

healthcare **now** | Unique insights to navigate a complex market

#5

Is it time
to **lose the labels**
in healthcare?



About Healthcare Now

Rooted in research and insight, essential provocation for brands and businesses in the health & wellbeing space.

We've got a long history of helping brands navigate the complex sphere of healthcare.

The main challenge used to be regulatory compliance, but today there are so many more factors to consider. It's a landscape completely changed by events of recent years and that change is constant...and happening quickly.

As two entities working across the full spectrum of health & wellbeing, from common ailments to rare diseases, Bray Leino and Solaris Health are in a unique position. In 2022 we came together to commission independent research agency QuMind to conduct a nationwide healthcare study

of 1,000 respondents across both consumer and core patient groups*. This exclusive, quantitative and qualitative research study – State of the Nation Wellness Report – unlocks previously unattainable insights to power healthcare marketing, now.

Through our programme of thoughtprovoking content, we'll reveal the beliefs and experiences that are shaping health attitudes and behaviours. From consumer and patient insight, we'll explore human perspectives and derive potential implications for brands and businesses navigating this space. Ultimately, we set out to see the world of healthcare through the eyes of those that matter.

*Those in primary care for with an ongoing medical condition and those with an ongoing chronic/rare medical condition.





Core insight: Is it time to lose the labels in healthcare?

Patient. Sufferer. Purchaser. Person?

In the world of healthcare, especially when it comes to marketing and communications, labels and typologies help us to identify and target specific groups of people for whom our product or service may be relevant. We spend time finding and nurturing those 'meaningful' moments within the customer journey that will have the greatest influence and impact on the purchase decision and go after them with our (often ailment focused) communications.

It's marketing 101. We all do it. It is the tried, tested and trusted way to approach marketing communications in healthcare, and arguably more generally than that. There is a relative ease

and comfort in approaching communications in this traditionally problem-solution way. And it works. Its effectiveness has been proven countless times.

However, the world is evolving and, as we've covered in our previous articles within the Healthcare Now series, people are changing.

We're all more conscious of our health and wellbeing and we're becoming more and more proactive in the way that we manage our healthcare. From diagnosis to treatment and everything in between, the lines between patient and person are blurring.



+ Patient. Sufferer. Purchaser. Person?

People are emotional creatures. We're multi-dimensional beings and identify as many different things: parent, wife, daughter, colleague, friend, patient, purchaser, consumer... the list goes on. The point is, we rarely just wear one hat. We rarely sit in one neat little box. Within healthcare we're unfortunately rarely only suffering or dealing with one thing, therefore why do we focus so much on the ailment, or the patient, and not the whole person?

Jade Goody. Dame Deborah James. Mary J Blige. These women are beautiful examples of the emerging 'earned authority' in the

healthcare space. Raising awareness of serious and critical health issues but doing so as people. People with humility.

Humankind are multi-dimensional emotional beings. Within this instalment of the Healthcare Now series we'll encourage brands, businesses and advertisers to look beyond the labels in healthcare; people are still people, no matter what their health condition.

It's not about casting the net wide, we'll never be able to identify and act upon all of the subtle nuances between our audiences, but we can pay a little bit

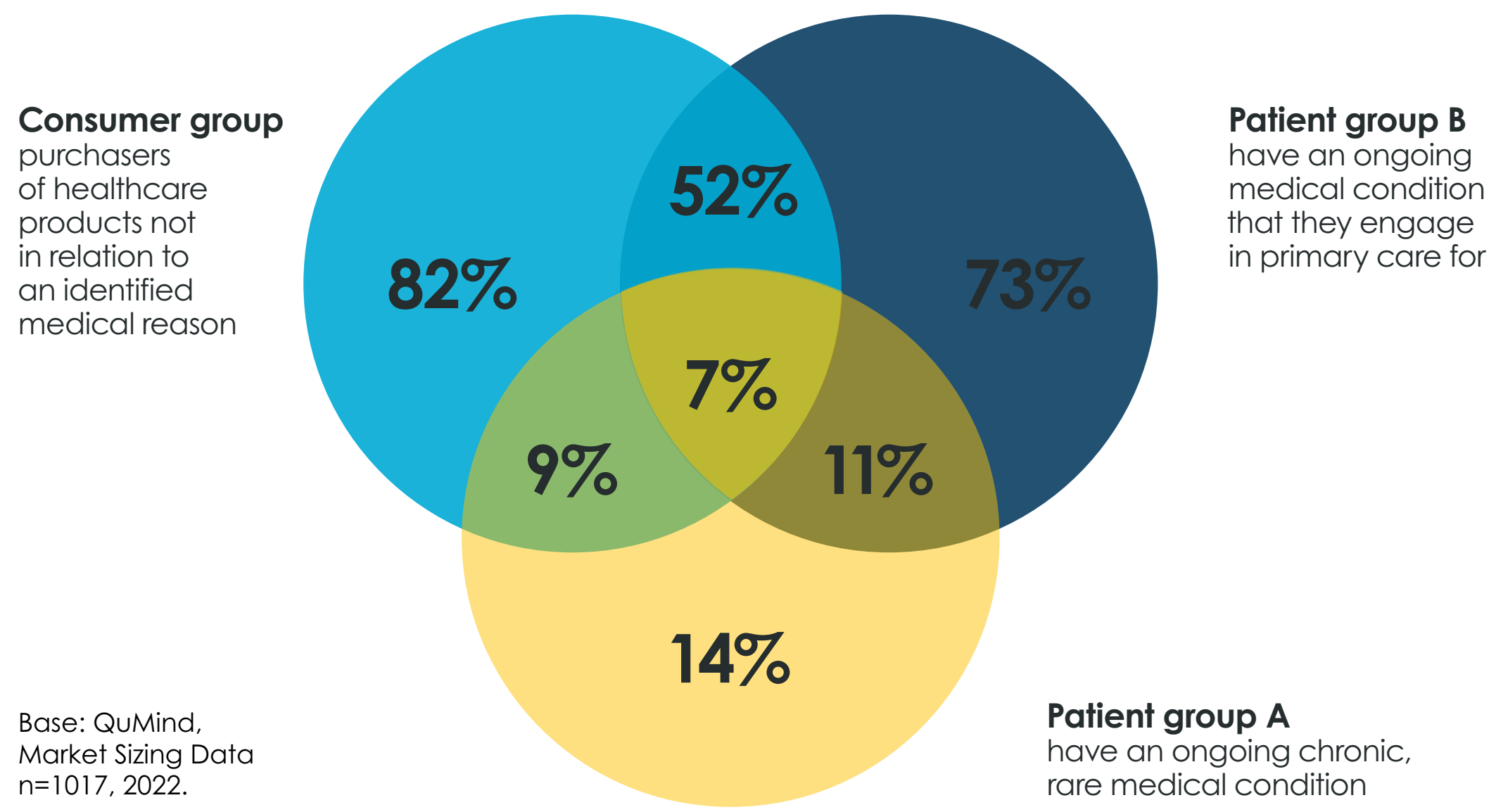
more attention (and do the research!) that will allow us to put the individual, the whole individual, at the centre of the communications ecosystem.

“ **Find a life worth enjoying, take risks, love deeply, have no regrets and always, always have rebellious hope. And finally, check your poo – it could just save your life.** ”

– Dame Deborah James



+ People are not siloed in their sufferance of health conditions.



Base: QuMind, Market Sizing Data n=1017, 2022.

It's easy for us as marketers to isolate people in their sufferance of one medical condition or another, but the data from our healthcare study shows that there is significant overlap between sufferance of mild, moderate and serious health conditions. This level of multi-layered sufferance will undoubtedly have huge impact on a person's attitude and behaviour towards their health, and therefore has implications in terms of how well our communications message will resonate.

From our research we know that consumers are generally proactive with their health and wellbeing and have always been this way. Sufferers of mild

to moderate conditions (patient group B) are more likely to be reactive to their health issues because of a trigger (fatigue, illness, pain). Patient group A, however (those who have a chronic or rare medical condition), are generally proactive, try to stay in control of their illness and have a more **positive outlook on life**.

7% of the population fall into all three of these groups, so it is critical that we get a deeper understanding of the person behind the problem, their lifestyle, mindset, attitude, behaviours and triggers, before we try and talk to them about their condition or ailment.



+ People are not siloed in their sufferance of health conditions.

Take aging, for example. As we age, we unfortunately have an increased likelihood of suffering with a breadth of ailments. Joint pain, backache, dental problems, skin complaints, catarrh and incontinence (amongst others), are all things to look forward to as we get older – and they are just the typical problems. Yet as marketers for products that treat one or more of these ailments and symptoms, we don't always take note of the wider context of sufferance, or indeed lifestyle of the person suffering. And even when we do, we tend to

follow a largely stereotypical view once they hit that 55+ age bracket (for more on this, please contact us to learn about our 55+ marketing consultancy, Anything But Grey.)

With growing sensitivity around sharing personal medical information and ever tighter GDPR restrictions, it is becoming increasingly difficult to target based on sufferance alone. So paying more attention to the person rather than the problem could be an opportunity to create better distinction for our brands.



I try to **stay positive,**
take each day as it comes
and do what I can because
I never know how I'm
gonna be.



- Hodgkin lymphoma sufferer from our research



+ 'I am more than my condition'

We are all guilty of it, in marketing and beyond... as soon as we know something about a person, it becomes their identity. It's the way we describe them. The 'label' we give them. The big consideration factor in how we might talk to them.

We see it in advertising all the time, from OTC remedies to disease focused charities, it is an incredibly fine line to walk between

promoting/supporting a cause and making it feel like it is the only thing that matters. And it is a balance our research suggests we may need to address.

Suffering with a long term or serious medical condition becomes part of someone's' identity, it can influence how they think and/or feel about things, but it doesn't become them.

“ I'm generally happy about things, I don't get upset anymore... I used to get frustrated about my situation but you just have to get on with it. ”

– Pulmonary Fibrosis sufferer

“ I try to stay positive, take each day as it comes and do what I can because I never know how I'm gonna be. ”

– Hodgkin lymphoma sufferer



+ ‘I am more than my condition’

Context is key. Even within one type of sufferance, there are different approaches to managing the condition. Take Patient group A as an example. The people identifying with this group live with chronic or rare medical conditions, often with unmet needs. You could assume that the very unique and serious nature of these types of condition drive some sense of synergy in the attitudes and behaviours of the people dealing with these illnesses. But actually, there are two very distinct typologies which emerged through our research:

Independent Patients (56%)

- “I take responsibility into my own hands to manage my condition”
- Predominantly male
- More likely to be 18-34, single, with no children
- 22% agree that ‘no one will understand my health as good as myself’
- More likely to say they should be doing regular exercise/staying active
- Often not ready to take care of their mental health.

Support Seekers (44%)

- “I need the support/guidance of others/professionals to help manage my condition”
- Predominantly female
- More likely to be 35-54 with children in the home
- 26% agree that ‘professionals understand my condition better than I do’
- More likely to say they should be avoiding social media and getting enough sleep
- They often do not have enough support around them to take good care of their mental health.

There are consistencies and ‘universal truths’ between the two... managing mental health and emotional support is a common need. However, even at a crude level we can see that the introduction of children into the household changes the way that a patient feels about, and chooses to manage, their condition. Communications that are sympathetic to this nuance and context could resonate with impact and authenticity.



+ The importance of tribes

42% of patients* feel fully informed on their condition but still would like additional information on how to care for/manage it.

* Patient Group A: have an ongoing chronic, rare medical condition

Regardless of level of dependency and knowledge of condition, people are still actively looking for more information on how to best manage their condition.

Sharing experiences on social media groups which they find reassuring:

“ **Online Facebook support groups through Covid when looking for a friendly face and someone to say hello to... good when you can't get to doctors for advice, as well as helping others by giving out your own advice.** ”
– Pulmonary Fibrosis sufferer

Reading digestible, medical articles online:

“ **You've got to be informed because doctors just don't have the time. I go online and look at articles to inform myself before I go to an appointment. I tend to look at medical articles that I can understand.** ”
– Hodgkin Lymphoma sufferer

Looking for articles on charity websites for specific information:

“ **I'll go on sites related to my illness, like Blood Cancer UK and The Lymphoma Trust.** ”
– Pulmonary Fibrosis sufferer

Looking for articles on charity websites for specific information:

“ **ME research and ME association are the best sources of information, sufferers are very willing to share information with each other – it is really just about doing it yourself because there isn't the help out there.** ”
– ME sufferer

Within the realm of healthcare, 9 times out of 10 we're talking to the patient or a 'sufferer' within our communications. There is a clear role for brands, businesses and services operating in this space to be providing patients with a deeper sense of control and confidence in handling their condition as well as a deeper (and needed) understanding of it.

However, there is also an emerging opportunity to create relevance and impact outside of that 1:1 conversation too. This information would not only be relevant for the patient but also for their friends/family/support network – their 'tribe', providing a holistic understanding of the condition, but also the impact that condition has on life outside of the disease.

Three key takeouts:

Look beyond the labels.

Just because you have a condition, this should not define who you are or how you are spoken to. Understanding the wider context of sufferance is critical to maximising the impact of targeted communications.

Tribes matter.

We all have a tribe; the people and platforms that sit within our sphere of influence and day-to-day life. Tribes will flex and adapt over time to reflect the needs in the moment; from diagnosis to treatment, management to just generally living life beyond the condition. Opportunity lies in exploring and identifying your audience's 'tribe' and where your brand has permission to infiltrate that wider support ecosystem.

Brands with humility will prosper.

Patients are still just people. Complicated, emotional beings trying to navigate their way through this thing called life. So, let's keep it simple.





Summary

Core Insight:

Healthcare users are more than their condition.

What this challenges:

The 'comfort' of traditional and linear problem/ailment focused communications.

Points of view

Unique perspectives on the core insight



Harrie Harris

Head of Client Services – Bray Leino

From ailment to condition to life-limiting diseases, it's often been easiest to talk condition and overlook the person behind it. But how does that make the end user feel? That you're talking to the condition they're determined mustn't define them? Life really is more than the health cards you've been dealt.

Working on baby healthcare brands has given us a unique perspective on this. Often an expectant or new parent's very first experience of ongoing healthcare is c/o maternity provision. And what a whirlwind that is. Losing your established identity is a common challenge, and one that's a contributor to declining mental health during this period.

We're so lucky to be living in an age of smashed boundaries around previously sensitive topics: sexual health, fertility, menstrual health, menopause, child loss, mental wellbeing. We no longer bandy around 'the big C' in hushed tones.

Holistic healthcare encourages practitioners to evaluate patients based on the whole individual, not just a single complaint. As marketers we'd benefit from talking more to the person behind the symptoms, taking learnings and inspiration from cultural cues and hearing what people – not patients – have to say.



Simon Treadwell

Healthcare Consultant - Bray Leino

We all learn early on in life that our language is really important and can have a big impact on others. The terms we use have evolved and changed, more so in recent times. When it's a person's health we are talking about it's really important to keep them at the centre, as a person. Having worked in Diabetes Therapy I learned early on (thanks to a patient putting me right) that they are a person with Diabetes...not a Diabetic, they are not a condition and not defined by the condition. Having this mindset can help steer your messaging, campaigns and gives real insight.



Tom Barlow

Associate Media Director - Bray Leino

Effective media planning looks beyond the buying audience to really understand who we're talking to. This report further highlights that in healthcare comms it's crucial not to focus solely on specific conditions or single audience characteristics. Instead, consider the broader context of people's lives to communicate more effectively. For instance, reaching out to patient groups with a strategic approach, considering their attentiveness, and ways to smooth the purchase and research journey.

Additionally, exploring product benefits beyond addressing ailments can open up contextual opportunities. For example, reaching someone when they're dreaming about getting back on the bike, could be just the moment to suggest your brand solution to prompt them into action.



Contact us

For more information on how we can help drive growth for your health & wellbeing brand, contact Sam Crocker
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