



**PROMOTIONAL TOOLS USED BY MEDICAL INSURANCE COMPANIES: AN
INTERNATIONAL STUDENT PERSPECTIVE**

BY

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ABSTRACT

The immigration Act 19 of 2004 requires that all international students have proof of medical aid cover for a whole year from a provider that is registered with the South African Council for Medical Schemes in terms of Medical Schemes Act, 1998. Some medical insurance companies provide gifts to students to gain a larger market share in educational institutions. Health insurance products are very crucial in the lives of students and therefore the students must be familiar of medical product benefits and exclusions. Students lack relevant knowledge of health insurance products. Students seem have a perception that medical insurance products cover all healthcare expenses. Dissatisfied customers will tarnish the image of the respective medical aid companies, hence customer attrition.

The purpose of this exploratory study was to determine the influence of promotional tools in awareness creation on higher education international students' selection of medical products. The study was descriptive and quantitative in nature. A structured questionnaire with close-ended and scaled response questions was used as the research instrument. The sample comprised 400 international students studying at two universities in KwaZulu-Natal. Non probability sampling was used to select the sample. The results indicate that the respondents are very sensitive to price and majority of them are influenced by advertising and word of mouth. The results indicate that students react differently to each promotional tool.

DECLARATION

I, the undersigned, Faith Rudairo Chibvura, do hereby declare that unless otherwise indicated, this dissertation is solely the result of my own work. This work has not been submitted to any other university for a degree award or other purposes and all the authors whose work contributed to this study have been accordingly referenced.

I hereby give consent for this work to be made available for inter-library loan, photocopying, and made available to outside interested organizations and students.

Faith Rudairo Chibvura

Date

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DEDICATION

This work is dedicated to the Faithful God, the creator of the heaven and the earth and all that is within them, who made it possible for me to commence and successfully complete this study.

TABLE OF CONTENTS

Contents

| | |
|--|---|
| CHAPTER ONE | 1 |
| Introduction to the Study | 1 |
| 1.1 INTRODUCTION..... | 1 |
| 1.2 RESEARCH PROBLEM | 2 |
| 1.3 AIM AND OBJECTIVES OF THE RESEARCH | 3 |
| 1.3.1 AIM | 3 |
| 1.3.2 Objectives | 3 |
| 1.4 RESEARCH HYPOTHESES | 3 |
| 1.5 IMPORTANCE OF THE STUDY | 4 |
| 1.6 LITERATURE REVIEW | 4 |
| 1.6.1 Promotional tools | 4 |
| 1.6.2 Medical insurance | 5 |
| 1.6.3 Decision-making Process | 6 |
| 1.7 RESEARCH METHODOLOGY | 6 |
| 1.7.1 Research Design | 6 |
| 1.7.2 Target Population..... | 7 |
| 1.7.3 Sample population | 7 |
| 1.7.4 Sample size | 7 |
| 1.7.5 Sampling method | 7 |
| 1.7.6 Measuring instrument | 8 |
| 1.7.7 Data analysis | 8 |
| 1.7.8 Pre-testing | 8 |
| 1.7.9 Delimitations/scope..... | 8 |

| | | |
|---------|--|----|
| 1.7.10 | Validity and Reliability..... | 9 |
| 1.7.11 | Anonymity and confidentiality | 9 |
| 1.7.12 | Ethical considerations..... | 9 |
| 1.8 | OUTLINE OF THE STUDY..... | 10 |
| 1.9 | CONCLUSION | 11 |
| | CHAPTER TWO..... | 12 |
| | LITERATURE REVIEW | 12 |
| 2.1 | INTRODUCTION..... | 12 |
| 2.2 | COMMUNICATION | 12 |
| 2.2.1 | Awareness | 13 |
| 2.2.2 | Models of communication | 14 |
| 2.2.2.1 | DAGMAR Model | 14 |
| 2.2.2.2 | Frazen Model..... | 16 |
| 2.2.2.3 | The Linear Model of Communication | 18 |
| 2.2.2 | TYPES OF COMMUNICATION | 20 |
| 2.2.3 | Importance of communication..... | 23 |
| 2.2.4 | Effective communication | 23 |
| 2.3 | PROMOTIONAL TOOLS..... | 24 |
| 2.3.1 | Functions of promotional tools | 25 |
| 2.3.2 | Promotional mix responsibilities | 26 |
| 2.3.3 | Steps in developing effective promotional mix programs | 26 |
| 2.3.3.1 | Identify the aimed audience | 27 |
| 2.3.3.2 | Shaping the communication objectives and goals..... | 27 |
| 2.3.3.3 | Designing the message..... | 27 |
| 2.3.3.4 | Selecting communication channels | 29 |

| | | |
|----------------------------|--|----|
| 2.3.3.5 | Establishing promotional budget | 29 |
| 2.3.3.6 | Formulating and supervision of the promotional mix | 30 |
| 2.3.3.7 | Assessing results | 30 |
| 2.3.3.8 | Managing the (IMCs) process. | 31 |
| 2.3.4 | Promotional Mix | 31 |
| 2.3.4.1 | Advertising | 32 |
| 2.3.4.1.1 | Advantages of advertising | 34 |
| 2.3.4.2 | Personal Selling | 35 |
| 2.3.4.2.1 | Sales force structure | 36 |
| 2.3.4.3 | Sales Promotions..... | 37 |
| 2.3.4.4.1 | Forms of direct marketing | 38 |
| 2.3.4.5 | Public Relations (PR)..... | 41 |
| 2.3.4.5.1 | Public relations tools | 42 |
| 2.3.4.5.1 | The functions of Public Relations..... | 43 |
| 2.4 | COMMUNICATION THROUGH THE MARKETING MIX | 44 |
| 2.4.1 | Product..... | 44 |
| 2.4.2 | Pricing | 45 |
| 2.4.3 | Place | 45 |
| 2.4.4 | Promotion..... | 46 |
| 2.5 | CONSUMER DECISION MAKING PROCESS | 46 |
| 2.5.1 | Factors influencing on consumer decision-making | 49 |
| 2.6 | CONCLUSION | 51 |
| CHAPTER THREE | | 53 |
| RESEARCH METHODOLOGY | | 53 |
| 3.1 | INTRODUCTION..... | 53 |

| | |
|--|----|
| 3.2 RESEARCH OBJECTIVES | 53 |
| 3.3 RESEARCH DESIGN..... | 54 |
| 3.4 TARGET POPULATION..... | 55 |
| 3.5 SAMPLE SIZE SELECTION | 55 |
| 3.6 SAMPLING METHOD | 56 |
| 3.7 QUESTIONNAIRE DESIGN..... | 56 |
| 3.8 QUESTIONNAIRE FORMAT | 57 |
| 3.9 DATA ANALYSIS | 58 |
| 3.9.1 Descriptive Statistics | 59 |
| 3.9.2 Percentages and frequencies | 59 |
| 3.10 VALIDITY AND RELIABILITY | 59 |
| 3.11 ANONYMITY AND CONFIDENTIALITY..... | 60 |
| 3.12 ETHICAL CONSIDERATIONS..... | 60 |
| 3.13 CONCLUSION | 61 |
| CHAPTER FOUR..... | 62 |
| FINDINGS, INTERPRETATION AND DISCUSSION OF FINDINGS | 62 |
| 4.1 INTRODUCTION..... | 62 |
| 4.2 RESPONSE RATE..... | 62 |
| 4.3 THE RESEARCH INSTRUMENT..... | 63 |
| 4.4 DESCRIPTIVE DATA..... | 63 |
| 4.4.1 Section A: Biographical Data | 63 |
| 4.5. FACTORS STUDENTS CONSIDER WHEN CHOOSING MEDICAL INSURANCE. | 67 |
| 4.6 EFFECTIVENESS OF PROMOTIONAL TOOLS | 69 |
| 4.7 PERCEPTION ON PROMOTION TOOLS USED IN CREATING AWARENESS.... | 72 |

| | |
|--|-----|
| 4.8 INFORMATION SOURCE | 73 |
| 4.9 INFERENTIAL STATISTICS | 75 |
| 4.10 HYPOTHESIS TESTING | 81 |
| 4.11 CORRELATIONS | 86 |
| 4.12 CROSS TABULATION | 88 |
| 4.13 CONCLUSION | 90 |
| CHAPTER FIVE | 92 |
| CONCLUSIONS AND RECOMMENDATIONS | 92 |
| 5.1 INTRODUCTION..... | 92 |
| 5.3 MAIN FINDINGS REGARDING RESEARCH AIM | 93 |
| 5.3.1 Conclusions on the research aim. To evaluate promotional tools used by medical insurance companies. | 93 |
| 5.3.1.1 First component: Campus advertising | 93 |
| 5.3.1.2 Second component: Media advertising | 94 |
| 5.3.1.3 Third component: Innovative promotional tools | 95 |
| 5.4 CONCLUSIONS ON OBJECTIVE ONE | 95 |
| 5.5 CONCLUSIONS ON OBJECTIVE TWO | 96 |
| 5.6 CONCLUSIONS ON OBJECTIVE THREE..... | 97 |
| 5.7 LIMITATIONS OF THE STUDY..... | 98 |
| 5.8 RECOMMENDATIONS | 98 |
| 5.9 SCOPE FOR FURTHER RESEARCH | 99 |
| 5.10 CONCLUSION | 99 |
| BIBLIOGRAPHY | 101 |
| Appendix A: Questionnaire | 127 |
| Appendix B: Letter of information and Letter of consent | 132 |

| | |
|---|-----|
| Letter of information | 132 |
| Letter of consent..... | 134 |
| Appendix C: Gate Pass UKZN | 135 |
| Appendix D: Gate Pass DUT | 136 |
| Appendix E: Correlation | 137 |
| Appendix F: Pearson Chi-Square Tests..... | 138 |
| Appendix G: Frequency | 141 |
| Appendix H: Factor Analysis | 149 |
| Appendix I: Reliabilities | 152 |
| Appendix J: Chi Square Tests..... | 153 |

LIST OF FIGURES

| | |
|--|----|
| Figure 2.1: DAGMAR Model..... | 15 |
| Figure 2.2: Frazen Model | 18 |
| Figure 2.3: Linear Model of Communication..... | 19 |
| Figure 2.4: AIDA Model | 29 |
| Figure 2.5: Blended mix of promotion tools | 32 |
| Figure 2.6: Forms of direct marketing..... | 40 |
| Figure 2.7: Consumer decision making process | 48 |
| Figure 4.1: Religion of respondents..... | 65 |

List of Tables

| | |
|--|----|
| Table 2.1: Response Rate..... | 62 |
| Table 4.2: Age and Gender | 64 |
| Table 4.3: Country of origin | 66 |
| Table 4.4: Factors considered in decision making | 67 |
| Table 4.5: Effectiveness of promotional tools..... | 69 |
| Table 4.6: Perception | 72 |
| Table 4.7: Information Source | 74 |
| Table 4.8: Cronbach's Alpha | 76 |
| Table 4.9: KMO and Bartlett's Test | 77 |
| Table 4.10: Section B (Decision making process) | 78 |
| Table 4.11: Section C (Effectiveness of promotional tools) | 78 |
| Table 4.12: Section D (Perception) | 79 |
| Table 4.13: Section E (Information source) | 80 |
| Table 4.14: Relationship between age and perception on promotional tools in creating awareness..... | 82 |
| Table 4.15: Relationship between gender and perception on promotional tools used in creating awareness | 83 |
| Table 4.16: Relationship between race and perception on promotional tools used in creating awareness | 84 |
| Table 4.17: Relationship between country of origin and perception on promotional tools used in creating awareness..... | 85 |
| Table 4.18: Correlation values between price and the following "items" | 86 |
| Table 4.19: Correlation values between "how well known is the medical insurance" and the following "items" | 87 |
| Table 4.20: Crosstabulation (country of origin and price) | 89 |
| Table 4.21:Crosstabulation (price and gender) | 90 |

CHAPTER ONE

INTRODUCTION TO THE STUDY

1.1 INTRODUCTION

According to the Immigration Amendment Act 19 of 2004, all education institutions require a medical aid cover certificate to prove that the student is covered for the whole year in order for each international student to register to study. Momentum medical insurance is recommended by most tertiary institutions in South Africa because it is registered with the SA Council for Medical Schemes in terms of the Medical Schemes Act (Muhowa 2010:1). In addition, students can purchase any medical insurance cover provided and pay for the complete calendar year. Many medical insurance companies are competing to create high market share in educational institutions (Grajales III, Sheps, Ho, Novak-Lauscher, and Eysenbach 2014: 13). Due to the rising level of competition, many promotional tools are being used for awareness creation. Health insurance services are vital to the life of every student; therefore, awareness on available medical insurance, medical benefits and limitations need to be created for the target market. Easy access and comprehensive awareness should be created through different promotional tools.

Furthermore, Singh (2011: 36) explains that diffusion of innovation theory is very important when targeting a particular group of target audience or a particular community. Diffusion of innovation theory states that the concept must be communicated throughout the international students group and given enough time to cement in the long term. In support to this theory, social influence theory and social network theory also state that social norms of a group must also be considered (Archibald and Clark 2014). To sum up, the medical insurance companies should consider the diffusion of innovation theory for their promotional tools to be implemented effectively. The main objective of the study is to determine factors that influence international student's decision-making process when choosing medical insurance. Furthermore, this study also sets out to determine the

influence of promotional tools in creating customer awareness for medical insurance to international students.

1.2 RESEARCH PROBLEM

Medical Insurance Companies are facing sales inconsistencies due to lack of information on full benefits and benefit limits which result in over expecting and dissatisfaction of customers when the actual service is delivered (Sabash and Raju 2015: 150). Students appear to be missing knowledge of the available health insurance products which leads to misconception of information. Students seem to be deceived by their perception towards the available medical insurance products as they just assume that medical insurance covers all healthcare expenses without a shortfall which is not always the case (Muhowa 2010:1). Due to this, dissatisfied customers will tarnish the image of the respective medical aid companies, hence customer attrition. An analysis on the influence of the promotional tools being used by all accessible medical insurance companies at tertiary institutions is important to identify if they are actually creating customer awareness. This raises the following concerns:

- Customer's ignorance of not searching for further information about available students' medical aid packages.
- Medical aid providers' responsibility to design effective promotional tools so as to try by all means to communicate true information about what they offer.

1.3 AIM AND OBJECTIVES OF THE RESEARCH

1.3.1 AIM

The study aims to evaluate the promotional tools used by medical insurance companies on international students.

1.3.2 Objectives

- To determine factors that influence international students' decision-making process when choosing medical insurance at a tertiary institution.
- To determine the influence of promotional tools in creating customer awareness for medical insurance on international students at a tertiary institution.
- To identify international students' perceptions towards promotional tools used by medical insurance companies.

1.4 RESEARCH HYPOTHESES

Based on the aim and objectives of this study, research hypotheses are formulated to guide this study.

Ho1: There is no significant relationship between age and perception on promotional tools used in creating awareness.

Ho2: There is no significant relationship between gender and perception on promotional tools used in creating awareness.

Ho3: There is no significant relationship between race and perception on promotional tools used in creating awareness.

Ho4: There is no significant relationship between country of origin and perception on promotional tools used in creating awareness.

1.5 IMPORTANCE OF THE STUDY

The study aims to evaluate the influence of promotional tools used by medical insurance companies on international students. The rationale of the study is to provide the knowledge on the significance of operative promotional tools and communication in enhancing customer awareness. Many students do not get the vital information on their medical insurance terms and conditions which leads to misinterpretation of information hence distortion of the medical insurance brand name as well as customer dissatisfaction. The study will also determine the current level of customer awareness and to learn how to improve customer awareness of medical insurance amongst international students.

This research was conducted to assist medical insurance companies in determining the level of customer awareness. Decisions of whether to maintain, improve or change promotional tools are determined by the empirical findings that are derived from this research study.

1.6 LITERATURE REVIEW

This section reviews the related literature on the concepts, developments and results from the insight of different scholars and authors with respect to: communication, promotional tools, consumer decision making, awareness, health insurance and perception.

1.6.1 Promotional tools

Communication has been defined and explained by various authors from the perspective of their different discipline. Communication is a process through which views and ideas are passed and shared (Dahlen, Lange and Smith 2010: 2). Similarly, Carlos Díaz Casero, Almodóvar González, de la Cruz Sánchez Escobedo, Coduras Martinez and Hernández Mogollón (2013: 1098) maintain that communication is a system of sharing information between two or more individuals through the use of symbols. These

definitions project the notion that communication is a thoughtful effort made to create awareness and an envisioned response as it takes place between two or more people. Awareness in this sense, refers to part and parcel of the human usual development and as such, it is necessary for human to be aware of the situations around them ("Henry" Jin, Fawcett and Fawcett 2013: 205). There are many features of communication such as encoding, decoding and recipient.

Advertising, personal selling, public relations, sales promotion and direct marketing make the promotional mix (Jones 2002: 38). Keller (2009: 42), defines exhibitions during opening days, advertising, public relations and word of mouth as the most appropriate communication strategies for marketing at universities. Promotional tools can be used to jog consumers' memory to identify their needs and advantages of past business and encourage them to purchase again (Sultana, Irum, Ahmed and Mehmood 2012: 11). Promotional tools can also help in differentiating competing brands with minor difference (Holcombe 2009: 223). Fill (2011: 3) proposes that promotional tools are used in what he posits as: distinguishing products; reminding and re-establishing confidence to active and credible consumers; inform prospects; influence the targeted market to perform in a particular way.

There are certain tasks expected from company managers to obtain effective communication with their customers (Bahuguna and Sikroria 2012: 20). Ouwersloot and Duncan (2009: 21) advocate that these questions should be answered: Who should receive the message? What should message be? How much is the budget? How are the messages to be delivered? How is the whole procedure going to be monitored? A lack of a good communication strategy would have a negative impact on marketing. In this regard, improving on a company's communication strategy will help the company benefit immensely both internally and externally.

1.6.2 Medical insurance

Having a knowledge of the type of product being promoted is very important (Piyathasanan, Mathies, Wetzels, Patterson and de Ruyter 2015: 491). Medical

insurance services require satisfaction, trust and commitment to create quality loyalty relationships with the customers (Moreira and Silva 2015: 254). Moreover, perceived service attributes are very important for customer satisfaction. According to Sabash and Raju (2015: 150) perception refers to how the customer interprets the stimulus they receive from the promotional tools that are used by medical insurance companies.

1.6.3 Decision-making Process

The decision-making process refers to a process where consumers assess and evaluate many products to select the best alternative to satisfy their need (Lin 2011: 87). To sum up, the consumer decision-making process is also very important in this study as it also influences the communication strategy and promotional tools to be used. According to Ahmed, Bwisa, Otieno, Karanja (2014: 79) a decision-making process includes three procedures which are need recognition, decision to change and a mindful commitment to implement the decision.

1.7 RESEARCH METHODOLOGY

This section provides a brief narrative on the research design, research approach, target population, size of the sample, sampling method, questionnaire design, data collection method, data analysis, reliability and validity implemented in the study.

1.7.1 Research Design

According to Yin (2014: 13), research design gives a logical sequence to a researcher which will in turn create a connection between the aims and objectives, questions of a research to eventually lead to the conclusion. Babbie and Mouton (2009: 74) describe research design as a blue print of how researchers intend to conduct the study. This study is quantitative and cross-sectional in nature. Closed-ended questions, in the form

of questionnaires, was used to obtain information in order to answer the research questions.

1.7.2 Target Population

Target population is basically understood as a total number of all the individuals who have certain characteristics and are of interest to a study (Bonds-Raacke and Raacke 2012: 34). The attention of the researchers was directed towards international students at Durban University of Technology and the University of KwaZulu-Natal. The universities were selected due to its convenience to the researcher. Furthermore, the researcher is familiar with them.

1.7.3 Sample population

Sampling does not refer to people only, but also to events and situations (Lindahl, Lidmar and Hess 2015: 27). A sample of 400 international students was selected (200 from each of the two selected universities).

1.7.4 Sample size

The size of the sample depends entirely on the nature of the study and concept being investigated whenever a theoretical scheme is used (Scwandt 2007: 270). A sample size of 400 international students was selected because if the population size is very large, it should be enough to support the research results (Sekaran 2003: 294).

1.7.5 Sampling method

This research made use of the non-probability sampling. Non-probability sampling does not involve random selection; it is rather by convenience, purposive, or self-selection (do-Carmo; Infante and Mendes 2014: 478). Purposive sampling is based on the specific trait the respondent has to fulfill the requirement of the study.

1.7.6 Measuring instrument

According to Sparkes and Smith (2014: 83), measuring instruments are used by researchers and practitioners to aid in the assessment or evaluation of subjects. Questionnaires will be used for collecting the data. The questionnaires were self-administered and consisted of a five-point likert scale and close-ended questions.

1.7.7 Data analysis

The researcher described and analyzed the data gathered based on the responses of the respondents through a quantitative/statistical presentation. The initial stage required a statistician to collate and process the raw data before interpreting it. The findings are presented in graphs, pie charts and tables. The quantitative analysis was done using Statistical Package for Social Sciences (SPSS version 24).

1.7.8 Pre-testing

Adequate pretesting was done in order to ascertain that the questionnaire is accurately understood by the selected respondents. Pre-testing was done to ensure that the respondents respond to the research questions and to establish if the research objectives are attainable. According to McDaniel and Gates (2010: 232) pretesting refers to an elimination process that includes a trial run with a group of participants to perfect the survey design. Copy of the preliminary questionnaire was circulated among academics in the relevant discipline and a statistician.

1.7.9 Delimitations/scope

The study was confined to international students at two selected Universities.

1.7.10 Validity and Reliability

Bonds-Raacke and Raacke (2012: 84) define validity as the ability of your measurement to accurately measure what it is expected be measuring. Reliability on the other hand according to Leedy and Omrod (2010: 93), is the “reproductively of consistent results of a measurement under circumstances where characteristics being measured have not changed”. These two aspects of a research are inevitable. White and McBurney (2013: 141) explain, while validity indicates the correctness in terms of the degree to which a research conclusion agrees with reality, reliability ensures presenting alike conclusions on different instances. Validity was ensured as the instrument for data collection was strictly aligned to the aims and objectives of the research. The researcher ensured validity and reliability by testing the results derived more than once.

1.7.11 Anonymity and confidentiality

Crow and Wiles (2008:1) opine that anonymity and confidentiality of respondents are central to ethical issues in research. The authors explain the idea as the ability of a researcher to cover the identities of the respondents and to uphold the confidentiality of the data given by participants. As such, it provides the respondent adequate freedom to share information liberally with less or no risks. This research ensured anonymity and confidentiality by not asking for the names of the respondents. As a result, the identification of the respondents was not exposed. This gave the respondents freedom to share their true opinions without fear of being exposed.

1.7.12 Ethical considerations

A research has ethical dimensions that require the researcher to maintain both moral and expert obligations to be supported by ethics even when the participants are uninformed of the ethics (Neuman 2011: 33). The researcher has to be extra careful and sensitive of the participant’s response during the course of data collection or fieldwork. The

researcher should also ensure truth and honesty and respect the respondents' morals throughout the research process for the purpose of integrity in the research. The researcher ensured that the respondents are aware that they were not compelled to participate in the study and not obligated to complete the questionnaire. The consent form was explained and signed by the respondents indicating that they clearly understood what was expected of them.

1.8 OUTLINE OF THE STUDY

The research study was structured as follows:

Chapter One: Introduction

Chapter one provides an introduction of the study. This chapter provides an outline of the study aim, objectives, importance of the study, methodology and delimitations. The outline of the whole research is discussed.

Chapter Two: Literature Review

This chapter reviews the related literature on the concepts, developments and results from the insight of different scholars and authors with respect to: communication, promotional tools, consumer decision making, awareness, health insurance and perception. Communication through the marketing mix, marketing communication models and are also discussed.

Chapter Three: Research Methodology

This chapter provides a narrative on the research design, research approach, target population, size of the sample, sampling method, questionnaire design, data collection method, data analysis, reliability and validity implemented in the research project.

Chapter Four: Presentation, Analysis and Discussion of Findings

This chapter presents the results and the findings obtained from the survey this study undertook. Descriptive statistics is presented in the form of graphs, cross tabulations and other figures for the quantitative data that was collected. Inferential techniques include the use of correlations and chi square test values; which are interpreted using the p-values.

Chapter Five: Summary, Conclusion and Recommendations

This chapter discusses the summary of the main findings, the conclusions and the recommendations of the study. Conclusions are drawn from the research findings. The limitations of the study are noted and areas for further research are suggested.

1.9 CONCLUSION

Chapter one outlines the problem statement of the study. The rationale for evaluating the promotional tools used by medical insurance companies was discussed in this chapter. The aim, objectives, research methodology and delimitations are also outlined in this chapter. Literature review of the study is covered in chapter two.

CHAPTER TWO

LITERATURE REVIEW

2.1 INTRODUCTION

This chapter reviews the related literature on the concepts, developments and results from the insight of different scholars and authors with respect to: communication, promotional tools, consumer decision making, awareness, health insurance and perception. Advertising, personal selling, sales promotions, communication through the marketing mix, marketing communication models and are also discussed.

2.2 COMMUNICATION

Communication has been defined and explained by various academics from the perspective of their different discipline. Dahlén, Lange and Smith (2010: 2) refer communication to a process through which opinions, feelings and ideas are passed and shared. Similarly, Carlos Díaz Casero *et al.* (2013: 1089) maintain that communication is a process of distributing information among two or more individuals using signs or symbols. These meanings project the notion that sharing of information is an intentional effort made to bring about knowledge and a planned response as it takes place between two or more parties. Communication can also be referred to a 'deal' which means that motivations of the ones who participate arouse the easy exchange of information in an organization and a common response is expected from the addressees (Steinberg 2013).

Khan and Khan (2012: 3) explain that sharing of information reminds prospects of a need they may have or remind them of the benefits of its transactions. Communication can always explain and create awareness of a market offerings being offered to customers.

Fill's (2011: 5) perspective to communication illustrates that it is a symbolic process (words and pictures) in which thoughts are intentionally created to put an individual or object meant by the symbol at the center of attention. Communication is the backbone of an organization as almost everything revolves around communication. It is further considered to be very vital in common life and in business settings and as such, it is an indispensable phenomenon. Organizations give highest significance to communication and ensure that the promotional tools frankly aim for the needs and wants of the targeted market.

An efficient and effective communication system of an organization is represented by a well and acceptably conveyed message. If a piece of information lacks the communicative competence to reach employees and customers, then it could be destructive which is likely to result to an unfavorable reaction (Mamuti 2013: 676). Many organizations around the world depend on recent and updated communication technologies (Wang, Haider, Gao, You, Yang, Yuan, Aggoune, Haas, Fletcher and Hepsaydir 2014: 124). Brand and product awareness depends on the efficiency and effectiveness of a communication strategy of an organization and customer retention is heavily dependent on knowledge and loyalty. Awareness is discussed in the following section.

2.2.1 Awareness

According to "Henry" Jin, Fawcett and Fawcett (2013: 205) awareness is part of the human development and as such, is necessary for human to be aware of the situations around them. This process comprises environmental characteristics, automatic process and finding. Environmental characteristics consist of situations, persons, measures and characteristics that activate an automatic course of action. Automatic process consists of feelings, origination, appraisal, and ethics and typecast conduct (Skotnes 2015: 304). The outcome includes behavior, inspirations, judgments and emotions. Statt (2004) refers customer awareness as the understanding by an individual referring to the available products being marketed and sold by a firm. Soba and Aydin (2013: 111) also

acknowledge that customer's awareness of a certain product or service provides the customer with satisfaction from what is bought by the customer. This avenue makes customers very much aware of their choice of product when they are fully equipped with the product knowledge and advantages from knowing their privileges and civil liberties. There is need to understand the various marketing communication models that have been put forward by various scholars so as to understand the importance of customer awareness. The models of communication are discussed in the following section.

2.2.2 Models of communication

For this study three models are discussed.

2.2.2.1 DAGMAR Model

Colley (2004: 40) proposed a model of marketing communication referred to by the acronym DAGMAR (Defining Advertising Goals for Measured Advertising Results). The model postulates a pre-stage in which there is the need to move the potential consumer from a state which he or she is unaware of the product or its proposition, to a positive awareness of the brand's existence in the marketplace. Only once a basic level of awareness has been created, can the task of improving understanding or comprehension begin. DAGMAR model has five steps as follows:

- Awareness

Awareness represent the first stage of DAGMAR model. It is important to create awareness before the purchase behavior is expected. The target market should be aware of the market offering (Schultz 1996: 140);

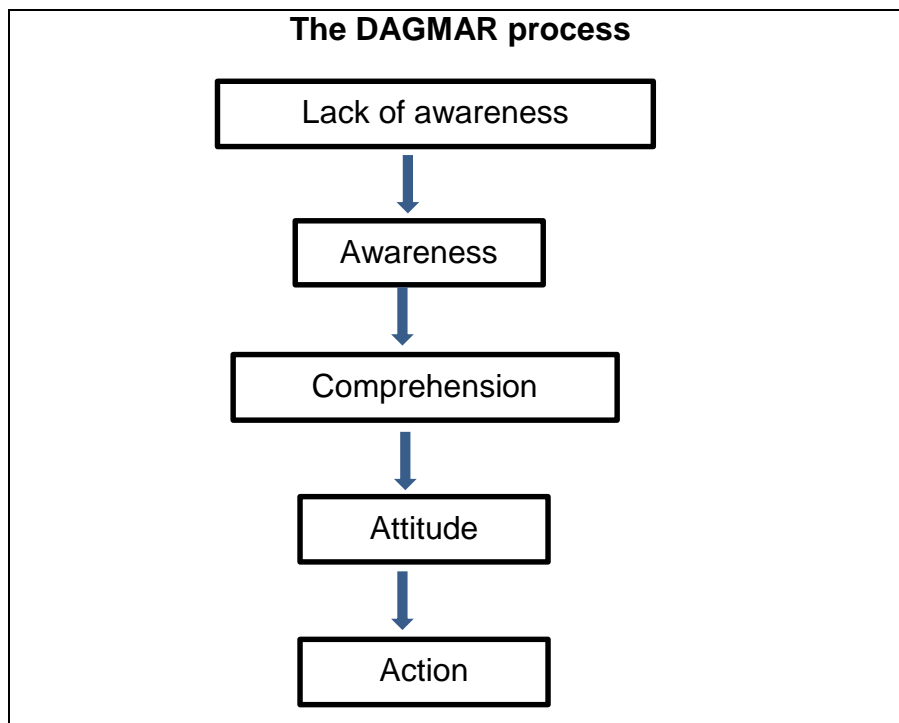
- Comprehension

At this stage the target market should learn about the attributes and benefits of the market offering. The communication task is to promote the characteristics, benefits and uses of the market offering (Egan 2007: 47);

- Attitude

A sense of conviction should be created at this stage; the customer should make an emotional decision to prefer the product over competitors' products. Advertising is used to create the best image of the product in the consumer's mind. The attitude stage refers to that part of the process in which a consumer is persuaded by the merits of purchasing the product, or the reinforcement of new positive views (Mihart 2012: 977); and

Figure 2.1: DAGMAR Model



Source: Colley (2004:40)

- Action

The final stage is the promotion of a specific course of action on the part of the consumer after awareness has been created. Communication should encourage the customers to make a purchase of the product.

In this study DAGMAR model can be very effective in breaking down the advertising strategy of medical insurance companies into different five stages as illustrated by the Figure 2.1. This will increase the results of advertising in creating awareness. Customers need to be exposed to a message so that they will be aware of the message information.

Medical insurance marketers can use the DAGMAR model to measure the effectiveness of advertisement basing on its ability to move the customers from a stage of awareness to the final stage of purchase. Marketers can also use DAGMAR model to define the target market for medical insurance. The aim of the study is to evaluate the promotional tools used by medical insurance, and DAGMAR model can contribute to the fulfilment of the study aim. However, DAGMAR model is also very expensive as it involves extensive research to set quantitative targets and measuring them (Scharm, Waltemath, Mendes and Wolkenhauer 2016: 46).

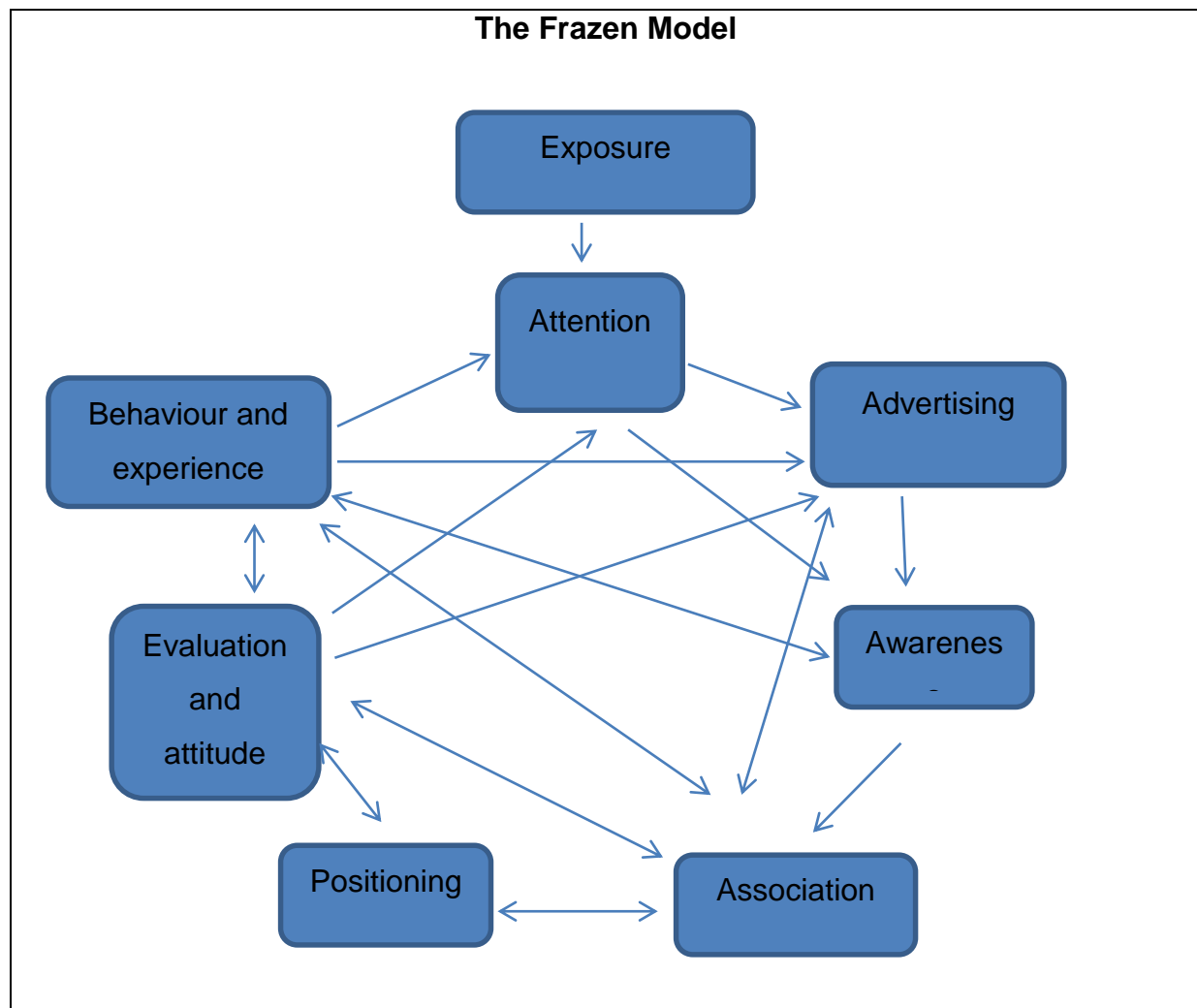
2.2.2.2 Frazen Model

The Frazen Model (Figure 2.2, page 18) helps explain the relationship between marketing communication strategies and customer awareness. Customers need to be exposed to the organization's offerings through promotional tools such as advertising, personal selling or direct marketing, to capture customers' attention and create company, brand, product or service awareness (Feick and Price 1987: 83).

- Advertising is the process whereby the viewer or reader translates the information provided into a form which is consistent with existing attitudes and beliefs. It will be very much influenced by prior awareness of the product category and personal attitudes and experiences with a particular product (Shimp 2010: 35);
- Brand awareness is an important dimension of the process and one to which marketing communications makes an important contribution. Except for new to the world products, the consumer is likely to have some level of brand awareness, either through previous personal experience or because of the experiences of others. There will be heightened consumer awareness (Mihart 2012: 978);

- Product Association is as the result of product use and advertising processing. Sometimes for example the consumer will have existing awareness of related brands or competitor brands, the values of which may be transferred to the product being offered;
- Positioning is the process by which consumers compare brands with one another. The process of perceptual mapping involves the identification of key attributes which are desired by the consumer of a particular product category and assessing the relative performance of the competing products against those dimensions; and
- Attitude is the result of other dimensions. Factors such as awareness, brand associations, previous experience, and the consumer perception of the position of the product or brand relative to its competitors will determine attitudes towards the brand. In turn buying behavior and usage experience are influenced by brand awareness therefore customer awareness is a crucial element which is dependent on marketing communications.

Figure 2.2: Frazen Model



Source: Kotler (2000:345)

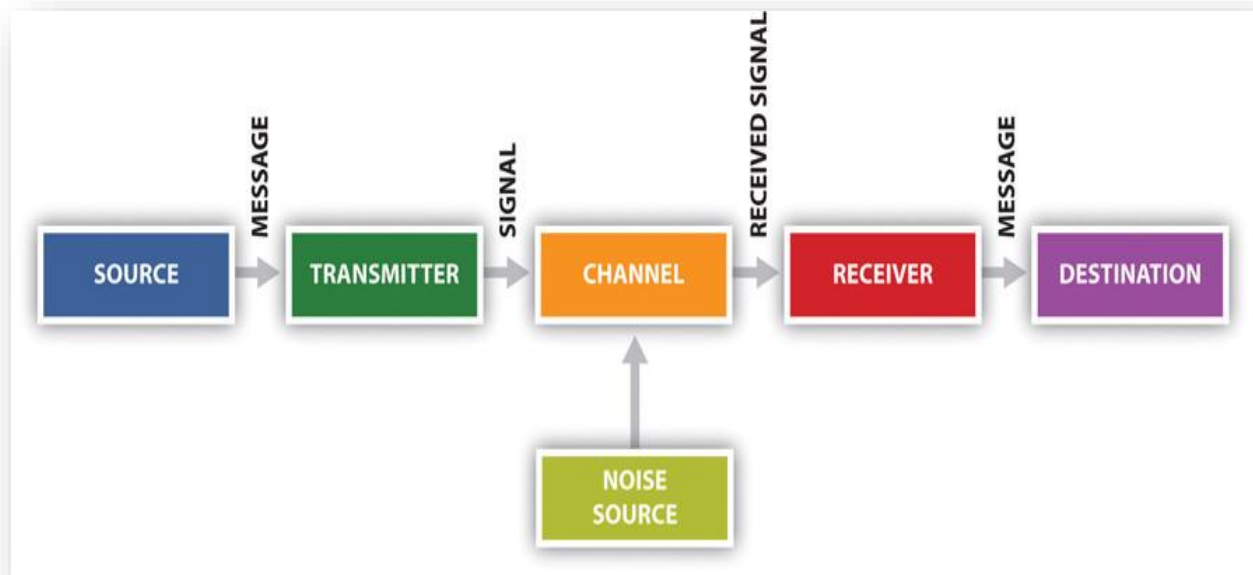
The linear model is discussed in the next section representing a communication system which does not involve feedback from the receiver.

2.2.2.3 The Linear Model of Communication

Ouwensloot and Duncan (2008: 8) are of the opinion that in linear model of communication, the sender's purpose is to make the receiver decode the information. The information may contain information concerning an organization, for example, new market offerings, products attributes and service offerings. Linear

model, communication is regarded as one-way process where sender is the only one who sends message and receiver does not provide feedback. The message signal is encoded and transmitted through channel in presence of noise. Linear model is applied in mass communication such as television and radio (Mihart 2012: 977).

Figure 2.3: Linear Model of Communication



Source: Ouwersloot and Duncan (2008: 8)

The linear model defines communication as a one-way process. Medical insurance marketers can use the linear model to create awareness for the medical insurance. However, in this study feedback is also very important for it to be possible to assess the effectiveness of promotional tool. Kotler (2014: 431) supports that after practicing the promotional plan, effectiveness must be measured through asking whether consumers recognize the communicated message.

According to Deephouse (2000: 17) having discussed the basic ideas of what communication is about and the communication models, it is imperative now to mention the features of an effective communication system. According to Ndubisi and Moi (2008: 32) these features are:

- Starting point- an individual or a company encoding the message;
- Encoding- changing the planned message into a figurative way that can be shared into a mutual meaning to both the sender and the receiver;
- Signal- the transmission of message using a certain channel or media;
- Decoding- accepting the figurative style of the piece of information in order to comprehend the message;
- Recipient- the person or the firm to decode the meaning from the sent piece of information;
- Feedback- the decoder's communication back to the encoder in response to the message; and
- Noise- barrier to the communication process, which results in the message being incorrectly, decoded by the receiver, hence wrong interpretation of the message (Chu, Shyr and Zhong 2015).

Types of communication are discussed below.

2.2.2 TYPES OF COMMUNICATION

Communication being a wide field has created the reasons for it to be classified into different typologies. These types vary in organizational usages in sending messages to the intended target audience (McQuail and Windahl 2015). Many scholars have made claims for these types, for instance, Kotler, Keller, Ancarani and Costabile (2014: 274) recognize different types of communication channels such as individual and non-individual communication systems. Individual communication channel consists of two or more people exchanging messages directly, individual to listeners, either over the phone or using email. Individual channels are effective through the ability to individualize communication presentations and feedbacks.

Kotler (2001: 276) states that non-personal communication channels involve medium atmospheres and processes. The media includes the print media (pamphlets, catalogues), transmission media (radio, television), electronic media, social networks, videotape, CD ROM, DVD, web pages), and display media such as billboards, signs, posters. Atmospheres are “packaged environments” that strengthen the customer towards buying the product (Malhotra and Wells 2010: 512). Events are occurrences intended to communicate certain information to targeted markets and create customer awareness. Types of media are discussed in the following section.

- Print media

According to Kotler and Armstrong (2010: 435) print media is one of the oldest and basic forms of mass communication. It includes newspapers, weekly, magazines, monthly and other forms of printed journals. A basic understanding of the print media is essential in the study of mass communication. The contribution of print media in providing information and transfer of knowledge is remarkable. Even after the advent of electronic media, the print media has not lost its charm or relevance. Okyere, Agyapong and Nyaku (2011: 50) state that print media has the advantage of making a longer impact on the minds of the reader, with more in-depth reporting and analysis. It is a mass type of communication, which is used to target a lot of people. This form of communication is cheap and it includes the use of newspapers, magazines, books and any other form of typed communication (Haans and Gijsbrechts 2011: 430). In South Africa, print media has a great coverage because most people buy newspapers and magazines and they get information on products or services which companies are using. However, when using this form, organizations have to be appealing so that they attract a lot of people to read their advertisement.

- Electronic media

It started with the invention of the radio. This media uses channels like radio, movies, television, audio and video records.

- Transmission media

Transmission media is the media that is used to convey information and can be classified into guided and unguided. The guided media provides a physical path while unguided media uses an antenna for transmitting using air, water or vacuum (Ndubisi and Moi 2008: 28); and

- Social media

Kotler and Keller (2012: 568) believe that social media is a platform where consumers share texts, images, videos and audio information among themselves and with organizations. Social media is an internet based applications that carry consumer-generated content which encompasses media impressions created by consumers. Social media has made it possible for many people to communicate about products and companies which provide them. The authors state that social media is a hybrid element of the promotional mix because it allows companies to communicate to their customers and it also enables customers to talk directly to one another.

Social media encompasses a wide range of online word of mouth forums which include blogs, discussions sponsored by companies, emails and social networking websites. Social media can be divide into three main platforms which are bloggers, social networks and online communities and forums (Bahuna and Sikroria 2012: 1599).

Blogs refers to the continuously updated online journals. Blogs are designed to reach only family and friends and some to reach and influence a vast audience. Blogs brings together people with the same interests (Madondo 2016: 84). This is done through platforms like blogs and facebook. It enables customers to talk to one another and to talk to other companies. However, the problem is that companies have no control over what customers say, so that it benefits the organization. Customers feel comfortable with products when they are able to provide feedback about the product.

The two types of communication channels identified above can be used in the promotional mix of different firms in a bid to bring awareness in the mind of a customer. The next section will discuss the importance of communication.

2.2.3 Importance of communication

The role of communication in the development process has long been recognized. Armstrong and Kotler (2014: 431) state that effective communication with various stakeholders within and outside an organization is a key factor for organizational success. It is a fact that specialized knowledge is not enough to guarantee success and communication skills are also vital. Research, spanning several decades, has consistently ranked communication skills as crucial for managers (Holcombe 2009: 223).

According to McDaniel, Lamb and Hair (2012:438) communication is an exchange of words and meanings, a two-way process of sending and receiving messages. It is the process by which two or more people exchange ideas, facts, feelings or impressions in a way that each gains a common understanding of the message. Communication allows a two-way process where the message sent by the sender should be interpreted in the same terms by the recipient (Irem, Sabri, Amjad 2015: 3). Effective communication is a part and parcel of any successful organization. Communication should be free from barriers so as to be effective (Redmond 2010: 147). The next section covers the effectiveness of communication.

2.2.4 Effective communication

Lonial and Raju (2015: 150) state that effective communication occurs when there is shared meaning. The message that is sent is the same message that is received. There must be a mutual understanding between the sender and the receiver for the transmission of ideas or information to be successful. According to Dahlen Lange and Smith (2010: 62) effective communication may be defined as:

- Using language that is appropriate to others' levels of understanding;
- Making sure others receive the information or knowledge intended; and
- Developing relationships with others.

The major marketing strategies can be employed from two perspectives namely: promotional tools and integrated marketing communication. Promotional tools are evaluated in the next section

2.3 PROMOTIONAL TOOLS

Thorson and Moore (2013: 271) opine that promotional tools focus on the ways in which an organizations use in notifying, convincing and reminding customers of its products and brands. Promotional tools represent the company's "voice" and its brands adds to the introduction of a channel of communication and create long-term customer relationships. There are different promotional tools used by many firms to expand and advance their communication processes and patterns.

Shimp (2010: 117) acknowledges that promotional tools stand for the compilation of all basics in a product's marketing mix which smoothens the development of exchange by formulating mutual meaning with customers. In addition, the meaning suggests that promotional tools can either be purposeful, referring to advertising and personal selling or not purposeful as when a product attributes something to customers that the sales representative may not have predicted earlier. In submission, promotional tool communication is arguably the process of passing on information to a target market to create proposed awareness most especially in an organization. Promotional tools are used to communicate different messages to the consumers (Mughal, Mehmood and Ahmad 2014). Hence, the lack of proper promotional tools can result in the decline of awareness.

According to Klink and Athaide (2014: 110) promotional tools include advertising, personal selling, sales promotions, public relations and direct marketing elements. An organization implements a promotional mix to follow its promotional tool objectives. Ebitu (2010: 129) supports that promotional mix includes various promotional tools, for example, advertising, personal selling, sales promotion and publicity which are united together to achieve the marketing purpose. Armstrong and Kotler (2014: 431) supports

that the marketing purpose includes identifying consumers' needs as well as creating customer awareness, meeting and fulfilling customer needs, profitably. Functions of promotional tools are discussed in the next section.

2.3.1 Functions of promotional tools

Schoenbachler and Gordon (2002: 77) state that the re-assurance or comfort element of promotional tools is of vital to an organization, as it helps creating customer awareness and retaining current customers. Re-assurance of promotional tools is considered to be cost effective as compared to a constant strive to attract potential clients.

Holcombe (2009: 223) is of the opinion that promotional tools can be used to differentiate competing brands with a slight difference. The image produced through promotional tools separate one brand from another, and gives the preferred brand more credit as customers prefer the brands they are aware of. Fill (2011: 3) suggests that these promotional tools are used in what he formulates in the acronym "DRIP" to mean:

- Differentiate market offerings;
- Remind and restore confidence to active and probable consumers;
- Notify consumers; and
- Influence the target market to think or perform in a certain way.

Holcombe (2009: 223) cautions that communication from one organization or offering will hold attention to the extent that the competitor organizations are temporarily put aside in the mind of the receiver. For company managers to achieve effective communication with the customers there are certain tasks that they must perform which are described in the following section.

2.3.2 Promotional mix responsibilities

Ouwersloot and Duncan (2008 21) suggest that the management's main task is to decide on the following:

- Who should get the message?
- What should the message say?
- How much is to be spent?
- How the messages are to be delivered?
- How to monitor the whole procedure once started?

Linking to this study the marketers should target the international students, create a customized message for the students, budget on how much is to be invested to the promotional program, decide on the effective channels to deliver the message and how to monitor the process. Adding to the above mentioned tasks, there are effective promotional programs that need to be developed and the management need not just choose a promotional program to use but there are steps that are involved in developing these programs. Indeed, the purpose is to ensure that right consumers receive the right information using the right medium at the correct place and proper time. The next section explains the steps to follow when developing an effective promotional program.

2.3.3 Steps in developing effective promotional mix programs

From Kotler *et al.* (2014: 272) perspective there are eight procedures to follow in formulating an effective marketing communication programs which are:

2.3.3.1 Identify the aimed audience

The first procedure is to recognize an unambiguous target audience, thus probable customers of the firm's market offerings, present users, decision maker, persuaders, individual or groups, exacting community. The target market refers to a significant influence on the communicator's choices on what to say, how to explain it, when to state it, where to pronounce it and to whom to utter it so as to formulate the needed customer knowledge and understanding about the product.

2.3.3.2 Shaping the communication objectives and goals

Discovering the target consumers and their expectations, the marketing conversationalist can make a decision on the required feedback, search for a cognitive, emotional or behavioral reaction. That is, the salesperson might decide to derive a specific message into the consumer's mind, transform consumers' attitude towards the brand or get consumers to perform the desired act.

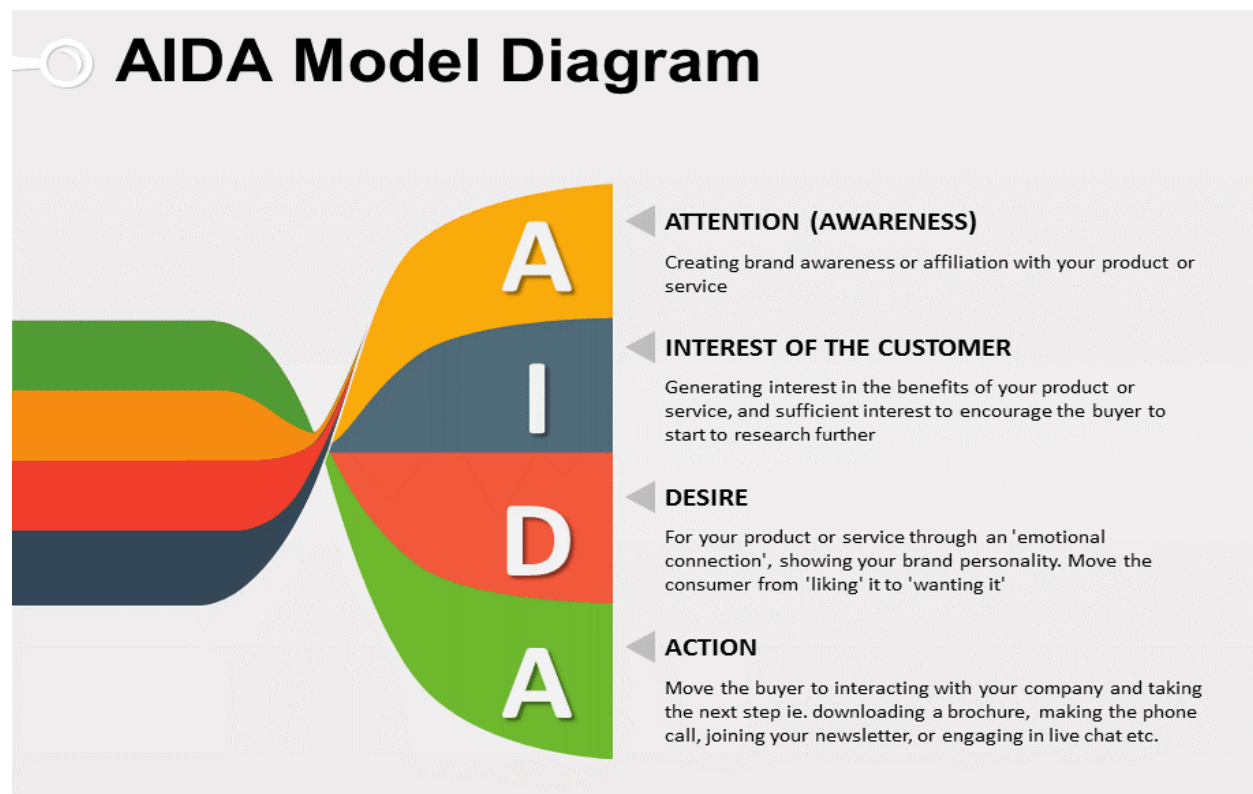
2.3.3.3 Designing the message

The conversationalist shifts to formulate a successful piece of information. Preferably the message should draw concentration, cleave to interest, stimulate desire and bring forth action, AIDA Model (see Figure 2.4). **AIDA** stands for attention, interest, desire, and action. It is an acronym used in marketing and advertising, which helps marketing managers develop effective communication strategies and communicate with customers in a way that better responds to their needs and desires. According to McDaniel, Lamb and Hair (2012:438) AIDA concept refers to a model that explains the procedure of achieving promotional goals in terms of stages of consumer involvement with the message. AIDA is an acronymy which stands for attention, interest, desire and action (Kotler and Keller 2012: 503).

- Attention is the first stage of the AIDA process. The marketer should create awareness and gain the market attention. The consumers should be aware of the products existence. TV advertising can be very helpful in creating awareness of a new product;
- The second stage is to stimulate interest in the product. Promotional tools such as personal selling which can display more information about the product attributes should be used;
- Desire creation represent the third stage of the AIDA model. At this stage the marketers have to convince prospects that the product is the best solution to meet their desire; and
- Action is a stage where the marketers have to motivate the customers to take action of purchasing the product. Medical insurance marketers should consider the AIDA model in promoting their products.

However, an after purchase stage should also be added after the action stage for feedback and customer long-term relationships. Furthermore, the AIDA concept does not explain the influence of promotional tools towards purchase decisions. The model is only limited to the measurement of promotional effectiveness in terms of consumers progressing from one stage to the next stage. To sum up the model helps marketers to select a promotional strategy.

Figure 2.4: AIDA Model



Source: Rawal (2013: 38)

2.3.3.4 Selecting communication channels

Efficient communication channels must be chosen when the message has been designed to convey it to the consumer. For instance, a service sales-force can hardly rest for minutes above ten on personal selling from a busy service provider. Journals, telephone, or conferences can be used.

2.3.3.5 Establishing promotional budget

Okyere, Agyapong and Nyarku (2011: 50) state that a promotional budget is created to anticipate the essential costs associated with promoting a product. Organizations decide

on the promotion budget using the following methods (Valos, Habibi, Casidy, Driesener and Maplestone 2016: 21):

- Affordable process – the promotion budget is formulated basing on the firm's affordability;
- Percentage of sales process – promotion expenditures are set basing on a particular percentage of the firm's sales (either present or expected) or sales value;
- Competitive parity process – firm's position their promotion financial plan to attain share-of-choice uniformity with other competitors; and
- Objective and task process – promotion budgets are formulated basing on the specified objectives and duties to be performed to obtain.

2.3.3.6 Formulating and supervision of the promotional mix

After the promotional budget is established, the firms must decide on how to distribute the budgeted resources over the five promotional tools such as advertising, sales promotions, public relations, personal selling and direct marketing (Soba and Aydin 2013: 111).

2.3.3.7 Assessing results

After practicing the promotional plan, effectiveness must be measured through asking whether consumers recognize the communicated message (Thorson and Moore 2013: 3). If the customers receive and understood the message communicated, thus promotional tool effectiveness.

2.3.3.8 Managing the (IMCs) process.

Given the division of collection markets into sub markets, the creation of new forms of media and the rising complexity of customers, firms should make use of a variety of the communication tools. To do this most efficient and effectively, firms should embrace integrated marketing communications. Promotional mix is discussed in the following section (Deephouse 2000: 1092).

2.3.4 Promotional Mix

A blended mix of promotional tools as illustrated in Figure 2.5 can be used by organizations to communicate their message to the intended audience and create customer awareness.

Figure 2.5: Blended mix of promotion tools



Source: Amstong and Kotler (2014: 431)

Having discussed the responsibilities expected from marketing managers in the previous section before they choose a promotional tool to use for customers' awareness, the following section take a look into each of the promotional tools that an organization can use in enhancing customer awareness.

2.3.4.1 Advertising

Jahdi and Acikdilli (2009: 8) state that advertising is a paid-for-media (television, press, radio, cinema, outdoor) used by marketers to communicate with a desired target audience. In a similar view, Christensen and Cornelissen (2010: 182) advocate that

advertising is a form of gaining the public's attention through paid media announcements. Irem, Sabri, Amjad (2015: 3) resonate that advertising is a non-personal type of crowd announcement. The elasticity of the advertising tool is excellent as it can be implemented to formulate the message for a national segment or certain specialized market segment. Kotler *et al.* (2014: 40) define advertising as any form of undirected arrangement and promotion of market offerings by a recognized sponsor. Advertising includes specific tools, for instance print, electronic, broadcasting, and outdoor. An advertising media should be selected, that can be used to reach the targeted market.

Armstrong and Kotler (2014: 421) list the following steps are important in selecting the best advertising media that can reach the customers and alert them of the firm's products and service offerings. The main steps in choosing an appropriate media for advertisements are.

- Decide on the reach coverage, occurrence, and impact

Coverage, frequency must be decided on first before choosing the media to achieve the advertising objectives. Armstrong and Kotler (2014: 459) define reach or coverage as the percentage of population exposed to the advert campaign at a particular time. This then leads to the notion of occurrence which means numerous times an individual is exposed to the advertisement. Shimp (2010: 35) states that media effect refers to the non-quantifiable worth of advert publicity through provided medium.

- Selecting among the main media

Frequency and impact of each main media type should be known by the media planner. The main forms of media include newspapers, television, direct mail, radio, magazines, outdoor and online media. The media behavior of aimed customers will impact media selection hence advertisers should look for that coverage of the target customers effectively. Dissimilar types of messages may require dissimilar types of media. Newspapers, TV and radio are used to deliver the message that needs immediate attention. Magazines and direct mailing are used for large contents of data (Ndubisi and Moi 2006: 29).

- Choosing particular media vehicles

The media organizer must then select the main media programme in each one of media types. The media organizer also considers the cost of creating an advert on the media vehicle. In choosing the media the media organizer should equalize media charges measures against various media effects.

- Deciding on the media timing.

The advertiser should make a decision on how to programme the advertisement over the whole the year. The firm's advertising campaigns can be in line with the seasonal patterns or in opposition to the seasonal patterns or to be the identical all year. Once the advertiser finishes the above mentioned procedures included in choosing the advertising media, hence, the firm may proceed with advertising. Advantages of advertising are listed in the next section.

2.3.4.1.1 Advantages of advertising

Kotler and Keller (2012: 513) assert that advantages of advertising are difficult to generalize because of the various forms and uses of advertising, yet the following observations are worthwhile:

- Advertising allows the marketer to repeat a message many times which will lead to comprehensive customer awareness;
- It also permits the buyer to receive and compare the messages of competitors;
- Advertising permit amplified expressiveness as it allows dramatization of the organization's products through the creative use of sound, print and color;
- Advertising can also construct and maintain consumer awareness of a market offering or organization thus can develop awareness and good image for a market offering. According to Soba and Aydin (2013: 111) advertising can create awareness of a new product to almost three quarters of the targeted market and half of the target market convinced;

- Advertising can persuade consumers, notifying them of the availability of a brand, or on the other hand by influencing or helping them to distinguish a product or firm from competitors in the market (Park; Park; Jang and Jang 2016: 786);
- Advertising can build competitive advantage by communication appropriate for the target market to structure a product (Batabyal and Beladi 2016);
- Advertising can reach a great coverage of many people with straight forward messages that provide opportunities to let receivers to understand and be alert of the product or service offering (Coleman, Jain and Whitbourne 2015);
- Advertising covers many of physically dispersed consumers incurring little cost for an advertisement.
- Huge scale advertising provides positivity on the firm's size, reputation and accomplishment. Consumers can perform the company's products through the artful use of visuals, print, sound and colour; and
- Advertising can activate rapid sales when consumers obtain the information or acceptance of what is taking place within the advertising company.

TV advertising provides only one-way communication without feedback from the audience. While a few advertising forms, for instance newspaper and radio can be operated on lesser budgets, network TV advertising requires very large budgets. However, despite the fact that advertising reaches a great coverage quickly, it is impersonal and cannot be directly influential like personal selling. Many service providers prefer personal selling to advertising because it allows a two-way communication with the customers. The next section discusses personal selling.

2.3.4.2 Personal Selling

Fill (2011: 278) states that personal selling is a one-on-one messaging tool which includes individual interaction of the sales team with the customers to inform, influence and reminding the customers about the firm's product. Personal selling provides face to face interaction which allows the sales team to get feedback and assurance of the customers'

understanding. This view is also supported by Christensen and Cornelissen (2010: 182), who see personal selling as the method by which a seller communicates with a customer or potential customers to convince them the aim of creating sales. Armstrong and Kotler (2014: 484) agree that personal selling as individual presentation by the company's sales team with the aim of producing more sales and long term customer relationships.

Personal selling involves sales presentation, trade show and inducement programs. It is paramount to add that personal selling includes individual communication between two or more individuals, so each can detect the other's wants, features and create quick decisions. Kotler and Keller (2012: 409) affirm that personal selling is the most effective tool particularly in creating buyer's awareness, tastes, conviction and activities. Fandos Roig, García and Moliner Tena (2009: 55) in a similar idea highlight that in personal selling, the consumer usually feels a bigger need to pay more attention, listen and act in response. Different organizations have got diverse sales force set ups and sales force types. Organizations' sales team structures are brought about reaching customers in different geographical areas and assure that the consumers are alert of the organization's market offerings. Medical insurance organizations practice personal selling as a promotional tool to create awareness. This research assesses the effectiveness of personal selling as part of the promotional mix in creating awareness for medical insurance organizations. Sales force structure is discussed in the following section.

2.3.4.2.1 Sales force structure

Piercy, Cravens and Lane (2009: 178) identify the following sale force structures;

- Territorial sales force: Each sales-person is assigned to a selected geographical area and sells the firm's full line market offerings to all consumers in that territory; and
- Product sales force: Product sales force refers to the people who know their products particularly when the products are many and difficult, and they are assigned to sell along product lines. Furthermore, there are two types of sales

force which are outside sales force and inside sales force (McGaham 2011: 1). Outside sales forces (OSF's) are also identified as field sales force. OSF's travel to call on customers. Inside sales people (ISF's) conduct business operating from their offices. ISF's receive visits from their prospective customers or they conduct business via the telephone or emails. It is apparent that personal selling extensively makes use of spoken word during the face to face interaction between the sales-person and the consumers.

2.3.4.3 Sales Promotions

Haans and Gijsbrechts (2011: 428) refer to sales promotions as short-term incentives to promote the purchase or sale of a market offering. Sales promotions involve a wide variety of tools which involves point of purchase displays, premiums, discounts, area of expertise advertising and demonstrations. If a market offering is created in a market, the main objective is therefore to enlarge utilization for recognized products to motivate trial by persuading new customers to use the product. Adjagbodjou (2015: 301) supports that sales promotions are done to add monetary value to a market offering in-order to achieve particular sales marketing objectives.

Through sales promotions, a firm can get a trial from first adopters or non-users. Sales promotions attracts customers' attention, provides powerful incentives to purchase, to illustrate product offers and to boost sagging sales. Sales promotions, compared to advertising, invites and rewards a quicker response whereas advertising says, "buy our product", and sales promotion says "buy it now." (Huang, Chang, Yeh, Liao 2014: 1066). Medical insurance organizations can use sales promotions to create awareness and motivate the students to buy by giving free branded gifts.

2.3.4.4 Direct Marketing

According to Wang, Wu and Yuan (2009: 4), direct marketing is an interactive method of marketing which utilizes one or more advertising medium to root an assessable response and/or transaction. Mamuti (2013: 676) rightly suggest that straight marketing seeks to target individual consumers with the purpose of providing individualized messages. Furthermore, it also creates a correlation with them based on their feedback to direct communications. In many cases, direct response media are offshoots of advertising, for example direct mail magazines inserts television and print advertisements which make use of contact information to give confidence to direct responses. Firms may use direct marketing to ensure a quick flow of information and create instant customer awareness.

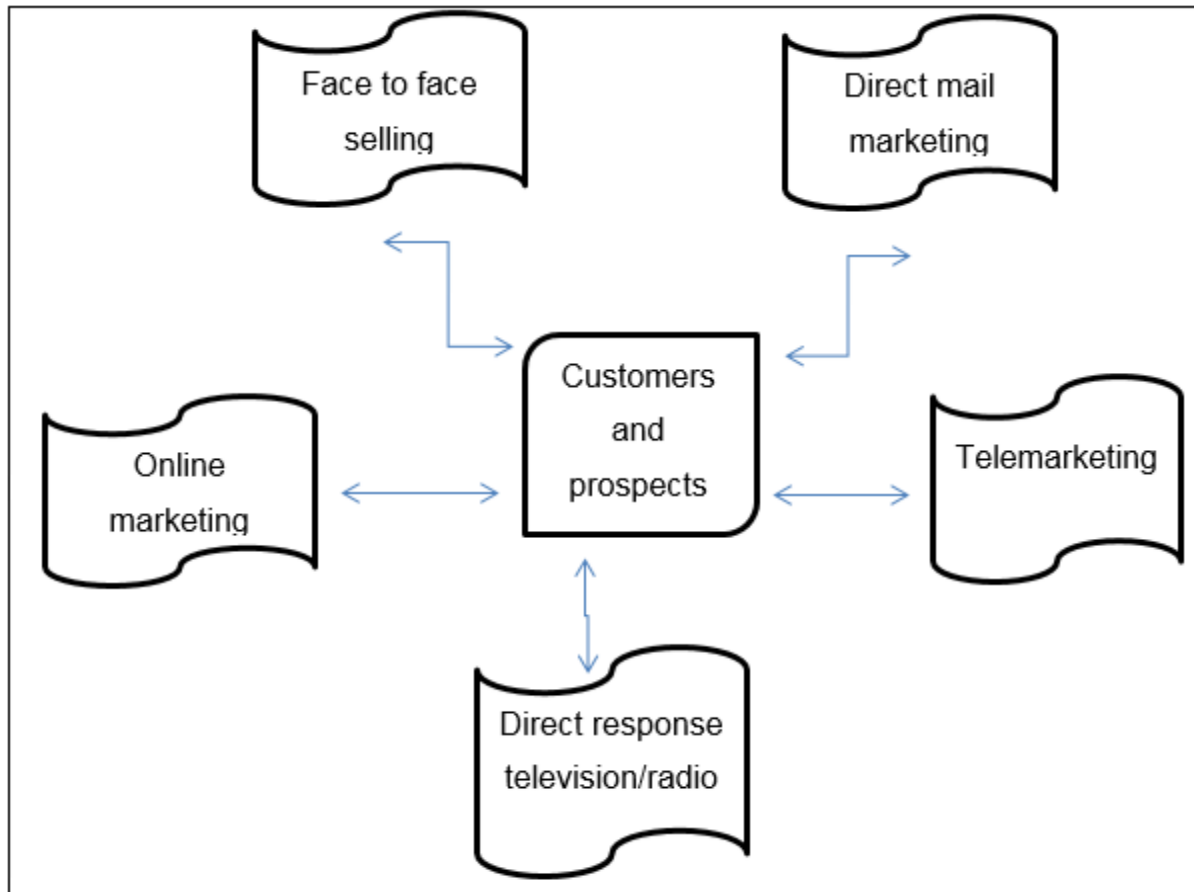
Kotler and Keller (2012: 403) opine that direct marketing refers to direct interactions with cautiously targeted individual customers to acquire an instant response. It includes the use of mail, telephone, fax and email and they are most likely non-public, instant and tailored. Messages can be organized promptly and they can be customized to appeal to specific customers. Furthermore, direct marketing saves time and introduces customers to a greater capacity of immediate awareness. Piercy, Cravens and Lane (2009: 212) suggest that direct marketing can also be timed to get to prospects at just the right time. Direct marketing materials provides privacy and ultimately receive higher readership and response from customers. Medical insurance organizations implement direct marketing to get students buy the medical insurance at just the right time. This study will evaluate the effectiveness of direct marketing in the medical insurance industry. There are various forms of direct marketing that can be utilized to notify customers and to create awareness.

2.3.4.4.1 Forms of direct marketing

According to Okyere, Agyapong and Nyarku (2011: 50) the forms of direct marketing are:

- Online marketing is done through interactive online computer systems which connect customers with the sellers by electronic means (Cravens and Piercy 2006);
- Direct response (television or radio) marketing is obtained from the radio or television. Marketers air radio or television spots after sixty seconds or one hundred and twenty seconds, which influentially explain a product and give consumers a toll free 800 number for responding or ordering (Brinson, Lee and Rountree 2011);
- Telemarketing encompasses using the telephone to sell openly to customers.
- Outbound telephone marketing is when the salesperson uses telephone to sell directly to consumers. Inbound toll free 800 is used to receive orders from
- customer obtained from T.V and radio ads (Armstrong and Kotler 2014: 521);
- Direct mail marketing includes distributing an offer broadcast, reminder or other item to an individual at a certain address, fax mail or email. For instance, the dut4life email is used to send announcements, reminders and job opportunities to all Durban University of Technology students; and
- Face to face selling is when there is direct contact with the customers and it is interactive.

Figure 2.6: Forms of direct marketing



Source: Armstrong and Kotler (2014: 521)

Organizations can employ the above mentioned forms of direct marketing as communication strategies that brings up inclusive customer awareness concerning the organization's product and services in the market. Comprehensive customer awareness can also be created when companies use database marketing (Tsiotsou, Ratten and Sigala 2010: 67) . The other promotional tool that organizations can use is public relations. Publicity is explained in the next section.

2.3.4.5 Public Relations (PR)

Jakovljevic *et al.* (2015: 112) assert that public relations consist of all types of intended communications between any firm and its publics with the objective of creating and maintaining shared understanding. According to Shimp (2010: 110) public relations is a management function that provides visibility for an organization and thus allows it to be properly identified, positioned and understood by all its targets. Khan and Khan (2012: 42) suggest that public relations is efficient in formulating brand alertness and knowledge thus brand seeding. Ignorance of the company may mean that the public is unaware of the company products or brand and this implies that they need to be made aware.

Public relations also help to resolve any negative myths surrounding the causes of customer attrition. The responsibility of public relations is to create and influence publicity in such a way that it has a positive impact on the company. The other functions of public relations are to eradicate misconceptions, incomprehension. Armstrong & Kotler (2014: 472) rightly suggest that public relations includes creating favorable relations with the firm's environment through obtaining goodwill, creating favorable corporate image and spreading good news, stories and events. According to Fill (2011: 250), public relations practice is the designed and continued effort to create and sustain goodwill and shared understanding between a firm and the public. Public relations provide some premeditated cues which allow stakeholders to build up images, tastes and preferences by which they appreciate and be familiar with organization.

Chikweche and Fletcher (2012: 528) explain that new stories, characteristics and proceedings seem more real and credible to read than advertisements do. Public relations can reach many potential customers who shun salespeople and advertisements. The communication reaches the customers as "news" rather than as sales-directed information. A well-thought-out public relations campaign used with other promotion-mix elements can be very effectual and reasonably priced (Shimp 2010: 112). Medical insurance companies can practice events sponsorships as a form of public relations.

Public relations can have a strong effect on creating public awareness and there are many public relations tools that are generally used by firms.

2.3.4.5.1 Public relations tools

According to Armstrong and Kotler (2014: 483) the major public relations tools are as follows:

- News is one of the major public relations tools. Public relations individuals' need to find or formulate constructive news about their organization and its market offerings so that positive news can be heralded about a certain brand, product or service in the marketplace (Armstrong & Kotler 2009: 409);
- Speeches can also build product and firm's publicity. Sales' representatives may give speeches at trade relations or sales meeting. Customers will be able to understand firm's products and this assists in creating awareness within the customers (Koehn *et al.* 2005: 154);
- Special Events is one of the public relations tools. Starting from news conference, press tour, grand opening and multi-media presentations. When special events occur, customers may be alerted to the firm's offerings during or after the special events occur. For instance, medical insurance companies should take advantage of sponsoring all international students' events (international students' sports day);
- Public relations individuals also organize printed materials to get to and persuade their target population. These materials consist of annual reports, brochures, articles, and company newsletters and magazines. Customers gain awareness and understanding of important information through reading written material (Turk 2000: 20);
- Audio visual materials such as films, slide and sound programs and video/audiocassettes which may contain relevant information about products and services can be given to customers to view, thereby bringing about awareness to them (Ameen 2015: 456);

- Corporate identity materials can facilitate the creation of a corporate identity that familiarizes the consumer with the product and raise awareness of the corporate. Logos, brochures, signs, business cards, buildings, uniforms and company cars all become marketing tools when they are attractive, distinctive and memorable (Vardeman-Winter and Place 2015: 345); and
- Organizations can progress public goodwill by appealing into sponsorship, thus contributing funds and time to public service performance. The image and identity of an organization is, increasingly, recognized as a vital dimension of its commercial wellbeing. Sponsorship requires organizations to contribute to the local community with a vision of participating and caring for the community and the environment. Sponsorship creates awareness, builds up consumer loyalty and progress the perception (image) of the brand or organization in the consumer's mind (Smith and Zook 2011: 343).

The above mentioned public relations tools help firms to enhance customer loyalty. In the next section the functions of public relations are explained.

2.3.4.5.1 The functions of Public Relations

Public relations fulfill a variety of functions. Nastasia (2010: 57) identifies some important aspects which include:

- Press relations refers to the formulation and introduction of newsworthy information in the news media to create a center of attention to market offering;
- Product publicity thus publicizing particular market offerings; and
- Public affairs thus constructing and maintaining nationalized or local community affairs that provide favorable publicity considering a firm's name, brand, market offering.

It is then evident that the five promotional tools which are advertising, personal selling, sales promotions, direct marketing and public relation are the means by which

organizations communicate with their target audiences and ensure that customer are aware of the intended information concerning a brand name, products and services. Medical insurance companies can use public relations to create awareness to students through introduction of newsworthy information using public relations tools. In addition to all the above promotional tools a marketing mix is discussed in the next section.

2.4 COMMUNICATION THROUGH THE MARKETING MIX

According to Constantinides (2006: 1400), each element of the marketing mix (the 4Ps) has a variable capacity to communicate to customers and create customer awareness. This section will discuss the four elements of the marketing mix.

2.4.1 Product.

McDaniel and Gates (2010: 47) define product as the heart of the marketing mix, because knowing the product helps the organization to design the strategies for price, place and promotion. A product can be tangible or a service, but also quality, design, features, brand name, packaging, sizes, warranties and value. Medical insurance companies offer health services to the students. Quality of service, benefits and limitations of the packages are very crucial to the student when it comes to medical insurance.

Sriram, Chintagunta and Neelamegham (2006: 21) refer to product as the ability to suit and meet a variety of conscious and unconscious consumer wants and needs. The marketing communication task is to ensure that the product perception of the offering or of an organization is the desired one. Wang, Wu and Yuan (2009: 35) are of the opinion that a product which has been sampled previously but has fallen short of expectations will hold a negative attitude or perception.

2.4.2 Pricing

Kotler and Keller (2012: 47) define price as to what the customer must provide to get the product in exchange. Price strategies also include list price, discounts, allowances, payment period for the student medical insurance packages. For instance, some medical insurance of payment plans of three months, and a student will have to pay quarterly, thus four months' payment plan. This helps to accommodate all students and it increases affordability. The pricing strategy need to be reflected in the communications undertaken by the organizations. Customers need to be aware of the price of a product, benefit awards and product attributes in monetary value so that when they purchase the products they really know the products worthiness they are buying.

2.4.3 Place

Place refers to the distribution and strategies involved in making the products accessible when and where customers need them (Idris, Asokere, Ajemunigbohun, Oreshile and Olutade 2012: 68). Failure to buy or consume services damages the creditability of the product. Unavailability of the product at the right place at the right time gives competitors a great opportunity to take the initiative in the newly identified and exposed market. Constantinide (2006: 1400) insurance companies need to create awareness on when and where customers can enjoy the services on offer. Reliability and consistence in delivering services is also paramount.

According to Idris *et al.* (2012: 68), the use of intermediaries to make available products and services to members of the target market is essential to the success of the business. If customers are unable to buy or consume the services, then the credibility of the product is damaged and competitors are given a window of opportunity to take the initiative in the newly identified and exposed market. Customers are therefore required to be informed of where the products are found and or where they can enjoy the services on offer.

2.4.4 Promotion

Ndubisi and Moi (2008: 34) state that a firm's products need to be promoted so that the customers are aware of the product. Products can be promoted through the use of promotional tools, branding as well as packaging. Firms seek to promote their products by intensively positioning the products and services in the customer's minds. Powerful promotional mix can serve to amend or even change totally the perceptual values of an individual brand. A promotional tool has to create favorable images to ensure customer confidence and smooth the progress of spreading the favorable word of mouth communication from belief of formers and leaders.

Research also shows that products that are heavily promoted products are perceived as higher in quality than those that are not advertised or promoted (Smith and Zook 2011: 343). Customers prefer to buy products that are advertised because they are aware of them, particularly if they have been recommended through personal communication as well. Carlos Díaz Casero *et al.* (2013: 1090) state that promotional tools should inform the target market about the prices of the market offerings. This can be undertaken via advertising, personal selling and sales promotion activities, or through in-store merchandising and packaging based on shared information. Medical insurance organizations inform the target market about the payment plans through personal selling.

2.5 CONSUMER DECISION MAKING PROCESS

Mathur, Guiry and Tikoo (2008: 94) review predictions of the future situation and past experiences that plays a big role for the consumers' consumption and product choice. All purchases are preceded by a decision process which makes the most pervasive and influential assumption in the study of consumer behavior (Sadi and Al-Ghazali 2010: 10). Consumer decision making process is made up of five stages which are need recognition, search, alternative evaluation, choice and outcome as shown in the figure below:

- Need Recognition

Need recognition occurs when consumers realize that they are not satisfied and they need a certain product to satisfy that need (Mihart 2012: 122). In addition, for the need to be recognized there should be a significant difference between the current state of the consumers' affairs and the desired state (Solomon, Marshall and Stuart 2009: 158). The promotional tools also play a very important role in every stage of the decision-making process. Appropriate promotion tools should be implemented in a way that they will positively influence each stage of the consumer decision making process;

- Information search

Information search is a stage where the consumer checks his or her memory and conduct an environment survey in search of the available alternatives to solve the problem (Wang 2010: 33). There are many sources of information available to the consumers such as the internet, advertising, print media and referrals. Moreover, the producer of the product can actually provide the information to the consumers if it is attempting to up-sell or cross-sell. Delanaye, El Nahas and Glassock (2015: 24) suggest that at this stage target advertising on television programs with a higher target market viewership to reach a greater coverage is important;

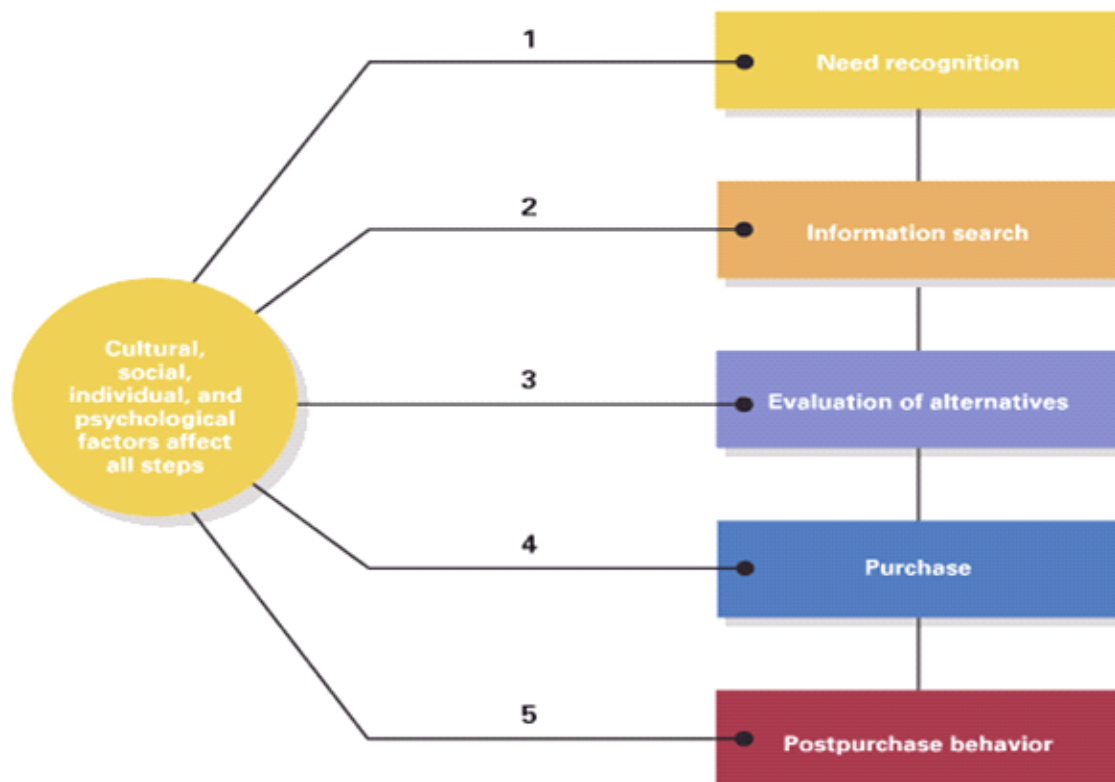
- Evaluation of Alternatives

This is the stage when the customer has identified the available options and from these options the consumer has to decide on a few true contenders. At this stage the consumer has to narrow his or her choices by selecting the best by basing the decision on the features, advantages, benefits and disadvantages (Kim, Ferrin and Rao 2007: 544). Consumers can also use different evaluative criteria such as subjective characteristics which are vital to the consumer (Felcman 2012: 162). Furthermore, the consumer also attaches a certain weight to each criterion. In this stage marketers use product positioning and framing of all the options in the consideration set through different promotional tools. Framing refers to the process of describing the products' attributes in a certain way that makes a characteristic seem more important to consumers (Cunningham *et al.* 2005);

- Purchase

The decision to purchase originates from the evaluation of the available options. For instance, if option one is unavailable automatically the consumer will then purchase the second option. At this stage of purchase many issues about the terms and conditions of purchase are considered, for instance the price, warranty, delivery, forms of purchase. Finally, the consumer does the purchase unless he or she decides to end the buying decision process (Hollensen 2010: 117); and

Figure 2.7: Consumer decision making process



Source: Richard, Olshavsky and Granbois (2008: 94)

- Post Purchase

The post purchase stage deals with evaluating the consumer actual product performance to check if it meets with the expected levels. This stage results in satisfaction or

dissatisfaction which determines whether the consumer is happy to repeat the same purchase in future (Lysonski and Durvasula 2013: 76).

Medical insurance marketers should make information available and accessible to all international students timely through target advertising and sales presentations during orientations. Product positioning should also be implemented effectively to create the best product image in the minds of the students. Moreover, factors considered when purchasing should be considered when packaging the medical insurance. After the purchase stage the marketers should work on loyalty programs to create long-term relationships with the customers.

2.5.1 Factors influencing on consumer decision-making

According to Ivens and Valta (2012: 1091) factors which can influence the consumer decision-making process are:

- Perception

Perception refers to the procedure by which consumers make choices, organize and interpret input from the outside world. Information input refers to all sensations received throughout all the six human senses (Lysonski and Durvasula 2013: 76). Research has shown that perception is a very complicated influence to consumer buying behavior (Grunert and Wills 2007: 43). Consumers derive perceptions from hearing and seeing an advert, smelling an appetizing food from a restaurant, touching and feeling the quality of the product. Furthermore, perception works more on food items that appeal to many senses.

- Roles

According to Felcman (2012: 35) all people have roles in different positions within certain groups. Roles refer to certain actions and responses which are supposed to be delivered by a person at a certain position. Multiple sets of expectations are placed on each person's behavior. Different roles have different demands as well. The type of roles in a person's life determines the need, for example different medical insurance packages are

bought depending on the type of role (mothers prefers medical insurance packages which covers maternity costs when they get pregnant).

- Family influence

Family structures have a direct impact on the consumer decision making process. Solomon *et al.* (2009: 170) state that a family life cycle also affects the consumer buying process to a great extent. Family life cycle refers to the progress a household makes as it proceeds from where it starts to its end. Each stage of family cycle has a different expenditure pattern. For instance, full time students depend on their parents for income and parents also influence students' choice of medical insurance basing on the income they have. In addition, every generation of consumers make purchases forecast over the progress of their lifetime. At the age of twenty-four the consumer expenditure goes up to the age of forty-four when the peak is reached. At the age of forty-seven the consumer expenditure decreases as the children get old enough and leave home hence spending decreases (Sadi and Al-Ghazali 2010: 10). However, consumers can be of the same age but it does not mean that they have the same consumer expenditure;

- Reference groups

Shrivastava *et al.* (2016: 92) state that charity begins at home as all consumers live with, depend on and are supported by friends, colleagues and family members. Understanding consumers and knowing them is very complex. A reference group represents both actual and an imaginary group of people considered as having significant relevance on an individuals' values, aspirations and behaviors. Consumers are influenced by groups that serve as bases of reference in their buying decision process. Sadi and Al-Ghazali (2010: 10) mention that there are three types of reference group influences such as normative influence, value-expressive influence and informative influence. Normative influence refers to a position where a consumer complies with the wishes of others to receive awards or avoid punishment. Informative influence is based only on the burning desire to make informed choices. Value-expressive influence is based only on the belief of the consumer about the psychological association and his or her value in relation to the acceptance of positions expressed by others.

- Culture and values

Culture is an important character of a group of people from other societies. Culture is made up of norms, values, customs, rituals, myths and rules that shape the behavior of people as well as their environment (Sun, Su and Huang 2013: 250). In addition, culture is learnt and culture also determines whether a product is a basic need or not which also affects the consumer buying behavior. Furthermore, culture can also include religion which also affects the consumer buying behavior. Culture also determines whether a product is acceptable or not in the society. However, the type of product determines whether culture can affect the consumer buying behavior to a greater extent or not. For instance, the Zimbabwean culture and law does not allow the wearing of “camouflage” designed clothes as it is only regarded as the national army regalia, hence no market for the products (Hodal Jensen 2016: 45). Medical insurance is quite acceptable in many different cultures; therefore, culture does not affect the consumer buying behavior in this regard. Reference groups affect decision making process of the students in the sense that parents are involved deciding for the children on medical insurance.

2.6 CONCLUSION

This chapter discussed relevant literature on marketing of the medical insurance industry. This review of related literature highlighted a gap in investigating effective and efficient promotional tools for the medical insurance industry. Prior research focused on one or more tools or have studied promotional tools in different industries or specified cases of medical insurance. The promotional mix was also discussed, shedding a light that the effectiveness of a promotional tool also depends on the type of the market offering. Communication was also one of the main concepts discussed. It can be concluded that an effective communication process of an organization is represented by a well and adequately conveyed message. The focus was also on the decision-making process of the consumers selecting the medical insurance. This is important as it helps the medical

insurance companies to understand their target market and tailor their marketing strategies according to the market expectations.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 INTRODUCTION

The previous chapter reviewed literature on related concepts, arguments, developments and results from the insight of different scholars with regards to communication, promotional tools, consumer decision making, awareness, health insurance and perception. This chapter represents the outline of the research methodology implemented in this study. This chapter provides a narrative on the research design, research approach, target population, size of the sample, sampling method, questionnaire design, data collection method, data analysis, reliability and validity implemented in the research project.

The aim of the field work is to gather information on promotional tools used by medical insurance companies at selected universities which are Durban University of technology and University of KwaZulu-Natal. According to Cooper, Schindler and Sun (2003: 6), the research methodology provides the knowledge and skills required to solve problems and meet the challenges represented by the fast-paced decision-making environment. The study focuses on the factors that students consider in their decision-making, information sources used by students and the effectiveness of promotional tools for student recruitment at higher educational institutions.

3.2 RESEARCH OBJECTIVES

Research objectives give direction on what the study will explore and measure. The study assesses the promotional tools used by medical insurance companies on international students.

- The aim of this research is to evaluate the promotional tools used by medical insurance companies on international students.

The objectives of the study include:

- To determine the factors that influence international students' decision-making process when choosing a medical insurance company,
- To determine the influence of promotional tools in creating customer awareness for medical insurance on international students at a university, and
- To identify international students' perceptions towards promotional tools used by medical insurance companies.

3.3 RESEARCH DESIGN

According to Yin (2014: 13), research design gives a logical sequence to a researcher which will in turn create a connection between the aims and objectives, questions of a research to eventually lead to the conclusion. Struwig and Stead (2013: 52) state that a research design refers to a plan of how to recruit and obtain data from participants with the aim of reaching a conclusion on the research problem. In summary, research design refers to a blue print of how researchers intend to conduct the study.

This study is quantitative and cross-sectional in nature. Ijabadeniyi (2014: 62) states that a quantitative research is objective, reliable and quantifiable. Doris, Janssen, Nani, Zaniopoulos and Van der Weide (2011: 1843) are in opinion that quantitative approach provides well-established statistical methods for data analysis and data can be easily summarized to give meaning and facilitate communication of findings. In addition, quantitative method facilitates comparison of data collected from large populations, different settings and different times.

Questionnaire administration is used because it is the most convenient for collecting data from a large number of respondents within a limited time frame. Closed-ended questions are used to obtain adequate information to answer the research questions. The study

has a descriptive focus. According to Karolchik, Kuhn, Baertsch, Barber, Clawson, Diekhans, Giardine, Harte, Hinrichs, and Hsu (2008: 16) there are three types of research designs which are exploratory, descriptive and causal. In descriptive research design statistics is implemented to analyze and interpret collected data and to provide meaning to the variables of a sample. Van Hinsbergen, Lippert, Dupont-Nivet, McQuarrie, Doubrovine, Spakman and Torsvik (2012: 5) view that exploratory research investigates to gain a deep understanding of the research problems and it does not involve statistical analysis. Causal research is done to express the relationships between variables (Malhotra 2010: 250).

3.4 TARGET POPULATION

Target population is basically understood as a total number of all the individuals who have certain characteristics and are of interest to a study (Kalandides and Zenker 2009: 24) . In this study the population refers to all the international students at the Durban University of Technology and the University of KwaZulu-Natal. The attention of the study is directed towards international students at the Durban University of Technology and the University of KwaZulu-Natal. The universities were selected due to convenience and the researcher is also familiar with them.

3.5 SAMPLE SIZE SELECTION

Burns and Bush (2013: 60) refer sample size of a study to be the number of units that are selected from the target population. According to Sekaran and Bougie (2010: 269) a sample size ranging between 30 and 500 is suggested, depending on the nature of the questions the research needs answering. The larger the sample size, the higher the chance of reducing errors and collecting accurate and reliable findings. A sample of 400 international students was selected (200 from the University of KwaZulu- Natal and 200 from the Durban University of Technology), however, a sample size of 384 should be enough to support the research results (Sekaran 2003: 294).

3.6 SAMPLING METHOD

Look *et al.* (2010: 212) support that when a population of interest is distinct, a sample for the study has to be selected. Non- probability sampling is used for this study to select a sample from the international students of DUT and UKZN. Non-probability sampling does not involve random selection; it is rather by convenience, purposive, or self-selection (Carmo *et al.* 2014: 478). In non-probability sampling, a sample is selected in a random manner without following any system (Winn, Ballard, Cowtan, Dodson, Emsley, Evans, Keegan, Krissinel, Leslie and McCoy 2011: 236) Consecutive non-probability sampling is used. Consecutive non-probability sampling technique includes all subjects that are available that makes the sample a better representation of the entire population (Explorable psychological experiments 2014: 1).

3.7 QUESTIONNAIRE DESIGN

Malhotra (2010: 336) supports that the design of questionnaire is critical to ensure that the correct research question is addressed and that accurate and appropriate data for statistical analysis is collected. According to Webb (2002: 89) a questionnaire is designed for four purposes such as to maximize the accuracy and relevancy of information to be obtained; to facilitate the gathering of information; to meet research objectives and to maximize the participation of relevant elements in the sample. Closed-end questions are used in the construction of the questionnaire. The questionnaire is designed in a way that it collects information such as, demographic information and the other factual information from respondents based on the objectives of the study and the problem statement.

The questionnaire consists of likert scale and dichotomous questions. Dichotomous question is used to collect factual information and to obtain a point of view from respondents whereas Likert scale questions were used on questions which needed respondent's perceptual judgment. The Likert scale is a 5-point scale to measure respondents' judgments. The scale ranged from 1 (strongly disagree or not important at

all) to 5 (strongly agree or most important). The structure of the questionnaire was kept simple and easy for the respondents to complete without difficulties. Sismanoglou and Tzimitra-Kalogianni (2011: 171) state that data collection is a two-way procedure which includes selection of the sample from the population and gathering information from the selected. According to Stephen, McBride, Lin, Varela, Pleasance, Simpson, Stebbings, Leroy, Edkins and Mudie (2009: 450) the performance of the procedure should be accurately reflected by the collected data. The questionnaire administration was done at the Durban University of Technology (DUT) and the University of KwaZulu-Natal (UKZN).

The study was conducted amongst international students from the two selected universities using a questionnaire. The letter of information and consent are written in English to accommodate all international students. The questionnaire was self-administered. The questionnaire was explained to the international students. Data was collected at residences and at international students' events.

Adequate pretesting was done to ascertain that the questionnaire was rightly and accurately understood by the selected respondents. This was done to ensure that they answered the research questions and to establish the objectives of the study. According to McDaniel and Gates (2010: 232) pretesting refers to an elimination process that includes a trial run with a group of participants to perfect the survey design. The questionnaire was given to the academics to avoid ambiguity in the questions.

3.8 QUESTIONNAIRE FORMAT

According to Zikmund, Babin, Carr and Griffin (2013: 280) a structured questionnaire is an advocated questionnaire format for self-administrated surveys. The structured questionnaire is used with only closed-ended questions and scaled response questions. The questionnaire has five sections which are biographical data, decision making process, effectiveness of promotional tools, perception on promotional tools, perception on promotional tools used in creating awareness and information source. Bias can easily happen when sampling or collecting data. The researcher tested the questionnaire before

the final data collection. Wording and sequencing of questions were managed to clear all ambiguity and recording errors by questionnaire layout.

The survey questionnaire consists of Section A to Section E. Section A measures the demographics such as age, gender, race and country of origin. Section B measures how the respondents make their decisions when choosing medical insurance. Section C measures the effectiveness of the promotional tools used and section D measures customer perception on promotional tools used in creating awareness. Section E measures how the consumers are getting information before purchasing medical insurance.

Rensis Likert developed the Likert scale which is the common rating format for surveys (Welman and Kruger 2005: 156-157). The Likert scale is the commonly used because it is easy to compile and to understand furthermore it provides integer data which makes ordering and distance measurement possible. Likert scale can also be used for multi-dimensional attitudes. In Likert scales respondents have to show their degree of agreeing and disagreeing to different statements. Respondents can also rank quality from high to lower best to worst using five levels. The statements are used to evaluate whether the respondents believe that the promotional tools being used are effective, Informative, deceptive, adequate, appropriate and to assess the customer decision-making.

3.9 DATA ANALYSIS

The researcher describes and analyses the data gathered based on the responses of the respondents through a quantitative/statistical presentation. The initial stage required a statistician to collate and process the raw data. According to Armstrong and Kotler (2009: 103) descriptive statistics is presented in the form of charts, graphs, frequency tables, means, and standard deviation and cross tabulations. The quantitative analysis was done using the Statistical Package for Social Sciences (SPSS version 24). The analysis and interpretation of data is presented using descriptive statistics.

3.9.1 Descriptive Statistics

Organizing, description and summarizing of quantitative data are described through descriptive statistics (Welman, Kruger and Mitchelle 2009: 231). Zikmund *et al.* (2013: 336) are of the opinion that descriptive statistics express attitudes of customers towards a certain product, and data presentation is done meaningfully. In this study descriptive statistics were computed from the variables in the form of frequencies and percentages. Frequency distribution was used as an economical way of organizing collected data to obtain profile of the sample. The data analysis comprised descriptive statistics and inferential statistics.

3.9.2 Percentages and frequencies

Data was simplified into standard numerical range which made it possible for data comparison through the use of percentages. For instance, data was converted into percentages and presented into bar graphs or pie charts tables. A frequency represents a numerical value which stands for the total number of observations for the variable being investigated in the study (Raggio and Folse 2011: 114).

3.10 VALIDITY AND RELIABILITY

Bonds-Raacke and Raacke (2012: 84) explain validity as the ability of the researcher's measurement instrument to accurately measure what it is supposed to measure. Reliability refers to the productivity of steady results of a measurement under the same circumstances (Leedy and Omrod 2010: 93). These two aspects of a research are inevitable. White and McBurney (2013: 141) state while validity indicates the accuracy in terms of the extent to which a research conclusion corresponds with reality, reliability ensures presenting similar conclusions on different instances. Validity is ensured as the instruments for data collection is strictly aligned to the aims and objectives of the research.

Cronbach's alpha test was used to measure reliability and all the reliability scores for all five sections exceed the recommended Cronbach's alpha value of 0.70.

3.11 ANONYMITY AND CONFIDENTIALITY

Crow and Wiles (2008: 1) opine that anonymity and confidentiality of participants are central to ethical issues in research. They explain the idea as the ability of a researcher to cover the identities of the respondents and to uphold the confidentiality of the data given by participants. As such, it provides the respondent adequate freedom to share information liberally with less or no risks. This research ensured anonymity and confidentiality by not asking for the names of the respondents. As a result, none of the respondent's identities were linked to their responses. This gave the respondents freedom to share their true opinions without fear of being exposed

3.12 ETHICAL CONSIDERATIONS

A research has ethical dimensions that require the researcher to maintain both moral and professional obligations to be guided by ethics even when the participants are unaware of the ethics (Neuman 2011: 33). The researcher was extra careful and sensitive of the responses during the course of data collection or fieldwork. The researcher also ensured truth and honesty and respected the respondents' morals throughout the research process for the purpose of integrity in the research.

The researcher ensured that, the participants were made aware that they were able to withdraw at any time from the research process. The researcher explained the consent form which required the respondent's signature allowing use of the responses for the study. Ethics are there to give guidelines to the researcher in relation to the respondent's rights during the study (Solomon 2004). The researcher followed all moral principles governing human and organizational ethics set by the Durban University of Technology.

3.13 CONCLUSION

This chapter focused on the research methodology used in this study. It explained the necessary research steps, the instrument used to gather data and procedures followed in the administration of the research instrument. The next chapter deals with the data analysis. The chapter analyses and interprets the findings of the study.

CHAPTER FOUR

FINDINGS, INTERPRETATION AND DISCUSSION OF FINDINGS

4.1 INTRODUCTION

This chapter presents the results and the findings obtained from the survey this study undertook. The questionnaire was the primary tool that was used to collect data and was distributed to students at the Durban University of Technology and the University of KwaZulu-Natal. The data collected from the responses was analyzed using SPSS version 24.0. Descriptive statistics is presented in the form of graphs, cross tabulations and other figures for the quantitative data that was collected. Inferential techniques include the use of correlations and chi square test values; which are interpreted using the p-values.

4.2 RESPONSE RATE

A total of four hundred questionnaires were distributed by trained research assistants. Table 4.1 below shows the response rate obtained from the selected tertiary institutions.

Table 4.1: Response Rate

| Institution | Planned sample | Realized sample | Response rate |
|---------------------------------|-----------------------|------------------------|----------------------|
| Durban University of Technology | 200 | 200 | 100 |
| University of KwaZulu-Natal | 200 | 200 | 100 |
| Total | 400 | 400 | 100 |

Table 4.1 shows that the planned sample was fully achieved from both Durban University of Technology and University of KwaZulu-Natal. At both Institutions data was collected at students' residences, international students' events and in lecture rooms.

4.3 THE RESEARCH INSTRUMENT

The research instrument consisted of 36 items, with a level of measurement at a nominal or an ordinal level. The questionnaire was divided into 5 sections which measured various themes as illustrated below:

- A Biographical data
- B Decision Making Process
- C Effectiveness of promotional tools
- D Perception on promotional tools used in creating awareness
- E Information Source

4.4 DESCRIPTIVE DATA

4.4.1 Section A: Biographical Data

This section summarizes the biographical characteristics of the respondents. The biographical dimensions in this study include gender, age, race, country of origin and religion. Biographical data provides an understanding of the respondents' groups. The following tables, graphs and pie charts present the demographic data.

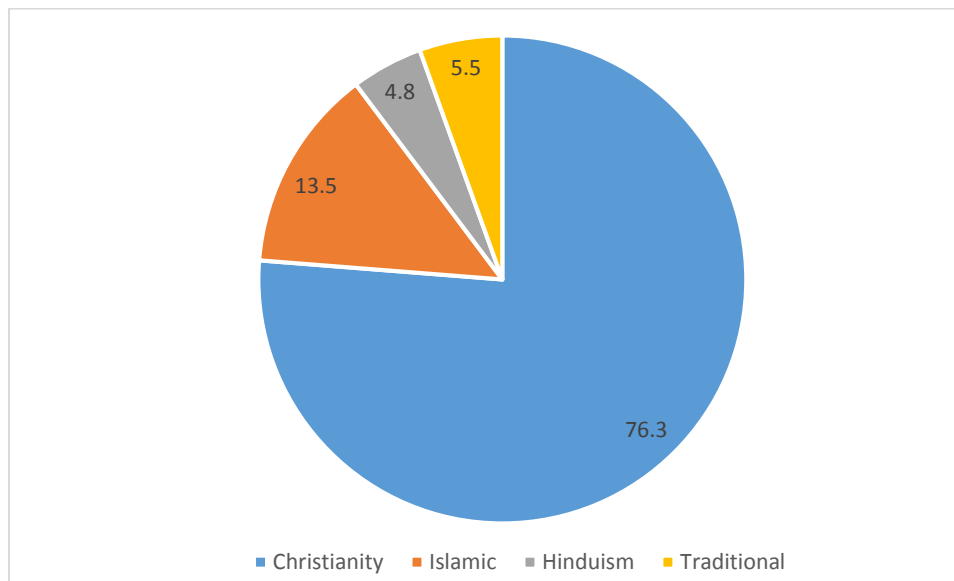
Table 4.2: Age and Gender

| | | | Male | Female | Total |
|----------------------|--------------------|--------------------|--------|--------|--------|
| Age Group (years) | 18-21 | Count | 92 | 40 | 132 |
| | | % within Age Group | 69.7% | 30.3% | 100.0% |
| | | % within Gender | 36.8% | 26.7% | 33.0% |
| | | % of Total | 23.0% | 10.0% | 33.0% |
| | 22-25 | Count | 77 | 49 | 126 |
| | | % within Age Group | 61.1% | 38.9% | 100.0% |
| | | % within Gender | 30.8% | 32.7% | 31.5% |
| | | % of Total | 19.3% | 12.3% | 31.5% |
| | 26-30 | Count | 42 | 36 | 78 |
| | | % within Age Group | 53.8% | 46.2% | 100.0% |
| | | % within Gender | 16.8% | 24.0% | 19.5% |
| | | % of Total | 10.5% | 9.0% | 19.5% |
| | > 30 | Count | 39 | 25 | 64 |
| | | % within Age Group | 60.9% | 39.1% | 100.0% |
| | | % within Gender | 15.6% | 16.7% | 16.0% |
| | | % of Total | 9.8% | 6.3% | 16.0% |
| Total | Count | | 250 | 150 | 400 |
| | % within Age Group | | 62.5% | 37.5% | 100.0% |
| | % within Gender | | 100.0% | 100.0% | 100.0% |
| | % of Total | | 62.5% | 37.5% | 100.0% |

Table 4.2 shows that overall, the ratio of males to females is approximately 3:2 (62.5%: 37.5%). The majority of the respondents were males (62.5%) and 37.5% were females. This shows that the sample was not balanced, however the study done by Redmond (2010) and Wiese (2008) found that some tertiary institutions had more female students (64%) than male student (36%) participants in their respective studies. The largest proportion of respondents (33%) was between the ages of 18 to 21years. This could be expected in terms of the characteristics of the sample frame, which consisted of students from first year of study to postgraduate level of study. Usually there are more students in first to third year of study as compared to fourth year and postgraduate level. In South Africa and many African countries there are very few people who continue to

postgraduate level of studying. Kember, Ho and Leung (2016) share these views and believe that few students continue to postgraduate level because of lack of adequate support on decision making, to take studies further after undergraduate programme. In addition, the authors assert that lower class background of students and responsibilities in the families reduce the participation of students who are first in their families in postgraduate studies.

Figure 4.1: Religion of respondents



Three quarters of the respondents follow Christianity, with similar numbers (5.3%) following Hinduism or cultural beliefs. The remaining 13.5% followed Islam. The results of the study indicate that the majority of the international students practice Christianity. Meyer (2004: 448) affirms that Christianity has spread from traditional churches to African independent churches and then to Pentecostal churches which is causing it to spread and dominate so fast in Africa. The significance of analyzing the religion of the participants to the study was to assess if religion influence the buying behavior on medical insurance. From the above results, it can be concluded that medical services are accepted more in Christianity religion and compared to the other religion.

Table 4.3: Country of origin

| | Frequency | percentage |
|-----------------|-----------|------------|
| <i>Zimbabwe</i> | 137 | 34.3 |
| Uganda | 45 | 11.3 |
| Nigeria | 44 | 11.0 |
| Germany | 43 | 10.8 |
| Botswana | 34 | 8.5 |
| Congo | 28 | 7.0 |
| Swaziland | 23 | 5.8 |
| Namibia | 20 | 5.0 |
| Zambia | 15 | 3.8 |
| India | 3 | 0.8 |
| Sweden | 3 | 0.8 |
| Burundi | 1 | 0.3 |
| Lesotho | 1 | 0.3 |
| Angola | 1 | 0.3 |
| Siera Leone | 1 | 0.3 |
| Mali | 1 | 0.3 |
| Total | 400 | 100.0 |

A third of the respondents (34.3%) were from Zimbabwe followed by Uganda, Nigeria, Germany, Botswana, Congo, Swaziland, Namibia and Zambia with 45%, 44%, 43%, 34%, 28%, 23%, 20% and 15% respectively. In the other countries the respondents are very few as compared to the sample. According to DUT international students Facebook page (2016) the majority of the international students at Durban University of Technology are Zimbabweans. The significance of assessing the country of origin of the international students was to get the information on what made up the international students' population. From the above results it can be concluded that the majority of the international students' population consists of Zimbabweans.

4.5. FACTORS STUDENTS CONSIDER WHEN CHOOSING MEDICAL INSURANCE.

This section deals with the factors that students consider when choosing medical insurance.

Table 4.4: Factors considered in decision making

| | | Of importance | | little Neutral | | Important | |
|---|-----|---------------|---------|----------------|---------|-----------|---------|
| | | Count | Row N % | Count | Row N % | Count | Row N % |
| Price (affordability) | B6 | 20 | 5.0% | 33 | 8.3% | 347 | 86.8% |
| How well known is the medical insurance company | B7 | 23 | 5.8% | 52 | 13.0% | 325 | 81.3% |
| Good image of the medical insurance company (credibility) | B8 | 25 | 6.3% | 54 | 13.5% | 321 | 80.3% |
| Gifts offered when joining. | B9 | 87 | 21.8% | 101 | 25.3% | 212 | 53.0% |
| Benefits and limitations Of medical insurance packages | B10 | 37 | 9.3% | 63 | 15.8% | 300 | 75.0% |
| Quality of service. (customer care) | B11 | 15 | 3.8% | 20 | 5.0% | 365 | 91.3% |
| Availability of adequate information about the services to be provided. | B12 | 25 | 6.3% | 26 | 6.5% | 349 | 87.3% |

The following patterns are observed. Some statements show (significantly) higher levels of importance whilst other levels of agreement are lower (but still greater than levels of importance). There are no statements indicating higher levels of little importance. The significance of the differences is tested and the results are shown in Table 4.4. The respondents regard quality of service as the most important factor they consider when selecting medical insurance. This means the majority of the students consider quality of service when it comes to medical insurance. Availability of adequate information was rated as the second important factor to consider when selecting medical insurance. This shows that medical insurance companies should make use of promotional tools effectively to

create awareness and provide adequate information. Maniatis (2016: 215) supports that quality of service is very important in saving lives in the health care industry, accessibility and affordability are also regarded as important traits for medical care. The respondents also consider the price, that is if the medical insurance package is affordable. Medical insurance has to be affordable as it is a basic need for the students and students are very price sensitive (Muhowa 2014: 1).

The respondents also consider the credibility of the company, that includes the image of the company in customers' minds and how well known is the medical insurance company. Health is crucial and customers need to be sure of the services to be offered. Moreover respondents also consider benefits and limitations of the medical insurance packages when selecting medical insurance. Gifts offered when joining are also considered important when selecting medical insurance. Petruzzellis and Romanazzi (2010: 147) are of the opinion that factors considered depends on the type of product offered, functional value, emotional value, social value, price and quality. The significance of analysing the factors was to identify the important factors students consider and this will help in creating a customer centered promotional mix. From the above results it can be concluded that quality of service is very important when choosing medical insurance.

4.6 EFFECTIVENESS OF PROMOTIONAL TOOLS

This section analyses the effectiveness of promotional tools. The Table 4.5 below illustrates the results obtained from the emperical study.

Table 4.5: Effectiveness of promotional tools

| | | Of importance | | Neutral | | Important | |
|---|-----|---------------|---------|---------|---------|-----------|---------|
| | | Count | Row N % | Count | Row N % | Count | Row N % |
| The use of university broadcast email | C13 | 38 | 9.5% | 89 | 22.3% | 273 | 68.3% |
| Advertising on University websites | C14 | 30 | 7.5% | 59 | 14.8% | 311 | 77.8% |
| Exhibitions by medical insurance companies during university opening days | C15 | 28 | 7.0% | 38 | 9.5% | 334 | 83.5% |
| Internet (social media , for instance Facebook and YouTube) | C16 | 38 | 9.5% | 59 | 14.8% | 303 | 75.8% |
| Newspaper and magazines adverts | C17 | 44 | 11.0% | 61 | 15.3% | 295 | 73.8% |
| Advertising on University radio slots | C18 | 47 | 11.8% | 71 | 17.8% | 281 | 70.4% |
| Events sponsorship | C19 | 37 | 9.3% | 79 | 19.8% | 284 | 71.0% |
| Sales promotions(gifts with company name printed on it) | C20 | 43 | 10.8% | 51 | 12.8% | 306 | 76.5% |
| Personal selling around university campuses during open days | C21 | 30 | 7.5% | 64 | 16.0% | 306 | 76.5% |

The results in Table 4.5 reflect that 83.5% of the respondents consider the exhibitions by medical insurance companies during university opening days to be the most important promotion tool. Moreover according to Coetzee and Liebenberg (2004: 71) open days exhibitions are the most used sources of information at tertiary institutions. Respondents also consider almost all promotional tools equally important. In addition, the findings of this study are supported with the results by Jones (2002: 174) where respondents percieved open days exhibitions as a vital source of information and effective promotional

tool. The average level of high importance is 74.83% which reflects that all the promotional tools are also regarded as highly important as well. Thorson and Moore (2013: 271) confirm that a promotional mix is needed to notify, convince and remind customers of the market offerings.

As reflected in Table 4.5, 75.8% of the respondents concurred that internet (social media) contributes to a greater extend a promotional tool for medical insurance. Overall it can be deduced that the respondents are very active on the social networks which makes them receive, access and decode the information easily. Moreover, at Durban University of Technology and University of KwaZulu-Natal every international student is a member of international student facebook page which makes it very easy to disseminate information to everyone involved. Recommended medical insurance companies have made use of the international student facebook page platform to advertise. Social networks connect students from different faculties together (Khan and Khan 2014: 4). According to Herrington (2006: 19) internet (social media) is a considerable marketing advance to which many tertiary institutions use as a promotional tool.

Madondo (2016: 66) caution that internet technology has affected the traditional business models of many industries such as media, finance, retail, and medical insurance industry. The Internet and the new emerging social media have transformed traditional marketing and promotional tools applied in the medical insurance industry. The effect of social media on the way of doing business is so tremendous. It lifted geographical barriers and provided users with new forms of interactive media hence greater coverage.

This is reinforced by Loda (2014: 306) who states that the digital revolution has already changed almost everything about how business is conducted in the medical insurance industry and it has greatly benefited from the new emerging opportunities offered by the Internet. Laranjo, Arguel, Neves, Gallagher, Kaplan, Mortimer, Mendes and Lau (2014: 67) state that the Internet, especially through the social media platform, has changed how marketers and consumers communicate. They add that the Internet has many distinct characteristics such as Interactivity and the provision of information when demanded,

inexpensive storage of vast amounts of information in different virtual locations, inexpensive and powerful means of searching and disseminating of information.

Al Kailani and Kumar (2011: 76) rightly suggest that one of the main advantages of Internet is that it enables marketing practitioners to reach a worldwide customer segment, so that prospective customers and actual customers can search, select, and purchase products from suppliers around the world.

Sales promotions and personal selling are regarded equally important as promotional tools for medical insurance with a percentage of 76.5%. The majority of the respondents also rate these promotional tools as highly important as well. Fandos Roig, García and Moliner Tena (2009: 55) argues that, when it comes to services, customers believe so much in personal selling as compared to other promotional tools which does not provide personal contact with the customer which insure understanding of the provided information.

The results also indicate that the respondents believe that university website, broadcast email and radio slots are also important promotional tools for medical insurance with the respondents percentages of 77.8, 68.3 and 70.4 respectively. In the study by Konyana (2012: 90) radio slots and university websites were also viewed as important and effective promotional tools at a tertiary institution.

In addition, newspapers and magazines adverts are also regarded as important from the above results with a high respondents' percentage of 73.8. Furthermore, events sponsorship is also regarded as an important promotional tool. Medical insurance companies usually sponsor international students' sports day every year through the International office of the University. Lund and Greyser (2016: 10) identify that sponsorship is an important source of income for sports events and sponsorship is an essential promotional tool for many organisations. In addition, the authors are of the opinion that organisations are becoming more dependent on sponsorship for growth, value creation and development. The significance of assessing the effectiveness of each promotional tool used by medical insurance was to analyse if the promotional tools are

creating awareness and the results reflect that exhibitions during university open days are the most effective.

4.7 PERCEPTION ON PROMOTION TOOLS USED IN CREATING AWARENESS

This section looks at the perception on promotional tools used in creating awareness. One of the objectives of the study was to identify international students' perceptions towards promotional tools used by medical insurance companies. Table 4.6 depicts the results obtained in this section.

Table 4.6: Perception

| | | Disagree | | Neutral | | Agree | |
|---|---------|-----------|------------|-----------|------------|-----------|------------|
| | | Coun t | Row N % | Coun t | Row N % | Coun t | Row N % |
| TV adverts reinforces brand awareness for medical insurance companies | D2 2 | 23 | 5.8% | 50 | 12.5 % | 327 | 81.8 % |
| Giving branded gifts creates awareness for medical insurance companies | D2 3 | 40 | 10.0 % | 59 | 14.8 % | 301 | 75.3 % |
| Sponsorships towards international students events creates awareness | D2 4 | 40 | 10.0 % | 53 | 13.3 % | 307 | 76.8 % |
| Personal selling through direct contact with the students provides information on the available medical insurance companies | D2 5 | 25 | 6.3% | 42 | 10.5 % | 333 | 83.3 % |
| Internet Adverts keep on reminding students about available medical insurance companies | D2 6 | 32 | 8.0% | 48 | 12.0 % | 320 | 80.0 % |
| Facebook and all other social networks contributes to a greater extent in creating awareness to students | D2 7 | 28 | 7.0% | 50 | 12.5 % | 322 | 80.5 % |
| Word of mouth creates awareness to a greater extend to students. | D2 8 | 25 | 6.3% | 43 | 10.8 % | 332 | 83.0 % |

As depicted in Table 4.6, the average level of agreement is 80.07%, this means the level of agreement to the statements above is high. The highest percentage of 83.3% of the respondents have the perception that personal selling through direct contact with the students provides information on the available medical insurance companies. Fill (2011: 278) supports that personal selling provides face to face interaction with customers which allows the sales team to get feedback and assurance of the customers' understanding.

This is followed by the perception that word of mouth creates awareness to a greater extend to students. From the previous research by Jones (2002: 143) word of mouth was ranked as the most effective promotional tool for the students. In the medical insurance industry word of mouth is very important as students make decisions through referrals from parents or family. According to Shrivastava, Londhe, Sonawane and Suri (2016: 92) many students believe that word of mouth is effective in creating awareness as students share their knowledge about the medical insurance.

TV adverts reinforces brand awareness with 81.8%. From the above results it is worth mentioning that the majority of the students agreed that TV advertising, advertising through social networks and personal selling creates awareness and provides information on the available medical insurance.

Soba and Aydin (2013: 111) state that advertising can make 70% of the target market aware of the new product, achieving 50% understanding of a proposition, with 40% convinced and 20% will purchase in the first period. Overall, it can be concluded that the majority of the international students are active in sport which makes it successful for the medical insurance companies to sponsor sports events giving away branded gifts. It can also be concluded that most students had access to the internet at the institutions as they have agreed that internet adverts revive brand awareness

4.8 INFORMATION SOURCE

This section deals with how the students get information on which medical insurance to choose. One of the objectives of the study was to determine the factors that influence international students' decision making process when choosing medical insurance at a

tertiary institution. Table 4.7 illustrates the scoring patterns of the results obtained on how they got the information.

Table 4.7: Information Source

| | | Disagree | | Neutral | | Agree | |
|--|-----|----------|---------|---------|---------|-------|---------|
| | | Count | Row N % | Count | Row N % | Count | Row N % |
| Word of mouth from other students | E29 | 32 | 8.0% | 56 | 14.0% | 312 | 78.0% |
| Sales presentation by a company representative around campus | E30 | 35 | 8.8% | 53 | 13.3% | 312 | 78.0% |
| Internet browsing | E31 | 45 | 11.3% | 74 | 18.5% | 281 | 70.3% |
| University pamphlets | E32 | 42 | 10.5% | 87 | 21.8% | 271 | 67.8% |
| University websites | E33 | 56 | 14.0% | 68 | 17.0% | 276 | 69.0% |
| TV adverts | E34 | 58 | 14.5% | 69 | 17.3% | 273 | 68.3% |
| Radio Advert | E35 | 77 | 19.3% | 79 | 19.8% | 244 | 61.0% |
| Received branded gifts | E36 | 61 | 15.3% | 62 | 15.5% | 277 | 69.3% |

Table 4.7 reflects the results on the information sources that influenced the student's decision making. The majority of the respondents got information from word of mouth and sales presentations, followed by internet browsing and all the other sources of information with the average level of agreement of 70.19%. Word of mouth is ranked as the first used source of information that influenced the student's decision making on medical insurance because students rely on advice from parents, family members and friends. According to the study by Konyana (2012: 107) word of mouth was rated the third while in the study done by Jones (2002: 143) word of mouth was ranked as the most effective source of information by the respondents. In addition, Klink and Athaide (2014: 110) state that when it comes to medical insurance and any other services reference group influence through word of mouth is very crucial.

Furthermore, personal selling has the highest percentage of agreement. This indicates that the majority of the respondents have received information through personal selling. Kotler and Keller (2012: 409) support that personal selling is the most effective tool at particular steps of the customer buying process particularly in creating up buyer's

awareness, tastes, conviction and activities. A similar study by Rapp & Collins (2009: 55) highlight that through personal selling, the consumer usually feels a bigger need to pay more attention, listen and act in response.

In addition, some of the respondents got the information from the internet through social media. Muhowa (2014: 1) states that every international student is a member of the international students facebook which makes it easy to communicate information to everyone involved. The recommended medical insurance companies have made use of Facebook page through the institution to inform all international students on facebook social media.

4.9 INFERENCE STATISTICS

Inferential statistics relates to the generalizations of the results from a sample to the total population and assists in determining whether the differences between the means, proportions or percentages are real or not. The following section explain the inferential statistics used in this study.

- Reliability Statistics

The two most important aspects of precision are reliability and validity. Reliability is computed by taking several measurements on the same subjects. A reliability coefficient of 0.70 or higher is considered as “acceptable”.

Table 4.8: Cronbach's Alpha

| | | Number of items | Cronbach's Alpha |
|---|---|-----------------|------------------|
| B | Decision making process | 7 | 0.766 |
| C | Effectiveness of promotional tools | 9 | 0.817 |
| D | Perception on promotional tools in creating awareness | 7 | 0.737 |
| E | Information source | 8 | 0.804 |

The reliability scores for all sections exceed the recommended Cronbach's alpha value. This indicates a degree of acceptable, consistent scoring for these sections of the research.

- Factor Analysis

Factor analysis is a statistical technique whose main goal is data reduction (Moonsamy and Singh 2012: 5). A typical use of factor analysis is in survey research, where a researcher wishes to represent a number of questions with a small number of hypothetical factors. For example, as part of a market survey on customer perceptions, respondents may answer three separate questions on affordability, credibility, customer care. Each question, by itself, would be an inadequate measure of attitude towards customer perceptions, but together they may provide a better measure of the attitude. Factor analysis can be used to establish whether the three measures do, in fact, measure the same thing. If so, they can then be combined to create a new variable, a factor score variable that contains a score for each respondent on the factor.

The matrix tables are followed by a summarized table that reflects the results of KMO and Bartlett's Test. The requirement is that Kaiser-Meyer-Olkin Measure of Sampling

Adequacy should be greater than 0.50 and Bartlett's Test of Sphericity less than 0.05. In all instances, the conditions are satisfied which allows for the factor analysis procedure.

Factor analysis is done only for the Likert scale items. Certain components divided into finer components. This is explained below in the rotated component matrix.

Table 4.9: KMO and Bartlett's Test

| | | Kaiser-Meyer-Olkin Measure of Sampling Adequacy | Bartlett's Test of Sphericity | | |
|---|--|---|-------------------------------|---------|-------|
| | | | Approx. Square | Chi- df | Sig. |
| B | Decision Making Process | 0.826 | 640.438 | 21 | 0.000 |
| C | Effectiveness of promotional tools | 0.807 | 1053.212 | 36 | 0.000 |
| D | Perception on promotional tools used in creating awareness | 0.746 | 554.674 | 21 | 0.000 |
| E | Information Source | 0.810 | 906.279 | 28 | 0.000 |

All of the conditions are satisfied for factor analysis. That is, the Kaiser-Meyer-Olkin Measure of Sampling Adequacy value should be greater than 0.500 and the Bartlett's Test of Sphericity sig. value should be less than 0.05. This means that the variables that constituted the research instrument were perfect measures of the component. Overall, it can be concluded that the sections on the research instrument measured exactly what they were intended to measure.

- Rotated Component Matrix

Factor analysis is a statistical technique whose main goal is data reduction. A typical use of factor analysis is in survey research, where a researcher wishes to represent a number of questions with a small number of hypothetical factors. With reference to table 4.9:

- The principle component analysis was used as the extraction method, and the rotation method was Varimax with Kaiser Normalization. This is an orthogonal

rotation method that minimizes the number of variables that have high loadings on each factor. It simplifies the interpretation of the factors.

- Factor analysis/loading show inter-correlations between variables.
- Items of questions that loaded similarly imply measurement along a similar factor. An examination of the content of items loading at or above 0.5 (and using the higher or highest loading in instances where items cross-loaded at greater than this value) effectively measured along the various components.

It is noted that the variables that constituted Section B loaded perfectly along a single component. This means that the statements that constituted this section perfectly measured what was set out to be measured. The remaining sections loaded along two components or (sub-themes). This means that respondents identified different trends within the section.

Table 4.10: Section B (Decision making process)

| Rotated Component Matrix^a | |
|---|------------------|
| B | Component |
| | 1 |
| Price (affordability) | 0.553 |
| How well known is the medical insurance company | 0.730 |
| Good image of the medical insurance company (credibility) | 0.716 |
| Gifts offered when joining. | 0.473 |
| Benefits and limitations Of medical insurance packages | 0.746 |
| Quality of service. (customer care) | 0.696 |
| Availability of adequate information about the services to be provided. | 0.650 |

This section measured the factors considered when selecting medical insurance (decision making process). As depicted in Table 4.10 the section loads perfectly along one factor.

This means that the statements in this section measured what they were set to measure. Extraction method used is the principal component analysis.

Table 4.11: Section C (Effectiveness of promotional tools)

Rotated Component Matrix^a

| C | Component | | |
|---|-----------|-------|-------|
| | 1 | 2 | 3 |
| The use of university broadcast email | 0.156 | 0.783 | 0.084 |
| Advertising on University websites | 0.124 | 0.866 | 0.179 |
| Exhibitions by medical insurance companies during university opening days | 0.292 | 0.568 | 0.220 |
| Internet (social media , for instance Facebook and YouTube) | 0.025 | 0.197 | 0.743 |
| Newspaper and magazines adverts | 0.169 | 0.129 | 0.830 |
| Advertising on University radio slots | 0.453 | 0.110 | 0.676 |
| Events sponsorship | 0.770 | 0.186 | 0.190 |
| Sales promotions(gifts with company name printed on it) | 0.773 | 0.077 | 0.239 |
| Personal selling around university campuses during open days | 0.743 | 0.345 | 0.001 |

This section measured the effectiveness of promotional tools used by medical insurance companies. As reviewed in Table 4.11 the section loaded along three components equally. This means that the statements in this section induced indifference. Extraction method used is the principal component analysis. The rotation method used is the varimax with Kaiser Normalization. Rotation converged in three iterations.

Table 4.12: Section D (Perception)

Rotated Component Matrix^a

| D | Component | |
|---|-----------|-------|
| | 1 | 2 |
| TV adverts reinforces brand awareness for medical insurance companies | 0.642 | 0.101 |
| Giving branded gifts creates awareness for medical insurance companies | 0.802 | 0.060 |
| Sponsorships towards international students events creates awareness | 0.791 | 0.204 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies | 0.473 | 0.423 |
| Internet Adverts keep on reminding students about available medical insurance companies | 0.253 | 0.687 |
| Facebook and all other social networks contributes to a greater extent in creating awareness to students | 0.147 | 0.808 |
| Word of mouth creates awareness to a greater extend to students. | 0.020 | 0.745 |

Extraction method used is the principal component analysis. The rotation method used is the varimax with Kaiser Normalization. Rotation converged in three iterations. This section loads along two components as shown in Table 4.12. This implies that the respondents identified different trends within the section. The splits within the section are color coded as illustrated in Table 4.12.

Table 4.13: Section E (Information source)

Rotated Component Matrix^a

| E | Component | |
|--|-----------|------------|
| | 1 | 2 |
| Word of mouth from other students | 0.055 | 0.831 |
| Sales presentation by a company representative around campus | 0.249 | 0.785 |
| Internet browsing | 0.642 | 0.308 |
| University pamphlets | 0.682 | 0.220 |
| University websites | 0.691 | 0.241 |
| TV adverts | 0.771 | 0.156 |
| Radio Advert | 0.818 | - 0.058 |
| Received branded gifts | 0.596 | 0.079 |

This section measures the information source of the respondents. As shown in Table 4.13 the section loaded along two components. Six statements out of eight were identified as one trend and only two were identified as a different component. This means that respondents identified different trends within the section. Within the section, the splits are color coded. Extraction method used is the principal component analysis. The rotation method used is the varimax with Kaiser Normalization. Rotation converged in three iterations.

4.10 HYPOTHESIS TESTING

The traditional approach to reporting a result requires a statement of statistical significance. A p-value is generated from a test statistic. A significant result is indicated with " $p < 0.05$ ". A second **Chi square test** was performed to determine whether there was a statistically significant relationship between the variables (rows vs. columns). The null hypothesis states that there is no association between the two. The alternate

hypothesis indicates that there is an association. The tables below summarize the results of the **chi square tests**.

Table 4.14: Relationship between age and perception on promotional tools in creating awareness

| Item | χ^2 | P |
|--|----------|-------|
| TV adverts reinforces brand awareness for medical insurance companies. | 29.056 | 0.040 |
| Giving branded gifts creates awareness for medical insurance companies. | 10.387 | 0.582 |
| Sponsorship towards international students' events creates awareness. | 17.124 | 0.145 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies. | 15.982 | 0.192 |
| Internet adverts keep on reminding students about available medical insurance companies. | 18.607 | 0.098 |
| Facebook and all other social networks contribute to a greater extent in creating awareness to students. | 16.888 | 0.154 |
| Word of mouth creates awareness to a greater extent to students | 14.284 | 0.283 |

As indicated in Table 4.14, it emerged that there was no significant relationship between age groups and most of the seven items that measures respondent perception on promotional tools used in creating awareness (p is greater than 0.05). However, the results also show that there is a relationship between age and one item saying that TV adverts reinforces brand awareness for medical insurance companies (p is less than 0.05). **Therefore, the hypothesis that there is no significant relationship between age and perception on promotional tools used to create awareness is highly accepted.**

Table 4.15: Relationship between gender and perception on promotional tools used in creating awareness

| Item | χ^2 | P |
|--|----------|-------|
| TV adverts reinforces brand awareness for medical insurance companies. | 2.752 | 0.600 |
| Giving branded gifts creates awareness for medical insurance companies. | 12.697 | 0.013 |
| Sponsorship towards international students' events creates awareness. | 7.217 | 0.125 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies. | 5.120 | 0.275 |
| Internet adverts keep on reminding students about available medical insurance companies. | 2.025 | 0.731 |
| Facebook and all other social networks contribute to a greater extent in creating awareness to students. | 1.457 | 0.834 |
| Word of mouth creates awareness to a greater extent to students | 7.140 | 0.129 |

Table 4.15 indicates that there is no significant relationship between gender and perception on promotional tools used in creating awareness for medical product as the p values of six out of seven items are greater than 0.05 except only one item with a p value of 0.013. Therefore, there is only significant relationship between gender and giving branded gifts as a way of creating awareness for medical insurance companies. **The hypothesis that there is no significant relationship between gender and perception on promotional tools used in creating awareness is accepted.**

Table 4.16: Relationship between race and perception on promotional tools used in creating awareness

| Item | χ^2 | P |
|--|----------|-------|
| TV adverts reinforces brand awareness for medical insurance companies. | 11.887 | 0.455 |
| Giving branded gifts creates awareness for medical insurance companies. | 19.237 | 0.083 |
| Sponsorship towards international students' events creates awareness. | 24.778 | 0.016 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies. | 12.170 | 0.432 |
| Internet adverts keep on reminding students about available medical insurance companies. | 13.026 | 0.367 |
| Facebook and all other social networks contribute to a greater extent in creating awareness to students. | 12.277 | 0.424 |
| Word of mouth creates awareness to a greater extent to students | 24.457 | 0.018 |

From the above results in Table 4.16 it indicates that there is no significant relationship between race and perception on promotional tools used in creating awareness for medical product as the p values of five items out of seven items are greater than 0.05 except only two items with a p value of 0.016 and 0.018. **The hypothesis that there is no significant relation between race and perception on promotional tools used in creating awareness is therefore accepted.**

Table 4.17: Relationship between country of origin and perception on promotional tools used in creating awareness

| Item | χ^2 | P |
|--|----------|-------|
| TV adverts reinforces brand awareness for medical insurance companies. | 91.594 | 0.005 |
| Giving branded gifts creates awareness for medical insurance companies. | 75.421 | 0.087 |
| Sponsorship towards international students' events creates awareness. | 63.923 | 0.340 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies. | 33.914 | 0.997 |
| Internet adverts keep on reminding students about available medical insurance companies. | 31.217 | 0.999 |
| Facebook and all other social networks contribute to a greater extent in creating awareness to students. | 43.542 | 0.946 |
| Word of mouth creates awareness to a greater extent to students | 64.664 | 0.317 |

Table 4.17 indicates that there is no significant relationship between country of origin and perception on promotional tools used in creating awareness for medical product as the p values of six items out of seven items are greater than 0.05 except only one item with a p value of 0.005. Therefore, there is only significant relationship between country of origin and the item which says that TV adverts reinforces brand awareness for medical insurance companies. **The hypothesis that there is no significant relationship between country of origin and perception on promotional tools used in creating awareness is accepted.**

4.11 CORRELATIONS

Correlation analysis is a statistical tool used to describe the degree to which two variables are linearly related to one another (Bonett and Wright 2000: 226). Alver *et al.* (2010: 418) state that Pearson's correlation frequently computes the correlation between ratio-scaled) random variables. Bivariate correlation was also performed on the (ordinal) data. The results indicate the following patterns. Positive values indicate a directly proportional relationship between the variables and a negative value indicates an inverse relationship.

Table 4.18: Correlation values between price and the following "items"

| Item | Correlation value |
|---|-------------------|
| How well known is the medical insurance company | 0.346 |
| Good image of the medical insurance company (credibility) | 0.308 |
| Benefits and limitations of medical insurance packages | 0.246 |
| Quality of service | 0.233 |

Table 4.18 indicates the correlation values between “**Price**” and the following items (“How well known is the medical insurance company”, “Good image of the medical insurance company”, “Benefits and limitations of medical insurance packages” and “Quality of service”) which indicates a significant positive relationship with price. Respondents indicate that a higher price of the medical insurance represent high quality of service. The respondents also indicated a higher the price also signify credibility of the medical insurance.

Table 4.19: Correlation values between "how well known is the medical insurance" and the following "items"

| Item | Correlation value |
|---|-------------------|
| Good image of the medical insurance company | 0.445 |
| Benefits and limitations of medical insurance packages | 0.448 |
| Quality of service (customer care) | 0.336 |
| Availability of adequate information provided about the services to be provided | 0.303 |
| Benefits and limitations of medical insurance | 0.448 |
| Personal selling through direct contact with the students | 0.230 |
| Sponsorship towards international students' events creates awareness. | 0.270 |

Table 4.19 indicates the correlation values between “**How well known is the medical insurance company**” and the following 7 items (“Sponsorships towards international students events creates awareness”, “Good image of the medical insurance company”, “Benefits and limitations of medical insurance packages”, “Quality assurance”, “Availability of adequate information about the services to be provided”, “Benefits and limitations of medical insurance”, “Personal selling through direct contact with the students”) are 0.270, 0.445, 0.448, 0.336, 0.303, 0.448 and 0.230 respectively. The correlation values indicate directly related proportionality. Respondents indicate that the more well known the medical company is, the more awareness through the above items is created towards international students, and vice versa.

4.12 CROSS TABULATION

A cross tabulation test was done as a technique of organizing information in a tabular way to express the shared impact of one variable on another. Cross tabulation was done where demographic variables were tested against each other and other factors to establish whether there is an association between two different linked variables.

The results reflected on Table 4.20 reveal that the majority of the respondents from all listed countries consider price as an important factor to consider when selecting medical insurance. All of the respondents that originate from India, Sweden, Lesotho and Burundi consider price as an important factor to consider. However, a respondent from Angola did not see anything important on price as a factor to consider when selecting medical insurance. Furthermore, some students would rather consider other factors as they will be on scholarships; therefore, price is not their worry at all.

Table 4.20: Cross tabulation (country of origin and price)

| | | Price (affordability) * Country of origin Cross tabulation | | | | | | | | | | | |
|-------------------|--------------|--|--------|-----------------------------|------|----------------|--------|------------------|--------|-----------------------|--------|--------------|--------|
| | | <i>Strongly disagree</i> | | <i>Of little importance</i> | | <i>Neutral</i> | | <i>Important</i> | | <i>Very important</i> | | <i>Total</i> | |
| | | | | | | | | | | | | | |
| Country of origin | Botswana | 1 | 2.9% | 3 | 8.8% | 5 | 14.7% | 7 | 20.6% | 18 | 52.9% | 34 | 100.0% |
| | Zimbabwe | 1 | 0.7% | 3 | 2.2% | 14 | 10.2% | 45 | 32.8% | 74 | 54.0% | 137 | 100.0% |
| | Congo | 1 | 3.6% | 1 | 3.6% | 2 | 7.1% | 11 | 39.3% | 13 | 46.4% | 28 | 100.0% |
| | Nigeria | 3 | 6.8% | 4 | 9.1% | 1 | 2.3% | 17 | 38.6% | 19 | 43.2% | 44 | 100.0% |
| | Uganda | 0 | 0.0% | 0 | 0.0% | 2 | 4.4% | 22 | 48.9% | 21 | 46.7% | 45 | 100.0% |
| | Germany | 0 | 0.0% | 1 | 2.3% | 2 | 4.7% | 18 | 41.9% | 22 | 51.2% | 43 | 100.0% |
| | Swaziland | 0 | 0.0% | 0 | 0.0% | 1 | 4.3% | 15 | 65.2% | 7 | 30.4% | 23 | 100.0% |
| | Zambia | 0 | 0.0% | 0 | 0.0% | 1 | 6.7% | 5 | 33.3% | 9 | 60.0% | 15 | 100.0% |
| | Namibia | 0 | 0.0% | 1 | 5.0% | 4 | 20.0% | 9 | 45.0% | 6 | 30.0% | 20 | 100.0% |
| | Burundi | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 1 | 100.0% | 0 | 0.0% | 1 | 100.0% |
| | Lesotho | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 1 | 100.0% | 0 | 0.0% | 1 | 100.0% |
| | Angola | 1 | 100.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 1 | 100.0% |
| | India | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 3 | 100.0% | 3 | 100.0% |
| | Sweden | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 3 | 100.0% | 3 | 100.0% |
| | Sierra Leone | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 1 | 100.0% | 0 | 0.0% | 1 | 100.0% |
| | Mali | 0 | 0.0% | 0 | 0.0% | 1 | 100.0% | 0 | 0.0% | 0 | 0.0% | 1 | 100.0% |
| Total | | 7 | 1.8% | 13 | 3.3% | 33 | 8.3% | 152 | 38.0% | 195 | 48.8% | 400 | 100.0% |

Key

| | | | |
|--|-------|--|----------------------------|
| | Count | | % within Country of origin |
|--|-------|--|----------------------------|

Table 4.21: Cross tabulation (price and gender)

| Price (affordability) * Gender Crosstabulation | | | | | |
|--|----------------------|-----------------|--------|--------|-------|
| | | | Gender | | Total |
| | | | Male | Female | |
| Price (affordability) | Not important at all | Count | 4 | 3 | 7 |
| | | % within Gender | 1.6% | 2.0% | 1.8% |
| | Of little importance | Count | 8 | 5 | 13 |
| | | % within Gender | 3.2% | 3.3% | 3.3% |
| | Neutral | Count | 20 | 13 | 33 |
| | | % within Gender | 8.0% | 8.7% | 8.3% |
| | Important | Count | 91 | 61 | 152 |
| | | % within Gender | 36.4% | 40.7% | 38.0% |
| | Very important | Count | 127 | 68 | 195 |
| | | % within Gender | 50.8% | 45.3% | 48.8% |
| Total | Count | 250 | 150 | 400 | |
| | % within Gender | 100.0% | 100.0% | 100.0% | |

Table 4.21 shows that the majority of the respondents who regard price as very important are men as compared to women. It can be concluded that men are more sensitive to price as compared to women. However, there is small difference when it comes to price sensitiveness as shown by the percentages. Ifcher and Zarghamee (2016: 655) further report that due to labor discrimination men have more paying jobs as compared to women and men provide for the families, therefore they tend to be more price sensitive as a way of being responsible.

4.13 CONCLUSION

The findings of the study are analyzed and presented in this chapter of the study. Tables, graphs are used to present the collected data which helps to provide a detailed analysis of data. In addition, the chapter also reviewed the statistical methods which

were used to analyze the data such as, factor analysis, chi-square test of independence, Pearson's correlation and hypothesis testing. The inferential statistics performed reflect a significant relationship between different variables as well as measuring the reliability and relevance of the research instrument. The findings of the descriptive statistics also review that most of the international student included in the survey were from Zimbabwe. Moreover, the results review the promotional tools which need further attention and improvements, such as public relations (events sponsorships), printed media and university radio slot advertising. Recommendations on these promotional tools will be made in the following chapter. The source of information and promotional tools are identified as very important in creating customer awareness. The next chapter gives a conclusion of the study, summarizing of the research findings and make recommendations for improvements and future research areas.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

The results of the study are reported in the previous chapter. This chapter discusses the summary of the main findings, the conclusions and the recommendations of the study. Conclusions are drawn from the research findings. The limitations of the study are noted and areas for further research are suggested.

5.2 SUMMARY OF THE STUDY

Chapter one reviewed the problem statement and the objectives of the study. The aim of the study was to evaluate the promotional tools used by medical insurance companies on international students.

Chapter two provided an overview on promotional tools, awareness creation, customer perception, consumer decision making and theoretical frame work.

Chapter three gave a description of the research method implemented for the study. This chapter also identified the research instrument and the sampling method used for the study. A research instrument was designed to collect data from the international students at the Durban University of Technology and the University of KwaZulu-Natal.

Chapter four presented the data analysis of the collected data. The impact that the respondents identified from different promotional tools used by medical insurance was also discussed. The findings regarding awareness creation, decision making process, and information source were also discussed and reported in detail on how the respondents viewed them as being vital.

5.3 MAIN FINDINGS REGARDING RESEARCH AIM

The results of the study suggest that medical insurance companies target students for their market offerings. A survey method was used to collect data on the main research objective, which was to ascertain the effectiveness of promotional tools used by medical insurance companies on international students. The target population of the study included international students from the Durban University of Technology and the University of KwaZulu-Natal.

5.3.1 Conclusions on the research aim. To evaluate promotional tools used by medical insurance companies.

The research results indicate that the students react differently to each promotional tool due to their difference in communication capacity to the target market. The study reduced the nine promotional tools into three components: The first component (campus advertising) consists of university broadcast email, university websites and exhibitions during university opening days. The first component had the highest average percentage of respondents considering it as being important. The second component (media advertising) consists of the internet, newspaper and magazines adverts and advertising on radio slots. It had the lowest average percentage of respondents considering it important as compared to the other two components. The third component (innovative promotional tools) consists of events sponsorship, sales promotions and personal selling. It ranked the second highest on the percentage of the respondents who considered it important. The first component named campus advertising, second component named media advertising and third component named innovative promotional tools are discussed in the following section.

5.3.1.1 First component: Campus advertising

The first component is named campus advertising and it consists of the following promotional tools.

- Exhibitions

The students considered exhibitions by medical insurance companies during university opening days as the most important promotional tool. Open day's exhibitions were viewed as the best considering that students needed medical aid cover at the beginning of each year. This was rated as the most effective promotional tool;

- University website

University website is rated as the second preferred promotional tool for medical insurance. The main advantage was that when it was advertised or recommended on the university website it was regarded as being credible; and

- Sales promotions and personal selling

The respondents considered sales promotions and personal selling equally effectively by the students. They are rated as third in promoting the medical insurance products as well as two-way communication. Personal selling is important for promoting medical insurance services as it involves personal contact and provides in-depth information to the students upon presentation.

5.3.1.2 Second component: Media advertising

The second component is named media advertising and it consists of the following promotional tools.

- Internet

The Internet consists of all social media. It is rated as the fourth effective promotional tool for medical insurance products. From the results it can be concluded that students are very active and familiar with the internet which makes it a very effective platform to promote medical insurance products (Table 4.5 page 63); and

- Newspaper and magazines adverts

Printed media was rated as the fifth effective promotional tool for medical insurance. From the findings it is worth mentioning that print media does reach the target market,

but not the whole target market. They are not commonly used as promotional tools by the medical insurance companies.

5.3.1.3 Third component: Innovative promotional tools

The third component is named innovative promotional tools and it consists of the following promotional tools.

- Events sponsorship

Events sponsorship is an effective promotional tool especially when it is expanded to more than sport to increase coverage. Overall, it can be concluded that some of the international students are active in sport which makes it possible for medical insurance companies to sponsor the international students' sports day and give away branded gifts to promote medical insurance products;

- Advertising on university radio slots

Adverts through university radio slots were rated as the seventh promotional tool for medical insurance. Some of the students consider it as an important promotional tool (Table 4.5 page 63). It reaches some of the students considering timing is of very much importance when it comes to radio adverts; and

- University broadcast email

University broadcast email was rated as the eighth effective promotional tool for medical insurance products. It is worth mentioning that the broadcast email is not commonly used for promoting medical insurance products.

5.4 CONCLUSIONS ON OBJECTIVE ONE

Objective one was to determine factors that influence international students' decision-making process when selecting medical insurance at a tertiary institution. As reflected in Table 4.4, (page 61) students consider price, how popular the medical insurance company is, company's reputation, incentives offered when joining, benefits and limitations of insurance packages, quality of service and availability of adequate

information prior to making their selection. All these factors influence the decision-making process of the students and they carry different weights of importance towards the final decision.

Quality of service was rated as the most important factor to consider when selecting medical insurance. Students also rated price as being important in their selection of a medical insurance company. In addition, factors that are considered depend on the type of the product offered, functional value, emotional value, social value, price and quality (Petruzzellis and Romanazzi 2010: 147). However, in some situations the factors considered depend on the nature of the target market. For instance, students are also known to be very price sensitive due to the high costs of studying.

Moreover, the students also considered the source of information when selecting medical insurance. Results also reflect that word of mouth and sales presentations ranked as the most considered sources of information that influenced the student's decision making on medical insurance. Word of mouth is very powerful when it comes to medical insurance, this also included information from reference groups (friends and family). Sales presentations provided information to a greater extent as compared to other promotional tools. Some of the students are influenced by information from the internet, university website, TV adverts. The source of information creates credibility and trust towards medical insurance hence positive decision-making by students.

5.5 CONCLUSIONS ON OBJECTIVE TWO

Objective two was to determine the influence of promotional tools in creating customer awareness for medical insurance. The findings indicate that the source of information is very important in assessing awareness creation. The majority of the students agree that word of mouth creates awareness to a greater extent. Many students get information from friends and family through word of mouth. Students believe that personal selling through direct contact with the students provides information on the available medical insurance companies. TV adverts reinforces brand awareness for medical insurance companies (Table 4.6 page 66). The majority of the students believe that social networks contribute to a greater extent in creating awareness for student. The respondents believed that sponsorship towards international students'

events was very crucial in creating awareness. It is also important to give branded gifts to students to enhance awareness.

All promotional tools are considered as very effective despite the infrequent use of some of them such as, printed media, university radio slots, and university broadcast email. Correlation testing also indicates that the respondents believed that awareness is created when the medical insurance company becomes more well-known. When many people are aware of the product, word of mouth spread effectively through referrals from family, friends, workmate or school mates.

5.6 CONCLUSIONS ON OBJECTIVE THREE

Objective three was to identify international students' perceptions towards promotional tools used by medical insurance company. The findings indicate that international students hold the same perceptions towards the promotional tools used by medical insurance companies. They all perceive that word of mouth and personal selling create awareness and personal selling through direct contact with the students (Table 4.7 page 68). This is the perception they all have about these promotional tools. Students also perceive that television advertising reinforces brand awareness. Students identify event sponsorship and giving branded gifts during the event as a great combination in promoting medical insurance.

Hypotheses testing indicates that there is no significant relationship between (age, gender, country of origin or nationality, race) and the perception of international students as a whole on promotional tools used by medical insurance companies to promote medical insurance products. According to hypothesis testing results from Tables (4.15, 4.15, 4.16 and 4.17) pages (77,78,79,78 and 79 respectively) it can be concluded that age, gender, country of origin and race do not affect the way international students perceive promotional tools used in creating awareness. Cross-tabulation results of nationality and price also indicate that the respondents perceived that there is a relationship between price and country of origin due to difference in currency and exchange rates. For instance, some currencies have more value as compared to South African Rand.

5.7 LIMITATIONS OF THE STUDY

The geographical context of the study consists of the University of KwaZulu-Natal and the Durban University of Technology. The study was also limited to international students yet medical insurance is also used by some of the local students, though it is not mandatory. Due to these limitations the results of the study might only be applicable to the target population.

5.8 RECOMMENDATIONS

The following recommendations are suggested:

- Medical insurance marketers should consider investing more in the most preferred promotional tools for medical insurance which are exhibitions, university website, sales promotions, the internet and personal selling. These promotional tools reach a greater coverage of the target market. The marketers should also consider improving and giving further attention to events sponsorship, printed media and the use of university radio slots. On events sponsorship the marketers should also look for other opportunities to sponsor where the whole target market is involved for example, the international students' orientation day. During sponsored events more branded gifts should be given away, as they will remind and inform many potential customers about the medical insurance company. All promotional tools should be implemented strategically reaching a greater coverage to create an effective promotional mix;
- The marketers should also consider creating good relationships with South African Embassy of different countries in order to recommend their medical insurance during students' visa applications. Medical insurance companies should make use of loyalty programs to create long-term relationships with their customers for the full study period. Medical insurance companies should review their marketing strategies and focus more on the marketing concept, thus focusing on how to satisfy consumers' need rather than focusing on sales.

The medical insurance companies should consider employee training programs to maintain consistency and to improve on the quality of service. This will help in maintaining a good image and high quality of service to enrich word of mouth promotion, as much of awareness is created through word of mouth;

- The promotional mix should be tailored with the nature of the target market. For instance, it is the nature of all students that they are sensitive to price changes, therefore the sales team should direct sales promotions on price. The pricing strategy should create a balance with the perceived value of service; and
- Marketers should consider timing as a very important factor in creating medical insurance awareness. Marketers should target the beginning of the year for massive awareness programs as students are in need of medical insurance at the beginning of each year.

5.9 SCOPE FOR FURTHER RESEARCH

The study presents some opportunities for further research. This study focused only on international students at Durban University of Technology and University of KwaZulu-Natal. Further research can be done on all international students at various public tertiary institutions. This will help to reduce population bias. The research was done using a quantitative research design and non-probability sampling for convenience. Further research can be done using mixed methods approach which can generate more data rich responses on what the students' perceptions are of the medical insurance companies.

5.10 CONCLUSION

The results of this study indicate that medical insurance companies should consider quality of service and price as being very important factors when designing a promotional mix. Promotional tools which involve two-way communication with the

customers are highly recommended in the service industry. Two-way communication is possible when feedback can be obtained from the customers and when there is personal interaction between the marketer and the customers. Students react differently towards various promotional tools, therefore, an effective promotional mix is required. Positive information on products should be available and accessible on all credible sources of information. Understanding the nature of the target market and the nature of the product is vital when designing a promotional tool. Awareness creation is the backbone of sales growth and market share. An understanding and correct implementation of the customer oriented promotional mix is paramount for medical insurance. It is anticipated that the findings of this study provides an understanding of medical insurance for international students.

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Appendix A: Questionnaire

Title: Promotional tools used by Medical Insurance companies: An international student perspective.

Aim: The study aims to evaluate the promotional tools used by medical insurance companies to international students.

Objectives

- 1. To determine factors that influence international students' decision making process when choosing medical insurance at a tertiary institution.
- To determine the influence of promotional tools in creating customer awareness for medical insurance to an international student at a tertiary institution.
- To identify international students' perceptions towards promotional tools used by medical insurance.

I am currently a Masters in marketing student at Durban University of Technology. I am conducting a survey on the promotion tools used by medical insurance companies to international students.

Instructions

1. Please spare a few minutes to read and answer all questions carefully.
2. Please note that all data collected will be kept in strict confidential and will be used for academic research purpose only.
3. Indicate your choice with a tick.

Section A

Demographic data

| 1. Age Group | |
|--------------------|---|
| 18-21 years | 1 |
| 22-25 years | 2 |
| 26-30 years | 3 |
| 31 years and above | 4 |

| 2. Gender | |
|-----------|---|
| Male | 1 |
| Female | 2 |

| | |
|--------------------|---|
| 3. Religion | |
| Christianity | 1 |
| Islamic | 2 |
| Hinduism | 3 |
| Traditional | 4 |

| | |
|-----------------------------|----|
| 4. Country of origin | |
| Botswana | 1 |
| Zimbabwe | 2 |
| Congo | 3 |
| Nigeria | 4 |
| Uganda | 5 |
| Germany | 6 |
| Swaziland | 7 |
| Zambia | 8 |
| Namibia | 9 |
| Other (Specify) | 10 |

Section B

Decision Making Process

| Select the factors you considered when selecting your current medical insurance in order of importance (Tick where is appropriate for you) | Not important at all 1 | Of little importance 2 | Neutral 3 | Important 4 | Very important 5 |
|--|---------------------------|---------------------------|--------------|----------------|---------------------|
| 6. Price (affordability) | | | | | |
| 7. How well known is the medical insurance company | | | | | |
| 8. Good image of the medical insurance company (credibility) | | | | | |
| 9. Gifts offered when joining. | | | | | |

| | | | | | |
|---|--|--|--|--|--|
| | | | | | |
| 10. Benefits and limitations Of medical insurance packages | | | | | |
| 11. Quality of service. (customer care) | | | | | |
| 12. Availability of adequate information about the services to be provided. | | | | | |

Section C

Effectiveness of promotional tools

| | Which promotional tools would you consider effective for medical insurance to an international student (in order of importance) | Not important At all 1 | Of little Importance 2 | Neutral 3 | Important 4 | Most important 5 |
|-----|--|------------------------------|---------------------------|--------------|----------------|---------------------|
| 13. | The use of university broadcast email | | | | | |
| 14. | Advertising on University websites | | | | | |
| 15. | Exhibitions by medical insurance companies during university opening days | | | | | |
| 16. | Internet (social media , for instance facebook and youtube) | | | | | |
| 17. | Newspaper and magazines adverts | | | | | |
| 18. | Advertising on University radio slots | | | | | |
| 19. | Events sponsorship | | | | | |
| 20. | Sales promotions(gifts with company name printed on it) | | | | | |
| 21. | Personal selling around university campuses during open days | | | | | |

Section D

Perception on promotional tools used in creating awareness

| | Please indicate your opinion on each of the following statements as they apply to your perception about promotion tools used. | Strongly Disagree 1 | Disagree 2 | Neutral 3 | Agree 4 | Strongly Agree 5 |
|-----|---|------------------------|---------------|--------------|------------|---------------------|
| 22. | TV adverts reinforces brand awareness for medical insurance companies | | | | | |
| 23. | Giving branded gifts creates awareness for medical insurance companies | | | | | |
| 24. | Sponsorships towards international students events creates awareness | | | | | |
| 25. | Personal selling through direct contact with the students provides information on the available medical insurance companies | | | | | |
| 26. | Internet Adverts keep on reminding students about available medical insurance companies | | | | | |
| 27. | Facebook and all other social networks contributes to a greater extent in creating awareness to students | | | | | |
| 28. | Word of mouth creates awareness to a greater extend to students. | | | | | |

Section E

Information Source

| | Indicate your opinion on each of the following statements as they contributed to your medical insurance selection decision. | Strongly Disagree 1 | Disagree 2 | Neutral 3 | Agree 4 | Strongly Agree 5 |
|-----|---|------------------------|---------------|--------------|------------|---------------------|
| 29. | Word of mouth from other students | | | | | |
| 30. | Sales presentation by a company representative around campus | | | | | |
| 31. | Internet browsing | | | | | |
| 32. | University pamphlets | | | | | |
| 33. | University websites | | | | | |
| 34. | TV adverts | | | | | |
| 35. | Radio Advert | | | | | |
| 36. | Received branded gifts | | | | | |

Appendix B: Letter of information and Letter of consent



Letter of information

Title of the Research Study:

Principal Investigator/s/researcher: (Faith Rudairo Chibvura, Masters in Management Sciences Marketing)

Co-Investigator/s/supervisor/s: (Darry Penceliah, Professor)

Brief Introduction and Purpose of the Study:

This study will provide an assessment of promotional tools used by Medical Insurance companies to international students' perspective. Hence, this study is motivated by the needs to ensure effective communication and awareness of the medical insurance services and to avoid misinterpretation of information by students.

Outline of the Procedures: You will be responsible for answering the questionnaire. You will be given 5 to 8 minutes to complete the questionnaire. The survey will be conducted on DUT and UKZN campuses. The questionnaire consists of the closed ended questions and a five-point likert scale. Non probability sampling will be used to select the sample. The attention of the researcher will be directed towards international students at DUT and UKZN.

Risks or Discomforts to you:

The nature of the research does not place any risk on you. You can choose to withdraw at any time.

Benefits: You will also have full access to the dissertation and all the information you might

need from it. You will also get support in your academic work from the researcher whenever you need assistance.

Reason/s why you May Be Withdrawn from the Study:

You can be withdrawn due to non-compliance, illness, and adverse reactions. You can choose to withdraw at any time and there will be no adverse consequences for you should you choose to withdraw.

Remuneration: You will be volunteering and no remuneration will be received.

Costs of the Study: You in this study has absolutely no cost implications.

Confidentiality: This research would ensure anonymity and confidentiality by not asking for your name of the respondents on the questionnaires. As a result, no one would know who has given the answers and the questionnaires answered would be kept away from the public for five years and then shredded.

Research-related Injury: No injuries are expected to emanate as a result of participation to this study

Persons to Contact in the Event of Any Problems or Queries:

(Supervisor and details) Please contact the researcher (tel no.), my supervisor (tel no.) or the Institutional Research Ethics Administrator on 031 373 2900. Complaints can be reported to the Director: Research and Postgraduate Support, Prof S Moyo on 031 373 2577 or moyos@dut.ac.za



Letter of consent

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher, Faith R Chibvura, about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: REC 20/16,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerized system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

**Full Name of Participant
Thumbprint**

Date

Time

Signature / Right

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher

Date

Signature

Full Name of Witness (If applicable)

Date

Signature

Full Name of Legal Guardian (If applicable)

Date

Signature

Appendix C: Gate Pass UKZN



08 July 2016

Ms Faith Rudairo Chibvura (21143336)
Durban University of Technology
ML Sultan Campus

Dear Ms Chibvura,

Protocol reference number: HSS/0835/016M

Project title: Promotional tools used by Medical Insurance Companies: An international student perspective

Full Approval – Expedited Application

With regards to your application received on 12 May 2016. The documents submitted have been accepted by the Humanities & Social Sciences Research Ethics Committee and **FULL APPROVAL** for the protocol has been granted.

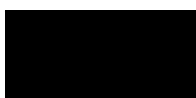
Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number.

Please note: Research data should be securely stored in the discipline/department for a period of 5 years.

The ethical clearance certificate is only valid for a period of 3 years from the date of issue. Thereafter Recertification must be applied for on an annual basis.

I take this opportunity of wishing you everything of the best with your study.

Yours faithfully



Dr Shenuka Singh (Chair)

/ms

Cc Supervisor: Professor S Penciliah

Humanities & Social Sciences Research Ethics Committee

Dr Shenuka Singh (Chair)

Westville Campus, Govan Mbeki Building

Postal Address: Private Bag X54001, Durban 4000

Telephone: +27 (0) 31 260 3587/8350/4557 Facsimile: +27 (0) 31 260 4609 Email: ximbap@ukzn.ac.za / snymanm@ukzn.ac.za / mohunp@ukzn.ac.za

Website: www.ukzn.ac.za



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Howard College

Medical School

Pietermaritzburg

Westville

Appendix D: Gate Pass DUT



*Directorate for Research and Postgraduate Support
Durban University of Technology
Tromso Annexe, Steve Biko Campus
P.O. Box 1334, Durban 4000
Tel.: 031-3732576/7
Fax: 031-3732946
E-mail: moyos@dut.ac.za*

26th July 2016

Ms Faith Rudairo Chibvura
c/o Department of Marketing
Faculty of Management Sciences
Durban University of Technology

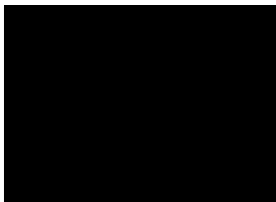
Dear Ms Chibvura

PERMISSION TO CONDUCT RESEARCH AT THE DUT

Your email correspondence in respect of the above refers. I am pleased to inform you that the Institutional Research Committee (IRC) has granted full permission for you to conduct your research "Promotional tools used by Medical Insurance companies: An international student perspective" at the Durban University of Technology.

We would be grateful if a summary of your key research findings can be submitted to the IRC on completion of your studies.

Kindest regards.
Yours sincerely



PROF. S. MOYO
DIRECTOR: RESEARCH AND POSTGRADUATE SUPPORT

Appendix E: Correlation

| | | Price (affordability) | How well known is the medical insurance company | Good image of the medical insurance company (credibility) | Gifts offered when joining | Benefits and limitations Of medical insurance packages | Quality of service (customer care) | Availability of adequate information about the services to be provided. | The use of university broadcast email | Advertising on University websites | Exhibitions by medical insurance companies during university opening days | Internet (social media, for instance facebook and youtube) | Newspaper and magazines adverts | Advertising on University radio slots | Events sponsorship | Sales promotion (gifts with company name printed on it) | Personal selling around university campuses during open days | TV adverts reinforce brand awareness for medical insurance companies | Giving branded gifts creates awareness for medical insurance companies | Sponsorships towards international students events creates awareness | Personal selling through direct contact with the students provides information on the available medical insurance companies | Internet Adverts keep reminding students about available medical insurance companies | Facebook and all other social networks contribute to a greater extent in creating awareness to students | Word of mouth creates awareness to a greater extend to students. | Word of mouth from other students | Sales presentation by a company representative around campus | Internet browsing | University pamphlets | University websites | TV adverts | Radio Adverts | Received branded gifts | |
|---|-------------------------------|-----------------------|---|---|----------------------------|--|------------------------------------|---|---------------------------------------|------------------------------------|---|--|---------------------------------|---------------------------------------|--------------------|---|--|--|--|--|---|--|---|--|-----------------------------------|--|-------------------|----------------------|---------------------|------------|---------------|------------------------|--|
| Spearmen Price (affordability) | Correlation C Sig. (2-tailed) | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How well known is the medical insurance company | Correlation C Sig. (2-tailed) | .346 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Good image of the medical insurance company (credibility) | Correlation C Sig. (2-tailed) | .308 ^{**} | .445 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gifts offered when joining. | Correlation C Sig. (2-tailed) | .152 ^{**} | .239 ^{**} | .295 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Benefits and limitations Of medical insurance packages | Correlation C Sig. (2-tailed) | .246 ^{**} | .448 ^{**} | .418 ^{**} | .297 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Quality of service. (customer care) | Correlation C Sig. (2-tailed) | .233 ^{**} | .336 ^{**} | .391 ^{**} | .105 ^{**} | .467 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Availability of adequate information about the services to be provided. | Correlation C Sig. (2-tailed) | .142 ^{**} | .303 ^{**} | .371 ^{**} | .259 ^{**} | .453 ^{**} | .407 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | | |
| The use of university broadcast email | Correlation C Sig. (2-tailed) | .160 ^{**} | .192 ^{**} | .253 ^{**} | .318 ^{**} | .194 ^{**} | .141 ^{**} | .320 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | | |
| Advertising on University websites | Correlation C Sig. (2-tailed) | .123 ^{**} | .162 ^{**} | .192 ^{**} | .159 ^{**} | .131 ^{**} | .154 ^{**} | .291 ^{**} | .549 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | | |
| Exhibitions by medical insurance companies during university opening days | Correlation C Sig. (2-tailed) | .173 ^{**} | .219 ^{**} | .139 ^{**} | .206 ^{**} | .222 ^{**} | .143 ^{**} | .417 ^{**} | .309 ^{**} | .447 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | | |
| Internet (social media, for instance facebook and youtube) | Correlation C Sig. (2-tailed) | 0.071 ^{**} | .175 ^{**} | 0.076 ^{**} | .247 ^{**} | .110 ^{**} | 0.078 ^{**} | .236 ^{**} | .224 ^{**} | .291 ^{**} | .323 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | | |
| New spaper and magazines adverts | Correlation C Sig. (2-tailed) | .098 ^{**} | .200 ^{**} | .122 ^{**} | .426 ^{**} | .161 ^{**} | 0.085 ^{**} | .261 ^{**} | .283 ^{**} | .267 ^{**} | .309 ^{**} | .438 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | | | | | | |
| Advertising on University radio slots | Correlation C Sig. (2-tailed) | 0.045 ^{**} | .188 ^{**} | .153 ^{**} | .342 ^{**} | .205 ^{**} | .181 ^{**} | .336 ^{**} | .255 ^{**} | .322 ^{**} | .320 ^{**} | .349 ^{**} | .546 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | | |
| | N | 373 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | 399 | | | | | | | | | | | | | | | | | | |
| Events sponsorship | Correlation C Sig. (2-tailed) | .179 ^{**} | .183 ^{**} | .299 ^{**} | .286 ^{**} | .293 ^{**} | .217 ^{**} | .333 ^{**} | .318 ^{**} | .296 ^{**} | .363 ^{**} | .245 ^{**} | .305 ^{**} | .426 ^{**} | 1.000 | | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | | | | | | | | | | | | | | | | | |
| Sales promotions (gifts with company name printed on it) | Correlation C Sig. (2-tailed) | 0.062 ^{**} | .199 ^{**} | .229 ^{**} | .321 ^{**} | .298 ^{**} | .134 ^{**} | .257 ^{**} | .250 ^{**} | .225 ^{**} | .332 ^{**} | .304 ^{**} | .327 ^{**} | .476 ^{**} | .435 ^{**} | 1.000 | | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | | | | | | | | | | | | | | | | |
| Personal selling around university campuses during open days | Correlation C Sig. (2-tailed) | .180 ^{**} | .187 ^{**} | .229 ^{**} | .234 ^{**} | .210 ^{**} | .226 ^{**} | .292 ^{**} | .368 ^{**} | .405 ^{**} | .410 ^{**} | .218 ^{**} | .230 ^{**} | .369 ^{**} | .495 ^{**} | .435 ^{**} | 1.000 | | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | | |
| TV adverts reinforces brand awareness for medical insurance companies | Correlation C Sig. (2-tailed) | .173 ^{**} | .196 ^{**} | .239 ^{**} | .319 ^{**} | .187 ^{**} | .134 ^{**} | .242 ^{**} | .257 ^{**} | .247 ^{**} | .158 ^{**} | .269 ^{**} | .242 ^{**} | .342 ^{**} | .385 ^{**} | .349 ^{**} | .427 ^{**} | 1.000 | | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | | |
| Giving branded gifts creates awareness for medical insurance companies | Correlation C Sig. (2-tailed) | .290 ^{**} | .215 ^{**} | .238 ^{**} | .273 ^{**} | .317 ^{**} | .249 ^{**} | .293 ^{**} | .282 ^{**} | .137 ^{**} | .211 ^{**} | .239 ^{**} | .196 ^{**} | .219 ^{**} | .313 ^{**} | .306 ^{**} | .361 ^{**} | .356 ^{**} | 1.000 | | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | | |
| Sponsorships towards international students events creates awareness | Correlation C Sig. (2-tailed) | .242 ^{**} | .270 ^{**} | .288 ^{**} | .355 ^{**} | .381 ^{**} | .251 ^{**} | .384 ^{**} | .277 ^{**} | .241 ^{**} | .252 ^{**} | .263 ^{**} | .233 ^{**} | .263 ^{**} | .376 ^{**} | .304 ^{**} | .310 ^{**} | .351 ^{**} | .448 ^{**} | 1.000 | | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | | |
| Personal selling through direct contact with the students provides information on the available medical insurance | Correlation C Sig. (2-tailed) | .125 ^{**} | .230 ^{**} | .237 ^{**} | .241 ^{**} | .199 ^{**} | .164 ^{**} | .290 ^{**} | .209 ^{**} | .198 ^{**} | .298 ^{**} | .249 ^{**} | .297 ^{**} | .230 ^{**} | .228 ^{**} | .317 ^{**} | .323 ^{**} | .236 ^{**} | .276 ^{**} | .474 ^{**} | 1.000 | | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | | |
| Internet Adverts keep on reminding students about available medical insurance companies | Correlation C Sig. (2-tailed) | .110 ^{**} | .213 ^{**} | .142 ^{**} | .148 ^{**} | .211 ^{**} | .257 ^{**} | .284 ^{**} | .136 ^{**} | .143 ^{**} | .188 ^{**} | .362 ^{**} | .247 ^{**} | .230 ^{**} | .189 ^{**} | .145 ^{**} | .183 ^{**} | .238 ^{**} | .261 ^{**} | .318 ^{**} | .312 ^{**} | 1.000 | | | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | | | |
| Facebook and all other social netw orks contributes to a greater extent in creating awareness to students | Correlation C Sig. (2-tailed) | .178 ^{**} | .123 ^{**} | .223 ^{**} | .217 ^{**} | .123 ^{**} | .200 ^{**} | .218 ^{**} | .222 ^{**} | .192 ^{**} | .165 ^{**} | .285 ^{**} | .301 ^{**} | .243 ^{**} | .180 ^{**} | .204 ^{**} | .155 ^{**} | .202 ^{**} | .267 ^{**} | .292 ^{**} | .307 ^{**} | .440 ^{**} | 1.000 | | | | | | | | | | |
| | N | 400 | 0.014 | 0.000 | 0.000 | 0.014 | 0.000 | 0.000 | 0.000 | 0.000 | 0.001 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | 0.002 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | 0.000 | | | | | | | | | |
| Word of mouth creates awareness to a greater extend to students. | Correlation C Sig. (2-tailed) | .198 ^{**} | .185 ^{**} | .354 ^{**} | .156 ^{**} | .209 ^{**} | .160 ^{**} | .294 ^{**} | .204 ^{**} | .203 ^{**} | .171 ^{**} | .126 ^{**} | .173 ^{**} | .150 ^{**} | .185 ^{**} | .183 ^{**} | .202 ^{**} | .122 ^{**} | .167 ^{**} | .260 ^{**} | .250 ^{**} | .250 ^{**} | .411 ^{**} | 1.000 | | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | | |
| Word of mouth from other students | Correlation C Sig. (2-tailed) | .125 ^{**} | .187 ^{**} | .202 ^{**} | .181 ^{**} | .137 ^{**} | 0.088 ^{**} | .122 ^{**} | .162 ^{**} | .273 ^{**} | .112 ^{**} | .210 ^{**} | 0.075 ^{**} | .112 ^{**} | .114 ^{**} | .167 ^{**} | .228 ^{**} | .136 ^{**} | .103 ^{**} | .153 ^{**} | .186 ^{**} | .156 ^{**} | .205 ^{**} | .334 ^{**} | 1.000 | | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | | |
| Sales presentation by a company representative around campus | Correlation C Sig. (2-tailed) | .176 ^{**} | .199 ^{**} | .269 ^{**} | .161 ^{**} | .230 ^{**} | .166 ^{**} | .219 ^{**} | .243 ^{**} | .250 ^{**} | .245 ^{**} | .196 ^{**} | 0.038 | 0.085 | .228 ^{**} | .118 ^{**} | .221 ^{**} | .133 ^{**} | .188 ^{**} | .199 ^{**} | .185 ^{**} | .237 ^{**} | .156 ^{**} | .251 ^{**} | .391 ^{**} | 1.000 | | | | | | | |
| | N | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 399 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | 400 | | | | | | |
| Internet browsing | Correlation C Sig. (2-tailed) | .101 ^{**} | .128 ^{**} | 0.098 | .220 ^{**} | .100 ^{**} | 0.068 ^{**} | .112 ^{**} | .170 ^{**} | .101 ^{**} | .172 ^{**} | .206 ^{**} | .273 ^{**} </ | | | | | | | | | | | | | | | | | | | | |

Appendix F: Pearson Chi-Square Tests

| | | Age Group | Gender | Race | Religion | Country of origin |
|---|------------|-----------|--------|--------|----------|-------------------|
| Price (affordability) | Chi-square | 15.361 | 1.165 | 14.135 | 6.662 | 124.847 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.222 | 0.884 | 0.292 | 0.879 | .000* |
| How well known is the medical insurance company | Chi-square | 14.697 | 4.289 | 9.588 | 19.260 | 100.404 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.258 | 0.368 | 0.652 | 0.082 | .001* |
| Good image of the medical insurance company (credibility) | Chi-square | 10.226 | 4.931 | 20.392 | 36.152 | 90.583 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.596 | 0.294 | 0.06 | .000* | .007* |
| Gifts offered when joining. | Chi-square | 18.937 | 3.962 | 15.383 | 27.171 | 89.169 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.090 | 0.411 | 0.221 | .007* | .009* |
| Benefits and limitations Of medical insurance packages | Chi-square | 12.942 | 2.605 | 20.064 | 29.082 | 100.186 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.373 | 0.626 | 0.066 | .004* | .001* |
| Quality of service. (customer care) | Chi-square | 5.251 | 1.355 | 19.386 | 23.163 | 106.378 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.949 | 0.852 | 0.08 | .026* | .000* |
| Availability of adequate information about the services to be provided. | Chi-square | 12.769 | 5.083 | 20.904 | 22.399 | 92.299 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.386 | 0.279 | 0.052 | .033* | .005* |
| The use of university broadcast email | Chi-square | 21.208 | 3.648 | 15.324 | 23.440 | 78.751 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | .047* | 0.456 | 0.224 | .024* | 0.053 |
| Advertising on University websites | Chi-square | 14.187 | 3.076 | 11.441 | 12.420 | 53.499 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.289 | 0.545 | 0.492 | 0.413 | 0.711 |
| Exhibitions by medical insurance companies during university opening days | Chi-square | 18.019 | 2.136 | 15.235 | 8.826 | 100.147 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.115 | 0.711 | 0.229 | 0.718 | .001* |
| Internet (social media , for instance facebook and youtube) | Chi-square | 16.945 | 5.300 | 27.934 | 19.452 | 65.213 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.152 | 0.258 | .006* | 0.078 | 0.3 |
| Newspaper and magazines adverts | Chi-square | 23.134 | 2.885 | 21.318 | 11.852 | 56.010 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | .027* | 0.577 | .046* | 0.458 | 0.622 |
| Advertising on University radio slots | Chi-square | 17.058 | 5.991 | 14.165 | 20.339 | 86.296 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.147 | 0.200 | 0.29 | 0.061 | .015* |
| Events sponsorship | Chi-square | 12.824 | 1.797 | 9.091 | 20.336 | 49.893 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.382 | 0.773 | 0.695 | 0.061 | 0.821 |

| | | | | | | |
|---|------------|--------|--------|--------|--------|--------|
| Sales promotions(gifts with company name printed on it) | Chi-square | 20.827 | 7.144 | 12.056 | 17.260 | 62.933 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.053 | 0.128 | 0.441 | 0.14 | 0.373 |
| Personal selling around university campuses during open days | Chi-square | 15.355 | 7.313 | 12.812 | 38.295 | 58.086 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.223 | 0.120 | 0.383 | .000* | 0.546 |
| TV adverts reinforces brand awareness for medical insurance companies | Chi-square | 29.056 | 2.752 | 11.887 | 37.798 | 91.594 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | .004* | 0.600 | 0.455 | .000* | .005* |
| Giving branded gifts creates awareness for medical insurance companies | Chi-square | 10.387 | 12.697 | 19.237 | 43.440 | 75.421 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.582 | .013* | 0.083 | .000* | 0.087 |
| Sponsorships towards international students events creates awareness | Chi-square | 17.124 | 7.217 | 24.778 | 14.855 | 63.923 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.145 | 0.125 | .016* | 0.249 | 0.34 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies | Chi-square | 15.982 | 5.120 | 12.170 | 12.426 | 33.914 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.192 | 0.275 | 0.432 | 0.412 | 0.997 |
| Internet Adverts keep on reminding students about available medical insurance companies | Chi-square | 18.607 | 2.025 | 13.026 | 13.718 | 31.217 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.098 | 0.731 | 0.367 | 0.319 | 0.999 |
| Facebook and all other social networks contributes to a greater extent in creating awareness to students | Chi-square | 16.888 | 1.457 | 12.277 | 16.015 | 43.542 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.154 | 0.834 | 0.424 | 0.191 | 0.946 |
| Word of mouth creates awareness to a greater extend to students. | Chi-square | 14.284 | 7.140 | 24.457 | 23.545 | 64.664 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.283 | 0.129 | .018* | .023* | 0.317 |
| Word of mouth from other students | Chi-square | 11.577 | 8.016 | 18.867 | 9.663 | 66.370 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.48 | 0.091 | 0.092 | 0.645 | 0.267 |
| Sales presentation by a company representative around campus | Chi-square | 19.472 | 1.295 | 16.641 | 21.806 | 76.610 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.078 | 0.862 | 0.164 | .040* | 0.073 |
| Internet browsing | Chi-square | 22.968 | 3.919 | 25.652 | 12.861 | 55.771 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | .028* | 0.417 | .012* | 0.379 | 0.631 |
| University pamphlets | Chi-square | 19.112 | 2.751 | 22.361 | 40.256 | 62.804 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.086 | 0.600 | .034* | .000* | 0.377 |
| University websites | Chi-square | 13.239 | 2.995 | 25.373 | 24.051 | 49.653 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.352 | 0.559 | .013* | .020* | 0.827 |
| TV adverts | Chi-square | 19.145 | 6.584 | 30.596 | 41.250 | 55.828 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.085 | 0.160 | .002* | .000* | 0.629 |

| | | | | | | |
|------------------------|------------|--------|--------|--------|--------|--------|
| Radio Advert | Chi-square | 20.978 | 8.099 | 24.904 | 29.554 | 39.849 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.051 | 0.088 | .015* | .003* | 0.979 |
| Received branded gifts | Chi-square | 17.539 | 10.188 | 28.721 | 25.157 | 61.990 |
| | df | 12 | 4 | 12 | 12 | 60 |
| | Sig. | 0.130 | .037* | .004* | .014* | 0.405 |

Appendix G: Frequency

| | | Age Group | | | |
|-------|-------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | 18-21 | 132 | 33.0 | 33.0 | 33.0 |
| | 22-25 | 126 | 31.5 | 31.5 | 64.5 |
| | 26-30 | 78 | 19.5 | 19.5 | 84.0 |
| | > 30 | 64 | 16.0 | 16.0 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

| | | Gender | | | |
|-------|--------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Male | 250 | 62.5 | 62.5 | 62.5 |
| | Female | 150 | 37.5 | 37.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

| | | Race | | | |
|-------|----------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | African | 270 | 67.5 | 67.5 | 67.5 |
| | Indian | 49 | 12.3 | 12.3 | 79.8 |
| | White | 59 | 14.8 | 14.8 | 94.5 |
| | Coloured | 22 | 5.5 | 5.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

| | | Religion | | | |
|-------|--------------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Christianity | 305 | 76.3 | 76.3 | 76.3 |
| | Islamic | 54 | 13.5 | 13.5 | 89.8 |
| | Hinduism | 19 | 4.8 | 4.8 | 94.5 |
| | Traditional | 22 | 5.5 | 5.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

| | | Country of origin | | | |
|-------|-----------|-------------------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Botswana | 34 | 8.5 | 8.5 | 8.5 |
| | Zimbabwe | 137 | 34.3 | 34.3 | 42.8 |
| | Congo | 28 | 7.0 | 7.0 | 49.8 |
| | Nigeria | 44 | 11.0 | 11.0 | 60.8 |
| | Uganda | 45 | 11.3 | 11.3 | 72.0 |
| | Germany | 43 | 10.8 | 10.8 | 82.8 |
| | Swaziland | 23 | 5.8 | 5.8 | 88.5 |
| | Zambia | 15 | 3.8 | 3.8 | 92.3 |
| | Namibia | 20 | 5.0 | 5.0 | 97.3 |
| | Burundi | 1 | 0.3 | 0.3 | 97.5 |
| | Lesotho | 1 | 0.3 | 0.3 | 97.8 |
| | Angola | 1 | 0.3 | 0.3 | 98.0 |

| | | | | | |
|------------------------------|----------------------|-----------|---------|---------------|--------------------|
| | India | 3 | 0.8 | 0.8 | 98.8 |
| | Sweden | 3 | 0.8 | 0.8 | 99.5 |
| | Siera Leone | 1 | 0.3 | 0.3 | 99.8 |
| | Mali | 1 | 0.3 | 0.3 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |
| Price (affordability) | | | | | |
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Not important at all | 7 | 1.8 | 1.8 | 1.8 |
| | Of little importance | 13 | 3.3 | 3.3 | 5.0 |
| | Neutral | 33 | 8.3 | 8.3 | 13.3 |
| | Important | 152 | 38.0 | 38.0 | 51.3 |
| | Very important | 195 | 48.8 | 48.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

How well known is the medical insurance company

| | | | | | |
|-------|----------------------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Not important at all | 7 | 1.8 | 1.8 | 1.8 |
| | Of little importance | 16 | 4.0 | 4.0 | 5.8 |
| | Neutral | 52 | 13.0 | 13.0 | 18.8 |
| | Important | 167 | 41.8 | 41.8 | 60.5 |
| | Very important | 158 | 39.5 | 39.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Good image of the medical insurance company (credibility)

| | | | | | |
|-------|----------------------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Not important at all | 8 | 2.0 | 2.0 | 2.0 |
| | Of little importance | 17 | 4.3 | 4.3 | 6.3 |
| | Neutral | 54 | 13.5 | 13.5 | 19.8 |
| | Important | 134 | 33.5 | 33.5 | 53.3 |
| | Very important | 187 | 46.8 | 46.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Gifts offered when joining.

| | | | | | |
|-------|----------------------|-----------|---------|---------------|--------------------|
| | | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | Not important at all | 35 | 8.8 | 8.8 | 8.8 |
| | Of little importance | 52 | 13.0 | 13.0 | 21.8 |
| | Neutral | 101 | 25.3 | 25.3 | 47.0 |
| | Important | 113 | 28.3 | 28.3 | 75.3 |
| | Very important | 99 | 24.8 | 24.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Benefits and limitations Of medical insurance packages

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 13 | 3.3 | 3.3 | 3.3 |
| | Of little importance | 24 | 6.0 | 6.0 | 9.3 |
| | Neutral | 63 | 15.8 | 15.8 | 25.0 |
| | Important | 119 | 29.8 | 29.8 | 54.8 |
| | Very important | 181 | 45.3 | 45.3 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Quality of service. (customer care)

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 7 | 1.8 | 1.8 | 1.8 |
| | Of little importance | 8 | 2.0 | 2.0 | 3.8 |
| | Neutral | 20 | 5.0 | 5.0 | 8.8 |
| | Important | 159 | 39.8 | 39.8 | 48.5 |
| | Very important | 206 | 51.5 | 51.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Availability of adequate information about the services to be provided.

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 7 | 1.8 | 1.8 | 1.8 |
| | Of little importance | 18 | 4.5 | 4.5 | 6.3 |
| | Neutral | 26 | 6.5 | 6.5 | 12.8 |
| | Important | 154 | 38.5 | 38.5 | 51.3 |
| | Very important | 195 | 48.8 | 48.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

The use of university broadcast email

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 16 | 4.0 | 4.0 | 4.0 |
| | Of little importance | 22 | 5.5 | 5.5 | 9.5 |
| | Neutral | 89 | 22.3 | 22.3 | 31.8 |
| | Important | 156 | 39.0 | 39.0 | 70.8 |
| | Very important | 117 | 29.3 | 29.3 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Advertising on University websites

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 9 | 2.3 | 2.3 | 2.3 |
| | Of little importance | 21 | 5.3 | 5.3 | 7.5 |
| | Neutral | 59 | 14.8 | 14.8 | 22.3 |
| | Important | 173 | 43.3 | 43.3 | 65.5 |
| | Very important | 138 | 34.5 | 34.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Exhibitions by medical insurance companies during university opening days

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 9 | 2.3 | 2.3 | 2.3 |
| | Of little importance | 19 | 4.8 | 4.8 | 7.0 |
| | Neutral | 38 | 9.5 | 9.5 | 16.5 |
| | Important | 184 | 46.0 | 46.0 | 62.5 |
| | Very important | 150 | 37.5 | 37.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Internet (social media , for instance facebook and youtube)

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 15 | 3.8 | 3.8 | 3.8 |
| | Of little importance | 23 | 5.8 | 5.8 | 9.5 |
| | Neutral | 59 | 14.8 | 14.8 | 24.3 |
| | Important | 172 | 43.0 | 43.0 | 67.3 |
| | Very important | 131 | 32.8 | 32.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Newspaper and magazines adverts

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 9 | 2.3 | 2.3 | 2.3 |
| | Of little importance | 35 | 8.8 | 8.8 | 11.0 |
| | Neutral | 61 | 15.3 | 15.3 | 26.3 |
| | Important | 187 | 46.8 | 46.8 | 73.0 |
| | Very important | 108 | 27.0 | 27.0 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Advertising on University radio slots

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|---------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 14 | 3.5 | 3.5 | 3.5 |
| | Of little importance | 33 | 8.3 | 8.3 | 11.8 |
| | Neutral | 71 | 17.8 | 17.8 | 29.6 |
| | Important | 155 | 38.8 | 38.8 | 68.4 |
| | Very important | 126 | 31.5 | 31.6 | 100.0 |
| | Total | 399 | 99.8 | 100.0 | |
| Missing | System | 1 | 0.3 | | |
| Total | | 400 | 100.0 | | |

Events sponsorship

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 13 | 3.3 | 3.3 | 3.3 |
| | Of little importance | 24 | 6.0 | 6.0 | 9.3 |
| | Neutral | 79 | 19.8 | 19.8 | 29.0 |
| | Important | 149 | 37.3 | 37.3 | 66.3 |
| | Very important | 135 | 33.8 | 33.8 | 100.0 |

| | | | | |
|-------|-----|-------|-------|--|
| Total | 400 | 100.0 | 100.0 | |
|-------|-----|-------|-------|--|

Sales promotions(gifts with company name printed on it)

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 15 | 3.8 | 3.8 | 3.8 |
| | Of little importance | 28 | 7.0 | 7.0 | 10.8 |
| | Neutral | 51 | 12.8 | 12.8 | 23.5 |
| | Important | 180 | 45.0 | 45.0 | 68.5 |
| | Very important | 126 | 31.5 | 31.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Personal selling around university campuses during open days

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|----------------------|-----------|---------|---------------|--------------------|
| Valid | Not important at all | 10 | 2.5 | 2.5 | 2.5 |
| | Of little importance | 20 | 5.0 | 5.0 | 7.5 |
| | Neutral | 64 | 16.0 | 16.0 | 23.5 |
| | Important | 151 | 37.8 | 37.8 | 61.3 |
| | Very important | 155 | 38.8 | 38.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

TV adverts reinforces brand awareness for medical insurance companies

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 9 | 2.3 | 2.3 | 2.3 |
| | Disagree | 14 | 3.5 | 3.5 | 5.8 |
| | Neutral | 50 | 12.5 | 12.5 | 18.3 |
| | Agree | 176 | 44.0 | 44.0 | 62.3 |
| | Strongly Agree | 151 | 37.8 | 37.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Giving branded gifts creates awareness for medical insurance companies

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 8 | 2.0 | 2.0 | 2.0 |
| | Disagree | 32 | 8.0 | 8.0 | 10.0 |
| | Neutral | 59 | 14.8 | 14.8 | 24.8 |
| | Agree | 173 | 43.3 | 43.3 | 68.0 |
| | Strongly Agree | 128 | 32.0 | 32.0 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Sponsorships towards international students events creates awareness

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 9 | 2.3 | 2.3 | 2.3 |
| | Disagree | 31 | 7.8 | 7.8 | 10.0 |
| | Neutral | 53 | 13.3 | 13.3 | 23.3 |

| | | | | |
|----------------|-----|-------|-------|-------|
| Agree | 161 | 40.3 | 40.3 | 63.5 |
| Strongly Agree | 146 | 36.5 | 36.5 | 100.0 |
| Total | 400 | 100.0 | 100.0 | |

Personal selling through direct contact with the students provides information on the available medical insurance companies

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 8 | 2.0 | 2.0 | 2.0 |
| | Disagree | 17 | 4.3 | 4.3 | 6.3 |
| | Neutral | 42 | 10.5 | 10.5 | 16.8 |
| | Agree | 182 | 45.5 | 45.5 | 62.3 |
| | Strongly Agree | 151 | 37.8 | 37.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Internet Adverts keep on reminding students about available medical insurance companies

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 6 | 1.5 | 1.5 | 1.5 |
| | Disagree | 26 | 6.5 | 6.5 | 8.0 |
| | Neutral | 48 | 12.0 | 12.0 | 20.0 |
| | Agree | 192 | 48.0 | 48.0 | 68.0 |
| | Strongly Agree | 128 | 32.0 | 32.0 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Facebook and all other social networks contributes to a greater extent in creating awareness to students

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 3 | 0.8 | 0.8 | 0.8 |
| | Disagree | 25 | 6.3 | 6.3 | 7.0 |
| | Neutral | 50 | 12.5 | 12.5 | 19.5 |
| | Agree | 184 | 46.0 | 46.0 | 65.5 |
| | Strongly Agree | 138 | 34.5 | 34.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Word of mouth creates awareness to a greater extend to students.

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 10 | 2.5 | 2.5 | 2.5 |
| | Disagree | 15 | 3.8 | 3.8 | 6.3 |
| | Neutral | 43 | 10.8 | 10.8 | 17.0 |
| | Agree | 173 | 43.3 | 43.3 | 60.3 |
| | Strongly Agree | 159 | 39.8 | 39.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Word of mouth from other students

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 20 | 5.0 | 5.0 | 5.0 |
| | Disagree | 12 | 3.0 | 3.0 | 8.0 |
| | Neutral | 56 | 14.0 | 14.0 | 22.0 |

| | | | | | |
|--|----------------|-----|-------|-------|-------|
| | Agree | 190 | 47.5 | 47.5 | 69.5 |
| | Strongly Agree | 122 | 30.5 | 30.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Sales presentation by a company representative around campus

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 22 | 5.5 | 5.5 | 5.5 |
| | Disagree | 13 | 3.3 | 3.3 | 8.8 |
| | Neutral | 53 | 13.3 | 13.3 | 22.0 |
| | Agree | 159 | 39.8 | 39.8 | 61.8 |
| | Strongly Agree | 153 | 38.3 | 38.3 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Internet browsing

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 12 | 3.0 | 3.0 | 3.0 |
| | Disagree | 33 | 8.3 | 8.3 | 11.3 |
| | Neutral | 74 | 18.5 | 18.5 | 29.8 |
| | Agree | 150 | 37.5 | 37.5 | 67.3 |
| | Strongly Agree | 131 | 32.8 | 32.8 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

University pamphlets

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 18 | 4.5 | 4.5 | 4.5 |
| | Disagree | 24 | 6.0 | 6.0 | 10.5 |
| | Neutral | 87 | 21.8 | 21.8 | 32.3 |
| | Agree | 146 | 36.5 | 36.5 | 68.8 |
| | Strongly Agree | 125 | 31.3 | 31.3 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

University websites

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 22 | 5.5 | 5.5 | 5.5 |
| | Disagree | 34 | 8.5 | 8.5 | 14.0 |
| | Neutral | 68 | 17.0 | 17.0 | 31.0 |
| | Agree | 144 | 36.0 | 36.0 | 67.0 |
| | Strongly Agree | 132 | 33.0 | 33.0 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

TV adverts

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 22 | 5.5 | 5.5 | 5.5 |
| | Disagree | 36 | 9.0 | 9.0 | 14.5 |
| | Neutral | 69 | 17.3 | 17.3 | 31.8 |
| | Agree | 155 | 38.8 | 38.8 | 70.5 |
| | Strongly Agree | 118 | 29.5 | 29.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Radio Advert

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 27 | 6.8 | 6.8 | 6.8 |
| | Disagree | 50 | 12.5 | 12.5 | 19.3 |
| | Neutral | 79 | 19.8 | 19.8 | 39.0 |
| | Agree | 130 | 32.5 | 32.5 | 71.5 |
| | Strongly Agree | 114 | 28.5 | 28.5 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Received branded gifts

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|-------------------|-----------|---------|---------------|--------------------|
| Valid | Strongly Disagree | 24 | 6.0 | 6.0 | 6.0 |
| | Disagree | 37 | 9.3 | 9.3 | 15.3 |
| | Neutral | 62 | 15.5 | 15.5 | 30.8 |
| | Agree | 113 | 28.3 | 28.3 | 59.0 |
| | Strongly Agree | 164 | 41.0 | 41.0 | 100.0 |
| | Total | 400 | 100.0 | 100.0 | |

Appendix H: Factor Analysis

| | | Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | Bartlett's Test of Sphericity | | |
|---|--|--|-------------------------------|----|-------|
| | | | Approx. Chi-Square | df | Sig. |
| B | Decision Making Process | 0.826 | 640.438 | 21 | 0.000 |
| C | Effectiveness of promotional tools | 0.807 | 1053.212 | 36 | 0.000 |
| D | Perception on promotional tools used in creating awareness | 0.746 | 554.674 | 21 | 0.000 |
| E | Information Source | 0.810 | 906.279 | 28 | 0.000 |

KMO and Bartlett's Test

| | | |
|--|--------------------|---------|
| Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | | 0.826 |
| Bartlett's Test of Sphericity | Approx. Chi-Square | 640.438 |
| | df | 21 |
| | Sig. | 0.000 |

Component Matrix^a

| B | Component 1 |
|---|----------------|
| Price (affordability) | 0.553 |
| How well known is the medical insurance company | 0.730 |
| Good image of the medical insurance company (credibility) | 0.716 |
| Gifts offered when joining. | 0.473 |
| Benefits and limitations Of medical insurance packages | 0.746 |
| Quality of service. (customer care) | 0.696 |
| Availability of adequate information about the services to be provided. | 0.650 |

Extraction Method: Principal Component Analysis.

a. 1 components extracted.

KMO and Bartlett's Test

| | | |
|--|--------------------|----------|
| Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | | 0.807 |
| Bartlett's Test of Sphericity | Approx. Chi-Square | 1053.212 |
| | df | 36 |
| | Sig. | 0.000 |

Rotated Component Matrix^a

| C | Component | | |
|---|-----------|-------|-------|
| | 1 | 2 | 3 |
| The use of university broadcast email | 0.156 | 0.783 | 0.084 |
| Advertising on University websites | 0.124 | 0.866 | 0.179 |
| Exhibitions by medical insurance companies during university opening days | 0.292 | 0.568 | 0.220 |
| Internet (social media , for instance facebook and youtube) | 0.025 | 0.197 | 0.743 |

| | | | |
|--|-------|-------|-------|
| Newspaper and magazines adverts | 0.169 | 0.129 | 0.830 |
| Advertising on University radio slots | 0.453 | 0.110 | 0.676 |
| Events sponsorship | 0.770 | 0.186 | 0.190 |
| Sales promotions(gifts with company name printed on it) | 0.773 | 0.077 | 0.239 |
| Personal selling around university campuses during open days | 0.743 | 0.345 | 0.001 |

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 5 iterations.

KMO and Bartlett's Test

| | | |
|--|--------------------|---------|
| Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | | 0.746 |
| Bartlett's Test of Sphericity | Approx. Chi-Square | 554.674 |
| | df | 21 |
| | Sig. | 0.000 |

Rotated Component Matrix^a

| D | Component | |
|---|-----------|-------|
| | 1 | 2 |
| TV adverts reinforces brand awareness for medical insurance companies | 0.642 | 0.101 |
| Giving branded gifts creates awareness for medical insurance companies | 0.802 | 0.060 |
| Sponsorships towards international students events creates awareness | 0.791 | 0.204 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies | 0.473 | 0.423 |
| Internet Adverts keep on reminding students about available medical insurance companies | 0.253 | 0.687 |
| Facebook and all other social networks contributes to a greater extent in creating awareness to students | 0.147 | 0.808 |
| Word of mouth creates awareness to a greater extend to students. | 0.020 | 0.745 |

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 3 iterations.

KMO and Bartlett's Test

| | | |
|--|--------------------|---------|
| Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | | 0.810 |
| Bartlett's Test of Sphericity | Approx. Chi-Square | 906.279 |
| | df | 28 |
| | Sig. | 0.000 |

Rotated Component Matrix^a

| E | Component | |
|--|-----------|-------|
| | 1 | 2 |
| Word of mouth from other students | 0.055 | 0.831 |
| Sales presentation by a company representative around campus | 0.249 | 0.785 |
| Internet browsing | 0.642 | 0.308 |
| University pamphlets | 0.682 | 0.220 |

| | | |
|------------------------|-------|--------|
| University websites | 0.691 | 0.241 |
| TV adverts | 0.771 | 0.156 |
| Radio Advert | 0.818 | -0.058 |
| Received branded gifts | 0.596 | 0.079 |

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 3 iterations.

Appendix I: Reliabilities

Reliability Statistics

| Cronbach's Alpha | N of Items |
|------------------|------------|
| 0.766 | 7 |

Reliability Statistics

| Cronbach's Alpha | N of Items |
|------------------|------------|
| 0.817 | 9 |

Reliability Statistics

| Cronbach's Alpha | N of Items |
|------------------|------------|
| 0.737 | 7 |

Reliability Statistics

| Cronbach's Alpha | N of Items |
|------------------|------------|
| 0.804 | 8 |

Appendix J: Chi Square Tests

| | Chi-Square | df | Asymp. Sig. |
|---|------------|----|-------------|
| Age Group | 34.8 | 3 | 0.000 |
| Gender | 25 | 1 | 0.000 |
| Race | 392.66 | 3 | 0.000 |
| Religion | 567.86 | 3 | 0.000 |
| Country of origin | 707.84 | 15 | 0.000 |
| Price (affordability) | 514.235 | 2 | 0.000 |
| How well known is the medical insurance company | 416.435 | 2 | 0.000 |
| Good image of the medical insurance company (credibility) | 399.365 | 2 | 0.000 |
| Gifts offered when joining. | 70.355 | 2 | 0.000 |
| Benefits and limitations Of medical insurance packages | 315.035 | 2 | 0.000 |
| Quality of service. (customer care) | 603.875 | 2 | 0.000 |
| Availability of adequate information about the services to be provided. | 523.265 | 2 | 0.000 |
| The use of university broadcast email | 229.205 | 2 | 0.000 |
| Advertising on University websites | 358.265 | 2 | 0.000 |
| Exhibitions by medical insurance companies during university opening days | 453.38 | 2 | 0.000 |
| Internet (social media , for instance facebook and youtube) | 325.505 | 2 | 0.000 |
| Newspaper and magazines adverts | 295.115 | 2 | 0.000 |
| Advertising on University radio slots | 249.203 | 2 | 0.000 |
| Events sponsorship | 261.995 | 2 | 0.000 |
| Sales promotions(gifts with company name printed on it) | 335.645 | 2 | 0.000 |
| Personal selling around university campuses during open days | 339.74 | 2 | 0.000 |
| TV adverts reinforces brand awareness for medical insurance companies | 424.685 | 2 | 0.000 |
| Giving branded gifts creates awareness for medical insurance companies | 317.615 | 2 | 0.000 |
| Sponsorships towards international students events creates awareness | 339.935 | 2 | 0.000 |
| Personal selling through direct contact with the students provides information on the available medical insurance companies | 449.585 | 2 | 0.000 |
| Internet Adverts keep on reminding students about available medical insurance companies | 392.96 | 2 | 0.000 |
| Facebook and all other social networks contributes to a greater extent in creating awareness to students | 402.26 | 2 | 0.000 |
| Word of mouth creates awareness to a greater extend to students. | 445.235 | 2 | 0.000 |
| Word of mouth from other students | 361.28 | 2 | 0.000 |
| Sales presentation by a company representative around campus | 360.335 | 2 | 0.000 |
| Internet browsing | 248.465 | 2 | 0.000 |
| University pamphlets | 220.805 | 2 | 0.000 |
| University websites | 229.52 | 2 | 0.000 |
| TV adverts | 219.905 | 2 | 0.000 |
| Radio Advert | 137.795 | 2 | 0.000 |
| Received branded gifts | 232.205 | 2 | 0.000 |