The effectiveness of social responsibility for public relations in marketing health services

Nassereldin Abdel Qadir Osman¹, Fatmah Abdulbaqi Albakheet², Merhan Mohsen Mohammed³, Tarek Ismail Mohamed¹,*

¹ College of Mass Communication, Ajman University, Ajman 346, United Arab Emirates
² Ministry of Human Resource and Social Development, Dammam 3258, Saudi Arabia
³ Department of Communication and Multimedia, University College of Bahrain, Manama 55040, Bahrain
* Corresponding author: Tarek Ismail Mohamed, tarekabdelatif96@hotmail.com

Abstract: The study aims to identify the effectiveness of social responsibility programs. More specifically, it seeks to identify the extent to which health institutions use social responsibility programs and to clarify the extent to which social responsibility programs succeed in achieving the goals of health institutions. The study sought to provide answers to the following questions: To what extent do health institutions use social responsibility programs? To what extent have social responsibility programs succeeded in achieving the goals of health institutions? The study used the descriptive analytical method, relying on the survey method. The study concluded with many results, the most important of which were the following: the effectiveness of social responsibility programs in marketing health services at the educational and age levels and the role of social media in marketing health services. The study recommended the necessity of providing an awareness dimension to marketing health services, with increasing training opportunities for workers in public relations departments in hospitals and health institutions to market health services, in addition to the necessity of conducting relevant research, studies, and surveys. Identify the activities that will help those working in the public relations department in health facilities with regard to identifying basic and influential needs and activities in directing successful health campaigns.

Keywords: marketing health service; social responsibility programs; public relations; communications

1. Introduction

Health institutions grapple with significant challenges in balancing their objectives and effectively serving the community. This delicate balance involves obtaining financial revenues to provide high-quality service while also meeting the community’s needs. Marketing plays a crucial role in attracting a wide audience to health services, thereby serving the public stakeholders (Dhavaleshwar et al., 2021).

Nowadays, the concept of social responsibility has become closely related to the provision of healthcare services. This is based on the grounds that healthcare institutions are no less important than other aspects covered by social responsibility, including global ethical principles that respect people and their rights to obtain optimal health care (Matysiewicz and Sztangret, 2017).

Social responsibility has gained an increasing international significance and become a part of the discussion about competitiveness and sustainability in the context of globalization, considering that it is a self-regulating business model that helps the health institution to be socially responsible to itself, stakeholders, and the public.
Generally speaking, through practicing social responsibility—which is called corporate citizenship too—companies can realize the kind of effect they exert on all aspects of society, either economically, socially, or environmentally. Social responsibility in marketing targets focusing efforts on attracting consumers who want to make a positive difference in the services they receive. Furthermore, miscellaneous organizations have adopted marketing strategies to help society through valuable services, especially health services (Investopedia Team, 2022).

In keeping up with the sustainable development goals, the third goal, entitled “Health and social well-being,” is a strategic goal that seeks to provide good health and well-being for all society members. Consequently, health institutions have started to pay attention to the health service field. Moreover, the social responsibility of institutions and companies significantly affects healthcare institutions. It can even help them reduce disease treatment costs, especially chronic diseases, in the long run by disseminating prevention and health promotion information as part of the corporate social responsibility in the healthcare field; companies and health institutions have chosen to focus their efforts in this context. That sheds light on the social responsibility of public relations is extremely important through the organizations’ commitment to society in its various segments by developing programs and activities that lead to achieving the goals of the organization and society as a contract between the organization and society, whereby the organization is committed to satisfying Society and in the public interest. Promoting social stability by achieving justice and equal opportunities represents the essence of the institution’s social responsibility. Improving the quality of services provided to the community. Increase awareness of the importance of integration between organizations and various interest groups (Maljugić et al., 2022).

2. Research problem

The significance of marketing health culture lies in its distinct effects on health organizations, including performance quality, whose effect can be measured through customer satisfaction and loyalty, in addition to their upholding the organization’s reputation. Therefore, there are distinct benefits to applying marketing strategies in health services effectively, including understanding the needs and expectations of patients, improving the competitive advantages quality, creating a good reputation among patients, and building a strong and compelling brand for the organization by distinctively marketing its services (Purcarea, 2019). Corporate social responsibility plays a vital role in this regarding via offering various programs that will support the marketing of various health services in a way that satisfies the needs and desires of patients within a framework of trust and credibility, which enhances customer loyalty, supports the institution’s reputation, and gives the institution a sustainable competitive advantage.

Health institutions seek to achieve effective participation in community service and its requirements through marketing health services optimally and with high quality, in addition to making them available to all people within the limits of their capabilities and desired needs. Therefore, the idea that organizations should be attentive to the needs of the constituent elements of their survival in the competitive market to provide
service at the highest level needs to be studied. This is what this study is trying to research by identifying the relationship between the provided work and society.

3. Research questions

The study seeks to answer the following questions:
1) What are the demographic characteristics of the target audience?
2) To what extent do health institutions use social responsibility programs?
3) How successful are social responsibility programs in achieving the objectives of health institutions?
4) What is the extent of the impact of social responsibility messages on increasing public interest in health institutions?
5) Did the social responsibility programs contribute to increasing the level of satisfaction among the public?

4. Research significance

The significance of the research lies in its theoretical and applied aspects. On the one hand, the theoretical significance lies in the study providing a theoretical framework for the effectiveness of public relations social responsibility programs in marketing health services. Moreover, its significance results from the health institutions’ role in their interaction with the local community and their care for the employees and beneficiaries of their services. Add to that; the theoretical significance becomes evident by creating a connection between the social responsibility concepts and public relations in a way that contributes to improving the work of the health institutions and how to benefit from them in a way that serves the community. Research in the field of using social responsibility programs in public relations provides a wealth of knowledge based on ethics and humanity.

On the other hand, the applied significance lies in the fact that the study works on activating methods and ways of employing the social responsibility of the service institutions optimally in a way that contributes to the success of communication processes with the public towards realizing the optimal objective of the public relations represented in achieving understanding and confidence towards the institution. This urges us as researchers to shed light on research that revolves around methods of using social responsibility programs in building public relationships. Moreover, the applied significance of the research lies in the following:
1) Indicating social media’s impact on public relations departments’ work in marketing health services.
2) Clarifying the type of statistical significance between community participation programs for public relations, marketing health culture, and public relations activities.
3) Enrichment libraries with a wealth of knowledge and information about social responsibility in public relations.
4) Developing the ethical, behavioral, and humanitarian aspects of those working in the field of public relations by activating social responsibility programs.
5. Research objectives

The study sought to achieve the following objectives.

1) Identifying the extent to which health institutions use social responsibility programs.
2) Clarifying the extent to which social responsibility programs succeed in achieving the goals of health institutions.
3) Clarifying the extent to which social responsibility programs contribute to increasing the satisfaction level among the public.
4) Exploring the impact of social responsibility messages in increasing public interest in health institutions.
5) Identifying the demographic characteristics of the target audience.

6. Research approach

The descriptive approach is defined as the approach that is used in studying the current conditions of phenomena in terms of their characteristics, forms, relationships, and the factors influencing them. The descriptive approach is often connected with human and social sciences studies. To achieve the purpose of the study, the researchers used the analytical descriptive approach, considering that it is the best approach to achieve the study objectives and answer its questions. The survey approach was relied upon by using a sample survey for several workers in governmental and non-governmental hospitals in the eastern region. A questionnaire was constructed for personnel of the public relations department in the health sector in the eastern province of the Kingdom of Saudi Arabia, with a view to providing answers regarding how effective the public relations social responsibility programs are for marketing health culture (Ahmad et al., 2021).

This study belongs to descriptive-analytical studies, which collect information related to a phenomenon and then analyze and interpret the results to extract useful results that help organizations fully benefit from social responsibility programs in marketing their health services. The study counts on the survey approach, one of the most used approaches in media studies, especially descriptive research (Krippendorff, 2004).

7. Data collection tools

In this study, the researchers used the questionnaire tool as an essential means of obtaining information through the posed questions by preparing a form to be filled out by a representative sample of individuals. The tool was used with a sample of workers in health institutions in the eastern province of the Kingdom of Saudi Arabia.

8. The theoretical framework

8.1. Sustainable development as a framework for CSR

Sustainable development issues have become at the forefront of the attention of the world’s countries and institutions of all kinds and diversity. Furthermore, institutions tended to strengthen and increase the size of their social practices or
responsibilities and integrate them with the sustainable development goals to contribute to society development, especially in light of the advantages of integrating corporate social responsibility and sustainable development goals into a new framework that meets current and future needs and provides a better roadmap for institutions.

The United Nations Industrial Development Organization defined social responsibility as an administrative concept carried out by companies through the voluntary contribution of the company or establishment to community development through the implementation of economic, social, environmental, and other development projects and programs in the country, in order to improve the effectiveness of the relationship with society and interaction with stakeholders. Social responsibility is the way through which an organization can achieve a balance at the economic, environmental, and social levels, according to the organization (https://www.unido.org). There is no doubt that social responsibility programs will enhance the company’s image, reputation, and brand, support public confidence in the company, customer satisfaction and loyalty, and enhance financial performance in the market.

Sustainable development is defined as development processes aiming to strike a balance between current and future needs by meeting the present’s needs without prejudicing future generations’ capabilities (Caradonna, 2017). At the same time, the sustainable development goals lead to the sustainability of businesses, stable economies and societies, preventing crises, managing resources, expanding the labor market, and the growth of global markets. Consequently, the sustainable development goals achieve the goals of corporate social responsibility.

Ethical principles and the application of social responsibility programs in healthcare institutions support sustainability and sustainable development goals (Munthe et al., 2021). In addition, healthcare employees’ participation in supporting social responsibility programs and activities positively affects innovation and outstanding performance in the workplace, which leads to corporate sustainability. Hence, there is an integration between ethical principles, social responsibilities, and sustainability (Ahmad et al., 2021).

8.2. Social responsibility and health service

There is no doubt that the social responsibility of institutions has become imperative that all organizations undertake. This is evident from the rapid response of health sector organizations to the coronavirus pandemic. On the one hand, many companies have shown a significant commitment to society by marketing health culture to citizens that would reduce the consequences of the coronavirus. On the other hand, other companies developed their strategies quickly to fulfill their responsibilities by protecting all stakeholders’ different and various interests and protecting society by providing integrated health care during the coronavirus pandemic (García-Sánchez and García-Sánchez, 2020).

Furthermore, numerous institutions have proactively participated in various social responsibility activities to combat the coronavirus. Therefore, the changes that occurred in society had a profound impact on the social responsibility of institutions,
to the extent that they promoted more honest and transparent policies to contribute to addressing the most urgent global challenge, which is the virus that ravaged the whole world. Forms of responsibility carried out by health institutions were various, most notably the ethical dimension in providing information with honesty and transparency about precautionary measures, safety measures at work, at home, and in public places, as well as working to provide possible care in hospitals. In addition, doctors played an important and active role during the pandemic around the world, seeking to help those people infected with this virus.

The effective role of social responsibility in the health sector has proven to have a significant positive impact, especially in government hospitals, because their programs have enjoyed a good reputation and loyalty from customers, as well as public evaluation of the hospital. This, in turn, enhances the application of social responsibility as a strategic tool to enhance the value of health organizations (Lubis, 2018).

Contemporary society demands that health institutions operate within the framework of social responsibility with regard to their work programs and with deep insight, especially in light of the growing global interest in the health dimension and human safety, which is one of the most important goals of sustainable development. Thus, social responsibility must be applied as a strategic tool in raising the value of the health institution in front of its customers, owing to the fact that the institution derives the profits from the value that customers add to it in exchange for trust, credibility, and optimal care. Add to that the positive impact on the reputation of the organization in the long run, in addition to gaining the trust and loyalty of customers and stakeholders (Lubis, 2018).

This was confirmed by some studies, such as Gazzola’s (2014) study, which confirmed the existence of a strong correlation between corporate social responsibility and a company’s reputation. Furthermore, it was proven that one of the reasons that urge companies to carry out social responsibility is not to lose their reputation.

The study of Matysiewicz and Sztangret (2017) also supported the possibility that the institutions obtain a competitive advantage within the framework of the sustainable development principles. Owing to the fact that health is regarded as one of the most prominent goals of sustainable development, the health sector should fall among the fields that are in urgent need of due care by the institutions, especially in light of the spread of various epidemics and diseases that afflict humanity and may destroy it, perhaps the most prominent of which is the corona pandemic. Therefore, the study of Dhavaleshwar and Man (2021) indicated that there is a necessity for the companies to provide health care and health promotion programs of high quality and which are specialized in social responsibility activities, with a view to achieving integrated community development.

There are a number of factors that have an impact on the social responsibility practices in the health sector. Such an impact was indicated by the study of Elifneh and Tsegaw (2019). The conclusions indicated that all the organizations’ cultures, governmental policies, and leaders in developing countries affect positively and exceptionally on the level of adopting corporate social responsibility. In addition to that, the study recommended that there was a necessity for diversifying social responsibility practices in the health field.
8.3. Marketing the health service

Marketing considerably affects organizations by looking into the relationship between expenditures a company spends on marketing and advertising on the one hand and its efforts in social responsibility programs on the other hand. It was found that companies with high advertising and marketing expenditures have distinct social responsibility programs. A study concluded that investment in marketing is considerably related to the sustainability of the activities carried out by organizations in the long run. Moreover, social responsibility initiatives affect the extent of the organization’s commitment to its advertising and marketing efforts that enhance customers’ awareness of the organization and its services (Kim et al., 2021).

Marketing health services has become a significant tool for providing health care services. The privatization of the health sector in many countries also exerts a salient role with regard to improving the service quality level successfully. The nature of commercial marketing differs from the marketing of services, especially in the healthcare field. There is no doubt that marketing health services has become an urgent requirement by healthcare consumers and healthcare providers. Marketing health services requires the active participation of individuals who enjoy good health and wish to achieve sustainable health, in addition to the sick individuals who wish to recover.

Health service quality counts on patients’ experiences and evaluations in a way that is reflected in the marketing of sustainable health services. Furthermore, marketing practices for health services must consider patients’ experiences and evaluations in order for them to become positive contributors to the success of health care (Dimitrievska, 2020). A study using the systematic review of several countries to survey and anticipate the marketing of health services reality has stressed that the importance and cost of marketing health care services are on the increase. Moreover, marketing for health care services increases competitiveness in the field of medical services, which calls for the implementation of a broad and comprehensive strategy aimed at employing all marketing tools in order to provide distinguished medical services and create an ideal reputation for health institutions (Syed et al., 2021).

One of the studies concluded that the need to adopt innovative marketing strategies for health services that are considered intangible, especially health services relating to patients’ health, safety, and lives, need to implement distinctive marketing policies. These strategies include the marketing mixture with its elements represented in the product, which is the health service provided with high quality, whether through the provision of expected treatment, the provision of distinguished customer service, or the provision of appropriate health products, in addition to the health service providers themselves and the characteristics that they must possess that make the target audience accept the service well.

With regard to the location, the place or site for providing the health service must be a distinguished location. With regard to the prices, health services must be provided at reasonable prices that will increase the demand for the provided health service so that the prices are not too high and the demand for the service decreases and vice versa (Ute, 2014).

As for promotion, promotion is the most important element of the marketing
mixture. Promotion in the health aspect is intended to improve, promote, develop, and support health. The promotion also plays an important role in promoting health institutions, as health services can be promoted through the influence of the spoken word, songs, printed and electronic means, and social media. Undoubtedly, the information provided on product benefits, features, fair price, and easy access needs effective communication to attract the target audiences. It is evident that the promotion strategy will achieve the greatest benefit from marketing communications, messages, and communication channels that formulate the motives for creating effective communication elements (Ute, 2014).

8.4. Significance of health promotion

The significance of promoting health institutions unfolds as follows:
1) Promoting health, educating citizens, and providing good health information and a healthy environment for the individual and society.
2) Reminding of the dates of conducting preventive medical examinations (such as periodic examinations).
3) Notifying community members of the symptoms, causes, and severity of health crises and widespread epidemics.

9. Methodological procedures for applied study

Research community: The community means all aspects of the phenomenon under study. The research community in this study is the people working in the health sector in the eastern province of the Kingdom of Saudi Arabia, whose work nature is consistent with social responsibility programs and community participation. This allows members of the research community to view the results of social responsibility programs and their impact on the public and recipients of health services in the eastern region.

To achieve the study objectives, a quantitative and qualitative method was adopted. These methods are considered one of the most important mechanisms for measuring the organization’s performance, especially as they measure the feedback from contacting the public and identify the impact of the organization’s activities on increasing public awareness of its services and products.

Research sample: This means selecting a sample identical to the original population. The number of questionnaires distributed was 120 questionnaires for employees at the level of director, head of a department/department, and public relations employee. 94 questionnaires were retrieved and valid for statistical analysis. The sample selection process included the health services industry, as it included a sample of workers in health institutions in the eastern region of the Kingdom of Saudi Arabia. After collecting the numbers of public relations workers in these institutions, all geographical locations in the eastern region were represented to ensure that the sample represented society. Research and present research results that can be generalized.

Treatment method: The researchers handled the research by analyzing the inputs through the questionnaire tool used in the research, by constructing a questionnaire form, and by providing an analytical reading of the research results. Furthermore, the
research conclusion was formed from the results and discussed with the presentation of new research recommendations from the current research, in addition to documenting previous scientific experiments and scientific heritage and presenting an analysis in the form of numerical tables showing the most important findings of the research.

The sample selection method: The research sample was selected randomly and stratified by proportion.

Testing the validity and reliability of the research tools:

The validity and reliability of the questionnaire: The two researchers presented the questionnaire to a number of jury members, four of them working in Saudi universities and abroad, to verify its validity and reliability (face validity). With regard to the reliability coefficient, the test method was employed and re-applied with a time difference of one week on 15 participants of the study community. The reliability coefficient of the study tool was calculated using the (Cronbach alpha) coefficient, so the percentage of certainty on the questionnaire items was 96.7%, which, in turn, confirms the possibility of using the tool.

Field study analysis: After collecting the questionnaire and reviewing it with the researchers, the respondents’ answers were confirmed. After that, the researchers typed, distributed, and tabulated the data and drew conclusions and the most important recommendations. It should be noted that all the data received and collected from the distribution of the questionnaire to 94 people were expressed using the number of individuals and their percentage in relation to the descriptive demographic variables such as age, gender, educational level, and work experience. Furthermore, individuals’ answers to the five-point Likert Scale based questionnaire for the questions of the first axis (A), second axis (B), and the third axis, and to the three-points Likert scale-based questionnaire for the questions of the first axis (B), and the descriptive question system for the second axis (A). The answers to the five-point Likert scale questions were coded as follows: 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree, while the three-point Likert scale answers were coded as follows: 1 = rarely, 2 = sometimes, 3 = Always. The answers to the axes’ questions were statistically expressed using numbers and percentages in addition to the weighted arithmetic mean and standard deviation of the answers to the coded questions. The following are the results obtained from the statistical analysis of the questionnaire using SPSS.

10. Descriptive statistics of demographic data

The demographic variables are described in Table 1, where the age was divided into 5 levels: the largest numbers were between 20 years and less than 30 years with a percentage of 42%, followed by the age level of 30 years and less than 40 years with a percentage of 34.0%, then came the age level ranging between 30 years and less than 40 years with the percentage of 34%, and finally the lowest numbers belonged to the age level of 20 years with the percentage of 6.8%.

The table shows descriptive statistics for demographic data. As for gender, males had the highest number, with a percentage of 51.1%, with a slight increase in comparison with females, whose percentage was 48.9%. As for the educational level,
most of the numbers were for the university level, with a percentage of 64.9%, followed by the post-university level, with a percentage of 20.2%. As for the secondary and lower secondary levels, they were the lowest number who answered the questionnaire questions, with a percentage of 14.9%. Finally, with regard to practical experience, age was divided into 5 levels: the largest numbers were between 5 years and less than 10 years with percentage of 31.9%, followed by the age level of 30 years and less than 40 years with the percentage of 34.0%, then came the age level of less than 5 years with percentage of 29.8%, and finally the lowest numbers belonged to the age level of 15 years and less than 20 years as well as the age level of more than 20 years with percentage of 9.6%.

Table 1. The descriptive statistics of the demographic data.

<table>
<thead>
<tr>
<th>Element</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 20 years</td>
<td>6</td>
<td>6.4</td>
</tr>
<tr>
<td>20 and under 30 years</td>
<td>40</td>
<td>42.6</td>
</tr>
<tr>
<td>30 and under 40 years</td>
<td>32</td>
<td>34.0</td>
</tr>
<tr>
<td>Under 50 years</td>
<td>8</td>
<td>8.5</td>
</tr>
<tr>
<td>50 years or more</td>
<td>8</td>
<td>8.5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>48</td>
<td>51.1</td>
</tr>
<tr>
<td>Female</td>
<td>46</td>
<td>48.9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Educational level</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary level and lower secondary level</td>
<td>14</td>
<td>14.9</td>
</tr>
<tr>
<td>University level</td>
<td>61</td>
<td>64.9</td>
</tr>
<tr>
<td>Post university level</td>
<td>19</td>
<td>20.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Practical experience</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 5 years</td>
<td>28</td>
<td>29.8</td>
</tr>
<tr>
<td>5 years and less than 10 years</td>
<td>30</td>
<td>31.9</td>
</tr>
<tr>
<td>10 years and less than 15 years</td>
<td>18</td>
<td>19.1</td>
</tr>
<tr>
<td>15 years and less than 20 years</td>
<td>9</td>
<td>9.6</td>
</tr>
<tr>
<td>20 years and more</td>
<td>9</td>
<td>9.6</td>
</tr>
</tbody>
</table>

The statistical analysis of the results of the questionnaire answers included three axes as follows:

Results of the answers to the questions of community participation programs for public relations with a five-point Likert scale were interpreted in Table 2. The answers were predominately “agree”, with the highest percentage, followed by the answer “strongly agree”, while the lowest percentages were those of the answer “strongly disagree”.

Table 2. First axis (A): Community participation programs for public relations.

<table>
<thead>
<tr>
<th>First axis (A): Community participation programs for public relations</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>%</td>
<td>Frequency</td>
<td>%</td>
<td>Frequency</td>
<td>%</td>
</tr>
<tr>
<td>1) Sequence of the community participation in general.</td>
<td>4</td>
<td>4.3</td>
<td>9</td>
<td>9.6</td>
<td>15</td>
</tr>
<tr>
<td>2) Health institutions use community participation programs mainly in public relations activities.</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td>12.8</td>
<td>10</td>
</tr>
<tr>
<td>3) The personality of health institutions becomes clear through the community participation programs for public relations they implement.</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td>12.8</td>
<td>7</td>
</tr>
</tbody>
</table>
Table 2 shows the first axis (A): community participation programs for public relations. Answers to questions regarding public relations community engagement programs were provided on a three-point Likert scale. The answers were “always”, the highest percentage was “sometimes”, while the lowest percentage was “rarely”.

As for the interpretation of the answers to health services marketing questions, social media had the highest percentage in answering the question of the most common means of communication that public relations departments use in marketing health services to the public, followed by the press and television, while radio and others were the lowest percentages.

As for the interpretation of the answers to health services marketing questions, the answers were predominantly “agree” with the highest percentage, followed by the answer “strongly agree,” and the lowest percentages were those of the answer “strongly disagree.” As for the interpretation of the results of the answers of public relations activities and their role in marketing health services, the answers were predominantly in the direction of approval with the highest percentage, followed by the answer “strongly agree,” and the lowest percentages were those of the answer “strongly disagree.”

The youthful age profile and high educational attainment of the respondents suggest a potential inclination towards innovative and modern marketing techniques, such as social media.

The balanced gender distribution ensures diverse perspectives are considered, while the concentration of respondents with less than 10 years of experience indicates that insights are primarily from those who are actively engaged in the current market environment.

These demographic insights provide a comprehensive understanding of the sample, ensuring that the study’s conclusions are grounded in the demographic characteristics of the respondents.

Table 3 shows the third axis (public relations activities and their role in marketing health services). The statistical analysis of the effect of age on the questionnaire answers to the three axes is clear: The results of the statistical analysis of the effect of age on the individuals’ answers to the questionnaire were shown in relation to the three axes (Likert scale). You may notice that there are significant differences between the different age levels. With regard to community participation programs for public relations, it is clear from the analysis that the age level of less than 20 years is the lowest in terms of approval from the rest of the age levels. Moreover, as for community participation programs for public relations and marketing health service, the age level of 20 years and less than 30 years and the age level of 30 years and less than 40 years were the least in terms of approval from the rest of the age levels. The lowest number of approvals was from the age level of 20 years and less than 30 years, as well as the age level of 30 years and less than 40 years. Moreover, as for the second axis (B), the age level of 20 years and less than 30 years, the age level of 30 years and less than 40 years, and the age level of 50 years and more were the least in terms of approval from the rest of the age levels. Finally, the rest of the age levels were statistically insignificant with each other and were inclined to provide an “agree” answer.
Table 3. Third axis (public relations activities and their role in marketing health services).

<table>
<thead>
<tr>
<th>The third axis (public relations activities and their role in marketing health services)</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
<td>%</td>
<td>Frequency</td>
<td>%</td>
<td>Frequency</td>
</tr>
<tr>
<td>1) The success of marketing in health organizations is determined by developing a public relations strategy</td>
<td>2</td>
<td>2.1</td>
<td>9</td>
<td>9.6</td>
<td>11</td>
</tr>
<tr>
<td>2) Health marketing is one of the tools on which public relations departments in health institutions depend</td>
<td>1</td>
<td>1.1</td>
<td>13</td>
<td>13.8</td>
<td>12</td>
</tr>
<tr>
<td>3) Public relations departments in health institutions do not give enough importance to the marketing research function</td>
<td>0</td>
<td>0</td>
<td>14</td>
<td>14.9</td>
<td>18</td>
</tr>
<tr>
<td>4) Public relations departments in health institutions do not attach much importance to marketing</td>
<td>0</td>
<td>0</td>
<td>16</td>
<td>17</td>
<td>18</td>
</tr>
<tr>
<td>5) The social responsibility programs for public relations succeeded in achieving the goals of health institutions</td>
<td>0</td>
<td>0</td>
<td>15</td>
<td>16</td>
<td>11</td>
</tr>
</tbody>
</table>

Community engagement: The results indicate a strong positive perception of community participation programs in public relations, emphasizing their importance in building a clear and favorable image of health institutions.

Strategic importance: Health institutions should continue to prioritize and refine these programs to enhance public relations efforts, ensuring they remain well-sequenced and clearly communicate the institutions' values.

Areas for improvement: Despite the positive feedback, addressing the concerns of neutral and disagreeing respondents can further strengthen these programs, making them more inclusive and effective.

By interpreting the data in this manner, we can better understand the relationships between community participation programs and their perceived effectiveness in public relations, leading to more targeted and strategic improvements.

Table 4 shows the statistical analysis of the effect of gender on the answers to the second axis (A): Marketing of health services. Statistical analysis was carried out using a chi-square test followed by multiple-pair analysis.

Table 4. Statistical analysis of gender effect on the answers to the second axis (A): Marketing the health services.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Radio Frequency</th>
<th>Television Frequency</th>
<th>Press Frequency</th>
<th>Social media Frequency</th>
<th>Others Frequency</th>
<th>Total number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>1</td>
<td>2.1</td>
<td>11</td>
<td>22.9</td>
<td>9</td>
<td>4.2</td>
</tr>
<tr>
<td></td>
<td>25</td>
<td>18.8</td>
<td>63</td>
<td>69</td>
<td>1</td>
<td>2.2</td>
</tr>
<tr>
<td>Females</td>
<td>2</td>
<td>4.3</td>
<td>6</td>
<td>13</td>
<td>8</td>
<td>1.1</td>
</tr>
</tbody>
</table>

Different letters mean that there is a statistical significance between the means, while similar letters mean that there is no statistical significance between the means.

Statistical analysis of the effect of the educational level on the questionnaire answers for the three axes:
The results of the statistical analysis of the effect of the educational level on the individuals’ answers to the questionnaire were shown. It was evident that there were statistically significant differences between different educational levels. Add to that, the analysis results showed that the secondary level and lower secondary level were the least numbers that answered with “agree” in comparison to other educational levels. Moreover, the university level and post university level were not statistically significant with each other and their answers are predominantly “agree”. As for marketing health services, which is the descriptive scale, there are statistically significant differences between the different educational levels, as it is clear that social media was the most preferred choice for the university level and post-university levels compared to the secondary level and lower secondary level. The press was the most preferred choice for secondary level and lower secondary level compared to university level and post-university level. Moreover, television was the most preferred choice for the university level and post-university level compared to the secondary level and lower secondary level. In conclusion, there is a non-significant difference between university and post-university levels. On the contrary, there was a significant difference between secondary level and lower secondary level compared to the university level and post-university level. The press was the most preferred choice for secondary level and lower secondary level compared to university level and post-university level. Moreover, television was the most preferred choice for the university level and post-university level compared to the secondary level and lower secondary level. In conclusion, there is a non-significant difference between university and post-university levels. On the contrary, there was a significant difference between secondary level and lower secondary level compared to the university level and post-university level. The analysis highlights the importance of focusing public relations efforts on social media, given its overwhelming preference across genders. While traditional media like television and press still have their place, especially among certain demographics, their role is secondary to the pervasive influence of social media platforms. Understanding these preferences helps tailor public relations strategies to effectively reach and engage the target audience.

Table 5 shows the statistical analysis of the level of influence on the answers to the second axis (A): Marketing of health services. Different letters mean that there is a statistical significance between the means, while similar letters mean that there is no statistical significance between the means. Statistical analysis of the effect of practical experience on the responses to the questionnaire.

<table>
<thead>
<tr>
<th>Educational level</th>
<th>Radio Frequency</th>
<th>Radio %</th>
<th>Television Frequency</th>
<th>Television %</th>
<th>Press Frequency</th>
<th>Press %</th>
<th>Social media Frequency</th>
<th>Social media %</th>
<th>Others Frequency</th>
<th>Others %</th>
<th>Total number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary level and lower secondary level</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>7.1</td>
<td>4</td>
<td>28.6</td>
<td>6</td>
<td>42.9</td>
<td>3</td>
<td>21.4</td>
<td>14</td>
</tr>
<tr>
<td>University level</td>
<td>2</td>
<td>3.3</td>
<td>10</td>
<td>16.4</td>
<td>10</td>
<td>16.4</td>
<td>39</td>
<td>63.9</td>
<td>0</td>
<td>0</td>
<td>61</td>
</tr>
<tr>
<td>Post university level</td>
<td>1</td>
<td>5.3</td>
<td>6</td>
<td>31.6</td>
<td>3</td>
<td>15.8</td>
<td>9</td>
<td>47.4</td>
<td>0</td>
<td>0</td>
<td>19</td>
</tr>
</tbody>
</table>

It is clear from the results of the statistical analysis of the effect of practical experience on the individuals’ answers to the questionnaire that there are no significant differences between all levels of practical experience, except that those with experience of less than 5 years as their answers with “agree” were less than those with experiences of 15 years and less than 20 years. As for community participation programs for public relations, it is evident that there are no significant differences between all levels of practical experience, except that for those with experience of less
than 5 years, their answers with “agree” were less than those with experience of 10 years and less than 15 years as well as those with experience of 15 years and less than 20 years. In brief, results of public relations activities and their role in marketing health services show that there are no statistically significant differences between all levels of practical experience except for those with experience of less than 5 years; their answers with “agree” were less than those with experience of 10 years and less than 15 years as well as those with experience of 15 years and less than 20 years.

**Table 6** shows the statistical analysis of the effect of practical experience on the answers to the Axis II questionnaire (descriptive scale). Statistical analysis was carried out using a chi-square test followed by multiple-pair analysis:

**Table 6.** Statistical analysis of the effect of practical experience on the answers to the questionnaire for the second axis A (descriptive scale).

<table>
<thead>
<tr>
<th>Educational level</th>
<th>Radio Frequency</th>
<th>Television Frequency</th>
<th>Press Frequency</th>
<th>Social Media Frequency</th>
<th>Others Frequency</th>
<th>Total number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Less than 5 years</td>
<td>2</td>
<td>7.1</td>
<td>7.1</td>
<td>14.3</td>
<td>60.7</td>
<td>10.7</td>
</tr>
<tr>
<td>5 years and less than 10 years</td>
<td>1</td>
<td>3.3</td>
<td>16.7</td>
<td>26.7</td>
<td>53.3</td>
<td>0</td>
</tr>
<tr>
<td>10 years and less than 15 years</td>
<td>0</td>
<td>0</td>
<td>16.7</td>
<td>16.7</td>
<td>66.7</td>
<td>0</td>
</tr>
<tr>
<td>15 years and less than 20 years</td>
<td>0</td>
<td>0</td>
<td>55.6</td>
<td>0</td>
<td>44.4</td>
<td>0</td>
</tr>
<tr>
<td>20 years and more</td>
<td>0</td>
<td>0</td>
<td>22.2</td>
<td>22.2</td>
<td>55.6</td>
<td>0</td>
</tr>
</tbody>
</table>

Different letters mean that there is a statistical significance between the means, while similar letters mean that there is no statistical significance between the means.

It became clear there is a correlation or a relationship between the total results of the axes answers which are measured by Likert scale with each other. Moreover, the results analysis showed that there are correlations amongst the different axes: it became clear that there was there is a strong, direct, and significant correlation with regard to community participation programs for public relations and the marketing of health services, in addition to a positive and average correlation with the activities of public relations and its role in marketing health services. Furthermore, it became clear that there is a statistically significant strong direct correlation for the first axis B with the first axis A and the second B, in addition to an average direct correlation with the activities of public relations and its role in marketing health services.

**Dominance of social media:** Across all experience levels, social media is consistently the most preferred medium, highlighting its crucial role in modern public relations.

**Increasing appreciation for traditional media:** As experience increases, there is a notable shift towards valuing traditional media (television and press), suggesting that more experienced professionals recognize their enduring effectiveness in reaching broader audiences.

**Negligible use of radio and other media:** These channels are largely seen as outdated or less effective, especially among more experienced professionals.

The analysis shows a clear preference for social media among all experience levels, indicating its vital role in contemporary public relations strategies. However,
with increasing experience, professionals tend to value traditional media more, suggesting a balanced approach that leverages the strengths of both modern and traditional channels to maximize reach and impact. Understanding these preferences can help tailor public relations efforts to effectively engage different segments of the professional audience.

11. Conclusions and recommendations

The study concluded that the effectiveness of community participation programs and public relations in marketing health services at different educational and age levels plus the educational experiences. In addition, the study concluded that social media is the most effective means of communication that utilizes the public relations department in marketing health services for public relations and is affected by different educational levels. It becomes evident that there is a statistically significant direct relationship between the community participation programs for public relations and marketing the health services and public relations activities and their role in marketing the health services. Furthermore, there are statistically significant differences amongst the different educational levels; it became clear from the evidence that the secondary level and lower secondary level were the most minor educational level which provided the answer “agree”, while the university level and post-university level were not statistically significant and were inclined to provide “agree” answer. There were statistically significant differences amongst the different educational levels, as it becomes evident that the university level and the post-university level chose social media more than the secondary level and lower secondary level. In addition, there is no statistical significance between the university level and post-university level. On the contrary, there is a statistically significant difference between the university level and post-university level.

The research recommended the following as in Table 7:

Table 7. The recommendation, action plan, strategies timeline and responsible.

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Action plan</th>
<th>Strategies</th>
<th>Timeline</th>
<th>Responsible</th>
</tr>
</thead>
</table>
| Correcting misconceptions about health marketing    | Comprehensive awareness campaign                 | • Produce educational videos  
• Publish informative articles  
• Design social media posts  
• Organize seminars and workshops | 6–12 months | Health marketing team with experts |
|                                                     | Collaboration with media                         | • Produce educational TV and radio programs  
• Publish articles in medical newspapers and magazines | Ongoing   | Public relations departments in health institutions |
| Conducting more research and studies to identify   | Establish a specialized research team             | • Hire specialized researchers  
• Develop a research plan including surveys and field studies | 12–18 months | Research and development department with universities |
| activities that help PR managers in health          |                                                   |                                                                            |           |                                         |
| institutions                                        |                                                   |                                                                            |           |                                         |
| Identify needs and activities for successful       | Identify research priorities                      | • Analyze collected data  
• Identify gaps in current health marketing and develop a plan to address them | 6 months  | Specialized research team               |
| health campaigns                                    |                                                   |                                                                            |           |                                         |
| Differentiating health marketing from general       | Specialized training courses                      | • Organize specialized training courses and workshops  
• Develop and distribute a guidance manual  
• Organize seminars and discussions | 6–12 months | Health marketing team with experts     |
| marketing                                           |                                                   |                                                                            |           |                                         |
Table 7. (Continued).

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Action plan</th>
<th>Strategies</th>
<th>Timeline</th>
<th>Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providing training opportunities for PR staff in health institutions</td>
<td>Continuous training programs</td>
<td>• Develop and implement continuous training programs</td>
<td>Ongoing</td>
<td>Human resources departments in health institutions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Organize advanced workshops</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Establish a regular performance evaluation system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Developing medical services in public hospitals and health institutions</td>
<td>Improving infrastructure</td>
<td>• Improve hospital infrastructure</td>
<td>12–24 months</td>
<td>Senior management in health institutions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Develop medical services</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Enhance PR departments’ authority</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enhancing the authority of PR departments to address professional performance weaknesses</td>
<td>Empower PR departments</td>
<td>• Provide necessary administrative support and resources</td>
<td>Ongoing</td>
<td>Senior management in health institutions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Encourage innovation in health service delivery</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 7 shows the recommendation, action plan, strategy timeline, and who is responsible for implementing it.

Potential areas for future research: There are some potential ideas for future research expected from researchers:

The impact of modern technology applications in enhancing the social responsibility of public relations in the field of health services.

The role of administrative leadership in enhancing social responsibility for public relations in health institutions.

Analyzing the effectiveness of using stories and narratives in communicating social responsibility messages for public relations in the healthcare sector.

Evaluating the impact of Professional ethics and corporate commitment in enhancing the social responsibility of public relations in health institutions.

Study the impact of government policies and legislation on the application of social responsibility for public relations in the health services sector.

Analysis of the impact of international public relations and international cooperation in developing the social responsibility of public relations in the field of public health.

Author contributions: Conceptualization, NAQO and FAA; methodology, MMM; software, TIM; validation, NAQO, FAA and MMM; formal analysis, FAA; investigation, NAQO; resources, FAA; data curation, FAA; writing—original draft preparation, NAQO; writing—review and editing, TIM; visualization, MMM; supervision, TIM; project administration, MMM. All authors have read and agreed to the published version of the manuscript.

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