

# Social Marketing Interventions to Primary Care Physicians to Decrease Health Disparities for Patients with a Disability: A Scoping Review.

Angela Makris MiM<sup>1</sup> Mahmooda Khaliq PhD MHS CPH<sup>1</sup> Elizabeth Perkins PhD RNLD<sup>2</sup>  
<sup>1</sup>College of Public Health, University of South Florida, <sup>2</sup>Florida Center for Inclusive Communities UCEDD, University of South Florida

## Introduction

- People with disabilities account for approximately 20% of the US population but are an under recognized disparity population.
- Adults with disabilities are high users of primary care. They make three times as many visits to the family doctor as their contemporaries without disabilities, and yet they report three times as many unmet needs.
- Attitudes of providers towards people with disabilities remain a significant deterrent to good quality care.



- There is a need to ensure that healthcare professionals receive training opportunities that help ‘demystify any associated anxieties fears and apprehensions ‘ (Cartlidge & Read, 2010, p. 98) dealing with this patient group. Social marketing based interventions may be well-positioned to take on that role.
- **Study Purpose:** To determine how social marketing has been used within the primary health care setting as a tool for medical provider behaviour change.
- **Significance:** By identifying opportunities for social marketing research and practice to change medical provider behavior, we will be able to inform interventions to decrease health disparities in the disability sector.

## Methods

- A scoping review of the scientific and grey literature was conducted for the period 2000 to April 2018. Databases searched Pubmed, Web of Science, PsychInfo, and CINAHL.
- **Research Question:** How has social marketing been used within the primary health care setting to provide better care for patients with disabilities?

### Search Terms:

|                      |   |
|----------------------|---|
| Social Marketing     | Social Marketing [MeSH] OR Behavio*r change OR Behavio*r modification   |
| Physicians           | Physicians [MeSH Term] OR Doctor OR General Practitioner OR Attitude of Health Personnel [Mesh Term]                      |
| Primary care         | Primary Health Care {Mesh Term} OR Primary Care   |
| Continuing Education | Education, Continuing [Mesh Term] OR Continuing Medical Education [Mesh Term] OR Physician Training OR Training           |
| Disabled Persons     | Disabled Persons [MeSH Term] OR Patient with a Disability OR Disabled AND Patient OR Developmental Disability [MeSH Term] |

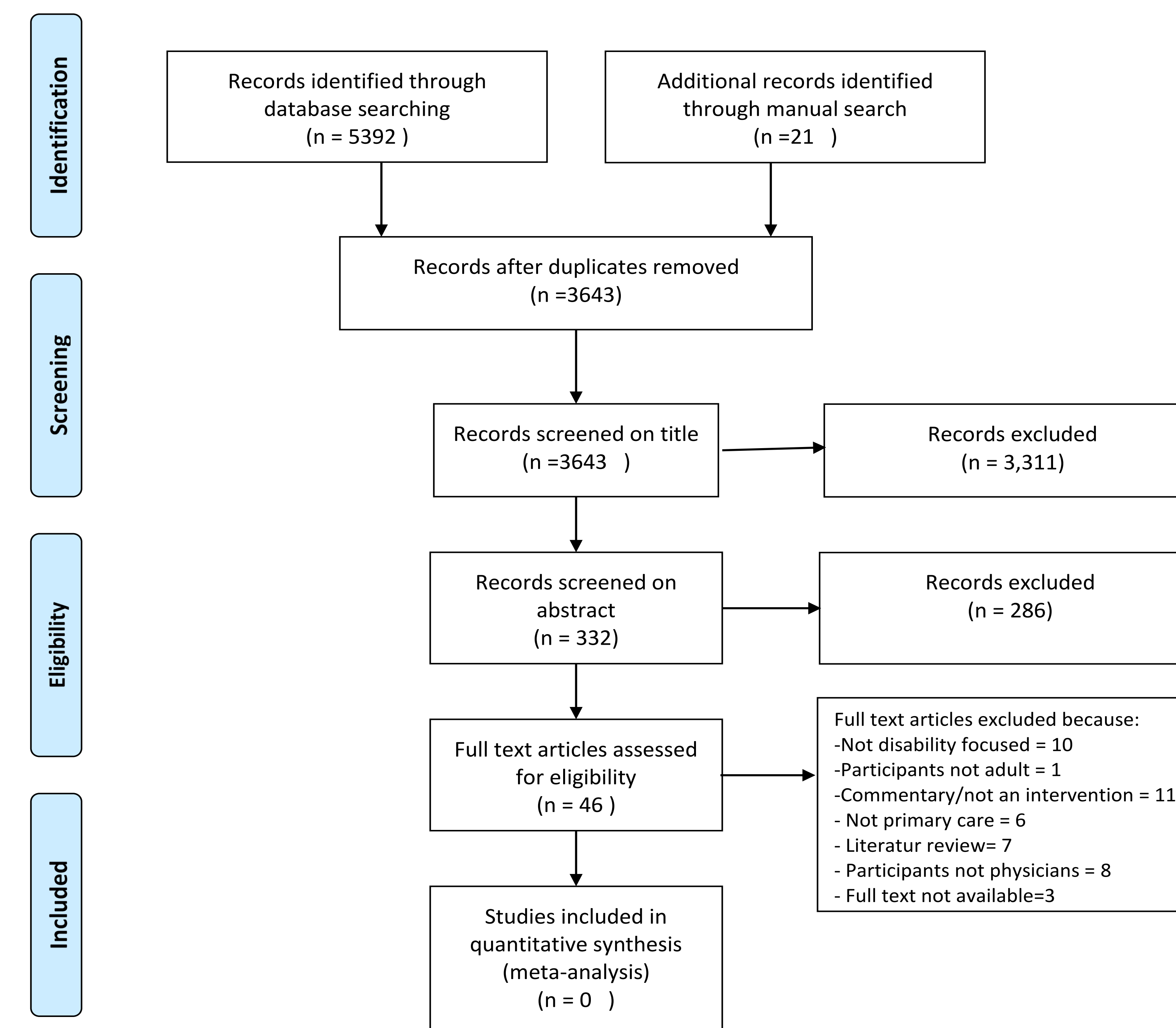


Fig 1. PRISMA Diagram

## Results

- Four papers used social marketing, but for changing clinical behavior related to management and procedures only.
- No papers were found to have a social marketing focus based on Andreasen’s Social Marketing Benchmark Criteria (SMBC) to change physicians’ attitudes or behaviors towards people with disabilities.

| Authors              | No Of SMBC | Behavioral objective | Audience Segmentation | Audience Research | Exchange | Marketing Mix | Competition |
|----------------------|------------|----------------------|-----------------------|-------------------|----------|---------------|-------------|
| Balogh, R., 2015     | 2          | ✓                    | x                     | x                 | x        | 2             | x           |
| Stahl, C., 2016      | 2          | x                    | ✓                     | x                 | x        | 2             | x           |
| Melville, C.A., 2006 | 4          | ✓                    | ✓                     | ✓                 | x        | 2             | x           |
| Hastings.R., 2017    | 2          | ✓                    | x                     | x                 | x        | 2             | x           |

Table 1: Andreasen’s Social Marketing Benchmark Criteria

## Discussion

- Social marketing is underutilized for medical provider behavior change. A possible reason for the underutilization of social marketing within the sector, could be based on the medical model itself that places an emphasis on impairment as the driver of disablement.
- Social marketing has the ability to identify causal factors and focus on tailored behavior change interventions, not just training, to achieve person-centered care through mid-stream interventions.
- Increased longevity of people with disabilities is resulting in increased patient-load to medical providers, resulting in greater need for appropriate training.
- The social marketing community can collaborate with medical education colleagues to positively impact the way continuing education about people with disabilities is conducted to decrease health disparities in patient care.

Cartlidge, D., & Read, S. (2010). Exploring the needs of hospice staff supporting people with an intellectual disability: a UK perspective. *International Journal of Palliative Nursing*, 16(2), 93-98.