

Integrated Marketing Communication: Exposure and Discovery of Gender Reassignment Surgery Service Information in Thailand

Received: February 25, 2019 / Received in revised form: April 15, 2020 / Accepted: May 12, 2020

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Abstract

This study aims to explore how transgender persons are exposed to and discover information concerning gender reassignment surgery services in Thailand. Data was collected and analyzed from 530 close-ended questionnaire questions. The results found that both transwomen and transmen have been exposed to the information via various types of marketing communication strategies: 1) interpersonal communication, 2) public relations, 3) advertising, 4) sales promotion and special events, and 5) direct marketing communication, respectively. In addition to interpersonal communication in transgender networks, online marketing communication is also popular. Moreover, if study participants' media exposure, satisfaction and interaction are high, their decision to have the surgery will be high. It is a similar correlation for the reverse hypothesis. However, if they have interacted excessively with surgical content via communication media, specifically on the internet, they may reject surgery due to information overload.

Keywords: Transgender, Gender Reassignment Surgery, Healthcare Marketing, IMC, Media

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This article is based on the research conducted for the dissertation "Marketing Communication Processes and Psychological Classification for the Gender Reassignment Health Service Industry in Thailand through the Six Buddhist Temperaments" by Puntarika Rawikul for which Wichian Lattipongpun was the advisor. It was supported by a government grant for the doctoral dissertation awarded by National Institute of Development Administration in 2016.

Introduction

Gender dysphoria (GD) is the behavior of those who are not satisfied with the gender they were assigned at birth. Research shows this is caused by a person's perception that while they were born with a healthy body of one gender, psychologically, they feel they belong to the opposite gender or one of the increasing numbers of possible gender identities. The most accepted and common treatment for those suffering from this condition is sex reassignment surgery (SRS). Today, Thai surgeons conducting gender reassignment surgery are some of the most respected physicians worldwide (Sittinew, n.d.). Assoc. Prof. Dr. Preecha Tiewtranon, who was the first Thai surgeon to offer sex reassignment surgery, feels that Thailand is the best place in the world to have gender reassignment surgery because the surgery in Thailand gives the patient the most natural body shape that also performs in a way most similar to the newly acquired gender would normally. Furthermore, the costs are much lower when compared to the service in other countries ("Thai doctors don't daydream", 2013). These significantly lower costs coupled with the government's policy of promoting medical tourism, gender reassignment surgery in Thailand is attracting persons of various nationalities, particularly European, American, Australian, Japanese, Chinese and Middle Eastern medical tourists. This is in addition to Thailand's ASEAN neighbors, Myanmar and Cambodia. Thailand has become more popular than competing countries, including India, Singapore and South Korea ("Thailand, Sex Reassignment Surgery Center", 2011).

From the literary review, it was found that only four Thai studies directly relate to gender reassignment services and that more research on the topic is required. Overall, there has been very little research conducted on transgender issues in Thailand; no studies were found dealing with transgender persons making the change from female to male nor studies that examine the link between transgender persons and the gender

reassignment health services industry. A survey conducted in 2015 concluded that only 116 health studies of transsexuals had been conducted worldwide (Asia Pacific Transgender network, 2015).

Due to the expertise in gender reassignment surgery of doctors in Thailand combined with the reasonable cost rates compared with worldwide competitors, developing Thailand to be the world leader of gender reassignment surgery services is extremely feasible. To achieve this, Thailand must develop marketing strategies that best target individuals and provide them with the correct amount of information that best serves potential clients and business models. Furthermore, it is also important to achieve this without interfering with ethical issues such as "hard sell" to influence people who do not need surgery to ultimately choose to undergo the transition. This is a very sensitive issue and extreme care should be taken.

Research Objective

To study how targeted consumers, transgender persons, are exposed to and discover information for gender reassignment surgery services in Thailand

Related Literature

The Concept of Gender Reassignment Surgery

The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) of the American Psychiatric Association provides a definition according to a medical assessment for gender dysphoria (GD) (Green & Maurer, 2015), which is the condition in which the gender at birth anatomically does not conform with the gender identity of an individual causing them to feel uncomfortable with their gender and body from birth. During adolescence, or teenage development, these individuals will not feel that they are themselves in the body they were born into. This gender nonconformity can make them decide to change how they dress, behave and express themselves as well as influence aspects of their lives that they identify

with. Some may choose to undergo gender reassignment through hormone treatment or surgery (Parekh, 2016). Sex reassignment surgery refers to changing the sexual organs of a woman who wants to become a man or those of a man who wants to become a woman and, thus, is included under aesthetic or cosmetic surgery. There are also other procedures an individual undergoing sexual reassignment might want or require such as breast augmentation for a transwoman, breast reduction for a transman as well as facial reconstruction or surgery on other organs of the face and/or body to make the body and face appear more like the transitioned gender (Asia Pacific Transgender network, 2015). For this research, the phrase “Gender Reassignment Surgery” refers to all types of surgeries intended to cross gender.

The Concept of Integrated Marketing Communication (IMC)

IMC applies and coordinates multiple customer communications that are included in a single plan with a single goal. This is based on the thinking that a consumer will collect information that will then influence their purchasing behavior. Therefore, multiple methods will be employed to provide consumers with sufficient information (Wongmontha, 1997). For this research, integrated marketing communications has been divided into five classifications: 1) advertising, 2) interpersonal communication, 3) direct marketing communication, 4) public relations and 5) sales promotion and special events. This includes promotion through broadcast media, television and radio; print media and advertising boards; and now crucially, interactive digital media, which has become increasingly important as it relates to the theory of two-way communication. This theory explains how communication is circular (Schramm, 1954). Besides, interpersonal communication is not limited to just direct sales by sales personnel, but also includes communication between all individuals who influence consumers by providing them with

information on a service provider. They include: 1) family / friends, 2) famous people that have undergone or relate to the surgery, 3) people experienced with the surgical procedures, 4) physicians/medical personnel and 5) receptionists, which together match with the two-step flow communication theory by Paul F. Lazarsfeld, Bernard Berelson and Hazel Gaudet (1944) who stated the distribution of news follows two steps: 1) from the media to influencers and 2) from influencers to the general public. The essential factor is the influencers or opinion leaders.

The Concept of Information Seeking Process

The Media Exposure theory explains that news broadcasting is a very important factor in a consumer’s decision making. This demonstrates that people want as much news and information as possible before making a decision, or they will have a sense of uncertainty, or dissonance. Furthermore, it is not possible for a single person to be exposed to every news broadcast, so they will select the media they feel are the most beneficial to their individual and bespoke interests. Therefore, each media must be captivating and provide benefits if it is to succeed. It has to be in line with a consumer’s attitudes (Surasondhi, 1990). The uses and gratifications theory also explains, based on the notion that a consumer, or receiver, will determine what they want from a media and content, they will then make selections that can best satisfy their demands (Benjarongkij, 1991). Moreover, the interactive media theory explains that this requires a communication exchange that then requires some form of relationship between two parties, two-way communication, which begins with face-to-face communication (Rafaeli, 1988). At present, media interaction through the internet is one form of two-way communication without the need for a specific communication partner. However, the information on the internet is a huge data source that includes direct and indirect, accurate and distorted and finally, credible and unreliable information. When

people are exposed to too much information, they can be faced with conflicting or an overwhelming amount of information, or information overload, which causes the receiver to be confused and unable to make any decision from the gigantic amount of data (Toffler, 1984). For this research the three communication theories mentioned above were intergraded: 1) the media exposure theory 2) uses and gratifications theory and 3) interactive media theory, to for an "Information Seeking Process". The targeted customers will use this process to find information via IMC channels for making the decision to undergo gender reassignment surgical services in Thailand.

Related Research

Word-of-Mouth Communication in Thai Business by Chathatai Meepradit (2008) - The results showed that word-of-mouth communication plays three roles in Thai advertising: 1) helps reduce advertising and public relations, 2) increases brand awareness and 3) helps in the dissemination of information that is restricted under laws governing advertising. This research analyzed and discussed this form of communication between service users to provide information concerning the gender reassignment health service industry, which can have a high impact, or influence on the transgender network.

Integrated Marketing Communication Strategies of Surgical Clinic "Meko Clinic" by Sompradtana Promchuew (2009) - The results showed that Meko Clinic provided cosmetic surgery services promoted through an IMC strategy. Their biggest obstacle affecting their IMC was their inability to present a comprehensive range of interesting content because of the restrictions stated in the Ministry of Health Memorandum 11 (2003) concerning regulations on the methods and terms and conditions governing sanatorium advertising. Therefore, Meko Clinic chose to increase its use of the Meko Beauty website and social media with the most effective channel being

word-of-mouth. This research contributed to a better understanding of IMC of cosmetic surgery clinics, particularly the content and media selected. In addition, it showed the restrictions imposed on communications and courses of actions that can be taken to find solutions to current problems.

Marketing Communication and Consumer Behavior in Health Care Market by Yaowapa Pathomsirikul (2012) - The results showed that the marketing communication strategies employed by hospitals in the healthcare services business contributed to consumers gaining a positive impression of the hospitals and the healthcare they provided. Hospitals would choose to employ an IMC strategy that comprised: 1) recommendations and data on health by hospital personnel, 2) social media, 3) hospital websites and 4) public relations such as organizing community activities. This research provided greater understanding of the IMC strategies employed by healthcare service providers, particularly the media.

In short, from the related studies, the researcher became interested in 1) the IMC media of gender reassignment surgery services in Thailand that influence service users' decision making. This research was also conducted to explain 2) how and why word-of-mouth and online communication have an impact on service users' behaviors.

Research Methodology

This quantitative approach employed a survey research method, a one-shot description study by a close-ended questionnaire that was distributed through two methods. Firstly, it was distributed through the newly created website, <http://www.cmcgrst.com> and secondly, as a hard copy among potential transgender persons interested in gender reassignment surgery for both men wanting to make the change to be a woman and vice versa. The target demographic includes both Thai and non-Thai nationals from around the world, including Asia, Africa, America, Europe and

Oceana. A multi-state sampling was employed, i.e., 1) purposive sampling and 2) accidental sampling, in order to collect data from a minimum sampling of 400 participants. By applying the Yamane formula, a reliability of 95 percent and deviation of no more than 5 percent could be achieved (Yamane, 1973). A total of 530 questionnaires were submitted.

Research Results

The total participants were 530, and further breakdown showed that transwomen outnumbered transmen in the ratio of 4 to 1. Most of the respondents were between the ages of 20-39 years of age. 89.43 percent of the respondents were Thai and the remaining 10.57 percent were from the Americas, Europe, Asia, Africa and ethnic groups based in the Pacific Islands, which were predominantly Buddhist. With regards to livelihood, most of the respondents had graduated high school, vocational education or completed a

bachelor's degree. The respondents predominantly worked in a private organization with a monthly income not more than 30,000 Thai Baht.

The research found that when the clients were interested in gender reassignment surgery services, they would conduct an information seeking process via the media consisting of 3 steps: 1) media exposure, 2) media satisfaction and 3) media interaction, before making their decision. The data shows for the media exposure step the clients received 1) interpersonal communication, 2) public relations, 3) advertising, 4) sales promotion and special events and 5) direct marketing communication respectively. For the media satisfaction and interaction steps, they satisfied and interacted with 1) interpersonal communication, 2) public relations, 3) sales promotion and special events, 4) advertising and 5) direct marketing communication as shown in the table 1.

Table 1 Mean, standard deviation and meaning of the information seeking process via the media overall (n=530)

1	Interpersonal communication	Mean 2.99 S.D. 1.11 Moderate	Interpersonal communication	Mean 3.26 S.D. 1.10 Moderate	Interpersonal communication	Mean 2.75 S.D. 1.33 Moderate
2	Public relations	Mean 2.61 S.D. 1.21 Moderate	Public relations	Mean 2.65 S.D. 1.26 Moderate	Public relations	Mean 1.95 S.D. 1.40 Low
3	Advertising	Mean 2.38 S.D. 1.07 Low	Sales promotion and special events	Mean 2.55 S.D. 1.38 Low	Sales promotion and special events	Mean 1.93 S.D. 1.55 Low
4	Sales promotion and special events	Mean 2.10 S.D. 1.34 Low	Advertising	Mean 2.54 S.D. 1.14 Low	Advertising	Mean 1.87 S.D. 1.38 Low
5	Direct marketing communication	Mean 1.58 S.D. 1.38 Least	Direct marketing communication	Mean 1.95 S.D. 1.40 Low	Direct marketing communication	Mean 1.67 S.D. 1.46 Least

Note: 1. The mean is calculated from 5 levels (1 = lowest and 5 = highest).
 2. The mean refers to 1.00-1.80 = least, 1.81-2.60 = low, 2.61-3.40 = moderate, 3.41-4.20 = high, 4.21-5.00 = highest.
 3. It is acceptable if the standard deviation (S.D.) is greater than 1 but not greater than the mean.
 With careful consideration of each detail, the interpersonal communication method was the

channel the participants received information of gender reassignment service most among IMC. As shown in table 2 below, for the media exposure step, the top three rankings were interpersonal communication via: 1) experienced people on the surgical procedure, 2) famous people that have undergone or relate to the surgery and 3) family / friends. For the media satisfaction step, the top three rankings were via: 1) experienced people on the surgical procedure, 2) physicians / medical

personnel and 3) famous people that have undergone or relate to the surgery. For the media interaction step, the top three rankings were via: 1) experienced people on the surgical procedure, 2) family / friends and 3) physicians / medical personnel. The result pointed out that the most pertinent factors in the interpersonal communication was having direct experience, possessing an increased academic knowledge and/or familiarity respectively.

Table 2 Mean, standard deviation (S.D.) and meaning of the interpersonal communication in detail (n=530)

1	Via experienced people on the surgical procedure	Mean 3.71 S.D. 1.36 High	Via experienced people on the surgical procedure	Mean 3.75 S.D. 1.32 High	Via experienced people on the surgical procedure	Mean 3.12 S.D. 1.62 Moderate
2	Via famous people who have undergone or relate to the surgery	Mean 3.19 S.D. 1.47 Moderate	Via physicians / medical personnel	Mean 3.47 S.D. 1.50 High	Via family / friends	Mean 2.90 S.D. 1.70 Moderate
3	Via family / friends	Mean 2.99 S.D. 1.74 Moderate	Via famous people who have undergone or relate to the surgery	Mean 3.20 S.D. 1.41 Moderate	Via physicians / medical personnel	Mean 2.78 S.D. 1.60 Moderate
4	Via physicians / medical personnel	Mean 2.72 S.D. 1.56 Moderate	Via family / friends	Mean 3.17 S.D. 1.53 Moderate	Via famous people who have undergone or relate to the surgery	Mean 2.69 S.D. 1.60 Moderate
5	Via receptionists	Mean 2.34 S.D. 1.61 Low	Via receptionists	Mean 2.69 S.D. 1.51 Moderate	Via receptionists	Mean 2.30 S.D. 1.62 Low

Note: 1. The mean is calculated from 5 levels (1 = lowest and 5 = highest).

2. The mean refers to 1.00-1.80 = least, 1.81-2.60 = low, 2.61-3.40 = moderate, 3.41-4.20 = high, 4.21-5.00 = highest.

3. It is acceptable if the standard deviation (S.D.) is greater than 1 but not greater than the mean.

Public relations was the IMC channel that respondents received the information of gender reassignment service at the second most frequency. As detailed in table 3 below, from the media exposure to media interaction steps, all of the top three rankings were public relations which can be further broken down into: 1) social media, 2) website and 3) television. This data shows that

in the internet era multi-screen displays such as smartphones, computers and television, have a very large influence on transgender persons regarding their search for information. The data also shows that printed media and radio had a very low frequency of acceptance.

Table 3 Mean, standard deviation (S.D.) and meaning of the public relations in detail (n=530)

1	Via social media	Mean 3.68 S.D. 1.49 High	Via social media	Mean 3.34 S.D. 1.51 Moderate	Via social media	Mean 2.72 S.D. 1.78 Moderate
2	Via website	Mean 3.50 S.D. 1.44 High	Via website	Mean 3.22 S.D. 1.47 Moderate	Via website	Mean 2.53 S.D. 1.75 Low
3	Via TV	Mean 2.57 S.D. 1.60 Low	Via TV	Mean 2.74 S.D. 1.61 Moderate	Via TV	Mean 1.79 S.D. 1.68 Low
4	Via magazine	Mean 2.36 S.D. 1.60 Low	Via magazine	Mean 2.50 S.D. 1.61 Low	Via magazine	Mean 1.75 S.D. 1.66 Low
5	Via newspaper	Mean 1.96 S.D. 1.60 Low	Via newspaper	Mean 2.20 S.D. 1.60 Low	Via newspaper	Mean 1.51 S.D. 1.59 Least
6	Via radio	Mean 1.62 S.D. 1.54 Least	Via radio	Mean 1.89 S.D. 1.54 Low	Via radio	Mean 1.41 S.D. 1.57 Least

- Note:
1. The mean is calculated from 5 levels (1 = lowest and 5 = highest).
 2. The mean refers to 1.00-1.80 = least, 1.81-2.60 = low, 2.61-3.40 = moderate, 3.41-4.20 = high / 4.21-5.00 = highest.
 3. It is acceptable if the standard deviation (S.D.) is greater than 1 but not greater than the mean.
 4. If the standard deviation (S.D.) is greater than the mean, be careful of disunity of data.

Advertising was the IMC channel respondents received information of gender reassignment service at the third most frequency. As detailed in table 4 below, for the media exposure step, the top three rankings were advertising: 1) on social media, 2) on websites and 3) in magazines. For the media satisfaction and interaction steps, the top three rankings were: 1) social media, 2) websites and 3) TV commercials. This confirms that today, multi-screen

displays such as smartphones, computers and televisions, influence transgender persons more than the other outlets. Advertising in magazines was the medium that dominated advertising for gender reassignment surgery services previously. However, this role has been replaced with advertising via the internet, social media and online publications such as websites. Therefore, a more interactive approach appears to be more popular

Table 4 Mean, standard deviation (S.D.) and meaning of the advertising in detail (n=530)

1	Ads on social media	Mean 4.08 S.D. 1.37 High	Ads on social media	Mean 3.51 S.D. 1.44 High	Ads on social media	Mean 3.03 S.D. 1.78 Moderate
2	Website	Mean 3.98 S.D. 1.38 High	Website	Mean 3.40 S.D. 1.38 Moderate	Website	Mean 2.81 S.D. 1.77 Moderate
3	Magazine ads	Mean 2.34 S.D. 1.58 Low	TV commercial	Mean 2.79 S.D. 1.59 Moderate	TV commercial	Mean 1.76 S.D. 1.74 Least
4	TV commercial	Mean 2.32 S.D. 1.68 Low	Magazine ads	Mean 2.51 S.D. 1.48 Low	Magazine ads	Mean 1.60 S.D. 1.62 Least
5	Billboard	Mean 1.80 S.D. 1.53 Least	Newspaper ads	Mean 2.16 S.D. 1.51 Low	Newspaper ads	Mean 1.45 S.D. 1.60 Least
6	City ads	Mean 1.69 S.D. 1.55 Least	Billboard	Mean 2.08 S.D. 1.47 Low	Billboard	Mean 1.44 S.D. 1.56 Least
7	Newspaper ads	Mean 1.62 S.D. 1.48 Least	City ads	Mean 2.04 S.D. 1.48 Low	City ads	Mean 1.52 S.D. 1.62 Least
8	Spot radio	Mean 1.19 S.D. 1.34 Least	Spot radio	Mean 1.81 S.D. 1.45 Low	Spot radio	Mean 1.36 S.D. 1.55 Least

- Note:
1. The mean is calculated from 5 levels (1 = lowest and 5 = highest).
 2. The mean refers to 1.00-1.80 = least, 1.81-2.60 = low, 2.61-3.40 = moderate, 3.41-4.20 = high, 4.21-5.00 = highest.
 3. It is acceptable if the standard deviation (S.D.) is greater than 1 but not greater than the mean.
 4. If the standard deviation (S.D.) is greater than the mean, be careful of disunity of data.

Sales promotion and special events were the IMC channel participants received information of gender reassignment service at the fourth most frequency. As detailed in table 5 below, for the media exposure to media interaction steps, all of the top three rankings were via: 1) transgender association activities, 2) special offer or discount on

the surgery and 3) transgender beauty contests. Although transgender persons received sales promotions and special events at low frequency, it was observed that transgender association activities were first in all rankings, which means they have a quite strong aggregation for distributing information.

Table 5 Mean, standard deviation (S.D.), meaning of the sales promotion and special events in detail (n=530)

1	Via transgender association activities	Mean 2.82 S.D. 1.69 Moderate	Via transgender association activities	Mean 3.10 S.D. 1.63 Moderate	Via transgender association activities	Mean 2.42 S.D. 1.85 Low
2	Via special offer or discount on surgery	Mean 2.40 S.D. 1.76 Low	Via special offer or discount on surgery	Mean 2.65 S.D. 1.68 Low	Via special offer or discount on surgery	Mean 2.00 S.D. 1.81 Low
3	Via transgender beauty contests	Mean 2.82 S.D. 1.69 Low	Via transgender beauty contests	Mean 2.60 S.D. 1.60 Low	Via transgender beauty contests	Mean 1.96 S.D. 1.79 Low
4	Via contest rewards towards surgery	Mean 1.91 S.D. 1.72 Low	Via academic activities	Mean 2.53 S.D. 1.62 Low	Via academic activities	Mean 1.93 S.D. 1.74 Low
5	Via the Sister's Hand project (free surgery)	Mean 1.88 S.D. 1.72 Low	Via the Sister's Hand project (free surgery)	Mean 2.44 S.D. 1.70 Low	Via the Sister's Hand project (free surgery)	Mean 1.78 S.D. 1.75 Least
6	Via academic activities	Mean 1.88 S.D. 1.65 Low	Via contest rewards towards surgery	Mean 2.40 S.D. 1.64 Low	Via contest rewards towards surgery	Mean 1.73 S.D. 1.72 Least
7	Via 1 get 1 free promotion on the surgery	Mean 1.47 S.D. 1.71 Least	Via 1 get 1 free promotion on the surgery	Mean 2.14 S.D. 1.74 Low	Via 1 get 1 free promotion on the surgery	Mean 1.69 S.D. 1.76 Least

Note: 1. The mean is calculated from 5 levels (1 = lowest and 5 = highest).
 2. The mean refers to 1.00-1.80 = least, 1.81-2.60 = low, 2.61-3.40 = moderate, 3.41-4.20 = high, 4.21-5.00 = highest.
 3. It is acceptable if the standard deviation (S.D.) is greater than 1 but not greater than the mean.
 4. If the standard deviation (S.D.) is greater than the mean, be careful of disunity of data.

The direct marketing communication was the channel of IMC that the clients received the information of gender reassignment service at the least prevalent frequency. As detailed in the table 6 below, for the media exposure to media interaction steps, all of the top three rankings were 1) Via chat applications, 2) via telephone, and 3) via E-mail. Although transgender persons received the direct marketing communication at the lowest frequency,

the researcher discovered an interesting trend the direct marketing communication via chat applications, the newest medium at present, is the number one in all rankings, while telephone and E-mail outlets have a reduced role. In addition to that, the conclusion can be drawn that the outlet of traditional mail is usually declined.

Table 6 Mean, standard deviation (S.D.) and meaning of the direct marketing communication in detail (n=530)

1	Via chat applications	Mean 2.32 S.D. 1.87 Low	Via chat applications	Mean 2.46 S.D. 1.72 Low	Via chat applications	Mean 2.16 S.D. 1.82 Low
2	Via telephone	Mean 1.65 S.D. 1.74 Least	Via telephone	Mean 1.99 S.D. 1.71 Least	Via telephone	Mean 1.66 S.D. 1.71 Least
3	Via E-mail	Mean 1.56 S.D. 1.67 Least	Via E-mail	Mean 1.98 S.D. 1.67 Low	Via E-mail	Mean 1.65 S.D. 1.68 Least
4	Via SMS	Mean 1.28 S.D. 1.59 Least	Via SMS	Mean 1.76 S.D. 1.62 Least	Via SMS	Mean 1.54 S.D. 1.70 Least
5	Via mail	Mean 1.07 S.D. 1.56 Least	Via mail	Mean 1.55 S.D. 1.63 Least	Via mail	Mean 1.32 S.D. 1.67 Least

- Note:
1. The mean is calculated from 5 levels (1 = lowest and 5 = highest).
 2. The mean refers to 1.00-1.80 = least, 1.81-2.60 = low, 2.61-3.40 = moderate, 3.41-4.20 = high, 4.21-5.00 = highest.
 3. It is acceptable if the standard deviation (S.D.) is greater than 1 but not greater than the mean.
 4. If the standard deviation (S.D.) is greater than the mean, be careful of disunity of data.

Discussion

Focusing on commercial gain and disseminating content concerning the gender reassignment health service industry, service providers, particularly private sanatoriums, will employ integrated marketing communications which Seri Wongmontha (1997) explained as having many forms of communication employed in a plan and with similar goals such as personal communication, public relations, advertising, sales promotion and special events and direct marketing communication. This agrees with Sompradtana Promchuew (2009), who found that Thai cosmetic surgery clinics applied different forms of integrated marketing communication, including advertising, sales promotion, public relations and direct marketing. This study also found that the marketing communication for the gender reassignment health service industry has a communication style that is moderately interesting and meets participants' demands for useful

information (Benjarongkij, 1991). This then supports their exchanging information with others by especially expressing their opinion through face-to-face communication (Rafaeli, 1988) and interactive communication through the internet. Furthermore, it relates significantly to their decision making to undergo surgery.

In personal communication, particularly with persons with direct gender reassignment surgery experience, Paul Lazarsfeld et al. (1944) explained that communication would flow from service providers through the media to reach influencers and then from the influencers to potential clients. In this case, based on transgenders who belong to a very strong reference group, news offered by the service providers disseminated through the media did not always directly reach them as it also requires personal influence or the support of opinion leadership. This form of communication is mostly outside the control of sanatoriums, legislation and the Thai Medical

Council. These findings are in agreement with Sompradtana Promchuew (2009), who found that word-of-mouth communication is the most influential in the integrated marketing communication strategy of cosmetic surgery clinics in Thailand, and Chathatai Meepradit (2008), who said that word-of-mouth communication plays an important role in supporting the dissemination of advertising information that could be restricted by Thai law.

For integrated marketing communication through the internet, it was found that this technology is ideal for the gender reassignment health service industry because gender reassignment is personal, exclusively for persons suffering from gender dysphoria (Green & Maurer, 2015), so privacy is important to maintain. Furthermore, service users are most open to the media that can be interacted with. The internet has become a vital means for two-way communication (Schramm, 1954), which is in agreement with the research of Yaowapa Pathomsirikul (2012), who found that hospitals should choose to use marketing communication via online social media and their website. Sompradtana Promchuew (2009) also found that the reason for communicating via

websites is to avoid laws governing sanatorium advertising.

Based on the statistical hypothesis testing of the IMC information seeking process for gender reassignment surgery services as presented in table 7, although service users overall show media exposure, satisfaction and interaction with each type of channel at a low to mid-level, the research found high-level positive correlations to each other ($r = .794$ to $.894$). All of these also relate to the decision to have gender reassignment surgery services in Thailand ($\text{Sig} < .05$). This data implies that when media exposure, media satisfaction and media interaction are high, the decision to have gender reassignment surgery services in Thailand will also be high. On the other hand, when media exposure, media satisfaction and media interaction are low, the final decision to have gender reassignment surgery services in Thailand will also be low. Nevertheless, when targeted customers interact extremely often with information via marketing communication channels, the decision to have gender reassignment surgery services may decline ($R^2 = .015$) due to information overload (Toffler, 1984).

Table 7 Statistical hypothesis testing of the IMC information seeking process for gender reassignment surgery services (n=530)

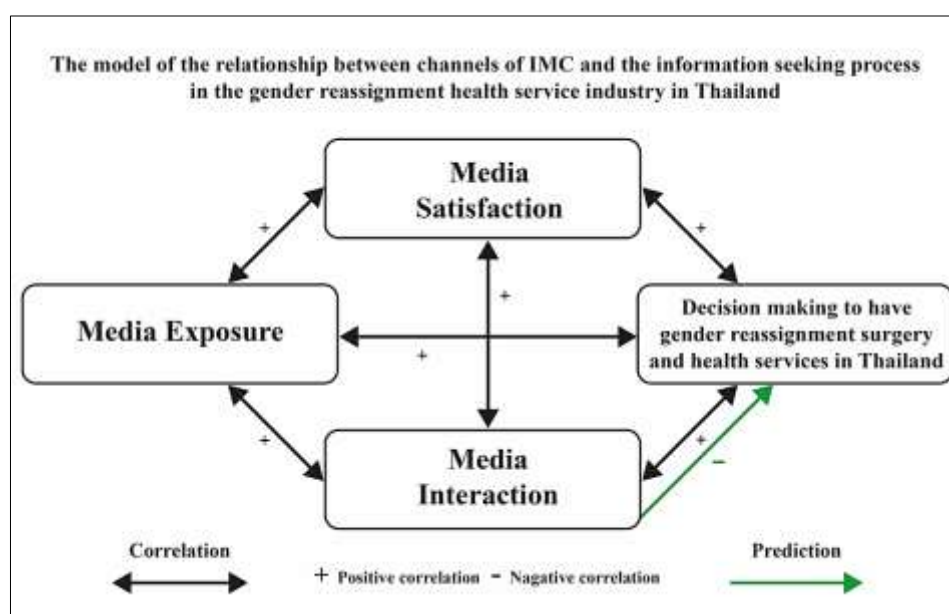
1) Media exposure is related to satisfaction of media concerning gender reassignment surgery and health services.	Media exposure and media satisfaction	Pearson Correlation test	.00	$r = .843$
2) Media exposure is related to interaction with media concerning gender reassignment surgery and health services.	Media exposure and media interaction	Pearson Correlation test	.00	$r = .894$
3) Media satisfaction is related to interaction with media concerning gender reassignment surgery and health services.	Media satisfaction and media interaction	Pearson Correlation test	.00	$r = .794$
4) Service users with different decision making to undergo gender reassignment surgery and health services have different media exposure.	Decision making to undergo gender reassignment surgery and media exposure.	F-test based on ANOVA statistical analysis and Post Hoc test	.033	S.D. is not greater than the mean.

Table 7 Statistical hypothesis testing of the IMC information seeking process for gender reassignment surgery services (n=530) (Continued)

5) Service users with different decision making to undergo gender reassignment surgery and health services have different media satisfaction.	Decision making to undergo gender reassignment surgery and media satisfaction.	F-test based on ANOVA statistical analysis and Post Hoc test	.015	S.D. is not greater than the mean.
6) Service users with different decision making to undergo gender reassignment surgery and health services have different media interaction.	Decision making to undergo gender reassignment surgery and media interaction	F-test based on ANOVA statistical analysis and Post Hoc test	.007	S.D. is not greater than the mean.
7) Media interaction is the most effective variable to explain the decision to undergo gender reassignment surgery and health services in Thailand.	Media interaction and decision making to undergo gender reassignment surgery	Multiple Regression and variable selection applying the Stepwise equation	.004	$R^2 = .015$

For a more concrete understanding, the model of the relationship between IMC channels and the information seeking process in the gender

reassignment health service industry in Thailand is presented below in diagram 1.

**Diagram 1** The model of the relationship between channels of IMC and the information seeking process in the gender reassignment health service industry in Thailand

Suggestions

1. Interpersonal communication, in particular word-of-mouth communication via experienced people involved with the surgery, is the most important and highly effective IMC communication channel and cannot be controlled. Therefore, service providers in the gender reassignment service industry should find a way to strategically manage this type of communication to ensure a healthy and positive image is maintained. Moreover, they should increase two-way communications between physicians and targeted customers for a better outcome, particularly in conversations through transgender web boards and Facebook Live, which are effective tools as the digital trend becomes more impactful.

2. Due to the emergence of the internet era, public relations and advertising in the gender reassignment service industry via social media, websites and television broadcasts are popular. Service providers should plan to integrate the communication of information through multi-screen and interactive displays, including smartphones, computers and televisions for optimal effectiveness.

3. Transgender persons have a high influence in distributing information to each other, so creating special events related to these associations is a great idea to promote services. Moreover, providing special offers or discounts on the surgery is can be effective promotional tactics to meet targeted customers' needs.

4. Although direct marketing communication is not popular today in the gender reassignment service industry, direct marketing via chat applications is an effective way to keep private contact with targeted potential customers in the era of interactive smartphones.

5. For the information seeking process, especially media interactions via the internet, the sender, or service providers, should pursue extreme diligence not to overload the receiver with information as this will decrease their level of acceptance. It is important to ensure the correct balance of information is available to maximize potential clients and be ultimately successful.

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