A Survey of the Public Perception of Chiropractic After Exposure to Chiropractic Public Place Marketing Events in New Zealand

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ABSTRACT

Objective: The purpose of this study was to assess public perception of chiropractic public place marketing events.

Method: A chiropractic public place marketing program was held at 3 events (a community sports event, an exposition, and a university campus market day) over a 5-month period in Auckland, New Zealand between 2008 and 2009. Participants were interviewed by chiropractic students. Interview questions were standardized and sought to find out participants’ perception of chiropractic and whether it was influenced in a positive or negative manner after their exposure to the marketing program.

Results: Three hundred and forty-five interviews were completed during 3 events. The minority of participants (15.9%) had a negative view of chiropractic, 29.2% were neutral, and 54.9% had a positive view of chiropractic. Of the responses of those surveyed, 54% did not change their opinion of chiropractic, 44.3% were more positive, and 1.7% were more negative.

Conclusions: This study found that direct or indirect exposure to chiropractic public place marketing events may possibly influence the public perception of chiropractic. Because of the limited sample, these findings cannot be extrapolated to other regions or populations. Further studies are needed to test these findings in other world regions and in more controlled environments. (J Chiropr Humanit 2017;xx:1-6)

Key Indexing Terms: Chiropractic; Marketing; Advertising

INTRODUCTION

Public place marketing of chiropractic occurs in New Zealand1 at different venues, such as shopping malls, sporting events, and other public events. Marketing programs may include educational materials, postural assessments, thermography, surface electromyography, and spinal palpation.1 These marketing practices are used to introduce the public to chiropractic care and to generate new patients for chiropractic practices.1,2 The New Zealand Chiropractic Board’s chiropractic advertising policy includes requirements for such activities: “All advertising must be presented in a manner that is accurate, balanced and not misleading; and use terminology that is understood readily by the audience to whom it is directed; and be from a reputable and verifiable source; meet legislative requirements.”1 This policy also outlines what is expected from public place marketing: “Chiropractic public place marketing is to promote the profession and to increase the awareness of the public regarding the benefits of chiropractic management, and not primarily for the sole purpose of practice building.” Further, it stipulates that the “purpose of the ‘chiropractic check’ is to give the participant an overview of the general state of health of their neuro-musculo-skeletal system within the Scope of Practice.”1

The impact of chiropractic public place marketing events on the public’s view of the profession is an area of concern for many chiropractors and chiropractic legislators.4 The
potential for public place marketing to harm the public image of the profession has led to some regulatory bodies issuing guidelines for the proper conduct of this type of marketing.5

Only a few studies have investigated the public perception of chiropractic, and different chiropractic marketing strategies and many opinions exist on this topic.6–16 One study revealed that few patients were attracted to chiropractic offices through direct to consumer marketing.15 According to 2 Canadian telephone surveys, respondents thought marketing in a public place would make them less confident in the chiropractic profession.11,16 These surveys revealed that the perceived motive of the chiropractor conducting the screening was an important factor in determining how the respondent would judge the chiropractic profession. If the respondents were told that the chiropractor’s motive was to generate new patients for his or her business, then they were less likely to become more confident in the profession as a result of the marketing and more likely to become less confident in it.11,16

A study in the United States explored perceptions of 537 people who had neither seen a chiropractor nor received chiropractic services.16 Surveys were conducted in person at various social settings, including shopping malls, athletic events, and festivals. The survey instrument included 23 statements, 1 of which related to public marketing, and the answers revealed that 88% of respondents disagreed with the statement: “I would be interested to hear more about how chiropractic care can help me if I was approached by a DC in a shopping mall.”16

It has been suggested that marketing practices in the form of screenings may lead to either unnecessary alarm or a false sense of reassurance, depending on the results found.17,18 Additionally, some suggest that there is little benefit in public place marketing and that in this practice there is a tendency to overdiagnose in a screening setting.17–23

There has been limited study of chiropractic public place marketing. Therefore, the aim of the present study was to assess public perception of chiropractic and how exposure to chiropractic public place marketing events influenced public perception of chiropractic in Auckland, New Zealand.

METHOD

Chiropractic public place marketing events were held at 3 public occasions over a 5-month period from 2008 to 2009. These included a community sports event, an exposition, and a university campus market day in Auckland, New Zealand.

Chiropractic interns (chiropractic students who have met the academic requirements to be able to provide chiropractic care to public patients in a supervised environment) conducted the surveys. Interns were from the New Zealand College of Chiropractic (NZCC) (3 males and 3 females), who wore plain clothes. They were not identified as being involved with the NZCC or chiropractic other than to conduct the survey.

The interviewers were instructed on the standardized survey questions, given that the main component of a survey’s reliability was its standardized administration.24 The individual items on the survey were offered on a Likert scale. Likert scales typically have a stimulus item (eg, a question as to whether they agree with a statement) that respondents indicate by polar extremes their thoughts on a particular stimulus (eg, positive, neutral, or negative).25

Members of the public 18 years of age or older who attended the venues were eligible to participate in the survey. The interviewers were instructed to ask interviewees for their agreement to participate in the survey. If the participant agreed, the questions were asked in order from a predetermined survey instrument, as discussed below. No incentives were given to respond to the survey. Responses were collected during the day; however, the time of week in which the data were collected varied. All interviews were anonymous, and no identifiable details were recorded.

The responses were categorized into 3 groups. Group 1 comprised those who attended the chiropractic public place marketing event and chose to make an appointment. Group 2 consisted of those who attended the chiropractic public place marketing event but chose not to make an appointment. Group 3 included those who responded to the survey but chose not to participate in the chiropractic public place marketing event. All interviews were completed at the event, either immediately after participation (groups 1 and 2) or as nonparticipant respondents (group 3) passed by the marketing site, and the information collected was separate from any information gathered by the screeners. Each interview took less than 5 minutes to complete and focused on the participant’s perception of chiropractic and whether exposure to the marketing session influenced this perception in a positive, neutral, or negative manner.

Gender was identified by the interviewer. Respondents were asked their age by decade range, whether they ever or currently saw a chiropractor, and whether seeing the marketing program that day changed their view of chiropractic (rated as very positive, positive, neutral, negative, or very negative). Participants from group 1 were asked to select from the following options as to why they booked an appointment: (1) to increase their health and well-being; (2) to reduce symptoms; (3) to correct a structural concern; or (4) to satisfy their curiosity. Participants from group 2 were asked how satisfied they were with the marketing program. Respondents were asked whether they planned to make an appointment in the future and if they would make any other health care decisions as a result of the interaction. If the respondent said that he or she intended to make a different health care decision, the individual was asked if that decision would be making an appointment to see a medical doctor, another chiropractor, a physical therapist, an osteopath, a massage therapist, or another health care provider. Participants from group 3
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