
News articles about family practice	2.14
Television and radio documentary about family practice	2.23
Academy promotion of October as Family Health Month	2.25
Opposed (mean score >4.50)	
Television or radio commercials by individual physicians	4.88
Newspaper advertisements by individual physicians	4.51

* 1, strongly agree; 6, strongly disagree

weight of 6 to strongly disagree responses, and weights of 2 through 5 to intermediate responses. Standard deviation calculations and chi-square analyses were conducted on a mainframe computer using the Statistical Package for the Social Sciences (SPSS). Results were considered statistically significant at $P < .05$.

RESULTS

Physicians in the questionnaire group perceived gaps in their patients' understanding of family practice. Only 58 percent of their own patients were believed by family physicians to know the difference between family physicians and other primary care physicians. Fewer patients were felt to understand family physicians' capabilities (51 percent) or the meaning of board certification (20 percent).

Physicians in the questionnaire group expressed agreement with statements indicating that they perceive a need for public information, they want the local academy chapter to respond to the need, and they give their ethical approval for the chapter to do so.

A rank ordering of marketing methods most favored and those most opposed by physicians in the questionnaire group is listed in Table 1. They favored several uses of the mass media by specialty academies for promoting family practice. They strongly opposed individual physician advertising in newspapers, on radio, or on television.

A comparison is shown in Table 2 between responses to the subset of five questions used for the validation study of the questionnaire group and those of the validation subgroup that had not responded to the earlier questionnaire. The mean scores were similar, and there were no significant statistical differences between the questionnaire

TABLE 2. RESPONSES TO VALIDATION QUESTIONS BY QUESTIONNAIRE GROUP AND VALIDATION GROUP

Question	Responses (Mean ± SD)	
	Questionnaire Group (n = 111)	Validation Group* (n = 35)
4. Family physicians in my area will face increasing competition in the coming decade from other sources of primary care such as emergency rooms, "urgicenters," and nonmedical practitioners.	2.05 ± 1.05	1.60 ± 0.66
8. Our southcentral academy chapter should sponsor projects to disseminate health information and to increase public awareness of family practice.	1.93 ± 0.82	1.81 ± 0.91
16. Academy-sponsored regular newspaper column discussing medical topics should be used to promote family practice.	2.12 ± 0.75	2.49 ± 0.98
23. Yellow pages advertisements by individual physicians should be used to promote family practice.	3.50 ± 1.56	3.67 ± 1.38
25. Television and radio commercials by individual physicians should be used to promote family practice.	4.90 ± 1.13	4.86 ± 1.17

* Validation Group, a subgroup that had not responded to the original questionnaire

Note: No differences are statistically significant

group and the validation subgroup of nonresponders. The validation group of previous responders was also compared in a similar fashion with the validation subgroup of nonresponders, and likewise no significant statistical difference was detected. The agreement in responses between the groups suggests that the original questionnaire accurately represented the views of the entire SC-PAFP.

DISCUSSION

This study is the first reported in the family medicine literature about the attitudes of practicing family physicians toward promotional marketing. These family physicians strongly and uniformly expressed the following

opinions: (1) family practice is not adequately understood, even by physicians' own patients; (2) use of mass media promotional methods by academies of family physicians is favored to increase public understanding of the specialty—newspaper columns, television documentaries, and observance of Family Health Month; and (3) individual physician advertising in the mass media is strongly opposed.

There are several limitations of the study. First, findings from this study do not allow conclusions to be drawn about the attitudes of family physicians in other regions of the United States or, particularly, in large urban areas, none of which was represented in the SC-PAFP.

Second, this study measured physician attitudes toward promotional methods rather than the actual influence of these methods on patients' physician-choosing behavior. To measure directly the impact of particular promotional methods on the public's selection of physicians would require marketing research methodologies beyond the scope of this study.⁸

Last, the survey questionnaire cannot be considered valid and reliable outside the context of the SC-PAFP without further testing of the instrument. If similar polls of family physicians in other regions show a comparable degree of support for specialty-based promotion, however, local and state chapters of the American Academy of

Family Physicians would have a strong mandate to undertake public relations projects.

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