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# The impact of social marketing campaigns on the pro-health behaviors of women and men in Poland

## Wpływ kampanii społecznych na prozdrowotne zachowania kobiet i mężczyzn w Polsce

### Abstract

The objective of the article is to indicate that social marketing campaigns have an impact on pro-health behaviors, particularly of women, as they have greater health awareness than men, due to the socialization. It is also interesting to recognize how the youngest (Millennials) generation women and men differ from the representatives of the Baby Boomers generation in this respect. The study uses the results of the exploratory quantitative survey conducted in the third quarter of 2021 among patients of a selected first contact medical facility located in Poland. The questionnaire was available to patients of this medical facility for two months. 217 of them filled the questionnaire (random sample). It turned out that men know a higher number of pro-health social campaigns than women, and more frequently believe that they contribute to disease prevention. However, this is not statistically significant and needs to be confirmed in further studies. The results also showed that male representatives of the Baby Boomers, compared to youngest men (Millennials), more often perceive social campaigns concerning health protection and prevention. This difference is statistically significant and not observed in the group of women. There is no theoretical research underpinning this study in Poland, so this article provides a significant input into the theory of social marketing in the field of pro-health campaigns and their influence on disease prevention. Medical facilities can use the results of this research as an argument for their activities toward social marketing. The observations were made only among patients of one medical facility, thus excluding the possibility of generalizing the findings. Therefore, this empirical research should be treated as an exploration of the subject matter for further surveys.

### Keywords

marketing of medical facilities, pro-health campaigns in Poland, social marketing

### Streszczenie

Celem artykułu jest wskazanie, że kampanie społeczne mają wpływ na zachowania prozdrowotne kobiet i mężczyzn. Hipotezy badawcze dotyczą przede wszystkim różnic w podejściu do tego zagadnienia obserwowanych u kobiet i mężczyzn z generacji milenialsów oraz *baby boomers*. W artykule wykorzystano wyniki badania eksploracyjnego, które zostało przeprowadzone w trzecim kwartale 2021 r. wśród pacjentów wybranej placówki medycznej w Szczecinie (uzyskano 217 wypełnionych ankiet). Wyniki badania wskazują, że mężczyźni znają więcej prozdrowotnych kampanii społecznych niż kobiety oraz częściej są przekonani, że kampanie społeczne mają znaczenie w profilaktyce zdrowia, chociaż te różnice między płciami nie są statystycznie istotne. Mężczyźni z generacji *baby boomers* istotnie częściej niż przedstawiciele milenialsów dostrzegają kampanie prozdrowotne jako działania mające wpływ na profilaktykę zdrowotną. Tej zależności nie obserwuje się w przypadku kobiet. W Polsce brak jest tego rodzaju badań, więc artykuł stanowi istotny wkład do teorii marketingu społecznego w obszarze znaczenia kampanii prozdrowotnych dla profilaktyki zdrowia. Artykuł zawiera także implikacje praktyczne: przychodnie medyczne mogą wykorzystać wnioski płynące z tych badań w swoich działaniach w obszarze marketingu społecznego. Badaniem objęto pacjentów tylko jednej przychodni, więc ich wyników nie można uogólniać, ale można je traktować jako eksplorację w kierunku dalszych badań nad zagadnieniem wpływu kampanii społecznych na zachowania prozdrowotne.

### Słowa kluczowe

zarządzanie instytucją medyczną, kampanie prozdrowotne w Polsce, kampanie społeczne, marketing społeczny

JEL: M31, M39, I11

## Introduction

The sphere of health belongs to areas subject to rigorous legal and administrative regulation, which limits the scope of marketing activities in this industry (Grier & Bryant, 2005). Additionally, one may observe an increasingly critical attitude of patients towards both knowledge and skills of doctors, poor level of trust and more reserved approach, i.e., patients are less tolerant, more skeptical, more likely to question a doctor's judgement. They also tend to require explanation why a doctor prescribes some drugs rather than others, if, by any chance, they are influenced by the marketing of a particular pharmaceutical company. One recent example is the COVID-19 pandemic and people's skepticism about vaccinations (Wiśniewska & Różycka, 2021).

One of the factors building trust between the doctor and the patient is the patient's belief that the medical facility really focuses on a broadly understood social dimension. Medical service industry operates on the border of the public area of the health care system and economic (business) activities. It is worth paying attention to the global guidelines for the policy for sustainable development, whose priorities include activities to support the provision of good health and well-being to all people, regardless of their age. This was announced by the UN General Assembly in 2015 as the 2030 Agenda for Sustainable Development (UN, 2015). Institutions providing medical services in line with the idea of sustainable development face similar economic challenges as any other company operating in the services market.

Marketing activities undertaken by companies in the context of sustainable development ought to be subject to the rules of responsible, green, and social marketing (Andreasen 1994; Alden et al., 2011). In the case of medical facilities, the focus upon social marketing is equally important, implemented in a way that satisfies the needs of patients and pursues business goals, considering a positive or neutral impact on the environment (UN, 2005).

In Poland, so far, there is not much research on social campaigns (Daszkiewicz, 2021; Rudawska, 2010), and there is a lack of research on the influence of social campaigns on the pro-health behavior of women and men. This article should be seen in the context of the debate on the role of social campaigns in disease prevention.

The objective of the analysis is to indicate that social campaigns have an influence on the pro-health behaviors. They contribute to an increase in social sensitivity and responsibility for people's own health and they encourage applying preventive measures. The gender role theory points out the importance of gender-role congruency on attitudes (Eagly & Karau, 2002) so it is interesting whether

women have greater health awareness than men, which can be due to the socialization process and women's role of "a home doctor" to children and other family members.

To start with, we present the legal status of medical service marketing to explain the obstacles these activities face in the health sphere and the role of social marketing in overcoming the same. Then the findings of research on social campaigns and their influence on the pro-health behavior of women and men in Poland are discussed. The study uses the results of the exploratory questionnaire survey conducted in the third quarter of 2021 among patients of the selected first contact medical facility located in Szczecin (random sample: 217 women and men filled the questionnaire).

## Current legal status concerning medical service marketing in Poland

Human health belongs to areas subject to increased legal and administrative regulation, which significantly limits the scope of marketing activities carried out by medical facilities. Their market operations differ from the activities of a classic enterprise where the goal is "to satisfy needs generating a profit" (Kotler & Keller, 2012, p. 5). According to Art. 14 of the Act of 15 April 2011 on Medical Activities (ustawa z dnia 15 kwietnia 2011 r. o działalności leczniczej, 2013), the doctor and the dental practitioner conducting a professional practice, i.e., the entity performing this activity, must not disclose to the public any information on the scope and types of health services provided, the content and form of which have the characteristics of advertising. It does mean that doctors must not advertise their services, use their own image in advertising or take part in advertising activities that encourage patients to choose their services or advertised medical products. However, according to the definition by the Members of Legal Advisers of the Supreme Medical Chamber in Poland, which was expressed in the legal opinion of 6 March 2013<sup>1</sup>, advertising is informing people on benefits and services provided in medical practices, highlighting their advantages so that people would pay for them. Dercz and Rek, in the commentary to the Medical Activities Act, indicate that advertising would be: providing, by the entity performing medical activities to the public, information on the scope and types of health services, combined with encouraging the use of these benefits, with the aim to, e.g., increase the number of patients and medical services, and, as a result, to increase financial benefits (Dercz & Rek, 2012). Serwach (2013) also claims that advertising would be providing, by the doctor, to the public, information

combined with encouraging the use of benefits, *de facto* leading to increase the number of patients and medical services performed by the doctor and increasing the revenues thus generated. It is worth pinpointing that the restriction on the freedom of advertising and information on providing medical services is also included in the Code of Medical Ethics (Naczelna Izba Lekarska, 2003). Pursuant to the provision of Art. 63 of the Code, the doctor shall establish a professional opinion solely based on the results of their work – therefore, any advertising by them shall be prohibited, nor should they authorize the use of their name and image for commercial purposes.

Pursuant to the Resolution 29/11/VI of the Supreme Medical Council of 16 December 2011 (Supreme Medical Council, 2011) on detailed rules for the public disclosure of information on the provision of health services by doctors and dental practitioners, doctors practicing their profession may inform on the provision of health services, among others, via the website, providing the name, last name and data on the professional title, place of supply of services, days and hours of admission, as well as, additionally, data informing on the type of professional practice, academic degree or title, specialization, skills in narrower fields of medicine or the provision of specialized health benefits, possession of specific powers. It is also permissible to provide the telephone number on the website, specify prices for the services and method of payment. This information can be made available through the exhaustive list of not more than two permanent notice boards outside the building, where the practice is carried out, and not more than two notice boards on access routes to the premises of the medical service. Moreover, it can be included in press announcements in medical service sections, in phone directories and directories on medical services in the medical service section. Such information must not bear the characteristics of advertising and must not contain any form of: incentive, attempt to encourage the use of health benefits, information on methods, their effectiveness and duration of treatment as well as promises related to the effectiveness of treatment or colloquial terms. The indication of prices and the method of payment shall only be allowed where such information is transmitted via the website of the professional practice or via dedicated information calls.

The doctor and the dental practitioner performing medical activities under the professional practice may be inspected by the authority keeping the register (the relevant district medical council), in accordance with the provision of Art. 111 of the Medical Activities Act. Since the findings contained in the Protocol, the authority keeping the register shall issue post-inspection

recommendations aimed at removal of any identified irregularities (e.g., violation of the advertising ban) and shall specify the time limit for their implementation. In the event of failure to comply therewith, the authorities shall delete the operator performing medical activities from the register. Due to the listed limitations, there are difficulties in precise identification of the boundary between prohibited advertising and allowed information, thus each case should be analyzed separately.

Despite the statutory limitations, as in the case of other professions, market conditions necessitate actions aimed at attracting new patients. In practice, many such activities are seen, informing on medical services provided and encouraging the use of services of the given health facility. These activities include developing a friendly and comprehensible way of communication with patients, introducing attributes that suggest professionalism while caring for patients, appropriate design of offices, the reception desk, waiting room, being physically as close as possible to the patient, and thus shortening the distance of the premise to the place of residence, finally, the visibility on the Internet.

In practice, it is difficult to determine what the patient is driven by when making decision on the choice of a doctor or a medical facility. It is known that they are usually guided by personal experience and if having none, they tend to first consult their family or friends. Opinions of other patients are very important or even crucial. Doctors who have many positive opinions about them are chosen more willingly and more often than others. An important element of e-health is patients consulting opinions on doctors via digital channels, such as an Internet search engine or social media (Wiśniewska & Różycka, 2021).

The research conducted by Hall, Roter and Rand (1981) indicated that the patient's satisfaction with the medical appointment is related to the evaluation of the manner of the doctor's communication with the patient. Both the proper communication and patient's trust in the doctor are essential and fundamental components of the doctor-patient relationship (McKinstry et al., 2006; Neuwirth & Schrader, 2007; Krot, 2016). Not only do they affect the results of treatment (Thom, 2001; Thom et al., 2002), but also the perception and compliance with medical recommendations, among others, purchasing and using medications as prescribed by the doctor (Johnell et al., 2006). In general, they increase patients' satisfaction with the appointment (Thom, 2001). In turn, other studies indicate that it is beneficial to distinguish the medical facility against the background of competitors through promotional programs that present benefits for patients along with taking

long-term actions on building reputation (Bukowska-Piestrzyńska, 2011). However, it is worth emphasizing that choosing a doctor by patients may not only be affected by the relationship with the doctors themselves, evaluation of their work and the patient's own experience or the promotional programs conducted, but also by the perception of the brand of the facility itself from the social perspective, i.e., social actions taken by the facility.

## Social marketing as an element of medical service marketing

The identification of social needs and taking actions to satisfy them is not only the task of enterprises, but also of various institutions and organizations that offer services. Although the process of planning and implementing all elements of mix marketing is important in marketing management<sup>2</sup>, in the case of medical facilities social marketing may be both a source and a tool of influencing the attitudes of its recipients, i.e., patients, and thus the entire society. Social marketing creates new ideas and characteristics of products to increase the usefulness of the offer using the achievements of value marketing (Dejnaka et al., 2013, p. 8). Lee and Kotler (2019, p. 8) emphasized that "social marketing is about influencing behaviors". Moreover, it has offered "an effective approach for developing programs to promote healthy behaviors" (Coreil et al., 2001, p. 231). Due to administrative and legal restrictions, it is unacceptable for medical industry to focus on traditional advertising. Therefore, focusing on social marketing as an element of marketing activities in the context of sustainable development is recommended and seems to be an integral part of operations of medical facilities (Dejnaka et al., 2013).

Social marketing, implemented in a way that satisfies the needs of patients, is becoming particularly important nowadays and its role in the socio-economic space is increasing. As Melovic et al. pointed out, social marketing has an impact on perceptions and attitudes toward vaccination of children (Melovic et al., 2020, p. 6). This is an example of the importance of social marketing in improving public health. In addition to the individual needs of patients, one should consider the long-term needs of the society as a whole and social marketing serves this (Cheng et al., 2009). It should be observed that social marketing can be implemented in a different way in a public clinical hospital, a private network of facilities, a single facility or a single doctor's office. Activities which

are possible and acceptable in a private surgery will not be so in a public hospital. Although managers in charge of the organizational unit of the clinic will differ in terms of marketing activities taken, each facility or surgery always has influence upon its patients and the level of satisfaction of their needs.

The objective of business marketing is to maximize the profit and to feed the desire to purchase a product or service, whereas the objective of social marketing is to bring about a change in consumer behavior, and not only to transfer the knowledge the recipients ought to obtain but also to shape attitudes related to what they should believe in and feel (Lee & Kotler, 2019, p. 167). In this context, the social marketing of the medical facility is directed to a particular type and segment of consumers – patients whose expectations are higher and more difficult to satisfy compared to consumers of other goods or services. Managers of the medical facility ought to be able to identify what is most important for patients and select marketing activities based on this knowledge. Gender perspective and recognizing gender needs is also crucial when designing health promotion (Östlin et al., 2007).

## Thematic scope of the research

Having assumed that the objective of marketing is not only to satisfy the current needs and desires of consumers, but also to create values and to shape attitudes, an exploratory empirical study was designed on the knowledge of campaigns aimed at making the society aware of the occurrence of specific diseases and the related health prevention, as well as those promoting healthy lifestyle. Pro-health campaigns are intended to contribute to increasing social sensitivity and responsibility and thus lead to a change in attitudes towards one's own health and taking preventive measures (Zhao, 2020).

In Poland the following pro-health campaigns were carried out in 2021. All of them were considered within this research:

1. #SzczepimySię (#WeGetVaccinated) (against COVID-19).
2. Polska mówi#aaa! (PolandSays#aaa!) Health starts in the mouth (dental campaign).
3. I do not see you, You, see me! (ophthalmic).
4. Rak'n'Roll Win Life! (oncological).
5. Colorful Sock Syndrome (Down syndrome).
6. ECHO, I Love Music (hearing impaired).
7. #Dbaj o serce (#TakeCareOfYourHeart). Your Heart TeleHEART Heart under control (cardiological).
8. Pink Ribbon #Jajnik21 (#Ovary21) (gynecological).

9. Yellow Ribbon #PoGodność (#ForDignity) (psychiatric).  
 10. Yellow Ribbon #Endometriosis (gynecological).

The research thesis anticipated the impact of social campaigns on the pro-health behavior of particularly women, who stereotypically are more interested in the condition of their health and have greater health awareness than men. So, one of the research questions was about the differences in the female and male perception of social marketing campaigns. The second research questions concerned to what extent the youngest (Millennials generation) women and men differ in terms of perception of pro-health campaigns and their impact on preventive behavior from representatives of the silver Baby Boomers generation. Millennials included those born in the years 1993–2003, and Baby Boomers – those born in the years 1952–1961.

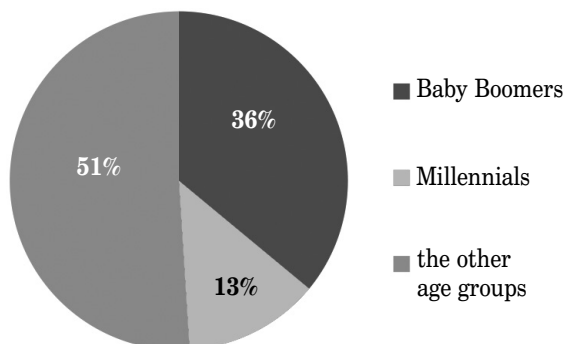
Three hypotheses were formulated for verification in the research process:

- Hypothesis 1: social campaigns impact the pro-health behaviors of women more often than of men.
- Hypothesis 2: social campaigns impact pro-health behaviors of female Baby Boomers more often than of female Millennials.
- Hypothesis 3: social campaigns impact pro-health behaviors of male Baby Boomers more often than of male Millennials.

As the research tool, a questionnaire was applied, developed for the purposes of this research, to be filled and collected from the respondents in writing. A total of 217 persons participated in the study (random sample), including 165 women and 52 men. The women that represented Baby Boomers amounted to 36% of the respondents, the Millennials' representatives amounted to 13%, and the women of other age groups – 51% (see Figure 1).

In the case of the men surveyed, representation of Baby Boomers was stronger than in that of women, amounting to 50% of all the men surveyed.

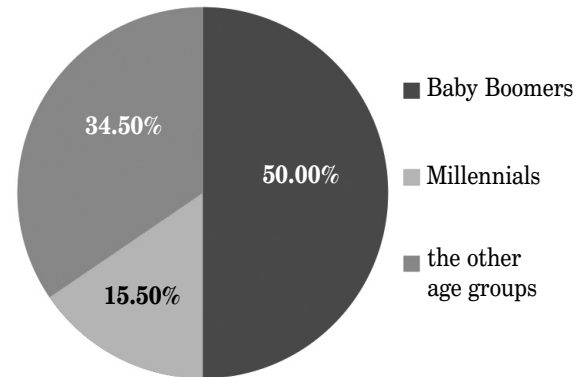
**Figure 1. Women surveyed, by age groups (as percentage of the total)**



Source: the results of own research of 2021.

The Millennial group was at a similar level – they amounted to 15.5% of all the men surveyed, while representatives of other age groups accounted for 34.5% (compare Figure 2).

**Figure 2. Men surveyed, by age groups (as percentage of the total)**



Source: as in Figure 1.

## Results and discussion

Initially, it is worth underlining that the Report by the Supreme Chamber of Control of 2016 emphasized that educational and information activities conducted in Poland by the Ministry of Health and the National Health Fund (NHF) were insufficient and ineffective in relation to the expenditure. The percentage of people who, in the years of 2012–2015, applied for free health assessment under colorectal cancer prevention programs amounted to 16–18% of those eligible, and under the cervical cancer screening program – 21–23%. Higher percentages (42–44%) regarded the breast cancer early detection program (NIK, 2016, p. 19). For comparison, e.g., in Iceland, more than 90% of those eligible shall be reported for preventive examination (NIK, 2017). In the report by National Health Fund, it is indicated that one of the important reasons for the failure to achieve the assumed objectives in terms of fighting cancer was a "limited range of preventive actions taken by general practitioners" (NIK, 2017, p. 20). Primary care physicians do not talk about tests and do not encourage patients to perform them.

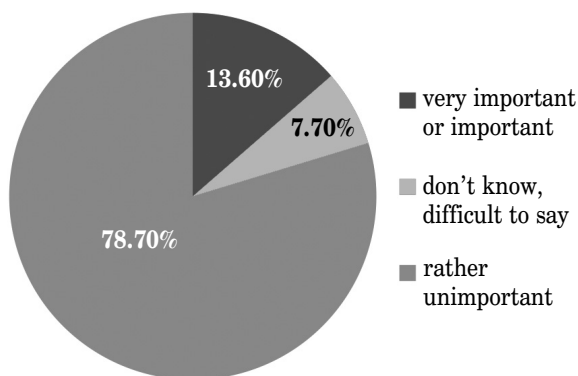
The results of our study indicate that only few social campaigns concerning preventive health care were known to the respondents. The data indicate that all the female respondents from the group of Baby Boomers (59 women) admit having heard about the campaigns: #SzczepimySię (against

COVID-19) and Rak'n'Roll Win Life! (oncological), and 41 women had heard about the campaign of Pink Ribbon #Jajnik21 (gynecological). The other campaigns included in the research were unknown to this group of respondents.

As for Millennials, e.g., women aged 18–28 (they were 21 among the women surveyed), when asked about their knowledge of preventive health care social campaigns, all of them indicated they had heard about the campaigns #SzczepimySię (against COVID-19) and Rak'n'Roll Win Life! (oncological), and 14 had heard about the campaign of Pink Ribbon #Jajnik21 (gynecological). The other campaigns were unknown among this age group.

Only 8 women surveyed from the Baby Boomers group indicated that social campaigns were very important or important to them and taken into consideration when they thought about their health and prevention. Vast majority (nearly 80%) declared considering them "rather unimportant" in health care (Figure 3). In the case of the Millennials women, 15 and thus the vast majority, indicated they considered social campaigns and six chose the "hard to say" answer option (Figure 4). Therefore, younger women notice social campaigns more often than the older ones, they are more likely to find them important and take them into account when thinking about their health and its prevention.

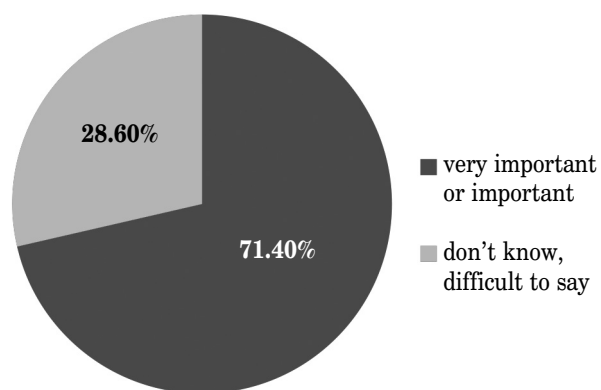
**Figure 3. Baby Boomers women surveyed, in terms of the assessment whether social campaigns are important to them in health care and its prevention**



Source: as in Figure 1.

The answers to the question whether, when selecting a doctor, the information indicating their social commitment (supporting people with disabilities, promoting a healthy lifestyle and healthy eating, participation in pro-health campaigns) is important, are quite similar. In the age group of Baby Boomers, only five patients

**Figure 4. Millennials women surveyed, in terms of the assessment whether social campaigns are important to them in health care and its prevention**



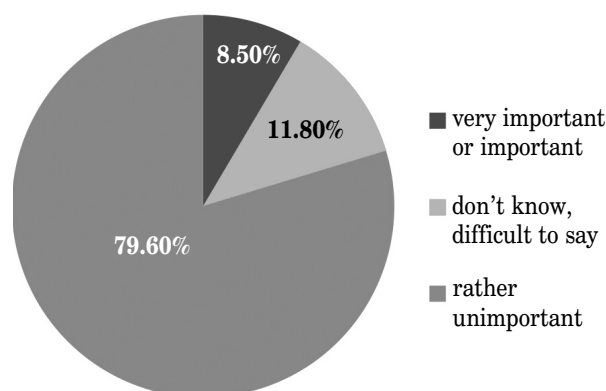
Source: as in Figure 1.

(8.5%) declared that such information on social activities of a doctor was an important factor in choosing them, whereas vast majority claimed that it was unimportant (Figure 5). Among the Millennials group, on the other hand, vast majority declared they considered this information important while choosing the doctor (Figure 6).

As much as 57% of the Millennials women surveyed would be willing to pay a higher price for a visit to a medical facility if it was involved in social actions, compared to only 5% in the group of Baby Boomers.

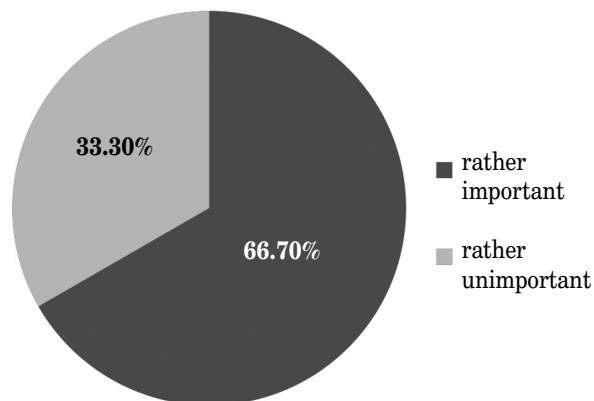
Among 52 men participating in the survey, there were 26 representing the Baby Boomer generation and 8 representing Millennials, while 18 belonged

**Figure 5. Women surveyed, representing Baby Boomers by the response to the question if the information on the social activity of the doctor is important to them during selection**



Source: as in Figure 1.

**Figure 6. Millennials women surveyed, in terms of their answer to the question whether the information on social activities of the doctor is important to them during selection**



Source: as in Figure 1.

to another age group. When asked about their awareness of social campaigns concerning preventive health care, most of the Baby Boomers generation men answered they had heard about the following campaigns: #SzczepimySię (against COVID-19), Rak'n'Roll Win Life! (oncological) campaign and the campaign of Pink Ribbon #Jajnik21 (gynecological) – respectively 23, 20 and 18 men. Unlike the women of this age group, the men also knew about other campaigns: #Dbaj o serce (TakeCareOfYourHeart), Your heart Tele HEART Heart under control (cardiological) – indicated by 13 men, Colorful Sock Syndrome (Down syndrome) – three men and ECHO, I Love Music (hearing-impaired) – two men.

In the group of Millennials, all the men declared having heard about the campaign #SzczepimySię (against COVID-19), four had heard about

Rak'n'Roll Win Life! (oncological) campaign, and one man had heard about the campaign Pink Ribbon #Jajnik21 (gynecological). The other campaigns were not known to the Millennials men.

When thinking about their health and its prevention, most Baby Boomers generation men and all the Millennials generation men indicated that social campaigns are important to them when they think about health protection and its prevention. Slightly fewer men (50% from the Baby Boomers group and 57% from the Millennials group) indicated that, when selecting doctors, they are guided by the information concerning the latter ones' social activities. A little more men than women declared they would be willing to pay a higher price for a visit to a medical facility if it was involved in social actions.

Table 1 below presents the results of verification of the research hypotheses.

The research results do not support the hypothesis that pro-health social campaigns impact women more often than men. The second hypothesis, that pro-health campaigns impact older women (Baby Boomers generation) more often than the youngest (Millennials), was falsified, too. However, there is an interesting finding that the research results supported the third hypothesis: older men (from the Baby Boomers generation) perceive pro-health campaigns more often than the youngest ones.

## Conclusions

Based on the results of the research, it can be concluded that a significant number of patients pay attention to the activities of the medical facility related to its involvement in social campaigns, education concerning health and disease prevention, concern for the protection of the

**Table 1. The results of hypotheses verification**

Hypotheses	Chi-square	Chi-square/df2	Verification outcome ( $\alpha = 0.05$ )
Hypothesis 1: social campaigns impact the pro-health behaviors of women more often than of men	31.36	5.99	Falsified
Hypothesis 2: social campaigns impact the pro-health behaviors of Baby Boomers women more often than of Millennials women	40.66	5.99	Falsified
Hypothesis 3: social campaigns impact the pro-health behaviors of Baby Boomers men more often than of Millennials men	3.31	5.99	Supported

Source: based on own research, 2021; N = 217; women = 165; men = 52.

natural environment. An increasing number of informed and well-educated patients, both women and men, are observed, willing to support medical facilities responsible for the society and natural environment, and ready to pay a higher price for a visit to such a facility. This applies more to Millennials than to Baby Boomers generation.

The use of responsible and sustainable marketing practices certainly poses a major challenge to both smaller and larger medical facilities. On the one hand, the introduction of social marketing to the development strategy of the medical facility, the ability to apply lawful marketing tools may translate into tangible benefits. On the other hand, marketing messages have the power to shape attitudes and behaviors of a broad public, and in this respect, medical facilities may play a significant role in promoting pro-health campaigns, aimed at taking preventive measures and revealing proper attitudes. The key and necessary efforts, e.g., enabling operations in accordance with the assumptions of social marketing, include the social commitment of doctors and persons managing the medical facility, the will to provide medical services in a way which correlates with social marketing and the belief that health objectives in this respect are achievable.

The conclusions from the analyzes carried out confirm that pro-health campaigns concerning disease protection and prevention are perceived

slightly more often by younger women, compared to those from Baby Boomers generation. It turns out that men know about a higher number of pro-health campaigns than women. They also more frequently believe that pro-health campaigns contribute to preventive health care, however this is not statistically significant. Therefore, the results of this exploratory study do not confirm the thesis that women have greater health awareness than men. They do not point out that Baby Boomers women are more prone to pro-health campaigns than the Millennials women. On the other hand, research results confirm that men from the Baby Boomers generation are more prone to pro-health campaigns and likely to take them into account in their health prevention behaviors than representatives of the Millennials.

The main constraints of the empirical research conducted relate to the fact that the observations were made only among patients of one selected first contact medical facility, thus excluding the possibility of generalizing the results. However, they may serve to formulate and verify research hypotheses for further research, including the broadening of analyzes concerning health campaigns under social medical marketing, considering the dynamics of changes in this field. It is also necessary to identify in detail the determinants of confidence in this type of campaigns from the point of view of medical staff and patients.

## Notes/Przypisy

<sup>1</sup> A reference number NRL/ZRP/WI/163/2013; nrl-zrp-wi-163-1-13-opinia-prawna-dot.-reklamy.pdf (nil.org.pl) (14.09.2021).

<sup>2</sup> For example, marketing-mix 7P includes a range of activities relating to seven areas: product, location/place, price/margin, promotion, physical evidence, process of providing services, people.

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