



CORPORATE IDENTITY DIMENSIONS IN LATVIAN HEALTH CARE ENTERPRISES: RESULTS OF EXPERT SURVEY

Didzis Rutitis¹, Anda Batraga², Lauma Muizniece¹, Kristofers Ritovs¹

¹BA School of Business and Finance, Latvia, Riga, ²University of Latvia, Latvia, Riga

Abstract

There have been quite many discussions and debate in public media over general health care financing models and the State financing distribution principles, but quite little analysis of general management of health care enterprises that offer paid health care services (either in addition to State subsidized or solely) and, thus, compete within the health care services market. Therefore, there is a need to define a managerial perspective that could contribute to analysis of the health care sector, and explore it on the individual health care enterprise level. The novelty and main contribution of this paper is that it has examined applicability of corporate identity model by Melewar and Jenkins (2002) for analysis of corporate identity formation and management within the State-owned, municipality, and private health care enterprises using expert interview method and survey of 7 top managers from the leading Latvian health care enterprises. Expert interviews reflected partial applicability of corporate identity dimensions outlined by Melewar and Jenkins (2002) in their corporate identity framework to health care enterprises, and highlighted essence of specific individual factors that contribute to formation of general corporate identity dimensions. Results suggest that general managers agree on corporate culture and behaviour dimensions being those that contribute mostly to formation of hospital and health care enterprise corporate identity due to the fact that the core philosophy, mission and goal of health care enterprises are the individual dimension factors related to the *raison d'être* – the ultimate reason of hospital existence, and the employee behaviour is the main factor from general behaviour dimension through which people perceive and interact with the hospital corporate identity. Further research is intended to test findings from the expert survey among health care customers. KEYWORDS: corporate identity, management, health care, services marketing, expert survey.

Introduction

Currently, the entire Latvian health care system is undergoing another cycle of screening and analysis by the Ministry of Health of the Republic of Latvia and different related State departments with an aim of developing sustainable long term health care model. There have been quite many discussions and debate in public media over general health care financing models and the State financing distribution principles, but quite little analysis of general management of health care enterprises that offer paid health care services (either in addition to State subsidized or solely) and thus compete within the health care services market. Therefore, there is a need to define a managerial perspective that could contribute to analysis of the health care sector, and explore it on the health care enterprise level.

Corporate identity is an interdisciplinary management and marketing concept known from 1970s, when it was first distinguished apart from the corporate image concept (Dowling, 1986). Since then the most of corporate identity concept research has been related to various business sectors, but there is quite little research available on corporate identity of public sector enterprises – only few papers available with the research of the education sector and the university corporate identity, e.g. by Melewar and Akel (2005), Mohamad *et al* (2007), Atakan and Eker (2007), while none referring to health care enterprises.

The aim of this paper is to reflect the findings from expert interviews of the general managers of leading Latvian health care enterprises (State, municipality and privately-owned) in order to determine the applicability

of corporate identity framework applicability to health care sector and reflect on possibilities for management of corporate identity dimensions in the health care enterprises.

The structure of the paper is as follows. The next chapter provides analysis and evaluation of corporate identity conceptual background and theoretical background. Then the authors introduce research methodology, followed by expert interview results and identification of the corporate identity dimensions that are applicable for Latvian health care enterprises.

Corporate identity conceptual background

According to Melewar and Jenkins (2002), there have been introduced various corporate identity definitions over time to describe the essence of the corporate identity and each of them relates to different mix of the organizational structure elements and management approach practices – starting from Dowling's statement (1986) for corporate identity to be "what an organization is", until more recent definitions, e.g. by Balmer and Soenen (1998), who assume corporate identity to be "mix as being composed of the mind, soul, and voice. The mind consists of managerial vision, corporate philosophy, strategy, performance, brand architecture, nature of corporate ownership, and organizational history. The soul consists of the subjective elements including the distinct values, mix of sub-cultures, employee affinities, and internal images. The 'voice' is the total corporate communication and consists of its uncontrolled communication, controllable communication, symbolism, employee and corporate behavior, and indirect

external/third party) communication”. This is supported by Ollins (1995), who assumes corporate identity management to be “the explicit management of all the ways in which the organization presents itself through experiences and perceptions to all its audiences”. In the context of corporate marketing mix, Balmer and Greyser (2006) define corporate identity as “What we indubitably are”.

Other papers regarding corporate identity relate to cross-disciplinary examination of the identity concept and thus conclude that corporate identity should be analyzed broader than simple marketing concept. For instance, Cornelissen *et al* (2007) explore issues of social, organizational and corporate identity indicating differences in the form and focus of research into these three topics. According to them, the social identity work generally examines issues of cognitive process and structure; organizational identity research tends to address the patterning of shared meanings; studies of corporate identity tend to focus on products that communicate a specific image. Nonetheless, across these areas there is general consensus that collective identities are (a) made viable by their positivity and distinctiveness, (b) fluid, (c) a basis for shared perceptions and action, (d) strategically created and managed, (e) qualitatively different from individual identities and (f) the basis for material outcomes and products.

Karaosmanoglu and Melewar (2005) provide a research agenda to examine the relationship between

corporate communication, identity and image and present a conceptual framework for further empirical testing.

In contrast, Bouchikhi and Kimberly [8] argue that “visible elements of a firm are held together by a set of shared beliefs – sometimes implicit, sometimes explicit – that define its essence. This set of shared beliefs, called I-dimension, gives the visible elements of the firm coherence and puts boundaries around how much change is possible without altering its essence”. They interpret corporate identity through I-dimension that “resides in multiple anchors, such as core business, knowledge base, nationality, operating philosophy, a legendary founder, a governance structure, or combinations of these”.

According to Bouchikhi and Kimberly, “any aspect that key stakeholders (employees, owners, suppliers, customers, hospitalers, shareholders) view as core, enduring, and distinctive about an organization is part of its identity.”

Corporate identity management

Corporate identity management as a managerial process has been reviewed by several researchers. Stuart (1999) summarized main findings from the initial attempts to propose corporate identity management models by Kennedy (1977), Dowling (1986), Abratt (1989), Baker and Balmer (1997), Marwick and Fill (1997), van Riel and Balmer (1997), and Stuart (1998).

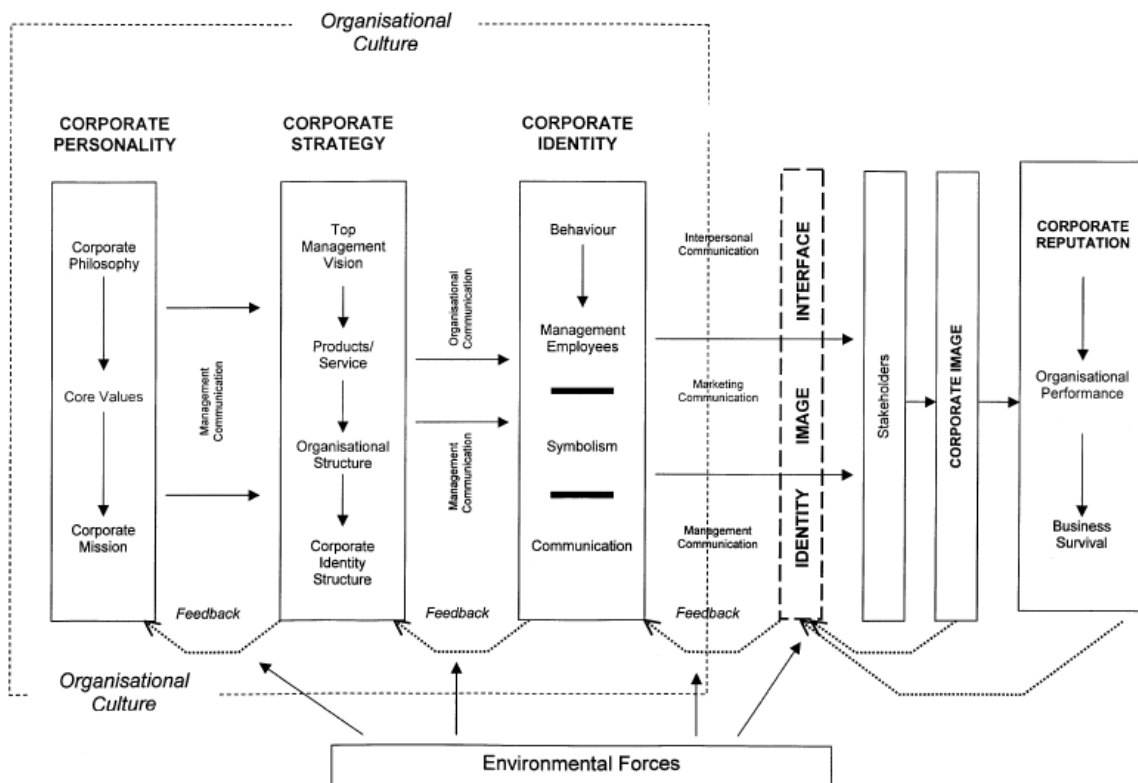


Figure 1. Corporate Identity Management Model by Stuart (1999)

However, her attempt resulted in a rather general theoretical framework in Fig.1., which was later further developed by Melewar and Jenkins (2002) for the

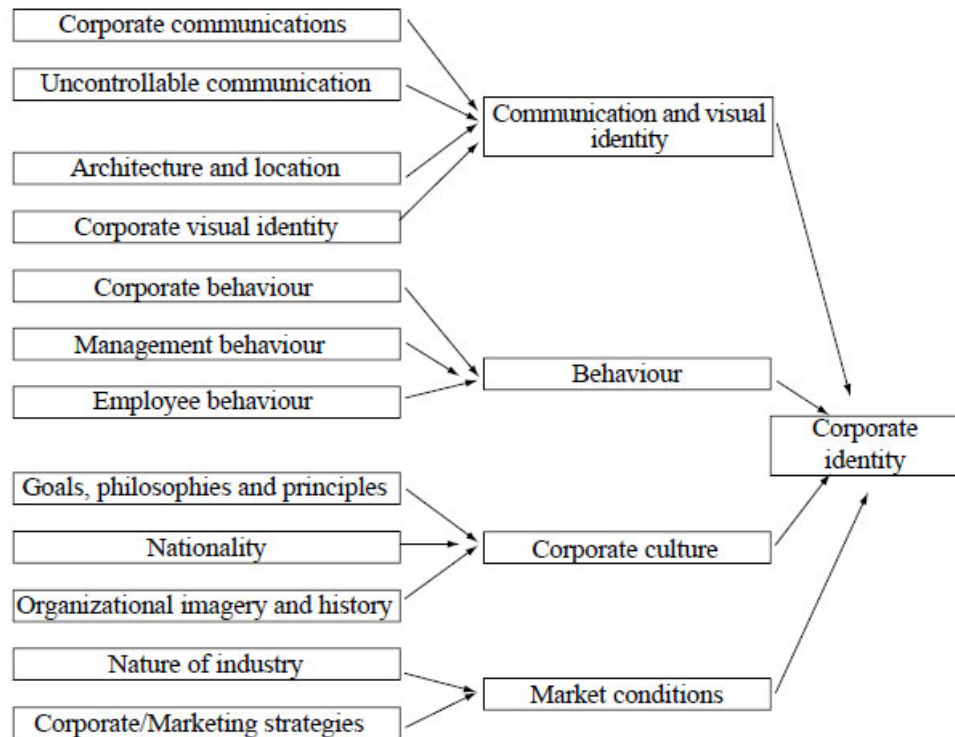
empirical application and analysis of individual corporate identity dimensions within the Corporate Identity Model.

Still, it is essential to note that Stuart contributed to gathering the initial set of the individual corporate identity elements, which were later included in the sets of general corporate identity dimensions developed by Melewar and Jenkins (2002).

Corporate identity framework by Melewar and Jenkins (2002)

Despite the existence of various corporate identity definitions and recent findings related to corporate

identity formation, the literature review reflects that corporate identity model by Melewar and Jenkins (2002) is the most relevant conceptual framework for the analysis of health care enterprise corporate identity due to its comprehensive nature bringing together various marketing management and organizational management perspectives and individual dimensions that all contribute to formation of the corporate identity.



Source: Melewar and Jenkins (2002). Corporate Identity Model

Figure 2. Corporate Identity Model by Melewar and Jenkins (2002)

According to Melewar and Jenkins (2002), corporate identity is made of several sub-constructs, which contribute to formation of corporate identity of any organization. These general sub constructs are:

- Communication and visual identity
- Behaviour
- Corporate culture
- Market conditions

Each of these sub constructs or dimensions joins several groups of factors relating to the formation of the specific sub construct:

1) Communication and visual identity includes:

- Corporate communications – any communications solutions and activities, internal and external, which are managed and implemented by the hospital employees. According to Melewar and Jenkins (2002), “corporate communication encompasses management communication, marketing communication, and organizational communication. Of the three, management communication is the most important, as it is the primary

means by which top level managers disseminate the goals and objectives of the organization to internal stakeholders.” (p. 82).

- Uncontrollable communication – this factor relates to the communication between hospital employees and the outsiders - external parties or stakeholders. Moreover, taking into account the increasing availability of the Internet and changing media consumption patterns, this factor would include also online communication in social networks and media, gossip, opinions and communication by any external parties within and outside the Internet environment.

- Architecture and location – this relates to the physical location of the hospital building and premises.

- Corporate visual identity – visual identity guidelines and their implementation in daily communication, media, and working environment, both internal and external.

2) Behaviour includes:

- Corporate behaviour – any actions by company in general;

- Management behaviour – top management behaviour. In case of health care enterprises, this can be defined as behaviour of hospital administration;

- Employee behaviour – any behaviour reflected by company employees. In case of health care enterprises, this can be defined as behaviour of hospital staff – doctors, nurses, and support medical staff.

As noted by Melewar and Jenkins (2002), “the most problematic area of classification appears to be corporate communication and behaviour... Behaviour, in a sense, is the non-verbal, intangible aspect to communication. Behaviour includes actions on the part of the organization and its employees.” (p.81).

3) Corporate culture includes:

- Goals, philosophies and principles – besides overall business principles of “how things are being done around here” this factors relates to company philosophy – mission, vision, values, and credo.

- Nationality – origin of the initial company emergence; also can relate to the geographic location of company headquarters, nationality of majority shareholders. As all surveyed hospital general managers represent local hospitals, this factor could mainly relate to the nationality of majority shareholders or historical foundation of particular hospital.

- Organizational imagery and history.

4) Market conditions:

- Nature of industry – as noted by Morison (1997) and cited by Melewar and Jenkins (2002), “studies of corporate identity... ..illustrate the difficulty in projecting an individual identity when the generic industry identity remains so strong”. (p.85). In case of health care enterprises it is relevant to review individual identities of health care industry participants because of apparent differences in the quality of service provided by different hospitals and variety of services provided, implying possibility of deviations from general industry identity.

- Corporate/marketing strategies implemented by the company.

The main advantage of this model is that it brings together the most commonly used and researched factors to describe the formation of corporate identity from the marketing management (communications, visual identity), organizational management (corporate culture, behaviour), and general strategic management (market conditions) perspectives.

Research methodology

There were carried out 7 semi-structured expert interviews, which were based on the outline (see Table 1) developed by Melewar (2003) for the research of individual corporate identity dimensions as derived from the general corporate identity framework by Melewar and Jenkins (2002). The questions were interpreted in relation to health care enterprise environment and specifics, and used as reference for interview structure.

The surveyed experts were general top managers of 2 State-owned, 2 municipality and 3 private hospitals or health care enterprises.

Table 1. List of questions for which corporate identity elements have answers (Melewar, 2003, 216-217)

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| <p>(1) Who is the company as an organization? The answer is hidden in culture (subcultures and values), behaviour and corporate structure.</p> <p>(2) What does the organization stand for? The answer is hidden in culture (mission, values and philosophy).</p> <p>(3) Why is the company there? The answer is hidden in culture (philosophy and mission) and strategy.</p> <p>(4) Where does the company come from? The answer is hidden in culture (history and founder).</p> <p>(5) Where is the company going? The answer is hidden in strategy and culture (vision, mission and philosophy).</p> <p>(6) What is the company good at? The answer is hidden in differentiation (unique capabilities and core competencies).</p> <p>(7) What does the company make or sell? The answer is hidden in products and services.</p> <p>(8) How does the company do the things it does? The answer is hidden in culture (principles and guidelines), behaviour, strategy and corporate structure.</p> <p>(9) How is the company organized? The answer is hidden in corporate structure (organizational structure).</p> <p>(10) Where does the company make what it makes? The answer is hidden in industry identity.</p> <p>(11) How does the company behave? The answer is hidden in corporate behaviour.</p> <p>(12) How does the company explain what it is about? The answer is hidden in corporate communication (controlled communication and uncontrolled communication), corporate design, culture, behaviour, corporate structure and corporate strategy.</p> |
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Expert interview results

Expert interviews reflected applicability of corporate identity dimensions outlined by Melewar and Jenkins (2002) in their corporate identity framework to health care enterprises and highlighted some key differences between corporate identity of a regular enterprise and health care enterprise, and the order of importance of the factors within a single corporate identity dimension.

Communication and visual identity dimension

Hospitals are using corporate communications to approach both, internal and external stakeholders. For instance, the hospital Internet websites are used for both, official announcements on organizational or management changes and public tender related-information (more often for State-owned and municipality hospitals as such information disclosure is required by existing legislation), and also marketing-related communications on service provision (i.e. list of available services, visiting hours, location and contact information, etc.) or staff promotion (i.e. brief CVs of leading specialists) to external

audiences. Internal corporate communications are being also incorporated within the regular morning meetings when on-going reports on patient-care are supplemented with general news on hospital performance or managerial issues.

Uncontrollable communication is a factor that has strong impact on communication and visual identity dimension due to often use of word-of-mouth marketing by patients to share feedback on individual health care specialists individually (face-to-face) or over the Internet in social networks and portals.

Architecture and location are considered to be unique combination and distinguishing element of health care enterprise corporate identity mainly for the largest and well-known hospitals and health care centres, mainly due to perception that “people know our building and the fact that we have been here for a long while”. However, it is also acknowledged for this factor not to have as important role as, for instance, elements of the corporate culture that are related to values and history of the hospital.

Corporate visual identity is perceived mainly as a part of formal corporate communications. However, for instance, Pauls Stradins Clinical University hospital has incorporated architectural layout of the main hospital building into the hospital logotype and the hospital visual identity graphical guidelines.

Overall, the dimension of communication and visual identity was considered to have influence on overall health care enterprise corporate identity, emphasizing role of uncontrollable communication that influences formation of the corporate image and architecture and location dimension, which are often present in a unique combination so as to differentiate particular hospital form others.

Behaviour dimension

Experts admitted that the specifics of health care enterprises are that regular employees (i.e. medical staff) are those who contribute the most to formation of the identity of the respective health care institution in the interrelations with patients due to strong and direct relationships between doctor and a patient.

Corporate behaviour dimension relates mainly to scientific achievements the hospital medical specialists have achieved or the unique combination of procedures being offered to patients. To some extent, also existing legislation and agreements with the Ministry of Health can influence the scope of hospital activities and thus shape corporate identity of health care enterprise due to enabling or limiting provision of specific services. Despite the fact that hospitals can be considered as competitors for the part of paid services they offer to public, in practice, State-owned and municipality hospitals are usually co-operating on hosting of professional events (e.g. meetings of surgeon associations).

Management behaviour is primarily focused to support the actions and performance of the medical staff providing health care services. However, it is quite common to face a struggle in State-owned and municipality hospitals between management intentions to focus on managerial and financial issues while medical

staff is more concerned with provision of the social benefits and delivery of health care services to greater number of people. Therefore, management behaviour is more apparent within the internal environment and can be said to serve a supportive role to medical staff (employee) behaviour. It is also acknowledged that general public often misinterprets hospital management willingness to accept professional education and training offers for its staff by its external providers (i.e. pharmaceutical companies or medical equipment sellers) as incompliant and intending corruptive features, while disregarding the fact that State is providing close to nothing in terms of the financing related to professional education and training of new generation health care professionals.

Employee behaviour is the dimension that is acknowledged to have the greatest impact on corporate identity formation in health care due to the underlying relationship between doctor (employee) and patient, who is input and output factor at the same time. It is noted, that employee behaviour factor is likely to dominate over management and even corporate behaviours due to the fact that it is common especially for large hospitals to have several bright personalities (senior professors) in their staff whose professional achievements and reputation are associated with the hospital itself.

Therefore, in case of health care enterprises it is of essential importance not to underestimate influence of individual employee behaviour on formation of the entire corporate identity. This conclusion also corresponds to findings by Balmer (1995), Van Riel (1997), Balmer and Wilson (1998) who state that corporate identity refers to an organization's unique characteristics rooted in the behaviour of employees. At the same time, this is an option for hospital management to utilize the public awareness and recognition of the bright individual employee personalities for the promotional purposes of the entire hospital or health care centre.

Corporate culture

Goals, philosophies and principles of health care enterprises are the *raison d'être* – the ultimate goal of their existence and together with employee behaviour are considered to form the core of any health care enterprise corporate identity. The underlying mission of the health care enterprises - to cure people - in combination with the moral obligation in form of the Hippocratic Oath given by the medical staff upon graduation of medical universities is the foundation of this ultimate purpose.

Nationality is considered to be explicit dimension of corporate identity for only hospital in Latvia – Jewish hospital Bikur Holim, which emphasizes its history and Jewish origin of the founders.

Organizational imagery and history is relevant mainly for those State-owned or municipality hospitals, which have been built before or during Soviet-era (mid 20th century), and thus have been in present in the health care sector for a while and carry either name of well known medical practitioner or founder (e.g. Prof. Pauls Stradins), or its location (e.g. Eastern hospital on the Eastern side of the River Daugava). It is quite common to see also monuments for historical personalities related to the history of medicine as such being located in visible

place within the hospital territory (e.g. monument of Avicenna – author of The Book of Healing), memorial posters or local exhibitions devoted to the history of hospital founders and the most distinguished practitioners. Therefore, health care enterprises tend to use imagery and history to highlight their credibility and appreciation for the efforts of their predecessors that have contributed much to the evolution of health care as such.

Market conditions

Nature of industry is pretty much determined by the content of the health care services – health care is a basic need that will be demanded at all times. However, there are different health care enterprises offering different scope of services, making each of them a unique service provider. Also, according to surveyed experts, there are approximately 10 insurance companies present in the Latvian health insurance market who are competing for approximately 250'000 customers, which are primary target audience of the hospitals and health care enterprises offering paid services. Thus, nature of industry definitely contributes to formation of the corporate identity of individual industry participants, but there are other dimensions that are acknowledged to have higher impact.

Corporate/marketing strategies have become recently more important and having larger impact on the corporate identity also for State-owned and municipality hospitals due to the fact that State is continuously cutting its financing for services that according to current legislation are available for free to citizens of Latvia, and instead forcing State-owned and municipality hospitals to focus on provision of paid services. Therefore, choice of corporate and marketing strategies made by hospitals or health care enterprises have increased the essence of these strategies in shaping individual corporate identities of the respective hospitals and health care enterprises.

Summary and conclusions

The novelty and main contribution of this paper is that it has examined applicability of corporate identity model by Melewar and Jenkins (2002) for analysis of corporate identity formation and management within the State-owned, municipality, and private health care enterprises.

Expert interviews reflected partial applicability of corporate identity dimensions outlined by Melewar and Jenkins (2002) in their corporate identity framework to health care enterprises, and highlighted essence of specific individual factors that contribute to formation of general corporate identity dimensions.

Some of discussion on general corporate identity management was focused around general manager's role within the health care enterprise and possibility of managing individual corporate identity dimensions. However, it was acknowledged by experts that medical staff is more important contributor to corporate identity formation in comparison to health care management. Only in case if the general top manager is also the chief executive or senior professor among the medical staff (employees) within the enterprise, his/her managerial action can be regarded as having strong influence over formation of the corporate identity of the entire

organization. Therefore, for health care enterprises the employee behaviour factor should be considered having higher importance over the management behaviour within the general behaviour dimension.

It was found that general managers agree on corporate culture and behaviour dimensions being those that contribute mostly to formation of hospital and health care enterprise corporate identity due to the fact that the core philosophy, mission and goal of health care enterprises are the individual dimension factors related to the *raison d'être* – the ultimate reason of hospital existence, and the employee behaviour is the main factor from general behaviour dimension through which people perceive and interact with the hospital corporate identity.

The expert survey confirmed findings from the conceptual corporate identity overview by Melewar (2003) in relation to the importance of corporate culture and behaviour dimensions to the overall corporate identity. It was found that communication and visual identity dimension is considered having less impact in comparison to corporate culture and behaviour dimension. However, the growing importance of corporate and marketing strategies due to increasing need to promote provision of paid services also by State-owned and municipality health care enterprises, makes market conditions dimension to be considered during individual corporate identity formation for particular enterprise. Corporate and marketing strategies were found to be more important for private health care enterprises than State-owned and municipality hospitals.

Further research is intended to test findings from the expert survey among hospital and health care enterprise customers to research their evaluation of the hospital corporate identity and reflect on possible gaps in corporate identity perception between hospital management and hospital primary customers – the patients.

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Didzis Rutitis. Degree: MBA, PhD Student at BA School of Business and Finance, Riga, Latvia. Workplace (-s): Johnson & Johnson AB Latvia branch. Position: sales manager. Publications: 5 publications, co-author of a book “Business across the borders”. Research interests include: corporate identity, healthcare industry. Address: K.Valdemara 161, LV-1013, Riga, Latvia, E-mail address: didzizr@gmail.com.

Anda Batraga. Degree: Dr.oec. Workplace (-s): University of Latvia. Position: Associate professor. Publications: 15 publications. Research interests include: marketing management. Address: Aspazijas bulvaris 5, LV-1001, Riga, Latvia, E-mail address: anda.batruga@lu.lv.

Lauma Muizniece. Degree: Mg.man.sc., Master Degree in Creative Industries Management. Workplace (-s): University of Latvia. Position: Project coordinator. Publications: 1 publication. Research interests include: marketing management, innovations management. Address: Baznicas 5, LV-1010, Riga, Latvia, E-mail address: lauma.muizniece@gmail.com.

Kristofers Ritovs. Degree: Mg.man.sc., Master Degree in Creative Industries Management. Workplace (-s): Kontaktu Vestnieciba Ltd. Position: Director. Publications: 1 publication. Research interests include: international trade and external markets. Address: Unijas 47, LV-1039, Riga, Latvia, E-mail address: kristofers@vestnieciba.com.