State Affiliate News

Marketing Your State Society

Each and every state society needs to market itself both to current and to prospective members, and to establish itself in the larger community to ensure its viability. Although many societies do prioritize marketing, planning and execution can be hard, especially for those societies that lack support staff. This article will offer tips to help state societies market their organization by learning from the experiences of four state societies that have increased membership, maintained a high retention rate, and successfully positioned their organizations as the voice of oncology in their state/region.

To Market Effectively, Think Ready . . . Aim . . . Fire

At times it may be tempting to just get started on a marketing project for your society, but preliminary steps such as goal setting matter enormously. Think about any marketing effort as having the following three stages.

READY: Determine Your Goal

Do you want to increase membership among a certain group (e.g., doctors, nurses, practice managers)? Is your goal to position your society as the voice of oncology in your state? Or is your goal to increase awareness of your top services?

The society's board of directors or other governing body should pose and answer questions to help the members and staff prioritize their efforts. Narrow the society's marketing focus and set specific goals. What exactly are you trying to accomplish? It's best to limit marketing projects to a maximum of three at any time.

AIM: Define Your Audience, Hone Your Message

To whom is your message addressed? What do you want to say to these people? Think about your audience and the message(s) that will resonate most strongly with them. If your target category is nurses, for example, think about the services you offer that are most popular among nurses. Keep your message simple. Once you capture your targeted audiences' attention, offer clear paths to more information.

FIRE: Spread the Word

Brainstorm the many ways you could possibly reach your target audience. Will you use your Web site? Newsletters? Invoices? Journals? E-mails? Activities? Awards? Remember, frequency is key. Tell them and then tell them again. Start by utilizing any internal, cost-free vehicles at your disposal, such as including a link to your society's Web site as part of your e-mail auto signature. Then, supplement with additional marketing efforts that may have costs (i.e., direct mail solicitations that require the acquisition of outside mailing lists).

By first answering these questions, you are positioning your organization for a successful marketing campaign.

Voices From State Affiliates

Providing real benefits to members underlies all marketing. Highlight your organizations' accomplishments, offer solutions to problems that are being experienced by oncology practices in your state, and offer your members the opportunity to network. When you offer members concrete value, it's important to remind them often and show potential members how they too can benefit from membership in your organization. Here you will learn how your peers in four state societies approach marketing their organizations.

Michigan Society of Hematology & Oncology

"You can't go to school to learn how to organize your state society. You network and learn from other people," says Mary Malloy, CAE, executive director. The Michigan Society of Hematology & Oncology (MSHO) has 95% of Michigan's private practice oncologists as members, as well as those oncologists employed at Michigan's four academic medical centers. Only members and their employees have access to the Society's services and educational programs. When the Society sends members invoices for annual renewals, it pointedly reminds them of these membership benefits. To simplify the membership renewal process even further, MSHO only asks for edits to members' contact information instead of requesting members to complete an entire application, which can be a deterrent to those whose time is already limited.

To establish its brand, MSHO works closely with the state's major insurers. Members of MSHO's board represent the society in affiliated professional advocacy groups, such as the Michigan Cancer Consortium. The society maintains close contact with state and national legislators, offering expert opinions and opportunities for policy makers to visit member practices.

Currently, says Malloy, "We're renovating our Web site to be more relevant, current and navigable. We're also developing services and programs for oncology physician extenders," a growing group.

Malloy values MSHO's affiliation with ASCO for the credibility that the national society offers, and for opportunities to compare notes with other state society executives. "There's no better test marketing than to see how ideas developed and flourished in [similar] organizations," she says.

North Carolina Oncology Association

To market the North Carolina Oncology Association (NCOA), immediate past president Richard Krumdieck,

ASCO offers its state affiliates these marketing-related services:

- A complimentary list of ASCO members in a given state, which can be useful in recruitment efforts
- Representation at the State Oncology Societies booth at ASCO's Annual Meeting. The booth boosts awareness of the societies and fosters networking
- A marketing piece in the new member packet that urges ASCO members to join their state societies
- Web site development assistance and hosting, to help societies communicate with both members and the public

Visit www.asco.org/stateaffiliates, and select "ASCO Services" for more details.

MD, emphasizes the inclusiveness of its mission. That mission is "to improve access and provide the highest level of care for *all* patients in North Carolina and to represent and defend the interests of *all* oncologists" in the state. He contrasts this with societies that focus on one group, but ignore others. The board of NCOA reflects the broad composition of its membership.

NCOA has also developed specific incentives for different member groups and has offered discounted rates for whole practices or whole divisions of an institution to join. "Then recruitment takes care of itself," he says. Growth has been good, with 70 members in 2004, 130 members in 2005, and currently 180 members.

For academic physicians, NCOA makes the commitment that all educational meetings will exclusively feature in-state experts. "When Dr Richard Goldberg, of the University of North Carolina, Chapel Hill, talks to us about GI oncology, we're not just educating our members about cutting-edge treatment. We're also promoting relationships between community oncologists and academic ones and promoting local clinical trials. The [doctor] from [a large northeastern cancer center] can't impact the practice of oncology in North Carolina in the same way. That is branding."

Ohio/West Virginia Oncology Hematology Society

Executive director, Dave Dillahunt, CAE, says, "Most of our marketing is through word of mouth. Drug reps, member physicians, and practice managers spread the word. We constantly encourage board members to recruit new members." The efforts have paid off. Of 225 potential physician members, 205 have signed up.

Convincing area hospital-based and university-based groups to join has proven harder. The Cleveland Clinic has enrolled, but other large institutions remain unaffiliated to date.

On the brand-building side, Dillahunt's society helped to create the Ohio Health Cancer Caucus. It serves as an information source for legislators, journalists, and patients and their families. "We have speakers address various topics, on a quarterly basis," he says. They cover clinical topics, such as new advances in cancer care, and business ones (such as coding and reimbursement issues and the use of electronic medical records).

Dillahunt observed that colleagues in the wider world of associations (outside oncology) were getting traction out of steps they took to quantify the benefits they could offer to members. He adopted this to help with both recruitment and profile building.

Accordingly, he managed to attach a dollar figure to certain work done by the society. "A couple of years ago, we worked for the passage of legislation sparing drugs from being subject to the state sales tax. We were able to show members that we'd helped save them approximately 7% on the millions of dollars they spend on drugs."

Oklahoma Society of Clinical Oncology

This society has expanded rapidly in the 3 years since Mary Jo Wichers became its executive director in 2004. It had 27 attendees at its Annual Meeting in 2003 and nearly 400 in 2007. She attributes this rapid growth to the society's offering of highly valued services to its members. That, in turn, has led to great advertising word of mouth.

In 2004, the society's board wanted to recruit more nurses. To that end, the Oklahoma Society of Clinical Oncology (OSCO) began giving out nursing awards at its Annual Meeting. Nominations come from doctors, patients, drugs representatives, and fellow nurses. Winners receive a plaque and gift card. "These awards get more people to attend the society's conference. Their doctors come to present the awards and so do the nurses' coworkers. When people feel appreciated they're more likely to get involved. We started out with about 12 nurse members and now have about 150."

To heighten awareness of OSCO, Wichers participates in lobbying efforts and works through several steering committees that are sponsored, for instance, by the Oklahoma Society of Association Executives and the Oklahoma Comprehensive Cancer Control Network. "By partnering with different agencies and programs, it helps get the word out about OSCO. That is advertising right there," says Wichers.

DOI: 10.1200/JOP.0734502