
Branding of health care services amongst general medical practitioners in rural KwaZulu- Natal, South Africa

V MKHIZE

University of KwaZulu-Natal. Graduate School of Business and Leadership
vukani.mkhize@vodamail.co.za

ME HOQUE *

University of KwaZulu-Natal. Graduate School of Business and Leadership
hoque@ukzn.ac.za

* corresponding author

Abstract

The transformation of South Africa's health care sector, rising health care costs, and fierce competition to attract and retain patients in the private health care sector raise the question of what general practitioners (GPs) are doing to sustain their business. The aim of the study was to investigate GPs awareness and practices with regards to branding of health care services. This was a cross-sectional study conducted among 15 GPs using a self-administered questionnaire.

GPs had poor knowledge regarding branding. The factors that were rated highest in terms of representing the doctor's brand included sensitivity towards patient needs (followed by an excellent patient experience). The most common brand elements used by GPs were signage (and business cards). In promoting the GP's brand it was revealed that pamphlet distribution was more commonly used, followed by social media).

GPs need to improve their knowledge of branding, that is commercial branding, as well as the branding of health care services. This will help them to appreciate the value of branding and also help them to understand which branding approaches are best suited to the customers they serve.

Key phrases

Branding; customer; health care and social media

1. INTRODUCTION

South Africa's health care system is undergoing rapid transformation. The increase in the lifespan of a person has also placed pressure on healthcare. Added to that is people becoming more health conscious and this has demanded an increase in health care as people want to invest in their health and wellbeing. The disease burden and the demand for quality health care are driving up health care costs (Mash, Fairall, Adejayan, Ikpefan, Kumari, Mathee, Okun & Yogolelo 2012:1).

About 80% of the country's population still uses the public health care system that is fraught with disease management challenges such as for chronic diseases, Tuberculosis and HIV/AIDS (Okorafor 2012:189; Sibiyi & Gwele 2013:387). The private health care sector serves about 20% of the South African population. General practitioners (GPs) in private practice occupy a large space in the private health care sector and entry into this sector is largely facilitated by GPs themselves. This implies that GPs need to remain competitive (Corallo, Croxford, Goodman, Bryan, Srivastava & Stukel 2014:5).

Competition is a norm in the private health care sector. Hence, some providers are unable to attract and retain new customers (Corallo *et al.* 2014:5). The increased disease burden and the demand for quality care increase health care costs. General practitioners who are running private medical practices compete with reputable private hospitals for walk-in patients. GPs also compete amongst each other for patients. They therefore need to adopt various strategies to attract and retain patients. Such strategies will of necessity carry costs (Mayosi, Lawn, van Niekerk, Bradshaw, Karim, Coovadia 2012:2042)

Appropriate use of branding strategies by the medical fraternity has been shown to have positive results on health care services, including, amongst others: Improved service quality and level of care, Improved level of patient retention and satisfaction, and Increased profit margins (Snihurowych, Cornelius & Amelung 2009:126). Therefore, this study seeks to investigate GPs' awareness and practices with regards to branding of health care services.

2. LITERATURE REVIEW

Healthcare branding is very important as people who are concerned about their health and wellbeing want the best quality of healthcare services. This means brands that carry good healthcare are of great importance to patients. In the literature review branding, healthcare branding and health care services branding solutions are discussed below.

2.1 Branding

Branding is a practice that has been around for a long time. It can be traced to farmers who used a symbol to brand their cattle to differentiate it from those of other farmers. A brand is a combination of attributes that are communicated through a name or a symbol that influences the minds of an audience and creates value. Strategic brand development assists medical aid companies to position themselves better in the market in relation to its competitors. When people think of the brand it should identify with quality, trust, care and commitment in the medical aid industry (Snihurowych *et al.* 2009:127). Researchers argue that a brand is a strategic resource that companies use to reach various segments of the market (Evans, Blitstein, Vallone, Post & Nielsen 2015:24). If well-crafted, branding creates a competitive advantage for a company and ensures market leadership. It was further argued that an excellent brand translates into higher profit margins (Dopico & Porral 2012:391).

A brand should represent an implicit promise that is offered to customers by an organisation. This gives customers a reason to remember, recognise, consider and ultimately choose the brand when making a purchase (Maas & Martin 2009:8). Researchers argue that strong brands are built through distinctive attributes, excellent performance and a consistent message; and are delivered in ways that appeal to customers' emotions (Kemp, Jillapalli & Becerra 2014:126).

Research has shown that a high level of customer commitment can be cultivated through emotionally appealing brands. This helps an organisation to gain differential and competitive advantage in the market. There is a general agreement among marketing academics that enhancing the value of a brand goes beyond its features and benefits to include its ability to penetrate customers' emotions. Brand dimensions provide a means of distinguishing the goods/services of one organisation from those of other organizations (Rahman & Areni 2014:328).

2.2 Branding in the health care services industry

Branding in the healthcare industry is a fairly new concept. According to many researchers, organisations in many industries have used branding to communicate the elements that differentiate them from other organizations in the sector, as well as to communicate their commitment to such elements (Kalia, Patel, Moriarity & Canon 2017: 971; Snihurowych *et al.* 2009:126). Although branding has been widely used in many industries, it has not been fully embraced and utilised by many health care service providers and organisations.

Whilst commercial branding aims to change behaviour in order to increase sales or increase the use of a particular service, health care service providers use it to offer a platform for a personalised experience; hence customers' emotions are considered to play a critical role in decision making (Pralea 2011:65). In the healthcare industry the customer shares personal information with the service provider. This intimate service influences a client's physical and psychological well-being. Hence trust is absolutely essential in the relationship (Kemp *et al.* 2014:126).

Proximity of the health care organisation to the patient is no longer the only driver of health care utilization (Kemp *et al.* 2014:126; Ranginwala & Towbin 2017:488). Pertinent factors that influence patient choice include, amongst others: the means to provide an excellent patient experience, customer-centric service, in-house technology, aesthetically appealing facilities, level of care, the quality of health care outcomes, efficiency of services and costs, and community involvement.

Good branding mediates not only an increase in the actual quality of a health care service, but may also affect patients' perceptions of quality (Snihurowych *et al.* 2009:126). The uniformity and consistency of service assure patients of quality (Kemp *et al.* 2014:126). It becomes an added value an organisation possesses purely because of the way in which patients perceive it (Jesitus 2014:76).

The most pronounced brand meaning for a patient is distilled from their direct experience of the brand (Jesitus 2014:76). This in turn encourages the patient to promote the organisation through word-of-mouth which helps to attract other patients. In order to derive value from a brand, patients have to feel a meaningful connection with the particular brand. This can be achieved by sharing sound information on the brand with the patient through information brochures, posters, flyers, leaflets, a website, appointment cards, magazines, and employee uniforms (Dunlop 2009:28).

In order for the patient to be loyal, the brand has to deliver consistently on its promise (Rahman & Areni 2014:328). This can assist by developing a relationship with the patient and enhances their continued interaction with the brand. Customers' perceptions of a brand emanate from their actual experience with the organisation; hence organisations should invest in and implement measures to ensure positive customer experiences (Pralea 2011:65).

Patients value different things about health care service providers. These may include location (distance to the health care service provider), the cost of services, utilitarian needs, service quality, aesthetic needs and other variables (Kemp *et al.* 2014:126). The quality of care, clinical excellence and ethical behaviour also ensure an enduring and successful practice (Heymann 2011:353). Tailoring care to the needs of the patient reduces the habit of “doctor shopping” (Snihurowych *et al.* 2009:126). Due to the increasing cost of medical care, some customers use this variable to select a health care service provider (Kemp *et al.* 2014:126).

Some customers are attracted to brands that they can trust, that offer added value and are committed to corporate social responsibility (CSR) (Kalia, Patel, Moriarity & Canon 2017: 972; Jillapalli & Jillapalli 2011:21). Organisations that adopt CSR are able to create a socially responsible brand value which encourages customers to identify with the organization, leading to customer attraction and retention. This helps businesses to improve their market penetration and/or access new markets, leading to increased competitiveness (Srisunan, Phapruek & Pratanporn 2012:137). Increased customer satisfaction and retention further boosts the organisation’s performance, enabling it to achieve healthy cash flows and superior market share (Melo & Galan 2011:423). Others also advocate that health care service organisations engage local communities as a means to cultivate a relationship with patients (Kemp *et al.* 2014:126).

3. BRANDING SOLUTIONS IN THE HEALTH CARE SERVICES

The development of a great brand involves careful planning and the implementation of creative and effective strategies (Franzak, Makarem & Jae 2014:16). The six “brand-building blocks” are salience, performance, imagery, judgments, feelings, and resonance (Jillapalli & Jillapalli 2011:21).

Another important factor in building a brand is the choice of brand elements. Brand elements help customers to identify a brand. These may include names, logos, slogans, and signage.

Keller (2013:142) identifies the following criteria for selecting brand elements):

- memorable - customers must be able to recognise and recall the brand elements.
- meaningful - brand elements must clearly outline what the brand is about and must be convincing.
- likable - brand elements must be interesting and aesthetically appealing.

- transferable - brand elements must be able to transcend and penetrate different geographical boundaries and market segments.
- adaptable - brand elements must be able to adapt over time.
- protectable - it must be possible to legally protect the selected brand elements.

Brand elements varies in their effectiveness when it comes to differentiating the brand; hence marketers are required to mix and match a combination of brand elements in a way that collectively contributes to brand equity (Keller 2013:167) A health care service brand promise must be delivered across all aspects of an organisation, at every touch point with its patients. This helps to enhance the patient experience with the brand and develops brand value and equity (Snihurowych *et al.* 2009:126).

An organisation develops its brand from the type of employees that it hires, the training it provides, the design of its facility and its approach to patient care. Effectively building a brand and executing growth strategies hinge on the uniqueness of what the brand offers. Experience-based perceptions, whether positive or negative, will always prevail. Even in the presence of well-designed advertising activities, service reputation cannot be rescued if, based on their experience, patients perceive it as unacceptable.

4. METHODOLOGY

This was a descriptive cross-sectional study conducted among all the GPs practicing in the north of Durban in the areas of KwaMashu, Newlands East, Ntuzuma and Inanda. A descriptive design is very useful when a researcher intends to describe variables to answer research questions without the intention of establishing a cause-effect relationship (Brink, Van Rensburg & Van der Walt 2012:153).

The Medpages Medical Directory was used to identify GPs practicing in the study area. The total population of medical practitioners in the areas of KwaMashu, Newlands East, Ntuzuma and Inanda operating private practices was 24 (Medpages 2013:Internet). Please note that 40% of these doctors have a second practice outside these areas

Due to the fact that a representative sample would have been too small and had the potential to present a source of error, the total population size (100%) was approached for participation. Every effort was made to get 100% participation. Therefore, no sampling was done to select the samples for this study. Survey sampling was done as the population is equal to the sample size of the study as the population was too small (24).

A structured questionnaire was developed by the researcher to collect relevant data which could answer the research objectives. The questionnaire was in English as the participants are conversant with this language. It comprised of two sections. Section A gathered biographical data and section B comprised questions pertaining to the implementation of various branding strategies and related outcomes.

The participants were contacted and an appointment was made. Upon meeting the participants, the purpose of the research was explained and their consent to participate was secured. Questionnaires were then given to the participants and took approximately 10 to 20 minutes to complete. The researcher explained to all prospective participants that they were free to participate or not participate in the study and encouraged them to answer the questions honestly in keeping with the principles of beneficence, justice and autonomy.

The University of KwaZulu-Natal Ethics Committee approved the study (Reference no. HSS/0188/015M) prior to collect the data. Confidentiality and anonymity was maintained at all times. Participants were informed that the participation in the study was voluntary.

Data were captured, coded and analysed using SPSS 23.0 version. Frequency distribution was performed for the entire variable since they were categorical. Tables and figures are used to show the results.

5. RESULTS AND DISCUSSION

More Indian (67%) participated in the study than any other race group. Almost all the participants were male. A total of 60% of the respondents were based in KwaMashu (Table 1). This could be due to the fact that KwaMashu has a much higher population than the other study areas and is more developed in terms of the availability of commercial centres, attracting GPs to operate private medical practices. KwaMashu has always been a central shopping area for people from Inanda and Ntuzuma, thus creating human traffic that attracts GPs. Generally population statistics determine the number of GPs in each area.

All of the respondents had been in private practice for at least six years, with just over a quarter (26.7%) having been in practice for more than 20 years (Table 1).

TABLE 1: Respondents' socio-demographic information

Variable		Frequency	Percentage
Gender	Male	14	93,3
	Female	1	6,7
Race	Indian	10	66,7
	African	4	26,7
	Coloured	1	(6.6)
Location	Inanda	4	26.7
	Kwamashu	9	60,0
	Newland East	1	6.7
	Ntuzuma	1	(6.6)
Years of experience	6-10 years	8	53.3
	11-15 years	1	6.7
	16-20 years	2	13.3
	>20 years	4	26.7
Patients seen per day	<10 patients	2	13.3
	10-20 patients	5	33.3
	21-30 patients	3	20.0
	31-40 patients	1	6.7
	>40 patients	4	26.7

This suggests that the respondents have considerable experience in private practice and therefore have sound knowledge of the health care industry. Some of the doctors adopt a low cost strategy and this attract high numbers of up to 60 patients a day

Sound insight into customer needs and an understanding of the business landscape play a role in crafting and creating an excellent strategic direction (Hagerman 2012:20).

The study found that the majority (86.7%) seeing on average more than 10 patients in a day (Table 1). This could imply that the majority of GPs has been successful in attracting patients. Appropriate use of branding strategies by the medical fraternity has been found to have the potential to attract patients as well as improve the level of patient retention and satisfaction (Rahman & Areni 2014:328).

5.1 GPs' knowledge of branding of health care services

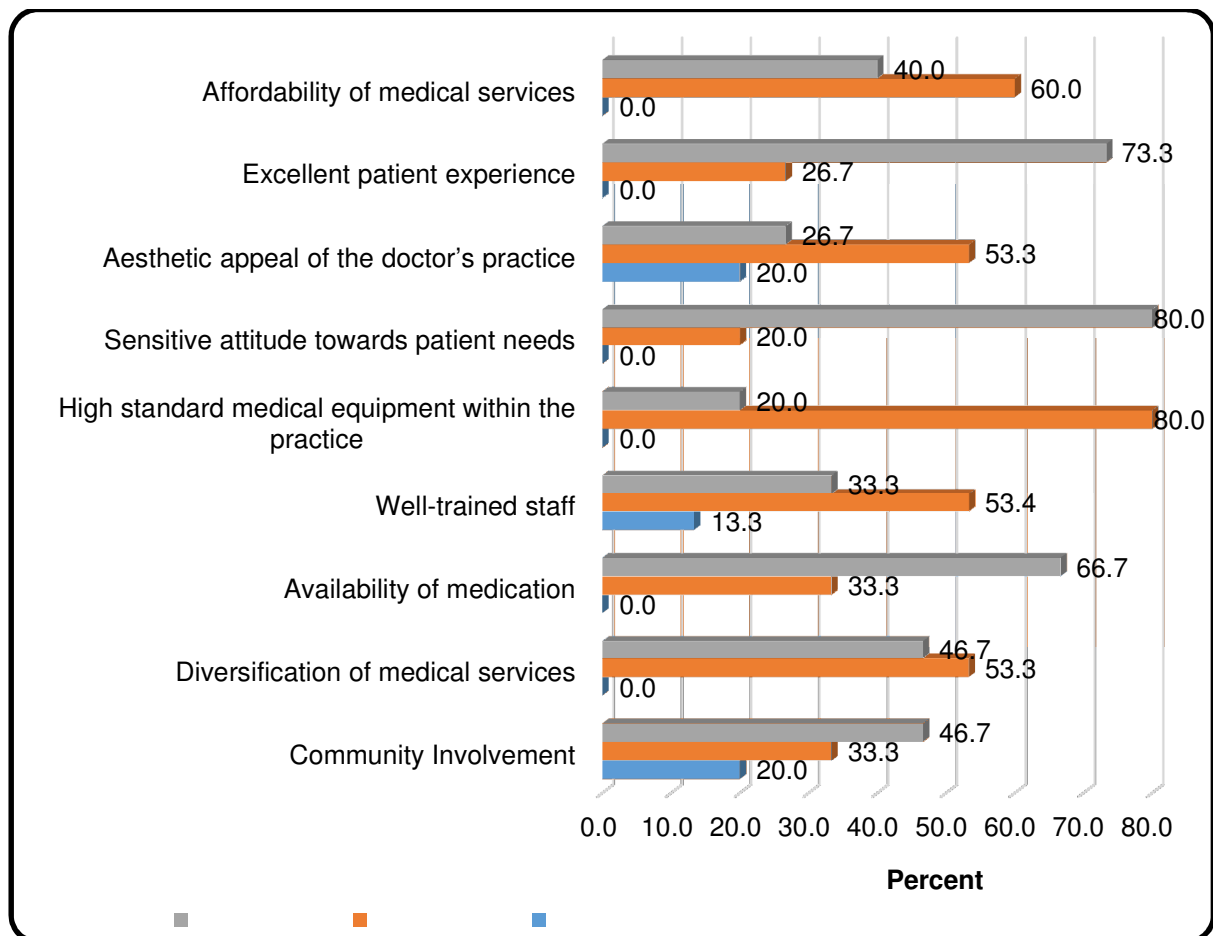
An excellent branding solution not only involves the branding of the medical practitioner but all aspects of the organisation, including the people that the patient comes into contact with (Holland & Weathers 2013:245). Almost half of the respondents (46.7%) were not familiar with the concept of branding health care services. This is in keeping with the literature that notes that, while branding has been widely used in many industries; it has not been fully embraced and utilised by many health care services providers and organisations (Snihurowych *et al.* 2009:126).

5.2 Branding practices adopted by GPs

The factors that were rated highest in terms of representing the doctor's brand included sensitivity towards patient needs (80%), an excellent patient experience (73.3%) and availability of medication that's if a practice is licensed to dispense medication (66.7%). The majority of the respondents cited high standards of medical equipment within the practice (80.0%), diversification of medical services (53.3%) and affordability of medical services (60.0%) as the factors that represent the doctor's brand to a moderate extent (Figure 1).

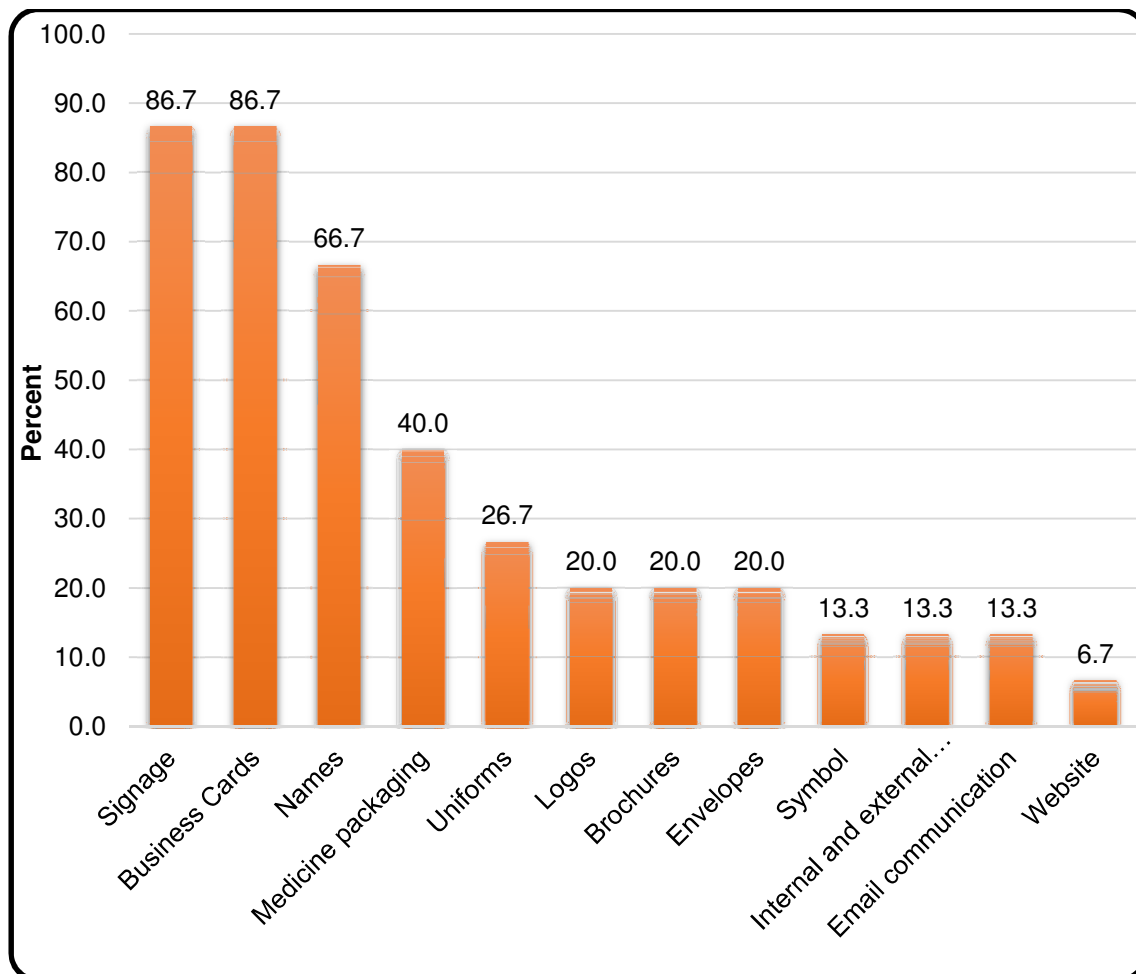
This implies that, these GPs, are adopting branding strategies in line with those recommended in the literature. Implicit in good service is that patients should receive the service they anticipate in a respectful, timely, and appropriate manner. Nothing can replace sensitive and caring service, reasonable waiting times and constant clear communication with patients and their loved ones (Weiss 2010:6).

FIGURE 1: Factors that define the practice as a brand and the degree to which it used



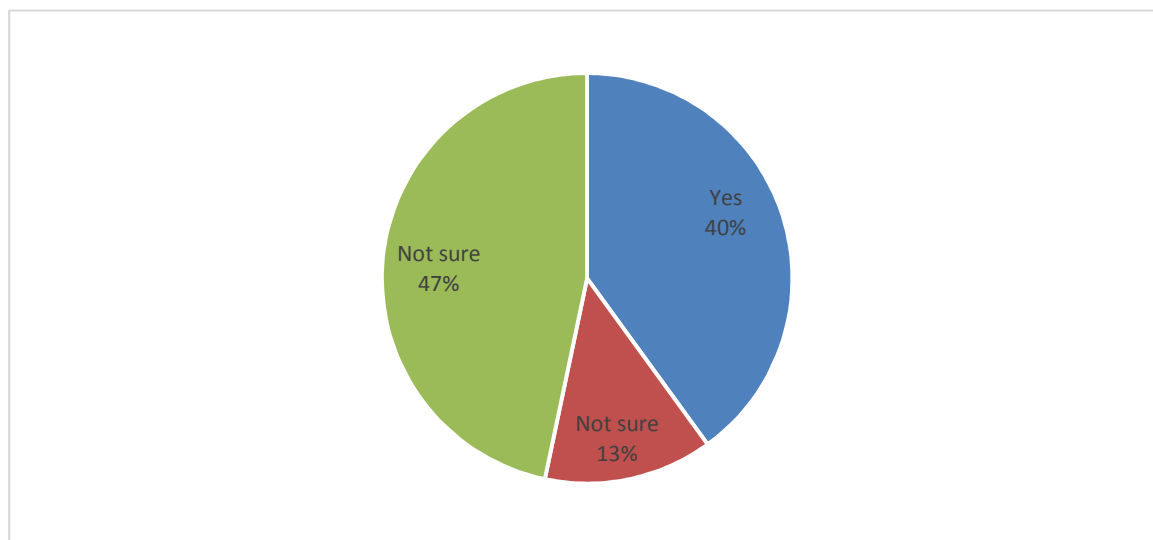
The present study revealed that the brand elements most commonly used by GPs include signage (86.7%), business cards (86.7%), names (66.7%), medicine packaging (40.0%) and uniforms (26.7%) (Figure 2). This confirms that the GPs are using the brand elements defined by the literature. Brand elements vary in their effectiveness in differentiating the brand; hence marketers mix and match a combination of brand elements in a way that collectively contributes to brand equity (Keller 2013:167).

FIGURE 2: Visual elements used to communicate services to the target market



When the GPs were asked whether the visual elements they adopted to communicate their brand clearly convey the message of the value they deliver, 46.7% answered negatively (Figure 3). This may have to do with the fact that the respondents may have not selected the correct brand elements for their medical facilities. It may also imply a lack of knowledge, as well as poor monitoring of branding outcomes. The development of a great brand involves careful planning and the implementation of creative and effective strategies (Dunlop 2009:28).¹³ It is important for health care providers to select brand elements that convey the right message to patients as well as help patients to identify the brand and differentiate it from other brands (Pralea 2011:65).

FIGURE 3: Effectiveness of the visual elements used



The GPs were asked to share other branding solutions which they had adopted. Signage, and giving all patients quality consultation time and treatment, as well as maintaining clear communication were cited as valuable. This included a holistic approach to the management of patients, that is, attending to their social, physical and psychological needs (Table 2). This further confirms that nothing should replace sensitive and caring service, reasonable waiting times and constant clear communication with patients and their loved ones (Weiss 2010:6). The patient experience is the ultimate source of a brand. It is thus important to deliver a patient care experience that is worth talking about (Hagerman 2012:20).

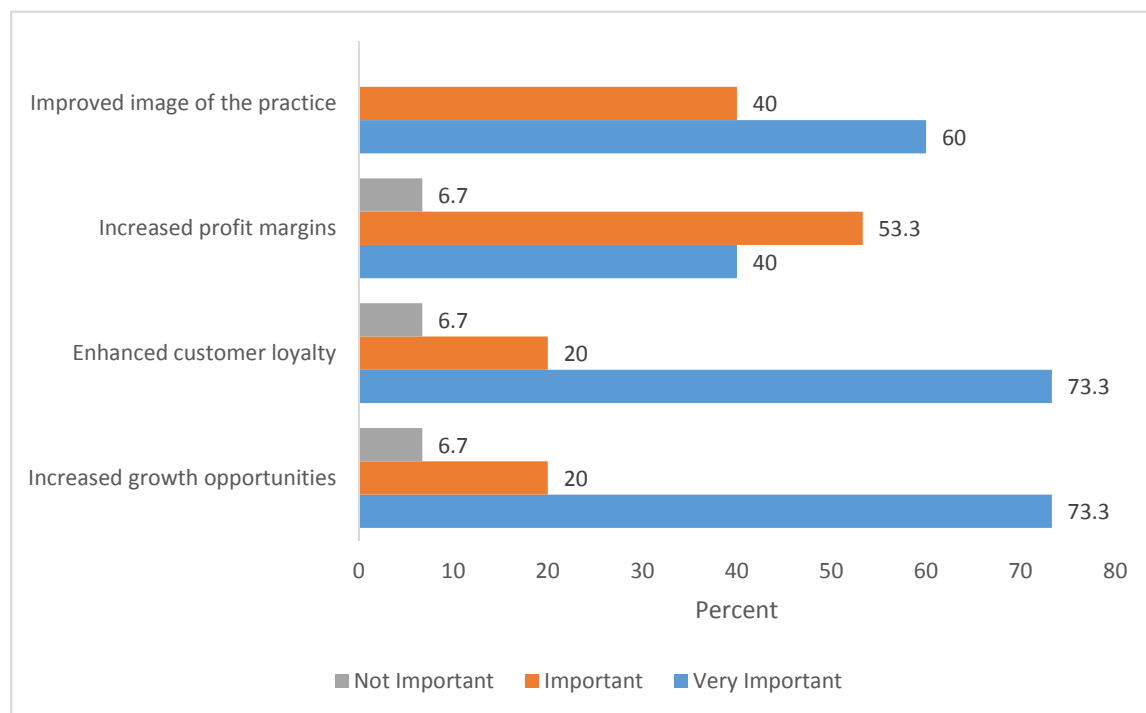
TABLE 2: Branding solutions adopted to attract customers

Possible solutions	Count	Percent
Use of signage	2	13.3
Use of social media, i.e., SMS and WhatsApp for known clients	1	6.7
Giving all patients quality consultation time and treatment and maintaining clear communication	2	13.3
Holistic management of patient – social, physical and psychological needs	2	13.3
Courtesy phone calls to follow-up on their well-being	1	6.7
Brand stationary	1	6.7

Source: The present study

Amongst other things, a well-crafted brand can result in increased growth opportunities, enhanced customer loyalty, increased profit margins and an improved image of the medical practice (Maas & Martin 2009:8). The majority of the respondents (73.3%) indicated that it is very important to adopt branding approaches in order to increase growth opportunities and enhance customer loyalty (Figure 4). Less importance was placed on increasing profit margins (53.3%) and improving the image of the practice (40%) through the use of branding approaches. This implies that these GPs are aware of the importance of the appropriate use of branding strategies by the medical fraternity that may have a positive impact on health care service delivery (Kemp *et al.* 2014:126).

FIGURE 4: Aim behind the adopted branding approach

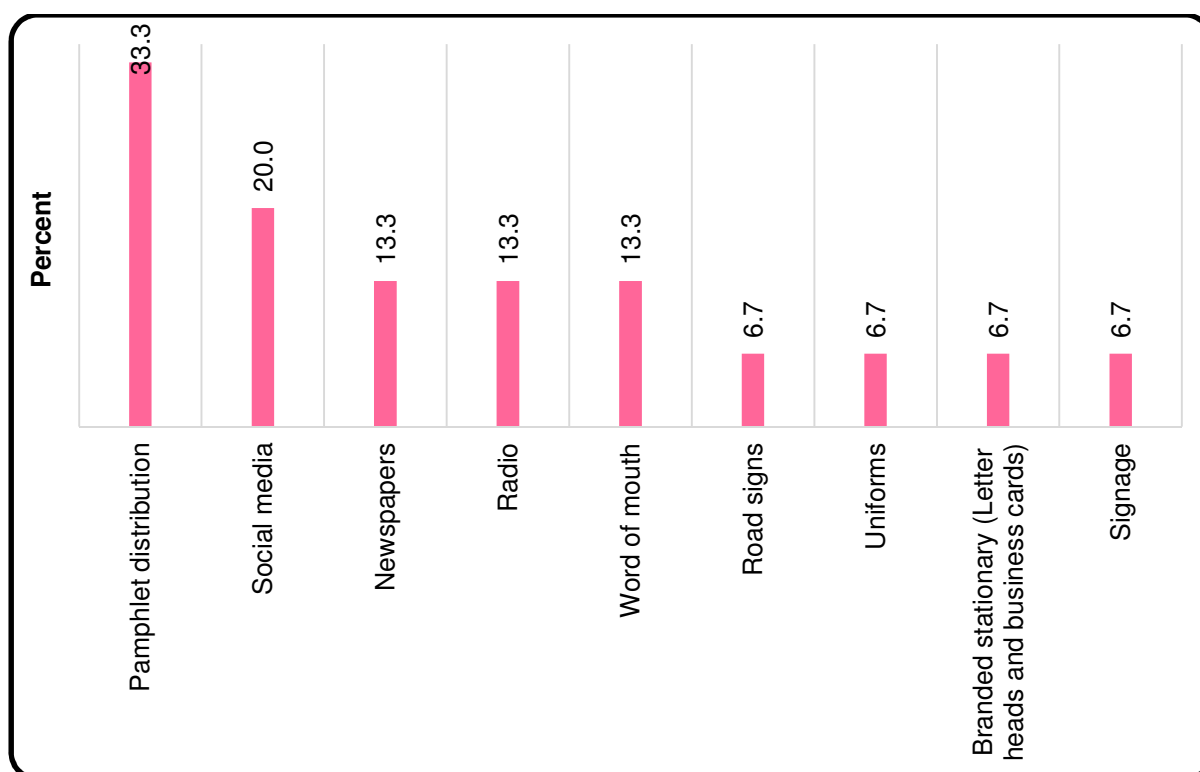


5.3 Promoting and communicating brand

Brand communication impacts on brand awareness, which in turn impacts brand meaning (Hagerman 2012:20). When asked about their choice of advertising channels, it was clear that the respondents have not made full use of all channels to communicate their brand. Pamphlet distribution is more commonly used (33.3%), followed by social media (20%) (Figure 5). Signage was amongst the least used for marketing services (6.7%).

Even though social media and word-of-mouth may offer free marketing, the respondents seem to lack Information of how to use it. Creativity and innovation are crucial in marketing brand value. Technology is available to create dynamic innovations that should ultimately deliver the right message to the patient (Heymann 2011:353; Ranginwala & Towbin 2017:489).

Figure 5: Advertising channels used to market the services offered



The study revealed that, less than 50% of the GPs maintain on-going dialogue with their patients. Furthermore, less than 50% monitors complaints and compliments (Table 3). This suggests that the respondents are not engaging their patients sufficiently. In today's well-connected society, an engaged customer spreads the word in the form of a referral (Franzak, Makerem, Jae 2014:16).

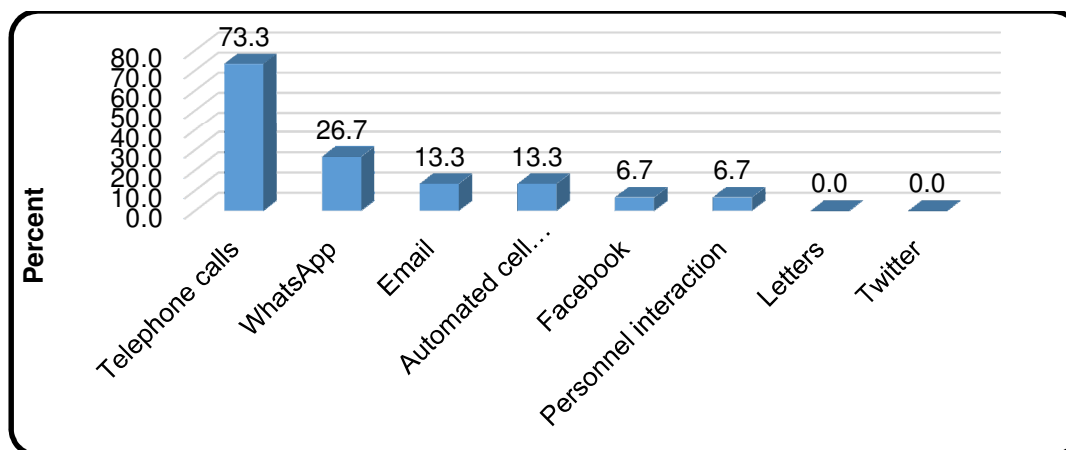
While it is commendable that about 93% of respondents respond to customer complaints, this also means that almost 7% of complaints are not attended to, representing lost opportunities for service delivery improvements. The health care provider should establish good brand meaning in order to be able to deal with negative occurrences. An organisation that is armed with excellent brand meaning is more likely to survive negative events than those with poorly developed brand meaning (Snihurowych *et al.* 2009:126).

TABLE 3: Summary of on-going dialogue with patients

Frequency of communication with patients	Never	Occasionally	Frequently	Always
Frequency of on-going dialogue with customers	13.3%	26.7%	33.3%	26.7%
Frequency of monitoring the number of complaints and compliments received by your practice	6.7%	46.7%	0.0%	46.7%
Frequency of responding to customer complaints	6.7%	0.0%	6.7%	86.7%

A total of 73.3% of respondents use telephone calls to communicate with their patients. They use social media to a lesser extent, WhatsApp being the most common (26.7%) (Figure 6).

FIGURE 6: Channels used to communicate with their patients



This shows that the respondents are making an effort to communicate with their patients. The literature notes that it is important for an organisation to keep its interaction with its customers alive and constantly monitor changing customer needs (Franzak *et al.* 2014:16).

5.4 Benefits by adopting brand practices

According to the literature, appropriate use of branding strategies by the medical fraternity may have a positive effect on health care service delivery. These includes, but is not limited to, improved service quality and level of care, enhanced patient perceptions of the quality of care, and enhanced communication and alignment of service provision with customer interests, as well as enhanced transparency and improved patient information (Snihurowych *et al.* 2009:126).

When the GPs were asked how their branding strategies benefitted patients in terms of these aspects, some indicated that the branding strategies they adopted benefitted their patients immensely in terms of enhanced communication and alignment of service provision with customer interests (33.3%) and enhanced transparency and improved patient information (40%). Improved service quality and level of care and enhanced patient perceptions of quality of care were rated satisfactory at 73.3% and 60.0%, respectively (Table 4). This implies that patients are receiving some benefits as a result of the branding approaches adopted.

TABLE 4: How patients benefitted from branding strategies implemented

Benefits from branding strategies implemented	Not benefited	Benefited satisfactorily	Benefited immensely
Improved service quality and level of care	6.7%	73.3%	20.0%
Enhanced patient perceptions of quality of care	13.3%	60.0%	26.7%
Enhanced communication and alignment of service provision with customer interests	13.3%	53.3%	33.3%
Enhanced transparency and improved patient information	6.7%	53.3%	40.0%
Patient continuity	100.0%	0.0%	0.0%

6. RECOMMENDATIONS

Branding is all about differentiating one's services from those of one's competitors and providing value-added to customers. The selection, design, and implementation of a branding strategy are crucial in effectively and efficiently achieving brand equity. Ultimately, the evaluation and measurement of brand equity over time provides useful information on the value of the brand in the market. The findings of this study highlighted what seems to be practical and what works when it comes to GPs branding health care services. The following are recommended for GPs to maximise their branding efforts in order to gain a competitive edge in the private health care sector.

GPs need to:

- Diversify their services – provide as many services as possible but also maintain service relevance, services which may include amongst others - disability assessments, insurance medicals, and occupational health medicals
- Properly design the practice layout such that it becomes a one-stop shop. If necessary, GPs should undergo additional training into some of the specific fields such as Occupational Health, Travel Medicine, Mental Health and others or form partnerships in order to be able to provide a variety of the required services.
- Develop a unique value proposition and offer efficient service at reasonable cost.

GP's are a very important element in the branding process. Since a GP can influence the way a patient thinks of a brand, they should therefore:

- Be sensitive to patients' needs;
- Display a high level of care and compassion;
- Deliver quality care and clinical excellence that ensures favourable health care outcomes for the patient at all times; and
- Liaise and collaborate with other health care providers that subscribe to similar patient management values.

7. CONCLUSIONS

In the highly competitive, rapidly changing business landscape, a winning strategy is a prerequisite for success. It remains central in the creation of superior value for any company. Sound insight into customer needs and an understanding of the business landscape play a crucial role in crafting and creating an excellent strategic direction. Strategic brand development can assist a company to position itself better in the market than its competitors. The same is true of private health care practices; sound strategic brand development and management are vital for business success.

The findings of this research study clearly indicate that there are various branding approaches which GPs can leverage that promise to, or have been proven to deliver positive results in gaining a competitive edge in the medical sector. Lack of knowledge of branding approaches and how these can be crafted and managed are key aspects that contribute to GPs not focusing on branding issues.

Health care service providers should keep abreast of changes in the health care industry in order to develop effective branding strategies. This will enable proper alignment of branding strategies with such changes as well as alignment with changes in the macro-environment surrounding the business. Service providers need to offer cutting edge services that patients are able to identify and connect with. This will embed the brand in the hearts and minds of patients and cement a loyal relationship with the practice.

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