



Improving Health Equity

Through Cross-Cultural Marketing

A PHARMA THOUGHT LEADER POV

PRESENTED BY



Not all healthcare is created equal.

Significant health disparities exist, and awareness of large sections of our population bearing an undue burden of disease is increasing.

While the road to achieving health equity is not going to be easy, passionate leaders who champion intentional change are paving the way. This initiative looks to share insights gleaned from early adopters and proven success stories, to provide health marketers with a foundation from which to build effective cross-cultural marketing strategies. When applied properly and in partnership with like-minded key stakeholders, cross-cultural marketing efforts can address the unmet needs of diverse audiences and increase both new and more adherent patients on treatment therapy.

YOU WILL LEARN

Necessary vocabulary and language

Essential building blocks for conversations about cross-cultural marketing and advancing inclusivity in healthcare

Tools and data sets

The resources available and needed to effectively communicate with diverse audiences

Marketer applications

Discussion points and perspectives to help guide future decision-making and industry collaboration



What is Cross Cultural Marketing?

Cross-Cultural Marketing is an insight-driven strategic approach that is based on understanding the attitudes, beliefs and behaviors of diverse consumers. It begins with mining for the insights about the consumers who drive population growth and cultural trends in the U.S. (Latinx, Black, Asian, and LGBTQ+), and then embedding them into your brand's marketing strategies. The brand communications that result will be relevant for the market at large, but particularly resonant for these high-growth segments.

'Culture' is related to but is not synonymous with race, ethnicity, nationality or language, and contains many variables.

Culture is neither homogeneous nor static.



Cross Cultural Marketing vs. Diversity, Equity, and Inclusion (DEI)

DEI

is often used in the context of organizational culture. DEI initiatives create an environment where all voices are given equal opportunity to be heard and involved. DEI creates an organization that's supportive of diversity and reflects the representation of the world we live in.

Cross-cultural marketing

is the strategic practice or application of DEI externally, towards your customers.



Necessary Vocabulary & Language

Language is a reflection of the world around us, and our understanding of the world around us is reflected in the language we use.

Language is not fixed – it is constantly shifting and changing as culture evolves. Research has shown that **language can impact patient behavior, patient outcomes and patient care.** That's why it's critical to be intentional and conscious of the language we use in health and wellness spaces.

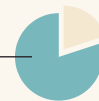
Our word choices can unintentionally promote shame, stigma and judgment. This increases cognitive bias, leading to negative perceptions and stereotypes. When this happens at the community level, it has broad implications and works to uphold systemic health disparities. Considering this, even the simple language we use to talk about people, conditions and health can be a powerful tool for health equity.

To help turn knowledge into practice, here are some definitions of terms essential to provide a foundational understanding of cross-cultural marketing.

APPROACHING

Health Equity

To attain health equity, health disparities need to be eliminated. Health disparities are the unfair, avoidable and unjust differences in health outcomes informed by multiple personal variables that exist between population groups as defined politically, economically, socially and/or geographically. Note that there is an inherent comparison between two groups, typically comparing data for a marginalized group with comparable data for a non-marginalized group.



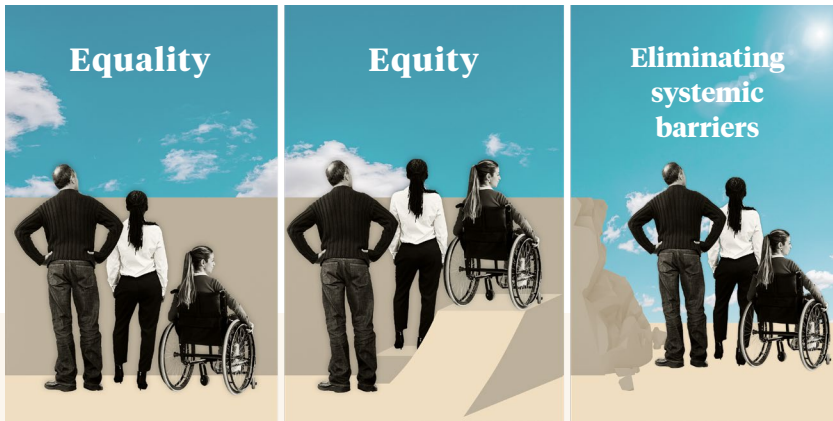
80%
OF ADVERSE PATIENT EFFECTS RESULT FROM **INADEQUATE INFORMATION TRANSFER** (INCLUDING PATIENT-PROVIDER COMMUNICATION)*

QUESTIONS TO ASK YOURSELF & YOUR TEAMS

- ✓ What health disparities exist in our therapeutic areas?
- ✓ In what ways can we begin to address these disparities through research and activation?

*Source: [https://store.jointcommissioninternational.org/assets/3/7/jci-wp-communicating-clearly-final_\(1\).pdf](https://store.jointcommissioninternational.org/assets/3/7/jci-wp-communicating-clearly-final_(1).pdf)

Health equity is attained when avoidable health disparities are eliminated, allowing everyone the opportunity to live their healthiest lives. While some use the term ‘health equality,’ equity differs from equality in that **equity** provides people with what they need, while **equality** provides the same to everyone, regardless of need. Equity aims to address unmet needs and barriers, raising everyone to the same level of health.



QUESTIONS TO ASK YOURSELF & YOUR TEAMS

- ✓ Are we equitably distributing our brand/campaign resources to address disparities in our therapeutic area?
- ✓ Are we using this work to help address disparities for underserved patient groups?
- ✓ How can we partner with advocacy and policy teams to create systemic change that helps improve the quality of life of those most in need?

UNDERSTANDING THE INPUTS THAT CAN CONTRIBUTE TO INEQUITIES

Social Determinants of Health (SDOH)

The social and physical environments in which people live, work, and play can provide context to the challenges they face in attaining their best health and understanding how they make health decisions.

What are the social determinants of health?

These non-medical factors affect health as well as quality of life outcomes, including but not limited to:

- 1 Access to healthcare and the quality of available healthcare
- 2 Economic stability, including employment opportunities
- 3 Educational opportunities and the quality of available education
- 4 Social and community contexts
- 5 Neighborhoods and built environments, including walkable and well lit sidewalks, local grocery stores, and reliable and affordable public transportation

Everyone is impacted by these determinants and it’s the inequalities in these factors that lead to health disparities. **Social determinants of health play an important role in informing consumer options and access, as well as impact overall wellness and health literacy.**

QUESTIONS TO ASK YOURSELF & YOUR TEAMS

- ✓ How do social determinants of health impact our patient populations?
- ✓ How can we address barriers and unmet needs created due to unfair social determinants of health?

UNDERSTANDING THE DIFFERENCE BETWEEN SYSTEMS OF OPPRESSION AND INDIVIDUAL CHARACTERISTICS

Race, Racism & Ethnicity

Race and ethnicity are two ways people have historically been categorized based on biological characteristics placed within a hierarchical system. These phenotypic differences are major contributing factors in today's health disparities. Multiple studies show a variety of risk factors and inequitable disparities in health outcomes across numerous therapeutic areas based on race and ethnicity.

Being able to distinguish between race, ethnicity and racism itself is paramount in understanding your audience, their health and their experiences.

RACE

A socially constructed means of categorization based on skin color and other characteristics. **Racial categories are not the same globally and categories are often related to the sociopolitical history of a country.**

DID YOU KNOW?

Not all Black Americans identify as African American. Terms even differ between countries - those from the UK may use Black, Asian, and Minority Ethnic (BAME) which is not a term used in the US.

RACISM

A hierarchical system based on 'race' that values lighter skin and de-values darker skin, creating a system of advantages and disadvantages.

ETHNICITY

A grouping of people who identify with each other on the basis of shared attributes that distinguish them from other groups, such as a common set of traditions, ancestry, language, history, society, culture, nation, religion or social treatment within their residing area. **The term 'ethnicity' is ambiguous in its definition but it is not the same as race and should not be used interchangeably.**

DID YOU KNOW?

Latino/a/x and Hispanic are ethnicities used to describe people either from Latin America or who are Spanish speaking. Latinos and Hispanics may self-identify as any race. This does not negate or replace their ethnicity.

Explore a full glossary of terms on page 12.

UNDERSTANDING SOCIAL IDENTITY AND HEALTH

Intersectionality

Intersectionality provides a framework for understanding the multitude of different identities people have and how they work together to impact a person's experience, and in our case, health. Understanding how factors such as race, gender, sexuality, sex, ability and economic status affect lived experiences can provide insights into language that would and would not resonate with a specific audience.

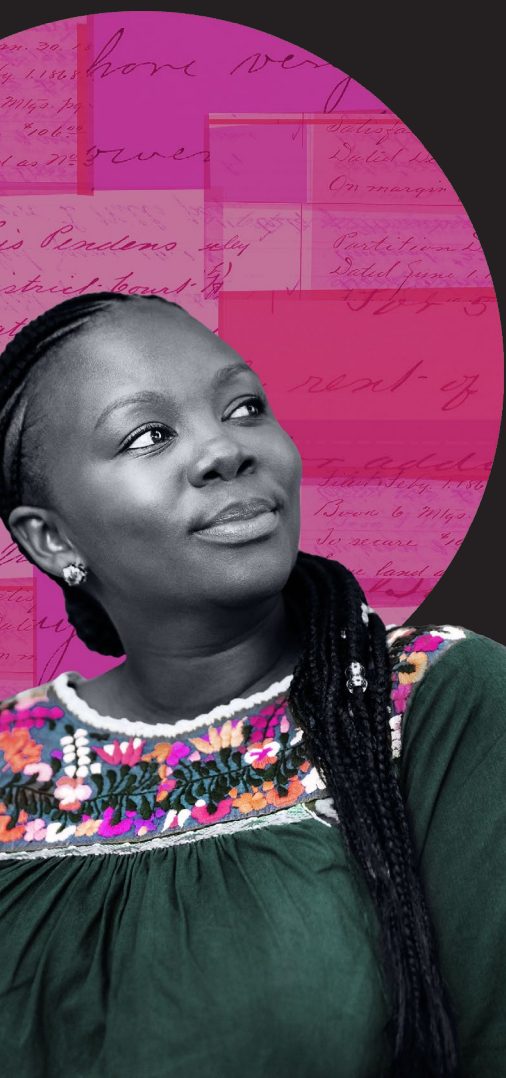
Acknowledging people's many intersecting social identities provides a depth of insight not seen when only considering one aspect of someone's personhood. It allows for greater contextualization of their daily life, experiences and points of view and can help inform communication strategies with deeper precision.

DID YOU KNOW?

2019 data from the CDC and Office of Minority Health states that there are about **equal rates of diagnosed diabetes between men and women** (9.5% and 9.3% respectively). However, if we add race we see that **American Indian/ Alaska Native women have much higher rates** at 14.5%. On a broad level, intersectionality allows for a more nuanced picture of population health.

QUESTIONS TO ASK YOURSELF & YOUR TEAMS

- ✓ Have we considered how various identity markers of our audiences intersect? For example, their race, gender and income?
- ✓ Do we understand how all those factors intertwine to create/inform/ impact our audiences' experience?



Tools and Data

We conducted a marketer survey in June 2021 to understand what would be most helpful for marketers. We uncovered that education, more real-life examples, and cross-departmental partnerships will be critical.

Experts and marketers agree: there is a need for new approaches, tools and data to better communicate with diverse consumer groups. When consumer campaigns accurately represent a diverse patient population, ad recall and action scores are higher. Yet, currently only 9% of surveyed pharma marketers cite race/ethnicity as an important dimension for their organization to consider when activating against their target audience. And even less cited gender, sexual orientation, income and ability as relevant dimensions through which to explore patient populations.

INSIGHT #1

Marketers Need More Research and Insights

It's clear from the survey that health equity represents an area of learning for marketers, who reported comparable levels of interest in education across a breadth of topics about health disparities, unconscious bias and inclusive language. Marketers are interested in learning about what drives health inequity and how we can put a stop to these factors, but also want to go one step further. They want to develop a greater expertise in creating more inclusive marketing and communications materials.

When asked about what resources were most needed to achieve their cross-cultural marketing goals, Research and Insights was the top response. It's essential for marketers to have access to consumer data and to be asking the right questions.



DID YOU KNOW?

Less than a quarter of people of color (POC) feel that health and wellness sites do a very good job understanding the needs of people who share their ethnic background.*

Finding ethnicity-related health information is challenging for most. While the information may be out there, people of color have to dig for it, often going to many sites and sources to piece it together.

*Healthline Media Content Evaluation Study conducted by Quester in Oct 2020. N=270 African American and Hispanic respondents.

HOW CAN MARKETERS BETTER SERVE PEOPLE OF COLOR?

“Best-in-class cross-cultural marketing isn’t about casting diverse actors – it’s about using data to better understand the attitudes, beliefs, behaviors and unmet needs of your target audience, and meeting them where they are with your marketing efforts.”

AMY GOMEZ SVP Diversity Strategy, Klick Health

“86% of consumers look for **health information** and 51% look for **recommendations** specific to their ethnic background.

These staggeringly high numbers demonstrate a need to really look at your audience data.”

BRENDAN MCHENRY SVP Strategy, Healthline Media



INSIGHT #2

Marketers Are Seeking Industry Best Practices

Unsurprisingly, another top response for resources and tools desired by marketers was case studies (25%). Survey results also indicate that measurement of cross-cultural efforts varies by organization. While there’s no shared standard for how to measure the impact of cross-cultural marketing efforts, individual respondents include use of customer surveys, revenue from different audience segments, and media coverage as some of the metrics, while some report only looking at internal efforts made and materials produced.

SPANISH LANGUAGE TRANS-CREATION CASE STUDY

Instead of just doing a straight translation to address the needs of the 43 million Spanish speaking people in the US, Healthline Media studied search patterns to select the conditions and health topics of interest to this audience, worked with bilingual editors and medical professionals to ensure language guidelines and accuracy, and created new content produced by Spanish speaking teams, featuring relevant topics and native Spanish-speakers.

THE RESULTS

.18%

CLICK-THROUGH RATE (CTR)
2X INTERNAL BENCHMARK

5:17

AVERAGE SESSION DURATION (ASD)
2:30 INTERNAL BENCHMARK

6%+

AVERAGE AUDIENCE QUALITY (AQ)

*Healthline Media Content Evaluation Study conducted by Quester in Oct 2020. N=270 African American and Hispanic respondents.

Cross-cultural marketing is currently dispersed across the organization. While Marketing was the team most often cited as being responsible for cross-cultural marketing, other departments bear responsibility as well:

Department Responsible for Cross-Cultural Marketing

% of respondents

MARKETING	22%
DIVERSITY AND INCLUSION	19%
RESEARCH AND INSIGHTS	13%
HUMAN RESOURCES	12%
SENIOR LEADERSHIP	9%
CUSTOMER SERVICE	8%

Even though it's packaged as marketing, cross-cultural marketing is also an expression of organizational values. It's the lens through which we do research, create products and serve our customers. If it is contained solely in the marketing department, organizations forfeit the opportunity to have real health equity impact. Early leaders and cross-cultural marketing experts are quick to point out that in order to realize the potential benefits to both patient health outcome and the bottom line, an integrated approach is essential. Individuals and teams looking to increase inclusivity in messaging and materials should seek alignment with all stakeholders.

“Effective cross-cultural marketing is all about insights and infrastructure.

With the right tools, teams and time, brands can become equipped to respond in real time to changing needs and current events.”

KRISTIN TOLBERT Director, Cross-Cultural Marketing, Klick Health

INSIGHT #3

Cross-Cultural Marketing Is a Shared Responsibility





Get Started

A SIMPLE CHECKLIST FOR MARKETERS

As the industry gets more educated, and we gather more narratives and proof-points, cross-cultural considerations will become ‘table stakes’ for marketing. But how can marketers get started today?

Representation

- Does our clinical and patient data include a stable sample of people of diverse backgrounds?
- Do all people have access to the healthcare required to get to a diagnosis and treatment?
- Are we thinking about diversity outside of race and ethnicity, also considering gender, sexuality, socio-economics, different levels of ability and neurodiversity?

Insights

- Do I understand the needs of people in different cultural, ethnic and racial groups?
- Are there differences in cultural understanding of this therapeutic area across groups?
- Does the condition affect different groups differently?
- Does the treatment differ across groups?

Communication

- What terms or language resonates with different audience groups?
- Are broad generalizations being made that rely on stereotypes?
- How am I accounting for intersectional identity in our patient persona development?

Advertising

- Am I considering differences in unmet needs in my messaging?
- Am I adjusting my targeting to address the needs of all groups?
- Are we representing the right archetypes and role models?



The Path Ahead

To eliminate health disparities, as with most things, knowledge is power. Acknowledging that disparities exist, understanding why, and learning about how you can make a difference are good places for you to start making an impact. Here are some recommendations for the path forward:

Be more mindful of the language you use

and how you practice conscious, cross-cultural communication. Word choices can be a powerful tool for health equity.

It's never too early to gather insights.

Cross-cultural marketing starts with an insights-driven approach that is applied across disciplines from brand planning to media and beyond, for effective and authentic engagement.

Interrogate the data and consider intersectionalities

to more fully understand your patients, caregivers and HCPs. Use learnings from the data to drive creative approaches and insightful strategic briefs, educate cross-functional teams, and work smarter with partners throughout the process.

Cross-cultural marketing is not “one and done.”

Resist the urge to try to do it quickly and treat it as a finite item. Done correctly, cross-cultural teams are fully integrated into foundational work streams with sustained support and seen as an ongoing strategic effort rather than a finite tactic.



Key Terms

for Effective Cross-Cultural Communication

HEALTH EQUITY

Attained when avoidable health disparities are eliminated. Equity differs from equality in that equity provides people with what they need while equality provides the same to everyone, regardless of need.

HEALTH DISPARITIES

Unfair, avoidable, and unjust differences in health outcomes informed by multiple personal variables that exist between population groups as defined politically, economically, socially or geographically. Note the comparison between two groups.

SOCIAL DETERMINANTS OF HEALTH

The conditions in the environments where people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning and quality-of-life outcomes and risks. They include access to and quality of health care, economic stability, education, social and community context, and neighborhoods and built environments. *(Source: Healthy People 2030)*

RACE

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HISTORICALLY MARGINALIZED

Groups who have historically been excluded from societal advantages due to a characteristic such as gender, sex, race, sexual orientation or ability. Preferable to 'minority/minorities.'

Minority implies a grouping based on how many people are in a group rather than focusing on how systems and institutions have affected groups regardless of numbers.

BIPOC

Black, Indigenous, People of Color. Note that this is a broad term; be specific when possible.

It's a broad term that includes a diverse group of individuals. To recognize these varied experiences, swap 'the community' for 'communities.' E.g., the Black community → Black communities

INTERSECTIONALITY

A framework for understanding the multitude of different identities people have (i.e., race, gender, sexuality, sex, ability and economic status) and how they work together to impact a person's experience.

DIVERSITY, EQUITY, AND INCLUSION (DEI)

These terms work together to create an environment where there are many voices that all are given equal opportunity to be heard and involved. Specifically, diversity is the presence of differences within a given setting. Equity is the process of ensuring that processes and programs are impartial, fair and provide equal possible outcomes for every individual. Inclusion is the practice of ensuring that people feel a sense of belonging in the workplace. *Source: BuiltIn*

Diversity: everyone is invited to the dinner party

Equity: everyone has a say in what's on the menu

Inclusion: everyone has an opportunity to eat

CROSS-CULTURAL MARKETING

Cross-Cultural Marketing is an insight-driven strategic approach that is based on understanding the attitudes, beliefs and behaviors of diverse consumers.

It begins with mining for the insights about the consumers who drive population growth and cultural trends in the U.S. (Latinx, Black, Asian, and LGBTQ+), and then embedding them into your brand's marketing strategies. The brand communications that result will be relevant for the market at large, but particularly resonant for these high-growth segments.



Through a shared dedication to advancing inclusivity in digital healthcare marketing, The Digital Health Coalition partnered with Healthline Media and Klick Health to provide health equity education on the topics at the forefront of the market today.

For more insights, background, or to provide feedback on anything learned in this document, please contact Alyssa Kopelman, Director Corporate Marketing at akopelman@healthline.com, or visit the partner brand sites:

