

Health care questions



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Health Care Questions The essay aims to provide relevant answers to the following questions, to wit what are the most effective sources of data to examine before beginning a social marketing campaign? And (2) what are some leadership traits that might be used by an important interest group in the development of public health objectives in your community? How might those traits be exploited?

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What are the most effective sources of data to examine before beginning a social marketing campaign?

First and foremost, social marketing has been defined as "" differing from other areas of marketing only with respect to the objectives of the marketer and his or her organization. Social marketing seeks to influence social behaviors not to benefit the marketer, but to benefit the target audience and the general society." (Kotler & Andreasen as quoted by Weinreich, 2006, par. 2). In every marketing campaign, the most important sources of data to examine are the elements of the marketing mix: product, price, promotion, and place. For social marketing campaigns, the following elements are added: public, partnership, policy and purse strings (Weinreich, 2006, pars. 4 - 11).

Under health care, a social marketing campaign considers any of the wide range of products offered by health care institutions. Physical products come in the form of medicines, prosthetics, and other tangible health products. Health care also offers services ranging from diagnostic, laboratory, therapeutic examinations. Other products are likewise enumerated: " practices (e. g., breastfeeding, ORT or eating a heart-healthy diet) and finally, more intangible ideas (e. g., environmental protection)" (Weinreich,

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2006, par. 4).

The price is the cost for designing and implementing the social marketing campaigns. The place is the target market for the campaign. The promotion “ consists of the integrated use of advertising, public relations, promotions, media advocacy, personal selling and entertainment vehicles. The focus is on creating and sustaining demand for the product” (Weinreich, 2006, par. 6).

The other critical sources of data for the campaign are: publics (internal and external groups directly involved in the campaign); partnerships (affiliated organizations that team up to organize the campaign); policy (governing rules supporting the social marketing program); and purse strings (“ funds provided by sources such as foundations, governmental grants or donations” (Weinreich, 2006, par. 11)).

What are some leadership traits that might be used by an important interest group in the development of public health objectives in your community?

How might those traits be exploited?

Coye, Foege, & Roper (1994) identified leadership traits required in public health to ensure the development of health objectives in one’s community, to wit: “ the ability to see the big picture, to think and plan strategically, to share a vision with others, and to marshal constituencies and coalitions for action”. Leadership in public health manifests traits of servant leadership, to wit: skills in (1) listening, (2) empathy, (3) healing, (4) awareness, (5) persuasion, (6) conceptualization, (7) foresight, (8) stewardship, (9) commitment to the growth of people, and (10) building community (De Graaf, Tilley & Neal, 2001, 1).

These traits are critical in developing clearly stated health objectives for the

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community after discerning the status of public health in their respective localities. Leadership does not exist in a vacuum and leaders do not operate in isolation. So leadership is not only about leaders but also about followers and the situation where both leaders and followers find or choose themselves to be in. The characteristics and need system of the leader influences his range of perceptions of follower motives and his judgment as to which of these are relevant in a particular situation. Public health leaders must become more conscientious in their objectives to include social responsibilities, environmental concerns, community development, social and civic projects, among others.

As aptly averred by Coye, et. al. (1994), “ public health leaders must understand and deal with the multidimensional public health problems of today and the future. Some of the straightforward challenges of the past (an uncomplicated infectious disease, for example) were amenable to straightforward solutions (produce a vaccine and deliver it to all who are potentially susceptible). Today, many problems (such as teen pregnancy, drug abuse, and sexually transmitted diseases) are intertwined with seemingly intractable social and economic ills. These issues demand that leaders in public health be equipped differently than the leaders of yesterday.” In this regard, the leadership traits which focus on the holistic development of public health can be exploited through providing the right motivation with a structured local health organization clearly stipulating health objectives at required time frames.

References

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