Recruiting and retaining healthcare association members

Ronette Wilson
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This Thesis is brought to you for free and open access by Rowan Digital Works. It has been accepted for inclusion in Theses and Dissertations by an authorized administrator of Rowan Digital Works. For more information, please contact LibraryTheses@rowan.edu.
The purpose of this study is to identify popular techniques used to recruit and retain members for healthcare and medical associations. The author compared and contrasted three medical associations and their membership benefits to show which benefits members value most.

Related research indicated recruiting and retaining members has become increasingly competitive among healthcare and medical associations. A new-member survey was conducted for three healthcare associations. Research indicated people primarily join organizations for specialized information, but they also hope to fulfill status-seeking needs.

A successful recruiting and retaining plan involves more than attractive benefits. Members’ motivational needs must be included. Based on a member’s motivation for joining and his/her expectations of the organization, members can be segmented into The Allegiance Categories of Association Membership’s most popular personality types: cognoscenti, status-conscious, shaper, altruistic, comparison shopper and doubter.

Research revealed surveying new members and understanding the target population were the first strategies in recruiting and retaining members. Members can then be coded as a personality type and sent specific messages in mailings.

In addition, members reported the newsletter as the most important benefit and educational meetings ranked second.
MINI-ABSTRACT

Ronette Wilson  
Recruiting and Retaining Healthcare Association Memberships  
2001  
Dr. Donald Bagin  
Public relations

The purpose of this study is to identify popular techniques used to recruit and retain members for healthcare and medical associations.

The results of three healthcare association's new-member surveys indicate the most successful strategies. The most important benefits, according to members, were examined.
ACKNOWLEDGMENTS

To Dr. Don Bagin
For guiding me through this project

To my husband and family
For all their support

The American College of Physicians - American Society of Internal Medicine
The American Medical Association
&
The Contact Lens Society of America
For their cooperation
# TABLE OF CONTENTS

## I. INTRODUCTION
- The Problem .......................................................... 1
- Purpose of the Study .................................................. 2
- Importance of the Study ............................................. 2
- Definition of Terms .................................................... 3
- Assumptions/Limitations ............................................... 4
- Plan of Study .......................................................... 5

## II. REVIEW OF RELATED LITERATURE
- Decreasing Memberships ............................................. 7
- Recruiting and Retaining Techniques .............................. 8

## III. DESIGN OF THE STUDY ........................................ 11

## IV. SURVEY RESULTS .............................................. 13

## V. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS ......... 20
- Summary ........................................................................ 20
- Conclusions ............................................................... 21
- Recommendations ...................................................... 21
- Recommendations for Further Study ............................. 25

**BIBLIOGRAPHY................................................................ 26**
CHAPTER 1
INTRODUCTION

The Problem

Recruiting and retaining members has become increasingly competitive among healthcare and medical associations. In addition to increased competition, organizations emphasize specific benefits to attract new members and narrow the potential member pool at the same time.

Some membership fees alone deter professionals from joining organizations. Professionals cannot afford membership fees to every association in their field, leaving many organizations competing for the same group. The New York Times attributed declining membership to “members’ reluctance to pay the relatively high association fee for what they get in return.”

Many associations fail to recognize Status-conscious members’ needs and focus on the Doubters. The organization touts the benefits it can offer a member, instead of asking what the member can offer the association. Members need involvement in setting policies and choosing leaders. In the healthcare field, educational meetings, networking opportunities and newsletter subscriptions are important, but acknowledging what motivates the professional is just as important.

Reaching new members also proves to be a challenge for most organizations. The Chicago-Sun Times reported, “Only about a third of the nation’s 800,000-plus

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physicians, medical residents and medical students belong to an association.”3 The Health and Social Statistics Division’s survey of physicians, dentists and pharmacists show the number of healthcare professionals increasing. Yet, the number of new members in most organizations is decreasing.4

“Organizations need to find ways to appeal to prospective members. One technique is offering specialized information through newsletters or seminars. Another way is creating a sense of status. The most successful recruiters implement both,” replied Richard Bagin, executive director of the National School Public Relations Association.

Kristopher B. Jones, author of “The Secret to Increasing Active Involvement,” said, “Organization leaders must understand their members’ needs. Combine psychographics with demographics to encourage all members to feel like they are a part of, and can actively contribute to the success of the organization.”5

Purpose of the Study

The purposes of this study are to:

1. Identify popular techniques used to recruit and retain members for healthcare and medical associations.

2. Compare and contrast three medical associations and their membership benefits to indicate which benefits members value most.

Importance of the Study

Many healthcare organizations are losing membership fees and turning to alternative ways of generating revenue. “Instead of examining practitioners’ needs,
healthcare organizations are convinced that more money from the corporate sector will compensate for declining membership.\textsuperscript{6}

“In 1998, the American Medical Association (AMA) taught all associations seeking financial-rescue-schemes to solve dropping memberships a lesson. AMA agreed to endorse Sunbeam products (heating pads, humidifiers and electric massagers) for five years. The deal guaranteed AMA and Sunbeam a profitable venture. The plan outraged members. Forceful and incessant editorials filled America’s newspapers.”\textsuperscript{7} “In the face of a public outcry, AMA reneged on the deal spending $9.9 million in legal fees. AMA lost 2,700 members--$2.6 million in membership dues.”\textsuperscript{8}

This study will help organizations develop a recruiting and retaining plan. As recruiting new members becomes more difficult, organizations need to retain their current membership base. Knowing which benefits members value most and understanding their motivational needs, organizations have a way to attract new members and satisfy the current ones.

**Definition of Terms**

*ACP-ASIM:* American College of Physicians - American Society of Internal Medicine

*AMA:* American Medical Association

*Altruistic:* association’s values motivate the member.\textsuperscript{9}

*CLSA:* Contact Lens Society of America

*Cognoscenti:* members who seek specialized information.\textsuperscript{10}


\textsuperscript{7} Troubles Keep Mounting for AMA.

\textsuperscript{8} (1998, December 2). AMA Struggling to Attract Members. \url{http://www.nytimesarchives}

\textsuperscript{9} Bagin, Richard. Allegiance Categories of Association Membership.

\textsuperscript{10} Bagin, Richard.
Comparison Shopper: shops between associations to see which organization better suits their needs.\textsuperscript{11}

Doubters: need reminders of the association’s value – what do I get from this membership?\textsuperscript{12}

Shaper: shapes policy and direction of association and field.\textsuperscript{13}

Status-Conscious: join for the status the association provides.\textsuperscript{14}

Assumptions/Limitations

This study assumed the reader has a basic understanding of healthcare professions and organizations.

This study focused on the practices of only three healthcare associations.

This study examined popular techniques organizations use to recruit and retain members.

This study examined the benefits that members find most important.

The organizations determined the number and pool of new members the author could survey. ACP-ASIM provided the author with a dozen e-mail addresses. Six members responded and the results were based on a small percentage of a large population.

AMA’s newest members are medical students. The author cannot determine if new professionals value the same benefits as seasoned professionals.

\textsuperscript{11} Bagin, Richard.
\textsuperscript{12} Bagin, Richard.
\textsuperscript{13} Bagin, Richard.
\textsuperscript{14} Bagin, Richard.
Plan of Study

To identify successful techniques for recruiting and retaining members, the author launched internet searches, collected articles and interviewed membership directors.

The author compared and contrasted the recruitment techniques of three different recruiters. The author then surveyed new members from ACP-ASIM, AMA and the Contact Lens Society of America, drew conclusions and made recommendations.
CHAPTER 2

REVIEW OF RELATED LITERATURE

Literature relating to recruiting and retaining members of healthcare organizations was difficult to locate.

Thesis research began with an ABI/Inform database through the Rowan University Library. Using the keywords “recruiting and retaining members” and “healthcare organizations,” two periodicals were located. The author also explored the Rutgers University database, IRIS. The search did not produce any books or articles related to the thesis topic.

Using Netscape, the author located WebMD, a Web site listing brief descriptions of every healthcare organization and a link to its homepage. The author visited numerous sites and selected three medical organizations.

The author then launched a search, using the association’s name as the keyword, “American Medical Association,” “American College of Physicians,” and “Contact Lens Society of America.” This brought the author to numerous periodicals and news articles examining each organization’s recruitment efforts.

The author interviewed membership directors from each organization, received newsletter updates about the number of new members and information about recruiting and retaining techniques.

The author found books covering recruiting and retaining members in volunteer organizations, but was unable to locate books specifically addressing the thesis topic.

According to CLSA’s membership director, Patrick Goughary, literature pertaining to increasing healthcare-association memberships does not exist. “I found
target-marketing strategies, but the information isn’t strictly designed for professional associations. We’re basically on our own” (personal communication, February 26, 2001).

AMA’s student membership recruiter Robert Cimino at New Jersey’s University of Medicine and Dentistry also encountered problems with locating recruitment information. “We didn’t have anything to go by. It wasn’t as if a book of recruitment rules was available. We used the trial and error system” (personal communication, May 22, 2001).

This chapter provides a summary of issues related to recruiting new members and retaining the current membership base.

**Decreasing memberships**

The American Medical Association (AMA) and the Contact Lens Society of America (CLSA) struggle to attract new members. The New York Times reported, “AMA membership, now at 293,695, is down 2% from last year.”\(^5\) CLSA’s year-end figures show a loss of 178 of its 821 members.

AMA appeals to the general physician population, while CLSA appeals to a specific population. CLSA welcomes all professionals in the optical field from technicians to physicians. The target population for each organization is very different, yet both groups suffer from the same recruiting problems.

While other organizations seek potential members, ACP-ASIM maintains 130,000 members and attracted 2,500 new members last year, the only healthcare organization that reported an increase.\(^6\) This association specifically targets a narrow pool of


physicians studying or practicing internal medicine. The association attributes this to its unique recruiting techniques.

**Recruiting and retaining techniques**

ACP, AMA and CLSA all offer student memberships, but AMA developed student-run chapters on each medical school campus. In 1998, after AMA lost 2,700 members, Dr. J. Edward Hill, chair of the membership committee became innovative in creating membership solutions.¹⁷ The committee focused on young doctors.

AMA offered students a discounted fee, a free Journal of American Medicine (JAMA) subscription, weekly newsletters, access to Web articles and leadership opportunities.¹⁸ Students received the same benefits as the current members with the same amount of representation and power in the organization.¹⁹

As AMA gained new members, current members complained about giving medical students and residents the same amount of clout as those who spent years in the ranks.²⁰ AMA couldn’t retain its membership while it recruited new members.

ACP-ASIiM and CLSA designed strict membership classes. Unlike AMA, neither organization expected students to pay for their memberships. This explained why new and student members do not receive the same privileges as established members. The first-year goal became introducing new members to the association and gaining their interest. If individuals want more involvement and responsibility, their memberships must be renewed.

²⁰ (2000, June 13). AMA Struggling to Attract Members.
CLSA offers students a free membership fee, quarterly newsletters, board exam study-guides and free continuing educational credits. Students did not receive the same amount of power as the current members. Students could not run for offices or vote on organization issues.

CLSA did not develop student-run chapters at each school. The organization relies heavily on the school leaders to recruit future members. CLSA’s top recruiting techniques involve a yearly mailing. It requests graduation and certification lists from colleges and universities. It sends students a promotional kit with a hard cover contact lens fitting-guide\(^2\).

In 1994, ACP-ASIM introduced a free medical student membership class. Medical students enroll for free, receive a newsletter, discounted products, access to online annals, and free attendance to the annual seminar and local chapter meetings. ACP-ASIM conducts local meetings but did not develop student-run chapters.

ACP-ASIM retains members through graduating members from level into the next. The technique caters to those seeking status and accomplishment. Members must be motivated to work their way through the ranks. The process mimics the profession’s educational process.

ACP-ASIM requires prospective members to submit an application. Medical students hold temporary memberships until accepted into an internal medicine program. The next level of membership becomes a promotion.\(^2\)

"Associate" is the first level of official membership. Associates complete an application and submit a recommendation letter from their training program or a current


“Master” or “Fellow” member. Associates cannot vote, hold office or recommend candidates for membership.\footnote{About the College.}

Full “Members” exercise voting privileges, but cannot hold office, propose candidates for membership or use ACP-ASIM after their name. The Membership Board votes on a candidate’s application and reviews recommendations written by two Fellow or Master members.\footnote{About the College.}

“Fellow” status is bestowed upon candidates whose peers recognize their personal integrity, competence, accomplishment and scholarship. Advancement can occur through membership or election. Fellows use the letters FACP after their names. Finally, a Master remains the highest form of distinction. This small group selected among Fellows use the letters MACP after their names.\footnote{About the College.}
CHAPTER 3

DESIGN OF THE STUDY

The methods used to compile the research in this thesis were:

1. Library database searches of books and periodicals;
2. A review of books and journals;
3. A review of healthcare association Web pages and membership packets;
4. Content analysis of membership recruitment letters;

The Rowan University, Glassboro, New Jersey Web site provided access to its library databases. The ABI/Inform database search was launched, using keywords "recruiting members" and "retaining members." This search led to periodicals featuring articles on recruiting and retaining members.

Reviewing these articles, the author discovered a list of healthcare associations and Web site addresses. The author found a link to individual sites through the following Web sites:


The author reviewed numerous individual Web sites and sought out the largest national health care organization and the smallest. The author then contacted the membership directors for interviews.

Using a list of healthcare organizations, the author conducted a content analysis of three associations recruiting members. The author surveyed new members from ACP-ASIM, AMA and CLSA. Then compared and contrasted techniques and the impact those techniques had on generating new members.
The author developed the survey based on the Allegiance Categories of Association Membership. The response to each question would place the member in a specific personality category: cognoscenti, status-conscious, shaper, altruistic, comparison shopper or doubter.

A thesis advisor oversaw the survey's design and development. A seminar class then tested and reviewed the survey's format and questions. Membership directors from each association also critiqued the questions before the mailing.

Each healthcare association determined the number of members the author could survey. ACP-ASIM gave the author 12 e-mail addresses. AMA provided the author with 30 e-mail addresses and CLSA submitted 300. Half of those surveyed returned their responses.

The author also examined how many professionals belonged to each discipline, then compared that number with the number of members in the corresponding organization. The research showed that the number of professionals available to join an association did not guarantee the largest membership.

Based on these findings, conclusions were drawn and recommendations were made about the techniques healthcare associations can use to successfully recruit and retain members.
CHAPTER IV
SURVEY RESULTS

To assist with this study, the author surveyed new members from three healthcare organizations using WebMD’s medical association index:

1. The American College of Physicians - American Society of Internal Medicine (ACP-ASIM) - the largest medical specialty association, open to the 575,000 physicians certified in or practicing internal medicine.\(^{26}\)

2. The American Medical Association (AMA) – the oldest healthcare organization, open to all 800,000 physicians.\(^{27}\)

3. The Contact Lens Society of America (CLSA) – a new and small organization, open to all 68,000 ophthalmic professionals.\(^{28}\)

The author contacted the Membership Director from each association and requested permission to send e-mail questionnaires to their newest members. ACP-ASIM allowed the author to survey 12 new members. Six of the 12 ACP members responded. AMA gave the author 30 e-mail addresses and 22 members responded.

CLSA provided the author with 300 e-mail addresses. Eighty-eight of the questionnaires were undeliverable because of bad or incorrect e-mail addresses. A total of 212 surveys were sent and 105 members responded.

Based on a member’s motivation for joining and his/her expectations of the organization, the author segmented the members into The Allegiance Categories of Association Membership’s most popular personality types: cognoscenti, status-conscious, shaper, altruistic, comparison shopper and doubter.


\(^{27}\) Medical Surveys.
The author designed each question to appeal to the specific personalities. "The Cognoscenti would select benefits that offered specialized information not found anywhere else. The Status-conscious join for the prestige an association provides: accreditation award programs, speaking and publishing opportunities and interaction with accomplished members. Shapers help shape policy, change and establish laws, and guide the association. The Altruistic seek the association’s values, fund-raising and heading case-related campaigns. Comparison Shoppers shop between organizations to see which better suits their needs and compare membership fees. Doubters need reminders of the association’s value and think they do not receive their money’s worth."29

Members who responded to the author’s questionnaire valued a variety of the association’s benefits. The survey was conducted as follows:

1. Which benefit is most important to you?

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACP-ASIM</td>
<td>Free newsletter</td>
<td>6</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>Educational meetings</td>
<td>6</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>Free continuing education</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

1. Which benefit is most important to you?

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMA</td>
<td>Free newsletter</td>
<td>14</td>
<td>67</td>
</tr>
<tr>
<td></td>
<td>Educational meetings</td>
<td>2</td>
<td>9.5</td>
</tr>
<tr>
<td></td>
<td>Free continuing education</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Other (Free Stedman Dictionary)</td>
<td>2</td>
<td>9.5</td>
</tr>
<tr>
<td></td>
<td>Other (Lunch with leaders)</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>CLSA</td>
<td>Free newsletter</td>
<td>39</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Educational meetings</td>
<td>45</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>Free continuing education</td>
<td>15</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Other (Camaraderie)</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Other (Meet peers)</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

Question number one asked how the Cognoscenti preferred to obtain specialized information. Newsletters and meetings ranked as the most important benefit among ACP-ASIM and CLSA members. CLSA members who submitted “camaraderie” and “meeting peers” did not fall into a particular category.

Cognoscenti AMA members selected the newsletter as the most important benefit. “Lunch with leaders” in the medical field ranked second. The Status-conscious members
who provided this open-ended response sought networking opportunities and interaction with accomplished members.

Question number two asked respondents to select all the reasons why they became members. ACP-ASIM members did not choose more than one reason for joining the association. AMA and CLSA members chose multiple reasons. The author recorded the number of responses.

### 2. Did you become a member to: (Check all that apply)

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACP-ASIM</td>
<td>Participate in seminars</td>
<td>3 Cognoscenti</td>
</tr>
<tr>
<td></td>
<td>Gain publishing or speaking opportunities</td>
<td>1 Status</td>
</tr>
<tr>
<td></td>
<td>Work on committees</td>
<td>0 Shaper</td>
</tr>
<tr>
<td></td>
<td>Other (Gain research opportunities)</td>
<td>2 Status</td>
</tr>
<tr>
<td>AMA</td>
<td>Participate in seminars</td>
<td>1 Cognoscenti</td>
</tr>
<tr>
<td></td>
<td>Gain publishing or speaking opportunities</td>
<td>4 Status</td>
</tr>
<tr>
<td></td>
<td>Work on committees</td>
<td>0 Shaper</td>
</tr>
<tr>
<td></td>
<td>Other (Gain research opportunities)</td>
<td>10 Status</td>
</tr>
<tr>
<td></td>
<td>Other (Share knowledge)</td>
<td>14 Cognoscenti</td>
</tr>
</tbody>
</table>
2. Did you become a member to: (Check all that apply)

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLSA</td>
<td>Participate in seminars</td>
<td>63 Cognoscenti</td>
</tr>
<tr>
<td></td>
<td>Gain publishing or speaking opportunities</td>
<td>27 Status</td>
</tr>
<tr>
<td></td>
<td>Work on committees</td>
<td>9 Shaper</td>
</tr>
<tr>
<td></td>
<td>Other (Access membership directory)</td>
<td>18 Status</td>
</tr>
</tbody>
</table>

The responses confirmed that the majority of members relied on their association primarily for information. The psychological need for status ranked a close second.

Question number three asked the respondent again to choose reasons why he/she joined the association. The response would determine if the member showed Altruistic, Cognoscenti or Shaper characteristics. AMA members submitted the open-ended response “matched career goals.” Thirteen of the 22 members found AMA to best suit their career needs. The author added Comparison Shopper as a category, but did not expect this response.

3. Did you join the association to: (Check all that apply)

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACP-ASIM</td>
<td>Change laws in your field</td>
<td>0 Shaper</td>
</tr>
<tr>
<td></td>
<td>Guide changes in the field</td>
<td>0 Shaper</td>
</tr>
<tr>
<td></td>
<td>Keep up-to-date on relevant issues</td>
<td>6 Cognoscenti</td>
</tr>
<tr>
<td></td>
<td>Raise funds</td>
<td>0 Altruistic</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>
3. Did you join the association to: (Check all that apply)

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMA</td>
<td>Change laws in your field</td>
<td>9 Shaper</td>
</tr>
<tr>
<td></td>
<td>Guide changes in the field</td>
<td>0 Shaper</td>
</tr>
<tr>
<td></td>
<td>Keep up-to-date on relevant issues</td>
<td>17 Cognoscenti</td>
</tr>
<tr>
<td></td>
<td>Raise funds</td>
<td>0 Altruistic</td>
</tr>
<tr>
<td></td>
<td>Other (Raise awareness of AMA projects)</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>(Association and personal goals match)</td>
<td>13 Shopper</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLSA</td>
<td>Change laws in your field</td>
<td>18 Shaper</td>
</tr>
<tr>
<td></td>
<td>Guide changes in the field</td>
<td>18 Shaper</td>
</tr>
<tr>
<td></td>
<td>Keep up-to-date on relevant issues</td>
<td>105 Cognoscenti</td>
</tr>
<tr>
<td></td>
<td>Raise funds</td>
<td>12 Altruistic</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>

Question number four asked if the member agreed with the association’s membership fee. Those who disagreed were categorized as Doubters. Suggestions about making the membership fee more reasonable were welcomed. Most members did not offer suggestions and seemed satisfied with the yearly fee.
4. Do you think the membership fee is reasonable?

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACP-ASIM</td>
<td>Yes</td>
<td>6 (0 Doubter)</td>
<td>100</td>
</tr>
<tr>
<td>AMA</td>
<td>Yes</td>
<td>21 (1 Doubter)</td>
<td>95</td>
</tr>
<tr>
<td>CLSA</td>
<td>Yes</td>
<td>93 (12 Doubter)</td>
<td>89</td>
</tr>
</tbody>
</table>

The last question asked if the member compared one association with another. This indicated if the member Comparison Shopped between associations.

5. Did you compare the benefits offered by other associations before joining?

<table>
<thead>
<tr>
<th>Association</th>
<th>Response</th>
<th># of Responses</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACP-ASIM</td>
<td>Yes</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>AMA</td>
<td>Yes</td>
<td>7</td>
<td>32</td>
</tr>
<tr>
<td>CLSA</td>
<td>Yes</td>
<td>30</td>
<td>29</td>
</tr>
</tbody>
</table>
CHAPTER V
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Summary

This study examined popular techniques organizations use to recruit and retain members. Related research on healthcare organizations was reviewed. A survey of the most important benefits to healthcare organization members and the reasons why they joined was conducted to identify what motivated people to become members.

It was this study's premise that membership directors needed insight into understanding how to increase membership and how to satisfy members' needs. Though memberships in most organizations are decreasing, recruiting and retaining members can be possible. Research was done to identify successful techniques for attracting potential members and providing current members with the benefits they value most.

The survey of the most important benefits to healthcare organization members and the reasons why they joined was conducted via e-mail. After contacting three organizations' membership directors and requesting new-member e-mail addresses, the author sent questionnaires to 12 members of ACP-ASIM, 30 members of AMA, and 212 members of CLSA. The majority of the members valued the information the organization provided them, agreed with the membership fee and also sought some type of psychological satisfaction from the organization, as well.
**Conclusions**

The results of the survey support the following:

1. People primarily join organizations for specialized information, but also seek to fulfill altruistic, status and field shaping needs.

2. Successful recruiting and retaining requires a plan to involve more than attractive benefits. Members’ motivational needs must also be included.

3. Members believe that newsletters and educational meetings are the most important benefits.

4. Most new members join an association to seek researching/speaking/publishing opportunities and network with accomplished professionals.

**Recommendations**

Based on the related literature and the survey results, the following recommendations are made:

**Use the application form to survey new members.** First-year members hold the weakest ties to the association and maintaining their memberships can be a challenge. First-year members also need to define their attitudes and behaviors. They are more open to persuasion than established members with set patterns.\(^{30}\) Surveying helps the healthcare association pinpoint what benefits each member expects in exchange for the membership fee. The membership application form should include a short survey. In essence, it forces all new members to complete a questionnaire and tell the association what will keep them satisfied.\(^{31}\)


The membership director will be able to code the members as Altruistic, Cognoscenti, Comparison Shopper, Doubter, Shaper or Status-Conscious based on their responses. The information should be logged into a database. Members’ names and addresses should be attached to the different personality characteristics. This enables the membership director to target specific information at different members.

**Understand the target audience.** “Identify the key publics and make sure their information needs are served”.ACP-ASIM knows the target population’s professional lifestyle. It seeks the Cognoscenti, Status-Seeker: those who believe in medical ranking and hospital hierarchy. The association recreates the educational atmosphere. Student members fall into the lowest membership class. Years pass before a student can reach the Master membership level. Each year those members stay with ACP-ASIM, they move up another rank and the association generates more income.

ACP-ASIM member Tony Secaira said, “I’m eligible to apply for Full membership this year. I’ve been a member for 17 years, all through medical school and training.” At this point, Secaira will submit another application, another letter of recommendation and pay the membership fee. A membership board must vote on his application. “It’s worth the prestige. Everyone looks forward to the accomplishment and I think I’ve earned it. Hopefully the board thinks so too.”

**Send specific messages in the mailings.** Todd Grunig and James Hunt, authors of *Public Relations Techniques* (1984), suggest tailoring messages. “Once target audiences have been selected, it is important to decide what message each group needs to receive from your organization. Rarely does an information campaign give precisely the

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same message to each of its publics. Careful analysis shows that each public has a
different stake in the organization”.

For example: welcome letters to the Cognoscenti should emphasize future
meetings, coming newsletter articles and continuing educational credits. Letters to
Altruistic members should include invitations to work on community projects or fund-
raisers. Shapers should be sent information about current laws, the impact the changes
will have on the profession and how they can help. The Status-Conscious should receive
a request for articles, a list of speaking opportunities and short biographies about the
other authors/lecturers. Doubters and Comparison Shoppers need a welcome letter
serving as a reminder of their career goals and everything the association can offer.33

Year-ending renewal letters should also emphasize members’ needs. The
association should remind members of specific benefits and how it can keep providing
those benefits. Offer members some type of reward. The organization could send a book
or video tape as a thank you.34

Publish an association newsletter. Fifty percent of ACP, 67% of AMA and 37%
of CLSA chose the newsletter as the most important benefit. Research shows the
members’ first priority is receiving specialized information. An association can link the
secondary need for status and accomplishment into the newsletter.

Findings showed that status was the next most important reason for joining an
association. A place to publish articles and report research summaries helps Status-
Conscious members fulfill their need for achievement. Small photos of the authors placed
next to the article also helps networkers identify the people they wish to interact with.

CLSA includes a free continuing education article in each newsletter. A particular company sponsors the research and funding. This saves the member from spending more money on extra courses or seminars.

Offer discounts on educational meetings. Fifty percent of ACP, 10% of AMA and 43% of CLSA selected educational meetings as the most important benefit. The meetings not only provide information, but also satisfy every personality type’s needs. The Cognoscenti receive information. Altruistics organize the event. Shapers speak about legal and professional changes in the field. Status-Conscious network and lecture. The Comparison Shoppers and the Doubters are there to remind themselves why they spent their money on a membership.

CLSA conducts an essay contest open to all students and current members. A dozen winners receive a “scholarship” including free airfare, lodging, and waived registration fees to the association’s annual educational meeting. The winning essays later appear as articles in the newsletter.

CLSA member, Jason Capozella, won a scholarship five years ago. He started out as a student member, was an essay contest winner and became an active member. He served on several committees and just finished a three-year term on the board of directors.

CLSA does not pay for scholarships with its own income. Industry corporations sponsor the program. AMA had problems accepting outside endorsements, because the members felt slighted. AMA gained revenue, but the members didn’t get anything in return. CLSA found a way to generate funding and offer educational opportunities to its members.
Recommendations for Further Study

This study was limited to three healthcare organizations. In addition the new members from each organization seemed to be at different stages in their profession based on the organization’s recruiting techniques.

It is recommended that this study be conducted again knowing that all the members from each organization are at the same stage in their membership.

This study did not examine an organization after it implemented these recruiting and retaining techniques. It is recommended a follow-up study be conducted to verify how effective the techniques were.
BIBLIOGRAPHY


