The Power of Social Marketing:
Concept and Application to Sustain Positive Health Behaviors

by

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Abstract

This capstone report captures the origins of social marketing and discusses the methodologies of commercial marketing, its foundation. Relevant behavior-related tools and techniques, which have successfully supported commercial marketing for many decades, and more recently social marketing, are described so they are understood and appropriately used. The tools and techniques are especially meaningful for social marketers to truly understand the target consumer-participants and tailor effective behavior-change messaging. The identification of a social marketing problem is discussed along with how desirable and undesirable behaviors are ethically determined. Demonstration of social marketing plan elements, including how to conduct target market research, is presented by retrospective evaluation of two executed social marketing programs. How these campaigns attempted to address distinct, health-related, societal needs is discussed along with their successes, failures and what could have been done better. The research found evidence that social marketing is under-utilized, especially in the U.S. Recommendations are accordingly made to increase awareness and knowledge of social marketing among practitioners who in turn can increase awareness, acceptance and broaden use. The capstone report shows how thoughtful and well-designed social marketing programs can be used to change as well as sustain positive health behaviors of target group individuals and societies.

Keywords: Health Care Administration, Dr. Dana Hart, disciplines, concepts, applications, benefits.
Acknowledgments

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Introduction

Commercial marketing has an overwhelming impact on the decisions people make in the United States and the rest of the world. It affects what is purchased, how fast the product or service can be delivered, the stores in which to shop, and brands believed to be more valuable than others. Consumers voluntarily cooperate because commercial marketers have effectively communicated the benefits of particular products or services and consumers are willing to exchange money for their perceived value.

Social marketing applies the same basic strategic principles as commercial marketing but instead of profit, the main exchange with the consumer, actually the consumer-participant, is information. This information, essentially persuasive in nature, can lead to more positive behaviors that are safer, adoptable, and result in healthier individuals. Once a positive behavior is accepted and practiced (sustained) among many individuals in a geographic area, the community can likewise be affected and a shift in typical behavior of patterns can be experienced. For an example, an anti-drug campaign focused on children may result in schools and communities reinforcing the political, economic, and social behaviors of residents.

Research and targeted social marketing programs, primarily outside the U.S., indicate that social marketing has been successful in communicating to under-informed individuals and social groups. The programs have not only been found to promote awareness but also to counteract undesirable and unhealthy messages from commercial marketing. It should be noted that the related topics, i.e., marketing, social marketing and its application to health behaviors, have been located and reviewed in various literature sources. Through these sources, namely academic and government research, articles from practitioners and published materials
Specifically for health-related behaviors, Debra Scammon (2013), marketing research consultant and marketing professor at the University of Utah, believes the recent Affordable Care Act (ACA) basically assumes that U.S. citizens will be responsible for knowing how to take care of themselves and will put forth the effort to do so (as cited by Collins, 2011). Collectively, it is therefore urgent that citizens voluntarily try to reduce their needs for health care throughout their lives. As the ACA, a series of specific laws, is further implemented, social marketing can be used to communicate these responsibilities to individual citizens and the general population. There are experts who believe that voluntarism cannot be relied upon and that laws and public policies must intervene for the desired behavior change results (Lee & Kotler, 2011, p. 9). It will be assumed for this report, however, that individuals and groups will voluntarily adopt, once informed and adequately convinced, the positive health-related behavioral changes.

This research report describes and discusses the disciplines of social marketing and commercial marketing, as well as common misconceptions between social marketing and other form of messaging. The strategic planning process and plan elements of commercial marketing are explored to appropriately explain its influences on and foundations for social marketing. Once understood, the marketing disciplines are summarized in terms of their differences, commonalities, and distinctive applications of marketing tools and techniques.

Of particular note are the goods- and service-based marketing mix elements and the behavior-related tools and techniques, which have been successfully used by marketer decades before social marketing was conceptualized. The former offers a methodical way of breaking down and analyzing how to best capture (and keep) the attention of potential target group individuals. The latter are tools and techniques which are significant as they provide the marketers with insight
in the true needs, desires, beliefs, and attitudes of the target group individuals. As these tools and
techniques have been successfully used by commercial marketers, the social marketer is further
challenged since its campaign’s value proposition is two-fold: persuading individuals to make often
difficult personal changes and maintaining them over time.

The means by which desirable and undesirable behaviors are identified for potential campaigns are discussed along with existing social marketing models used to structure the campaigns. A composite model is used to retrospectively evaluate two social marketing campaigns executed in the U.S. By applying new elements introduced in the composite model, information is gleaned from the case studies, which serve to show how the campaigns’ strategies, executions and outcomes could be bettered.

The report’s research through scholarly and professional literature is summarized and followed by findings discovered through research and generation of this report. The findings identify how to better understand and account for the intangible nature of a social marketing campaign and its value. Recommendations are made regarding how to promote use of social marketing campaigns.

The merits, or expectations, of this report are therefore to clearly introduce and argue for social marketing’s use as a key instrument in persuading individuals to take beneficial actions in improving their health. It is further hypothesized that individual behaviors can change and effect communities which then collectively affects the overall “health” of the U.S.
Origins of Social Marketing

Social marking is a distinct marketing discipline which has had its beginnings in the 1960s (Andreasen, 2006, p. viii). During those years in the United States, social and environmental consciousness was being embraced by substantial numbers of young adults. The mass awareness and concern highlighted needs which had previously been under-addressed. These conditions provided opportunities to apply standard marketing concepts and fine-tune them to the point where social marketing was defined as a marketing discipline in the 1970’s.

With the publication of “Social Marketing: an approach to planned social change” in 1971 (as cited in Andreasen, 2006, p. 89), Philip Kotler and Gerald Zaltman published and formally introduced the term and subject matter to governments, academic researchers, and businesses (primarily nonprofits) around the world. They reasoned that commercial marketing strategies, which have been so successful in selling products, originally goods and recently services, to consumers, could be used to change individual and group behaviors, and even organizational policies. Social marketing, Kotler and Zaltman advocated, could be used to “promote socially beneficial ideas, attitudes and behaviors” (as cited by National Institute of Health Care Management [NIHCM], 2009, p.1). After further application and evaluation, Kotler and Andreasen later described social marketing as “different from other areas of marketing only with respect to the objectives of the marketer and his or her organization: social marketing seeks to influence social behaviors not to benefit the marketer, but to benefit the target audience and general society” (as cited by Weinreich, 2006).

Specifically from the health perspective, Kotler and Andreasen stated social marketing attempts to increase healthy behaviors and attitudes in a target group by applying marketing techniques proved to successfully promote commercial (profit-driven) products. The proven
techniques referred to are those lessons learned from marketing science, human reception of messages, behavior theory, and social and cognitive psychology (Evans & McCormack, 2008, p. 781). In 1995, Professor Alan Andreasen wrote that these are “proven concepts and techniques drawn from the commercial sector to promote changes in diverse socially important behaviors such as drug use, smoking, sexual behavior…this marketing approach has an immense potential to affect major social changes if we can only learn how to harness its power” (as cited in NIHCM, 2009, p.1).

**Definitions from Social Marketing Experts**

More recently in 2011, several social marketing experts were asked to offer their definition of social marketing. Direct quotes from a few of these experts follow and help to define approaches and desired results of social marketing programs:

- Professor of Marketing at Georgetown University, Alan Andreasen, has updated his original description of social marketing as “the application of the voluntary behavior of target audiences to improve their lives or society of which they are a part” (as cited by Lee & Kotler, 2011, p. 7).

- International social marketing consultant Nancy Lee, Professor of Marketing at the University of Wisconsin-Madison, Michael Rothschild, Emeritus Professor at the School of Business, University of Wisconsin-Madison, and Bill Smith, former Executive Vice President of the Academy of Educational Development, go further into the application that Professor Andreasen describes by stating “this strategically oriented discipline relies on creating, communicating, delivering, and exchanging offerings that have positive value for individuals, clients, partners, and society at large” (as cited by Lee & Kotler, 2011, p. 7).
• The definition of Jay Bernhardt, Professor and Chair of Health Education and Behavior at the University of Florida, offers an emphasis on the system that invokes interest and involvement from consumers by stating that social marketing “is the systematic application of interactive marketing principles and techniques that harness audience participation to deliver value and achieve specific behavioral goals for a social good” (as cited by Lee & Kotler, 2011, p. 7).

• Sharyn Rundel-Theile, Associate Professor of Marketing at Griffith University in Australia, clarifies the elements and goal of social marketing by stating “social marketing is the activity and processes for understanding, creating, communicating, and delivering a unique and innovative offering to overcome a societal problem” (as cited by Lee & Kotler, 2011, p. 8).

• Mike Newton-Ward, Social Marketing Consultant at North Carolina Division of Public Health and Independent Consultant, brings the above definitions together by stating that “social marketing is a way to reduce the barriers and increase the facilitators to behaviors that improve the quality of life for individuals and society. It uses concepts and planning processes from commercial marketing… It goes beyond communication, public service announcements, and education to give you a 360-degree view of potential causes and solutions for health and human-service problems” (as cited by Lee & Kotler, 2011, p. 8).

From these definitions, social marketing’s overall concept and shared ideas emerge: *identifying a human condition* or behavior which has negative societal implications, *applying standard marketing principles*, tools and techniques, *identifying and focusing on a particular*
target audience segment or society, influencing the underlying factors that cause the negative behavior of condition, and producing a lasting benefit to society through its individuals.

See Figure 1 for social marketing’s summary into five key elements. All this, it should be stressed, is accomplished the same way as with commercial marketing, that is, via voluntary responses from individuals within a targeted group.

Figure 1. The Five Key Elements in Social Marketing

Identifying a human condition or behavior which has negative societal implications

Applying standard marketing principles, tools and techniques

Identifying and focusing on a particular target audience segment or society

Influencing the underlying factors that cause the negative behavior of condition

Producing a lasting benefit to society through its individuals

Note: The flow chart demonstrates how the five key elements of social marketing relate to each other and composite social marketing as a whole. Elements have been drawn from the definitions of subject-matter experts, i.e., consultants and academics specializing in social marketing.

Profit versus Nonprofit

A general distinction between social marketing and commercial marketing can be made, in particular for the intended response to benefit individuals and societies as compared to businesses’ bottom lines, respectively. The difference between profit and nonprofit businesses is more than money. The fundamental vision, mission, and outcome-nature of each drive them in different directions. A nonprofit entity or organization has a stated mission or purpose to be
involved in activities that benefit a “greater good” in the community. These organizations can make a profit but the money goes to its operating expenses, not to stockholders. Common nonprofits are government services, which operate on tax dollars, and private organizations such as the YMCA and Red Cross, which rely on tax breaks, minimal fees and donations. These organizations also have a passion to improve the human condition and actually serve to lessen the dependency on government services. Given this, social marketing campaigns align more appropriately with the missions of nonprofit organizations, those private and government-run.

Confusion with Other Messaging Methods

In terms of methods of messaging, there are many common ways of communicating to individuals and groups, as well as whole societies. Two methods, in particular, require discussion so that social marketing is distinguished for its methodical approach and communication objectives (Lee & Kotler, 2011, p. 358). These messaging methods are public service announcements (PSAs) and social media. This is not to say that PSAs and social media would not be used as part of a social marketing campaign, but it is necessary to describe how each is inherently different and avoid incorrect assumptions of similarities.

PSAs, or nonprofit public service announcements, have been for decades used by governments and organizations around the world to communicate their missions and/or functions to people. The approach is usually to communicate to a large population segment via a one-size-fits-all messaging hoping to reach and impact individuals. PSAs are most commonly confused with social marketing due to the seriousness of their messaging gains attention and visibility across multiple media sources. Media sources, such as print (e.g., newspapers and magazines), the internet, TV, and radio are also employed by social marketers with mixed results.
PSAs have been around since the wide adoption of radios in the 1920s. The current PSA format, typically short 15-30 second messaging, was developed during World War II (WWII) and used by the United States government to solicit and keep citizens’ support of the war effort (Ad Council, 2013b). Historically speaking, it is possible that not much persuasion was necessary but PSAs served to send consistent, unifying messaging to which citizens and military personnel overwhelmingly responded.

Since WWII, the Ad Council, a private, nonprofit organization has been the source of the majority of PSAs in the United States. It has continued to produce PSAs that speak to a broad range of social issues, such as prevention of forest fires, blood donation drives, highway safety, and drug use. These issues are essentially straightforward “do’s and don’ts” as exemplified by long-running PSAs such as Smokey the Bear saying “Only you can prevent forest fires” and TV spots saying “Friends don’t let friends drive drunk” (Ad Council, 2013b; Andreasen, 2006, p. 106). Although the Ad Council states that it effects “positive social change”, its PSA campaigns are noticeably different to those of social marketing. The Ad Council’s aim is to raise awareness or shift attitudes about particular behaviors (Ad Council, 2013a), while social marketing’s aim is far-reaching, further downstream and upstream to understand how to change and maintain positive behaviors for a new norm to be established. It is understandable that PSA and social marketing are sometimes confused since PSAs have been a part of American life for a long time. The use of PSAs can be considered to raise awareness and interest in learning more about a particular social marketing campaign. It is important, however, that social marketing be acknowledged as a superior catalyst for change in more complicated social issues.

Over the last few years, a new means of mass communication has come about through e-commerce sites, blogs and interactive social networks such as Facebook, LinkedIn, Twitter, and
YouTube. It is called social media (West, 2012). Social media is also often confused with social marketing likely because of the common word “social” and media being so closely identified with marketing. The basic motivations of social media and social marketing are however different namely due to for-profit and for-public-good, respectively. Between themselves and potential customers, social media marketers cause a real-time conversation on these sites for the marketer’s products and services being discussed (Shapiro, 2012). The sites are used as platforms to promote brands, sell products and services, show popularity (e.g., “likes”), and over time build-up loyal customers.

The purpose in social media’s case is to accordingly make money and grow a business, which is too commercial to be confused with social marketing objectives. But social media’s potential to support a social marketing campaign cannot be ignored as it was estimated in late 2011 that over 80% of American use some form of social media within these sites each week (Mershon, 2011). It is generally believed by marketing proponents that the percentage is very likely higher. The effect of social media, and the technologies that support it, are noticeably a part of many peoples’ lives. Its use within social marketing campaigns can reach into the lives of many people to effectively and efficiently start a conversation for behavioral and social change (Lee & Kotler, 2011, p. 369). As with PSAs, social media can play an important role by stimulating interest and directing attention to an actual social marketing campaign.

The 40-year old discipline of social marketing and its use of the same basic strategic principles as commercial marketing have been discussed. Social marketing has been defined by several experts in the field and said to show great applicability and promise to positively affect societal change. Social marketing has also been differentiated from commercial marketing and other forms of messaging. In particular, as compared to commercial marketing, social
marketing’s main exchange is persuasive information versus profit. The persuasive information can result in positive behavior change, ideally, sustained.

The most decent intentions and elements of the commercial marketing discipline have been taken forward into social marketing and serve a greater purpose than profit. It is important, therefore, to understand commercial marketing as the roots of social marketing’s key concepts.
Commercial Marketing: Foundations

The American Marketing Association, AMA, has defined marketing as “the activity, set of institutions, and processes for creating, communicating, delivering, and exchanging offerings that have value for customers, clients, partners, and societies at large” (American Marketing Association, 2008). The idea is basically delivering value to those involved in a product or service transaction. This transaction satisfies some particular need of the involved stakeholders who are varied and have an interest in the transaction’s outcome. Buyers, sellers, company investors, communities and even a nation’s citizens are stakeholders where goods and services are made or sold. The most visible stakeholder is the consumer, the ultimate user of the good or service. Individuals are primarily thought of as the consumer but consumers can also be business organizations or governments. With all the emphasis on the consumers and their needs, the providers of the good or service cannot be overlooked. In traditional marketing, the seller has to make a profit to remain in business and, ideally, consciously sell the highest quality product or service possible.

Marketing Concept, the Need

A common approach to selling, regardless of the business’ size, product or service, is the marketing concept. At the heart of the concept is consumer need, which is the difference between a consumer’s actual state and a desired state (think of an affordable, new car to replace an old one). While it may seem obvious, the upstream marketing concept calls for marketing researchers to first identify consumer needs (those obvious to the consumer) and then satisfy the needs through new products and services. This approach is in contrast to an organization developing products and services and thereafter attempting, downstream, to convince consumers through advertising and marketing they have unrealized needs (those of which the consumer is
unaware; think of a new gadget that cuts hair at home). Of these two commercial marketing approaches, the latter would involve more effort to engage and convince the potential customer.

Social marketing can be understood as having elements of commercial marketing adoption of upstream and downstream concepts where its marketing concept includes acknowledging consumers may not be aware that a behavior change (need) is necessary before they can consider what can be “good” for them (Hastings, 2007, p. 55). However it is important to distinguish what is meant by upstream and downstream in the social marketing discipline. Commercial marketing defines upstream and downstream as points of consumer engagement, either up-front to determine product or service need, or after-the-fact where the consumer has to be convinced of a need through promotion or advertising (Owyang, 2012, October 1).

Social marketers employ both, where downstream is the point of consumer-participant engagement, to provide information to the target audience, and upstream is engagement to eliminate or reduce forces outside the target audience’s control or influence, i.e., barriers are removed as much as possible (Kotler & Lee, 2009, pp. 50-51). The problem behaviors are addressed at the micro-level and the external forces are addressed at the macro-level. The combination can be looked at as treatment or correction at the same time as prevention which helps increase the likelihood of sustaining the behavior change for a new norm to result. See Table 1 which summarizes how commercial and social marketing differ with respect to goals and approaches to upstream and downstream engagements. It should be noted that for simplicity sake, this report will concentrate on the downstream approach of social marketing since it is the point of contact and engagement with the identified target audience.
Table 1. Commercial and Social Marketing’s Approaches to Marketing

<table>
<thead>
<tr>
<th>Marketing Discipline - Goal</th>
<th>Marketing Approach Description / Use</th>
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<tbody>
<tr>
<td></td>
<td>Downstream</td>
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<tr>
<td>Commercial Marketing - Making a Profit</td>
<td>Products or services are first designed and then handed to marketers for promotion to consumers</td>
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<tr>
<td>Social Marketing – Affecting Positive Social Change</td>
<td>Directly communicating information to those with undesirable (e.g., unhealthy) behaviors</td>
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**Applying market segmentation.** Consumer needs are not necessarily straightforward or obvious since they can be physical, psychological or both. The particular way a consumer’s need is satisfied depends on his or her personal history, learning environment, and cultural environment. A group of individuals who are similar in some way, such as having the same needs or common traits, are considered a market segment. Within segments, there could not only be needs but also wants. Wants are need influenced by an individual’s surrounding environmental factors and can be described as desires for particular products or services. To illustrate, two scenarios can be used to describe needs vs. wants. First, consider how three consumers choose lunch: a fast-food cheeseburger, brown-bag granola or sit-down sushi. A
second scenario can be how consumers seek medical attention for a sore throat that could be strep. One consumer is satisfied with visiting a walk-in clinic, another, a private-practice physician, and a third, the emergency room. How the basic need is satisfied, i.e. the benefit to the consumers, in terms of food or medical attention, can be quite different depending on the individual and his or her environmental influences. These examples show the segmentation of a market, how those within a large market break down into different, distinct subgroups (in these cases, for example, level of affluence). It is understandable how researched, targeted marketing, not a one-size-fits-all approach, can be advantageous determining how a new restaurant or health care facility can reach potential customers.

**Realizing value.** These marketing activities, including those of social marketing, are contributors to the consumer realizing utility, the value also known as the sum of the benefits received from the good or service (Solomon, Marshall, & Stuart, 2008, p. 10). The marketing approach creates this value to consumers by ensuring that they have the opportunity to not only receive the product or service, but also receive it when and where it is needed (or wanted). Marketing is therefore an exchange relationship, where something is received for something else in return. This voluntary relationship in commercial marketing is straightforward and, while the exchange may be tangible or intangible, it is timely and immediate.

For social marketing, however, its voluntary exchange relationship can be further complicated by its unconventional price, delayed payback or even how the benefit is experienced. Its price is essentially sustained effort on the consumer’s part (not up-front money); the anticipated value may be a long time coming and, when received, may be indirect. These service-related realities require that social marketing be supported by systemic, rigorous and strategic-planning process: the program must be influenced by the target group’s wants,
needs, and preferences while attending to benefits that are as “real, deliverable, and near-term” as possible (Lee & Kotler, 2011, p. 9). As compared to commercial marketing, analyzing and understanding how to reach the target group and its individuals is paramount to establishing an effective social marketing plan since its success is not repeat business but voluntarily sustained behavior change. Social marketing is obviously more complicated and difficult.

**Marketing plan elements.** The key marketing elements regardless of the marketing discipline are all aligned through a strategic planning process. This includes how marketing plans are structured and defined. See Table 2 where the process stages of situation and stakeholder analyses, marketing goals and objectives, marketing strategies, implementation and controls are shown. Process stage 6, “Control by Monitoring and Evaluation” depicts the recurring verification against marketing/consumer research data. Given the relationship of elements, how monitoring controls are important to understand the impact of activity and adjust as necessary. When controls (monitoring and evaluation) are founded on accurate, timely, and directly-applicable research data, then an organization can make, if and when needed, necessary strategy adjustments to meet its business objectives.

In general, a target marketing strategy involves dividing a total market into different segments (or audiences) based on consumer characteristics, identifying one or more segments to serve and then developing the products and/or services to meets their wants and (Solomon et al., 2008, p. 203). A marketing segment, therefore, should consist of a group of consumers who share similar characteristics. From a commercial perspective, this marketing segment must be accessible, measureable, large enough and potentially profitable to be viable (or worthwhile). From a social marketing perspective, the marketing segmentation process involves identifying target audiences that are reachable and with the greatest need (prevalence of the social problem),
readiness for change (willing and able) and best matched to the involved organization’s mission, available resources and their expertise (Solomon et al., 2008, pp. 14, 151). Gerald Hastings, Director of the Institute of Social Marketing, considers social marketing segmentation in a similar way, namely personal (e.g., social class, beliefs), behavioral (e.g., smoker) and beneficial (e.g., health) (Hastings, 2008, pp. 28, 586). In the three focus areas, a target audience is identified and studied for the particular marketing mix elements to be appropriately captured.

Table 2. Overview of Marketing Plan Elements

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<tr>
<th>Marketing Plan: How to Achieve Organizational Objectives</th>
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<tbody>
<tr>
<td>1. Perform Environmental/Situation Analysis</td>
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<td>(Research, e.g., Strengths, Weaknesses, Opportunities, and Threats (SWOT) internal and external to organization)</td>
</tr>
<tr>
<td>2. Stakeholder Analysis</td>
</tr>
<tr>
<td>3. Establish Marketing Goals and Objectives</td>
</tr>
<tr>
<td>(after environmental conditions are known and understood)</td>
</tr>
<tr>
<td>4. Develop Marketing Strategies</td>
</tr>
<tr>
<td>a. Evaluate target markets and positioning (how to influence)</td>
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<tr>
<td>b. Select marketing segment, target audience</td>
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<tr>
<td>c. Identify barriers, benefits, competitors and other influences</td>
</tr>
<tr>
<td>d. Develop marketing mix strategies specific to target audience</td>
</tr>
<tr>
<td>1. Original, goods-based 4 Ps: Product, Price, Promotion, Place</td>
</tr>
<tr>
<td>2. Additional service-based 3Ps: People, Process, Physical Evidence (or Physical Environment)</td>
</tr>
<tr>
<td>5. Implement</td>
</tr>
<tr>
<td>(execute marketing strategy)</td>
</tr>
<tr>
<td>6. Control by Monitoring and Evaluation</td>
</tr>
<tr>
<td>(monitor progress towards established goals and objectives)</td>
</tr>
<tr>
<td>a. Measure actual performance indicators</td>
</tr>
<tr>
<td>b. Compare actuals to established marketing goals and objectives</td>
</tr>
<tr>
<td>c. Make adjustments to either strategy or objectives, based on actual performance</td>
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Marketing positioning is the way in which the target market perceives the product in comparison to the competitors’ brands (Solomon et al., 2008, pp. 28, 586). This is in terms of commercial positioning where consumers have the option of selecting products or services from a variety of “producers.” For social marketing, positioning is more difficult to analyze and understand due to the nature of the competition. The product of the messaging is the positive result of a behavioral change where the competition is the current behavioral state and the messaging that supports it. Similar to commercial marketing, social marketing’s intended effective positioning is for the new product, the new behavior and its benefits, to be advantageous over the current.

Preview of marketing mix, the Ps. Once commercial market segmentation, targeting and positioning are determined, successful marketing further depends on a number of key considerations. These include: exactly what a company is going to produce, how much it is going to charge, how it is going to deliver its product or services to its customer, and how it is going to inform its customer about the product or service. These original marketing mix considerations are known as the 4Ps – Product, Price, Place and Promotion. They are part of marketers’ strategic tools for determining how to create a response from the predetermined group of people (Solomon et al., 2008, p. 28).

As marketing became a more sophisticated field, specifically offering service-type products, People, Process and Physical Evidence (or Physical Environment), were added to the
original marketing mix elements. The collection of these considerations is now known as the extended 7Ps of marketing.

**Conventional and unconventional applications of the Ps.** It should be noted that, with respect to the topic of social marketing, actual social marketing campaigns and scholarly publications (academic, professional and governmental) have consistently included the original four marketing mix elements. However, the three service-related marketing mix elements have not been included. Research across dozens of scholarly and expert sources has not found any explanations for their exclusion except that social marketing experts are unable to agree on how to apply the extended P list (the 7Ps) or that the additional 3Ps are too complicated to translate to social marketing’s behavior-related product (Hastings, Angus, & Bryant, 2011, pp. 153-154). Key opinion leaders and marketers have obviously chosen to continue examination and execution of social marketing campaigns only in terms of the original 4Ps. Conceivably this is due to social marketing initiation before the three service-related Ps were formalized, in the 1960s vs. 1980s, respectively. Incorporating the three service Ps would, therefore, likely necessitate retrospective reviews and revisions of published works to adjust the baseline information. It is acknowledged that continuing application of just the four original market mix elements allows for less complicated comparisons of developed strategies and results across various social marketing programs. The recommendations for future system improvements would also be less complicated since omitting the service-related People, Process and Physical Evidence (Environment) elements.

This report, however, endorses the usefulness and applicability of these three service Ps since social marketing is also intangible and mandates an emphasis on who delivers the behavior-change message, how the message is delivered, and what is the physical state: People,
Process, and Physical Environment or Evidence. The 7Ps as described earlier in Table 2, Overview of Marketing Plan Elements, will be therefore be more closely described and discussed. The information will provide the necessary background information for this report to retrospectively analyze actual social marketing campaigns in terms of the extended P list application.

**Closer looks at marketing and marketing mix.** From a marketing perspective, companies use many methods, or tactics, to attract and retain customers. There are several different marketing concepts, or philosophies adopted by management, which lead to making a sale. These address identifying and satisfying customer needs by developing marketing-related plans and strategies, ensuring consistency of messaging, branding, specifying marketing mix and managing customer relationships. The one marketing concept which is interconnected to the others and consistently identified to be the most important is marketing mix, a combination of market or marketplace features. As we have discussed, four elements comprise its core and are known as the traditional marketing mix. Traditional applies to a business’ *tangible* products, or goods, where producing is different, or separate, from consumption, products are homogeneous (standardized and manufacture-able) and their value is not time-dependent. These four elements and their general descriptions are shown in Figure 2 to provide a baseline against which to later contrast service marketing and social marketing.

The commonly-accepted definitions of marketing mix elements for traditional (goods-based) products are given below (Solomon et al., 2008, pp. 28-29):

- **Product:** A product is an item that has value to a customer and is consumed.
- **Price:** The item’s cost to the consumer is the price and it provides the business an adequate profit margin.
• Place and Time: These describe the item’s delivery or distribution channel(s) to the consumer, namely where, when and how long.

• Promotion: This is a series of activities which the company undertakes to inform consumers about its products and to encourage potential customers to buy (and buy again) its products.

Figure 2. Commercial Marketing Mix Elements

Note: The four (4) marketing mix elements applied to tangible-goods products are shown above. The above information is adapted from “The 7Ps of Service Marketing,” by Management Study Guide, 2012.

A service company, as compared to a traditional goods company, approaches the above four elements in noticeably different ways (Management Study Guide [MSG], 2012). This is due to the intangible as well as the heterogeneous (mixed or varied) and perishable nature of its products. Unique to services companies (primarily) are three additional marketing mix elements, namely People, Process and Physical Environment or Physical Evidence. These three elements address how a service company further manages its relationship with the customers.
since its service is its product. See Figure 3 below that shows their involvement in completing the marketing mix analysis.

Figure 3. *Service Marketing Mix Elements*

Note: The seven (7) marketing mix elements applied to service products are shown above. The above information is adapted from “Service Marketing,” by C. H. Lovelock & J. Wirtz, 2010, p. 31.

All seven marketing mix elements are further described from a service product’s perspective in the following (Clarity Marketing Ltd., 2005; Lovelock & Wirtz, 2010, p. 31; MSG, 2012).

- **Product**: The product is a service, or some sort of assistance or benefit, that has value to a customer and is experienced rather than used or consumed.

- **Price**: The service cost to the consumer is more difficult to determine due to its products’ immaterial nature and how to capture the value of its effect on the individual or targeted groups of individuals. For the for-profit company, pricing
considers what would yield an adequate profit margin. For a nonprofit company, pricing considers what its targeted groups can afford for the particular service.

- **Place and Time:** For the service company, product delivery occurs at the same time of its creation therefore there are no storage or transportation considerations. Location of the service, whether it is via the internet or at a store, requires particular understanding of the customers’ needs and how they are able to access the services.

- **Promotion:** Communicating the availability of a service product is more than typical advertising to consumers, the potential customers. Emphasis is placed not only the product itself but educating the consumers of the benefits of the service. Through the education-oriented promotions and advertising, the service company encourages its potential customers to buy its products.

- **People:** A service company’s mode of delivering its product is its workers; the two are not separable. Given this relationship, a service company needs to ensure that its people are not only competent and knowledgeable links to the customers but also reflect the company’s values.

- **Process:** Process is basically how the company service products are delivered to the customers and how the relationship is maintained throughout the experience. Consistency and ease of use for the customer are especially important for intangible products and the process of servicing should be designed primarily from a customer’s view, not the company’s.

- **Physical Evidence or Environment:** For the service company and its intangible products, this marketing mix element refers to tangible, touchable proof of the company’s quality, reputation and delivery of its products. This evidence can be in
the form of brochures, service agreements, comfortable waiting rooms, signage, and
customer feedback forms.

The above descriptions and discussion offer an understanding of what the seven elements
of market mix entail, in particular for a service product. In order to better understand the 7Ps for
evaluation of a social marketing campaign, the original four Ps are accordingly explained below
(Andreasen, 2006, p. 106; Hastings, 2007, p. 72) followed by this author’s interpretation for the
three service-related Ps.

- Product: The benefit(s) that the recommended behavior change offers the target
  audience.
- Price: The cost(s) and barrier(s) perceived by the target audience to adopt the
  recommended behavior change.
- Place and Time: The channel(s) and timing of messaging the behavior change and its
  benefits to the target audience.
- Promotion: The various communication networks by which the behavior change and
  its benefits are promoted and encouraged.
- People: The campaign messengers of the recommended behavior change and its
  benefits, the partnerships and surrounding culture who send out consistent messaging.
- Process: The campaign messages’ development and delivery method, maintenance of
  the target audience-campaign relationship throughout the experience.
- Physical Evidence: The campaign’s tangible proof observed and experienced by the
  target audience so that the messaging is reinforced as real, worthwhile and serious.

These seven marketing mix elements cover different aspects of target groups and are very
important in the proper development of a social marketing campaign, including those related to
health behaviors. The elements will thus be further described so that the influencing tools and techniques, later evaluated and discusses, will be better understood. See Table 3 below for the 4Ps followed by this author’s descriptions and examples of the service-related 3Ps.

Table 3. Marketing Mix Elements, the 7Ps of Social Marketing

<table>
<thead>
<tr>
<th>Marketing Mix Element</th>
<th>Social Marketing Description</th>
<th>Examples of Specific Effects or Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Product</td>
<td>The benefit(s) that the recommended behavioral change offers the target audience.</td>
<td>• Rejection of current behavior or attitude</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Adoption of positive behavior or attitude</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Rejection of future negative behavior or attitude</td>
</tr>
<tr>
<td>Price</td>
<td>The cost(s) and/or barrier(s) perceived by the target audience to adopt the recommended behavior change.</td>
<td>Physical, emotional, psychological, financial or cultural</td>
</tr>
<tr>
<td>Place and Time</td>
<td>The channel(s) and timing of messaging the behavior change and its benefits to the target audience.</td>
<td>• Interpersonal channels</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Media</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Physical places</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Distribution or messaging channels</td>
</tr>
<tr>
<td>Promotion</td>
<td>The various communication networks by which the behavior change and its benefits are promoted and encouraged.</td>
<td>• Advertising</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Media endorsements</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Interpersonal</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Interactive social networks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Direct mail</td>
</tr>
<tr>
<td>People</td>
<td>The campaign messengers of the recommended behavior change and its benefits, the partnerships and surrounding culture who send out consistent messaging.</td>
<td>Credible, authentic and compassionate yet knowledgeable and determined support; consistent in communicating benefits of desired behaviors and attitudes to target audience</td>
</tr>
<tr>
<td>Process</td>
<td>The campaign messages’ development and delivery method; maintenance of the target audience-campaign relationship throughout the experience.</td>
<td>Methodology capturing development, delivery and maintenance of involved relationships</td>
</tr>
<tr>
<td>Physical Evidence or Environment</td>
<td>The campaign’s tangible proof observed and experienced by the target audience so that the messaging is reinforced as real, worthwhile and serious.</td>
<td>• Intangible services made tangible by capturing campaign in promotional materials (e.g., magazines and newspapers), newsletters informing target audience of campaign progress or issues</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Official website or office of the campaign</td>
</tr>
</tbody>
</table>

Note. The 7Ps of social marketing are described and exemplified above. The information presented on the first 4Ps is adapted from “Social Marketing in the 21st Century,” by A. R. Andreasen, 2006, p. 106, and “Social Marketing: Why Should the Devil Have All the Best Tunes?” by G. Hastings, 2007, p. 72. The latter 3Ps are according to the author of this report.
Social marketing closely mirrors commercial marketing through application of segmenting the audience, targeting one or more subgroups, tailoring a marketing strategy (via at least the 4Ps) that has appeal to the subgroup(s), and captures individuals’ attention. A key distinction is necessary to clarify commercial and social marketers’ long term objectives. Commercial marketing’s response objective is to fulfill customer needs, gain repeat purchasing and make a profit for the company. Social marketing focuses on the creation of a social movement that comes from enough individual behavior change to affect that of the subgroup or surrounding society. The objective is not just momentary behavioral change in individuals across the group, but sustaining the behavioral change such that it is the new norm. How these customers or participants can be reached and convinced to voluntarily respond to the marketing message is heavily dependent on understanding human behavior, as individuals and in groups.

Science and Theories Behind Marketing

It has been established that there are substantial differences between commercial marketing and social marketing, namely the issues or causes each seeks to address. Marketing research science is a primary element for both disciplines since its process is to comprehensively establish a marketing plan. Simply stated, marketing research science covers the process of collecting, analyzing, and interpreting data about potential customers, competitors, and business (or social) environments in terms of improving marketing effectiveness or benefits (Solomon et al., 2008, p 579). Marketing science is market consumer research, as shown earlier in Table 2, Overview of Marketing Plan Elements, and is essential to establishing, executing and monitoring a marketing plan. To better understand what comprises marketing research, see Figure 4 below where the three science elements are identified.
How an organization or program applies this marketing research data, executes a campaign and gets to the point of deriving the desired benefit, either bottom line or sustained behavioral change, is also essentially the same in product-based marketing and social marketing. Both disciplines need to understand how to influence individuals of a target market and invoke a voluntary response (Dann, 2006). In terms of specifically developing a social marketing campaign, Hastings emphasizes its behavioral-related goal (versus selling goods or services) and addresses how to influence by first asking three basic questions to understand the target audience (Hastings, 2006, p. 6):
- Where are people in relation to a particular behavior?
- What factors are causing this position or attitude?
- How can they be moved in a desired, positive direction?

Along with the research science, influencing tools and techniques used by commercial marketing for years are also applicable to social marketing campaigns to collect consumer and “competitive” data that help answer Hastings’ questions above. These tools and techniques include human psychology and behavioral theories. As these tools and techniques are more closely reviewed, contributors to behavior can be kept in mind, specifically individual characteristics, the individual’s immediate environment and greater social environment. See the following Figure 5 which breaks down these factors contributing to an individual’s behavior.

Figure 5. Contributors to Human Behaviors

Note: This diagram shows the three main contributors of human behaviors in a cyclical and cohesive map resulting in the individuals’ health related behaviors. The above information is partially adapted from “Social Marketing: Why Should the Devil Have All the Best Tunes?” by G. Hastings, 2007, p. 28.
As discussed, successful public campaigns are based on understanding behaviors and attitudes, including those related to health, and the surrounding environments in which the behaviors happen. The campaigns, essentially interventions to improve behavior one person at a time, can be designed by skillfully applying relevant behavior theories. Overall, these are sources to learn more about and from the target audience and its individuals. In addition to the science of psychology, many behavioral theories and models have been found as per this report’s research and review of publications by leaders in social marketing’s concept and application. Only the current, most often discussed theories and models are presented in this report along with a new model. Even though these tools have varied focal points, there are common threads that attempt to explain the complex human condition. Their distinguishing characteristics as well as similarities are evident as each is described and discussed. All serve to illustrate how behavior-change theories and science can be applied up-front in developing and executing social marketing campaigns. See Figure 6 which shows the specific topics which follow.

Collectively, these sources of information can be considered to determine “susceptibility, seriousness, benefits, barriers, and perceptions of effective cues to action” of the target group and individuals, both real and perceived (Lee & Kotler, 2011, p. 197). While the sources are numerous, market researchers should be familiar enough with each to assess applicability and choose a manageable few to use in developing the respective social marketing strategy. A closer look at each follows beginning with the science. Note that due to the vast amount of information on the study of human psychology, the field of social psychology has been identified since it emphasizes the effect of external human influences on individuals.
Figure 6. *Science and Behavior-related Theories Supporting Marketing Research Science*

*Note:* The diagram exemplifies the various science and behavior-related theories that contribute to marketing research science.

**Social psychology.** Social psychology focuses on interpersonal behavior; how social forces govern an individual’s thoughts, feelings, beliefs, and actions (e.g., attitude formation, attitude change, prejudice, conformity, attraction, aggression, intimate relationships and behavior groups) (Weiten, 2008, p. 18). Six elements within social psychology are described below (Weiten, 2008, p. 467):

- Person perception: where stereotypes and expectations influence impression of others
- Attribution processes: making guesses or assumptions about what causes the behavior of others
- Interpersonal attraction: assessing what is causing, or not causing an interest in another person, i.e., the extent of similarities and differences that affect compatibility such as educational backgrounds or political views
• Attitudes: how have attitudes been transformed and how they can be changed
• Conformity and obedience: where group influence overrides personal values
• Behavior in groups: where behavior alone and with significant others may be different than when in a group

Models and theories. One can understand in the six elements of social psychology above that each simplifies considerably complex human characteristics, individual as well as group. The following models and theories dissect human psychology further and are important inputs to target audience research, a campaign’s subsequent marketing plan and its execution.

Social Norm Theory. The Social Norm Theory identifies what is believed, by individuals within a group, as a social norm, i.e., what everyone else is doing. This theory is important to the change and prevention aspects of developing a social marketing strategy. As an example, if individuals within a group believe that binge drinking is destructive but not common within its group, then reception of the messaging will not be very effective (Lee & Kotler, 2011, p. 197). The converse can also be true where drinking is believed to be more common than it actually is, and then there is pressure to conform and fit in. Misconceptions of peer norms need to be overcome before the behavior issue can be properly acknowledged and the needed change seriously considered.

Health Belief Model. The Health Belief Model states that an individual’s perception of a threatening health behavior is based on, at least, general concern about health, belief about particular vulnerabilities (e.g., “Skin cancer does not run in my family.”) or belief about health problem consequences (e.g., “Granddad lived to 92 and he smoked.”) (Hastings, 2007, p. 22). The model is broken down into six concepts and related questions that a person could ask him or herself (Kotler & Lee, 2009, p. 146). See Table 4 for details.
Table 4. Concepts of the Health Belief Model

<table>
<thead>
<tr>
<th>Concept</th>
<th>Individual’s Question to Self</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Susceptibility</td>
<td>What are the chances I am vulnerable to the health condition?</td>
</tr>
<tr>
<td>Perceived Severity</td>
<td>Even if I am vulnerable, how concerned am I about the potential health condition?</td>
</tr>
<tr>
<td>Perceived Benefit</td>
<td>If I change my behavior, how effective would that be in preventing or reducing the possibility of the potential health condition?</td>
</tr>
<tr>
<td>Perceived Barriers</td>
<td>If I change, or try to change, my current health behavior, what might be the negative results or resistance factors?</td>
</tr>
<tr>
<td>Cues to Action</td>
<td>Do I see or feel any symptoms of the potential health condition?</td>
</tr>
<tr>
<td></td>
<td>Are there any environmental factors that indicate I should do something?</td>
</tr>
<tr>
<td>Self-Efficacy</td>
<td>How sure and worthy do I feel about adopting the new desired behavior?</td>
</tr>
</tbody>
</table>

Note: The six health-belief concepts and associated questions to self for each are listed to assist in understanding the target individual and group. The table information is adapted from “Up and Out of Poverty: The Social Marketing Solution,” by P. Kotler & N. R. Lee, 2009, p. 146.

The individuals’ collective responses to these questions would be communicated to the marketer as relevant target audience information and be used for development of a tailored social marketing strategy.

Behavior learning theories. These learning theories focus on how consumer behavior is changed by external stimuli or events (Solomon et al., 2008, p. 579). Learning is a change in behavior caused by information or experience. The goal of marketers is to “teach” and for the target audiences to “learn” to buy or adopt “products”. Common approaches such as classical and operant conditioning and cognitive learning theories are overviewed (Solomon et al., 2008, pp. 150-151).

Classical conditioning learning. Classical conditioning learning is when a consumer receives at least two stimuli at the same time. The positive reactions and feelings for one are
transferred to the other. An example is a TV advertisement showing a handsome, carefree man riding a new motorcycle along the beautiful coast. After surgery certain target audiences would favorably view the motorcycle since associated with the fortunate man, and possibly integrate the notion of health in influencing advertisement to influence future purchases.

*Operant conditioning.* Operant conditioning, also known as Behavioral Reinforcement Theory, is learning through either reward or punishment where the learning influences future purchasing (Andreasen, 2006, p. 224). A shoe store example for each of these conditions is receiving a gift certificate to use at the next visit or experiencing a difficult return policy, respectively.

*Cognitive learning theory.* Cognitive learning theory, or cognitive psychology, focuses on the individual’s “higher” mental processes such as memory, reasoning, information processing, language, problem-solving, decision-making and creativity (Weiten, 2008, p. 18). The abilities allow an individual to make connections across different ideas and associate “if this, then that” actions. Observational learning is a form of cognitive learning but in terms of learning from the actions and attitudes of others. Whether positive or negative, this exposure influences the observer.

*Stages of Change Theory.* The Stages of Change Theory, formally known as Transtheoretical Mode of Behavior Change, suggests, according to psychologists Prochaska and DiClemente, that individuals go through steps, or changes, for the adoption of and commitment to a new behavior (as cited by Hastings, 2007, p. 24). The starting point is where an individual is either unaware or indifferent towards a particular change and moves, progressively and thoughtfully, to adopting and maintaining a new behavior or attitude change, creating a new norm. This theory is directly applicable to strategic social marketing in terms of determining
how receptive, or unreceptive, a target audience is. A closer look at its five stages is presented below (Hastings, 2007, pp. 24-25):

- **Precontemplation:** an individual’s awareness of a potential new behavior but is currently not interested in pursuing it (e.g., recycling plastics)
- **Contemplation:** through some sort of messaging or personal acknowledgement, an individual consciously evaluates the new behavior’s importance to him or herself
- **Preparation:** an individual’s decision to act and is trying to figure out how to get started
- **Action:** an individual starts taking measures to change, adopt or avoid a certain behavior
- **Confirmation (or maintenance):** an individual’s adoption of the behavior, with no intention or desire to relapse.

Note that the above stages include relapses back to the old behavior or attitude and repeating one or more stages of change.

**Theory of Planned Behavior.** The Theory of Planned Behavior, also known as the Reasoned Action or Behavioral Intention, suggests that an individual’s intention to adopt a behavior (BI) is related to his/her personal attitude (A) towards the behavior and subjective norms (SN), i.e., perceived expectations from relevant groups or other individuals (Kotler & Lee, 2009, pp. 143-145; (University of Twente, n.d.). The model, A+SN=BI, attempts to predict a person’s behavior by a combination of his opinion, or attitude, of the behavior and what others think of the behavior (and of him). There is no assumption that attitude and norms are weighted equally as the factors could vary greatly depending on the situation as well as the individual. An example situation is an individual who does not follow fads would not have his subjective norm
factor (e.g., peer pressure) weighted heavily. His behavior would be predicted primarily by personal attitude. Conversely, the behavior of an individual who is heavily influenced by subjective norms would accordingly be predictable, i.e., the person would follow the crowd without much consideration of personal beliefs, opinions, or attitude. This theory is particularly interesting assessing social marketing strategies associated with certain age groups, where peer pressure may be a prevalent influence.

**Social Cognitive Theory.** The Social Cognitive Theory suggests human behavior is determined by internal factors (e.g., self-worth or education level) and external, environmental factors (e.g., local economy or available government services). Here, a two-way cyclic relationship is acknowledged, namely that environments influence individuals and their behaviors and, in turn, individuals influence their environments through their behaviors and expectations (Hastings, 2007, p. 28). An example is an overweight family who change their personal habits by not eating fast-food. They choose to keep only fresh healthy food in the house and make dinner as well as eat dinner as a family. A negative eating cycle is broken, positive life-changing behaviors adopted and an improved family environment could be experienced.

**Exchange Theory.** The Exchange Theory captures a standard economic theory where, for a transaction to occur, a consumer must receive, or perceive, benefits at least as equal to the real, or perceived, costs (Andreasen, 2006, pp. 188-189). This traditionally has been applied to a two-party transaction, originally for goods products and more recently service products. Over the last four decades, however, the idea of not just two-party but multiple party exchanges has been recognized, for example recycling’s benefits to the environment and conservation awareness. Associating a social marketing’s campaign that improves individual as well as societal conditions can be considered a multi-party exchange.
This expanded scope of the Exchange Theory can be applied to understanding the perspectives of a social marketing campaign’s target market. It can be done so that the campaign’s marketing strategies can intentionally avoid stereotyping or assumptions and be thoughtfully developed for the identified group of individuals.

Common elements of marketing information are presented below in terms of individuals’ adoption of behaviors and attitudes (versus purchase of goods or services) (Lee & Kotler, 2011, p. 189). What is believed necessary to give (give up) is answered by responding to the following questions.

- **Barriers (or Costs):**
  - What are the concerns about the new behavior?
  - Is adopting the new behavior believed possible?
  - Why now and not tried earlier?

- **Benefits (or Value, Offer):**
  - What is believed to be received (tangible or intangible) from the new behavior?
  - What is believed to be the likelihood of receiving the benefit? (Is it another false promise?)
  - Is the benefit truly desirable?

- **Competition:**
  - What is the current behavior and why is it being done?
  - What is the supposed benefit from change to the new behavior, and/or competitive behaviors?
  - What does the new behavior “cost”? 

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- How does the cost compare to the current behavior?

- Influential Others:
  - Regarding the new behavior, to whose message or to whom does the individual (in the target audience) pay attention?
  - What are these influences likely to say about the new behavior?

Answers to the above exchange-related questions will help in addressing the marketing mix elements, the 7Ps. As the social marketing campaign strategy is developed, considering how to effectively and efficiently capture the attention of individuals within a target audience is necessary before action can be created.

In the case where the initial exchange evaluation finds individuals to not be as receptive as desired, then the social marketing strategy can be revised to intentionally include messaging and evidence to better communicate. As McKenzie-Mohr and Smith (1999), environmental psychologist and educator, respectively, suggest, one or more of the following actions can be taken: “1) increase benefits of the new target behavior; 2) decrease barriers (and/or costs) to the new target behavior; 3) decrease benefits of the current competing behavior; and/or 4) increase barriers (and/or costs) of the current completing behavior” (as cited by Lee & Kotler, 2011, p. 193).

**Persuasion Model.** The Persuasion Model has been used by advertisers for decades to attract potential customer by getting their attention, provoking interest, creating desire and getting an action, which is prompting purchases (Heath, 2012, p. 15). The Persuasion Model is an active method of influencing groups, one individual at a time, towards adoption of an attitude, idea, or behavior. This is accomplished by appealing or guiding rather than by strong pressure or coercive tactics. The five most accepted elements that make up an effective persuasive
campaign, and address “who said what to whom and how” (Sabry, 2012). In terms of communication strategy, this saying is commonly broken down into five, interconnected and interdependent elements, namely communicator, message, audience, channel and context (Senishch-Chmilewsky, 2010). These elements are further illustrated below from a marketing perspective (Solomon et al., 2008, pp. 378, 397, 411):

- **Communicator:** credible, knowledgeable, trustworthy and attractive
- **Message:** delivery balanced between reasoning and emotive information, one- or two-sided argument
- **Audience:** demographics, personality traits, preferences
- **Communication Channel or Medium:** printed word, interpersonal face-to-face, TV, internet
- **Context (or Surrounding Conditions):** preamble or set-up to the persuasive message, environment (social or physical), group dynamics

**Behavior Conditioning Model (BCM).** The Behavior Conditioning Model was developed from a two-year thematic analysis of 120 behavior change models and theories. The model explains conditions that support or mitigate an individual’s behaviors in understanding and engaging in the way they view the world. This model could be used to evaluate correlations between an individual’s behavior patterns and receptiveness to behavior change. With patterns identified, health care advocates potentially can predict an individual’s reaction to interventions, specifically by understanding detractors as well as motivators to making and sustaining behavior changes.

At the core of the BCM are concepts of Character, Soul, and Spirit which are unique to each individual. Dr. Hart’s (2013) definition of each is stated below (p. 10):
• Character: the demonstrable consistency of external behaviors recognized by self and others.

• Soul: depicts the internal through process consistently descriptive of one’s introspective beliefs and values.

• Spirit: the energy emitted form mind/body connection to the environment.

Seven categories, or constructs domains, have been summarized from research and are applied to recognize and comprehend an individual’s behavior disposition. See Figure 7 which is the BCM depicted as a process map that can be read, starting at Social Psychological Foundations and moving counterclockwise, to show relationships and connections of human experiences, across the identified behavioral constructs.

Figure 7. Behavior Conditioning Model

Note: This is a conceptual model of the seven behavioral conditioning constructs leading one’s development of character, soul, and spirit (indicated by the caricature). The counter clockwise inner circle flow represents the typical process of exploring routinized behaviors. The connection to the added “intended intervention” construct depicts the path of influence of the constructs to connect both the readiness for change (Social Psychological Foundations, Self-Efficacy, and
Behavior Sensitivity) and post intervention phase (Mental Processing and Assimilation) to adopt or adapt to change. Hart, 2012.

Note: The construct dimensions emerged from a Delphi Analysis of the 135 journal articles in the 17 Psychological Journals.

According to Hart (2013), a description of each behavioral construct follows:

- Social Psychology Foundations: “an individual’s relationships or association to one’s culture, community, family, or group” (Hart, 2013, p. 13). These foundations are necessary, as per philosopher Charles Taylor (1989), in order “to understand the importance of understanding one’s adherence to tradition, norms, and devotion to the values and beliefs” (as cited by Hart, 2013, p. 13).

- Self-Efficacy: an individual’s “receptiveness to understand and learn” (Hart, 2013, p. 14) is associated with perceived self-worth (respect, esteem, and confidence in oneself). The positive state of mind influences feelings of being worthy of attention, improvement and value to others.

- Behavioral Sensitivity: understood as “first the conscious versus subconscious awareness of one’s environment and second the relationship of one’s behaviors in diverse settings” (Hart, 2013, p. 15). An understanding of this construct helps to assess the readiness of an individual’s response to interventions or intercessions regarding behavior.

- Non-Initiated Event: experiences across “a cycle of stimulus-process-response” (Hart, 2013, p. 16) which is based on an individual’s real or perceived environmental state. One’s ambitions and surrounding environment (real or imagined) influence his or her behavior. The construct suggests that person-to-person differences are actually based on perceptions, not behaviors. An understanding of the BCM’s core concepts
Character, Soul, and Spirit, actual or desired, is suggested to gauge how an individual perceives and reacts.

- **Intended Intervention**: “a common staged [initiated] intervention model” (Hart, 2013, p. 18). Wood and Neal (2007) describe this construct as how and when an individual cannot control reaction to a signal (or cue) that brings about a particular behavior (as cited by Hart, 2013, p. 18). How an individual, with forethought and preparation, alters his or her behavior is based on a planned behavior, or planned reaction to a cue.

- **Mental Processing**: an approach to a behavioral event that has been influenced by self-introspection (i.e., internal feelings, memories, and expectations) and external factors (i.e., discussion with others and related actions) (Hart, 2013, p. 19). The resulting behavior occurs as a result of how an individual processes information, recalls events, and either confirms old or gains new knowledge.

- **Assimilation**: the action or “final stage of deciding how” (Hart, 2013, p. 20) a behavioral event is retained among other memories and whether it supports past learning or causes new learning which could be applied in the future.

Although further research is required, Dr. Hart’s study results suggest a systemic approach and process for practitioners to uncover personal underlying conditions that lead individuals to make decisions and guide their behaviors. Prior to an intervention, the model can be used to predict an individual’s success in a particular intervention. If the probability of success is low the practitioners can address the identified human conditions before execution. Overall, the model can help identify how one can increase self-understanding of a current state, predict and/or optimize behavior conditions, and lead to a desired personal state of their personally defined Character, Soul, and Spirit.
Remarks regarding marketing science and behavioral theories. Since social marketing is essentially about behavioral change and its sustainability, the obvious place has been to look at these interlocking theories and science behind human behavior (Hastings, 2007, p. 20). It is clear now that that attention must not only be paid to the individuals within a target audience but to the influences of their surrounding personal, cultural and physical environments. Understanding how to communicate and emphasize intrinsic rewards is critical for the social marketer: individuals within an identified group must find a reward in the behavior change itself, to have a reasons to reject current behavior or attitude, adopt the positive behavior or attitude, or reject future behavior or attitude (see Table 3, Marketing Mix Elements, the 7Ps of Social Marketing, for details). Understanding contributors to human behavior, related theories and science can be combined with established marketing processes for social marketing to be well-positioned to market desired social behaviors (Andreasen, 2006, p. 6).
Directly Comparing the Marketing Disciplines

This report has discussed the social marketing discipline in terms of how it compares to the more-familiar commercial marketing, a proven point of reference. Their differences and similarities have been discussed and contrasted. A summary of the differences is shown in the following Table 5.

Table 5. Inherent Differences Between Social Marketing and Commercial Marketing

<table>
<thead>
<tr>
<th>Marketing Characteristic</th>
<th>Social Marketing</th>
<th>Commercial Marketing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marketing process aims to “sell” products of</td>
<td>Desired behaviors; nonprofit</td>
<td>Tangible goods or services; for profit</td>
</tr>
<tr>
<td>Primary goal →</td>
<td>Convert enough individuals to cause societal gain</td>
<td>Financial gain</td>
</tr>
<tr>
<td>Target audience →</td>
<td>Participants; greatest amount of behavioral change</td>
<td>Consumers; greatest profit or volume</td>
</tr>
<tr>
<td>Competitors →</td>
<td>Current or preferred behavior of the target audience</td>
<td>Other organizations offering similar goods</td>
</tr>
<tr>
<td>Cost to the target</td>
<td>Time, effort, reduced pleasure; social alienation</td>
<td>Money, time</td>
</tr>
<tr>
<td>Availability of financial resources →</td>
<td>Limited, nonprofit based</td>
<td>Vast, profit based</td>
</tr>
</tbody>
</table>


Despite these considerable differences, there are many similarities between the two marketing disciplines. The key similarities are reiterated below (Kotler & Lee, 2009, pp. 55-56; Lee & Kotler, 2011, pp. 15-16):

- The marketer or campaign needs to solve a problem of the target audience, also known as satisfying a need.

- The exchange theory is fundamental, i.e., for the individuals to receive a benefit at least as equal to the perceived cost.
• Marketing research science and influencing tools and techniques are used to understand the target audience (needs, desires, beliefs, attitudes), attract and keep their interest.

• Besides advertising and other means of communication, the marketing mix elements (the Ps) are considered.

• Results are measured and monitored for program improvement.

Now that the supportive structures of social marketing have been established, contrasted with commercial marketing and summarized, how potential social marketing campaigns are identified and modeled can be discussed and evaluated.
Focusing on Social Marketing

What makes social marketing unique is its end goal of sustained behavioral change, ideally at the societal level. It is therefore essential that the societal problem be properly researched and identified even though there are varied opinions and beliefs about what is actually a problem; agreement can be difficult but is necessary for stakeholders to be genuinely committed to the campaign and its sought-after success. Thereafter, when a societal problem has been identified, there are established models on which to establish a social marketing program. The following offers a focus on these important aspects of social marketing.

Identification of a Social Problem

A social marketing campaign begins with identifying a social problem. Ones that easily come to mind, regardless of a country’s affluence, are “poverty, starvation, disease, and discrimination” (Andreasen, 2006, p. 13). These societal problems are complex and must be broken down into smaller segments, or more specifics issues for planned improvements to occur. Examples of smaller-segment, societal problems are poverty among U.S. veterans and single, inner-city mothers. As the social marketing concept predicts, when enough of the affected individuals within the target group are positively affected (and the changes sustained), the problems become more like isolated issues versus broad societal ones.

The identification or awareness of social problems comes about through various sources, the following being three of the most common (Andreasen, 2006, p. 15):

- Statistical surveillance – government information (e.g., census, welfare records, federal loan applications); profit and nonprofit organizations’ tracking, trending, and reporting of related information (e.g., purchasing habits of certain groups, patients’ repeat admittance to hospitals)
Special one-time quantitative studies – typically conducted by government agencies or affiliated organizations to gather data on a specific issue (e.g., underage drinking on college campuses)

Individual insights or augmentation – collectively rethinking the acceptance of a situation which actually adversely affects a group of individuals (e.g., labor laws not protecting jobs of new mothers)

Another source that identifies large-scale problems is government groups such as the United Nations (UN) and the World Health Organization (WHO). Even though at the macro-level, these organizations keep the exposed, publicized societal issues alive providing the necessary attention for the public to be addressed. One example of such visibility is the UN’s Millennium List of 18 targeted initiatives (Andreasen, 2006, p. 22). Target 17 reads, “In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries.” This large-scale issue, the lack of life-saving drugs, can be broken down by countries or sections within the countries. Target 17 and the other UN initiatives are kept obvious in the UN’s messaging (e.g., on its websites) in order to help millions of people.

In the United States since 1990, the Center for Disease Control (CDC) has analyzed citizens’ health-related data carefully and developed a list of high-occurring (ill) health indicators, the current state of each, affected groups, measures, and future goals. The most recent version of this program, Healthy People 2020, was launched in December 2010 (Healthy People, 2012). This current program highlights 42 agenda items by their Leading Health Indicator (LHI) (Healthy People, 2013). These LHIs are “intended to draw attention to both individual and societal determinant that affect the public’s health and contribute to health disparities from infancy through old age, thereby highlighting strategic opportunities to promote
health and improve quality of life for all Americans” (Healthy People, 2011). Table 6 shows two actual health-indicator initiatives that the CDC presented in 2000.

Table 6. *Healthy People Leading Health Indicators (LHIS) and Related Details*

<table>
<thead>
<tr>
<th>Healthy People Indicator</th>
<th>Group</th>
<th>Measure</th>
<th>Current State (in 2000)</th>
<th>Future Goal (for 2010)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance abuse</td>
<td>Adolescents -</td>
<td>No:</td>
<td>35%</td>
<td>16%</td>
</tr>
<tr>
<td></td>
<td>Adults -</td>
<td>• Drugs or alcohol in 30 days</td>
<td>24%</td>
<td>12%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Binge drinking in 30 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Drug use in 30 days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health</td>
<td>18 years or</td>
<td>Depressives get treatment</td>
<td>23%</td>
<td>50%</td>
</tr>
<tr>
<td></td>
<td>older -</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note.* This displays the LHI detail across the affected group, the measure (or metric), baseline and goal are shown. The information presented in the table is as cited in “Social Marketing in the 21st Century,” by A. R. Andreasen, 2006, p. 28.

The Healthy People 2020 program and its 42 agenda items are excellent sources to help identify and/or support well researched problems and provide the legitimacy of a proposed social marketing campaign. Once the topic has been identified, much needs to be done to make progress towards the future goals. It is important to closely evaluate a LHI and determine a desired behavior that is achievable and offers maximum benefit towards meeting the established goal and objective.

**Determining Desirable and Undesirable Behaviors**

It is straightforward enough to agree that social marketing’s intention is to be a catalyst for behavioral changes that benefit individuals as well as whole societies. What can be controversial, however, is determining what a desired behavior is and, conversely, the undesirable behavior that it seeks to correct. Understanding both factors upfront is critical to properly assess a potential social marketing campaign and the involvement of social marketers.

For example, a societal problem can be exemplified as a long waiting list for donated organs. The underlying behavior affecting the supply can be complex including factors such as religious
beliefs, lack of knowledge, or indifference. What makes a worthwhile campaign for one person, e.g., increasing organ-donor drives, can be objectionable to another due to ethical beliefs (Lee & Kotler, 2011, pp. 52-53). When a proposed campaign has been properly vetted through an environmental analysis (e.g., SWOT analysis) and evaluation of potential target markets, the actual viability of a campaign, its target group and goals can be assessed before going any further.

The subject of strong personal beliefs lead government agencies, profit and nonprofit organizations and social marketers to primarily concentrate on supporting pre-screened, publicized initiatives such as those listed in the CDC’s Healthy People 2020. A marketing campaign’s association with such visible known issues also would help with securing its funding from either the government or private organizations. Supposing such a behavior change has been identified, it is critical for the social marketing campaign to be thoughtfully structured and realistically justified.

**Social Marketing Plan Elements**

Earlier in this report, the steps and relationships involved in a general marketing plan were discussed (see Table 2, Overview of Marketing Plan Elements). Inherent in the structure is the control and monitoring feedback look that helps ensure improvements or refinement to the program’s execution. Social marketing plan elements follow the same basic steps but are approached from a different point of view; instead of how to sell a product, the focus is on understanding desired behaviors and the undesired, competing and most often current behaviors. See social marketing Table 7 which is a modified version of Table 2. Note that guiding statements (text bubbles within the table) are placed in several areas and are intended to help ethically establish and conduct the plan elements.
Table 7. Overview of Social Marketing Plan Elements

<table>
<thead>
<tr>
<th>Marketing Plan: How to Achieve Organizational Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Perform Environmental/Situation Analysis</td>
</tr>
<tr>
<td>(Research, e.g., Strengths, Weaknesses, Opportunities, and Threats (SWOT) internal and external to organization)</td>
</tr>
<tr>
<td>2. Stakeholder Analysis</td>
</tr>
<tr>
<td>3. Establish Marketing Goals and Objectives</td>
</tr>
<tr>
<td>(after environmental conditions are known and understood)</td>
</tr>
<tr>
<td>4. Develop Marketing Strategies</td>
</tr>
<tr>
<td>a. Evaluate target markets and positioning (how to influence)</td>
</tr>
<tr>
<td>b. Select marketing segment, target audience</td>
</tr>
<tr>
<td>c. Identify barriers, benefits, competitors and other influences</td>
</tr>
<tr>
<td>d. Develop marketing mix strategies specific to target audience</td>
</tr>
<tr>
<td>i. 7Ps</td>
</tr>
<tr>
<td>1. Original, goods-based 4 Ps: Product, Price, Promotion, Place</td>
</tr>
<tr>
<td>2. Additional service-based 3Ps: People, Process, Physical Evidence (or Physical Environment)</td>
</tr>
<tr>
<td>5. Implement (execute marketing strategy)</td>
</tr>
<tr>
<td>6. Control by Monitoring and Evaluation</td>
</tr>
<tr>
<td>(monitor progress towards established goals and objectives)</td>
</tr>
<tr>
<td>d. Measure actual performance indicator</td>
</tr>
<tr>
<td>e. Compare actuals to established marketing goals and objectives</td>
</tr>
<tr>
<td>f. Make adjustments to either strategy or objectives, based on actual performance</td>
</tr>
</tbody>
</table>

Of particular note, as compared to commercial marketing, is social marketing’s element of stakeholder analysis. Commercial marketing stakeholders include buyers, sellers, company investors and community residents. Social marketing stakeholders’ analysis is more complex as it not only evaluates how to establish a relationship between the marketer and individuals within a target group but needs to include “the involvement of family members, communities, voluntary organizations, health professionals and others in order to create and maintain the desired behavior change” (Hastings et al., 2011, p. 160). Without this broader multifaceted evaluation of the stakeholders, those who have a stake in the behavioral change, i.e., something to lose or gain, may not even realize they are involved (e.g., enabling family members) or that a social marketing campaign’s success could depend on their attention and participation (e.g., volunteerism).

Specifically for social marketing campaigns, models have been developed to help address the uniqueness their product and value proposition. Three popular models are described and discussed in the following sections.

**Government model of the social marketing wheel.** After a marketing plan’s situational (environmental) and stakeholder analyses are performed, the U.S. National Cancer Institute (NCI) has developed its own approach to what it calls health communication planning and established the Social Marketing Wheel (National Cancer Institute [NCI], 2002). The wheel is comprised of six basic elements or stages that are not only common to marketing plans but also to basic project management (e.g., risk identification and management and the use of performance indicators). These six stages are shown in terms of a cycle in Figure 8 below.
Note: The social marketing wheel is shown adapted from the NCI, 2002. The figure details social marketing’s six main process stages in a cyclical form.

The wheel stresses communication planning and effectiveness-monitoring in health-related campaigns. Each stage is further described in the following list (Evans, 2006; NCI, 2002; National NCI, 2002; NIHCM, 2009, p. 1-4):

1. Planning and Strategy Development: developing plans and strategies using behavior theories and marketing science
2. Selecting Channels and Materials: based on identifying the desired behavior change and understanding target audience, select communication channels and materials (e.g., to middle age women, communicating contributors to and warning signs of high blood pressure, relationship to heart attacks and how to reduce the risks)
3. Developing Materials and Pretesting: using qualitative methods (typically), check the plan’s feasibility before execution of the social marketing campaign (e.g., focus group
questioning of individuals representing the target group, namely how the health messaging is received and their response)

4. Implementation: execution of the communication plan or social marketing campaign (e.g., full-scale marketing to target group or small-scale approach by physicians 1:1 with their elderly patients)

5. Assessing Effectiveness: evaluations of audience exposure, awareness, reaction to messaging, and behavior-change outcomes (if any, e.g., weight loss or mental health counseling sought)

6. Feedback to Refine Program: as identified by assessments, make improvements by introducing subtle yet influential changes to program’s execution

**Private sector models for social marketing.** As compared to the U.S. government’s NCI, private sector experts take different approaches to establishing a social marketing program. In particular, a popular private sector model of Kotler & Lee appears to emphasize various means of in-depth research and target market evaluations as well as funding considerations before execution of the program. Kotler and Lee, educator and consultant co-authors, break development and planning of a social marketing campaign in the following ten steps (Kotler & Lee, 2009, pp. 220-221; Lee & Kotler, 2008):

1. Describe Background, Purpose and Focus for the Planning Effort
2. Conduct a Situation Analysis
3. Select and Describe the Target Market
4. Set Marketing Objectives and Goals (Behavior, Knowledge, Beliefs)
5. Identify Audience Barriers, Benefits, and the Competition
6. Write a Positioning Statement
7. Develop a Strategic Marketing Mix (the 4Ps)
   a. Product
   b. Price
   c. Place
   d. Promotion

8. Determine an Evaluation Plan

9. Establish a Campaign Budget

10. Outline an Implementation Plan

Note that the steps are not intended to be sequential, but cyclic, and subject to change as the associated campaign is developed and executed.

Another approach to modeling social marketing programs has been developed by Doug McKenzie-Mohr, an environmental psychologist. He breaks down a campaign (presumably after performing situational analysis and establishing goals and objectives) in the following ways (McKenzie-Mohr, 2011, pp. 8-10):

1. Selecting [Desirable] Behaviors
2. Identifying Barriers and Benefits
3. Developing Strategies
4. Piloting
5. Broad-Scale Implementation and Evaluation

Of particular note is McKenzie-Mohr’s approach to identifying the particular positive behavior to be promoted. Inherent in his model is ensuring that the desired behavior is as divisible, or inseparable, as possible from other related behaviors and represents the intended end-state, the change to be sustained. Since McKenzie-Mohr’s expertise deals with the
environment, his behavioral change example is related to energy efficiency (McKenzie-Mohr, 2011, p. 13). In this instance the non-divisible behavior, related to insulating his house, was installing attic insulation. The verification of the end-state could be accomplished by energy audits or reduced heating bills.

A parallel example related to health is the indicator of obesity where the target group’s goal is average weight reduction by 10%. The personal behavioral change, a healthier lifestyle, is increasing exercise and is divided, or isolated, to individuals walking briskly for 30 minutes a day, at least five times a week. In this case, walking is not confounded with other behaviors such as going to the gym or weekend yard work. Verification of progress towards the desired end-state could be periodic weigh-ins and blood pressure monitoring. In both the environmental and health-related cases, the identified desired behavior, or condition, is as basic as possible so that what to do (or adopt) is clear; success is easier to monitor and achieve. It is understandable that isolating and understanding the specific target behavior is especially important in developing effective behavior-change strategies.

This report has thus far discussed social and commercial marketing plan elements (their commonalities and inherent differences), important behavior-related tools and techniques, how desirable target behaviors can be identified, and key models which can be used to properly capture stages or steps in effectively developing, executing, and monitoring a social marketing campaign. Now armed with this information and insight, the approach to and effectiveness of actual social marketing campaigns will be evaluated and discussed.
Case Studies in Social Marketing

Research for this report has not found widespread use of social marketing to address societal problems, especially in the U.S. To exemplify, of the 18 case studies presented in *Social Marketing: Why Should the Devil Have All the Best Tunes?* Hastings (2007) identified only one from the U.S. (p. 5). In their book, *Up and Out of Poverty: The Social Marketing Solution*, Kotler and Lee (2009) offered ten case studies, two of which had been executed in the U.S. Two years later, Lee and Kotler (2011) evaluated another 16 executed social marketing campaigns in their subsequent book, *Social Marketing: Influencing Behaviors for Good*, and six (mostly short-term and small-scale) were in the U.S.

A closer look finds that approximately 22% of the social marketing campaigns identified by these experts were in the U.S. The number of social marketing campaigns executed in the U.S. appears to be growing, yet given that the U.S. is a world leader in so many ways, 22% indicates that the discipline of social marketing is under-utilized in the U.S. In just one source, Healthy People 2020, 42 agenda items, or acknowledged health-related problems in the US, are listed (Healthy People, 2013, March 8); the reduction of these societal problems can be explored through social marketing’s application.

As an exercise in social marketing’s application, two health-related campaigns executed in the U.S. have been identified. (Neither is discussed in the Lee, Kotler, and Hastings books.) The campaigns will be described and evaluated across a compilation of social marketing plan components (Hastings, 2007, pp. 229-235; Lee & Kotler, 2011, pp. 40-49), from descriptions of the campaign through lessons documented by the involved marketers. Thereafter, missed opportunities (including the 3Ps of service) and analysis of target group individuals (from perspectives of behavior theories and marketing science) are presented by the author of this
report and intended for future system improvement or re-execution of campaign. See Table 8 for a breakdown of this report’s approach for retrospectively analyzing a social marketing program.

Table 8. Breakdown of a Social Marketing Campaign

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Introduction and Description of Campaign</td>
</tr>
<tr>
<td>2.</td>
<td>Problem Definition</td>
</tr>
<tr>
<td>3.</td>
<td>Research and Analyses</td>
</tr>
<tr>
<td>4.</td>
<td>Formulation of Strategy, i.e., Marketing Plan</td>
</tr>
<tr>
<td>5.</td>
<td>Behavior Aims and Objectives</td>
</tr>
<tr>
<td>6.</td>
<td>Monitoring of Outcomes and Feedback</td>
</tr>
<tr>
<td>7.</td>
<td>Lessons Learned</td>
</tr>
<tr>
<td>8.</td>
<td>Missed Opportunities</td>
</tr>
<tr>
<td>9.</td>
<td>Reaching and Influencing the Target Group</td>
</tr>
<tr>
<td>a.</td>
<td>The 4Ps</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>Product</td>
</tr>
<tr>
<td>ii.</td>
<td>Price</td>
</tr>
<tr>
<td>iii.</td>
<td>Promotion</td>
</tr>
<tr>
<td>iv.</td>
<td>Placement</td>
</tr>
<tr>
<td>b.</td>
<td>The 3Ps</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>People</td>
</tr>
<tr>
<td>ii.</td>
<td>Process</td>
</tr>
<tr>
<td>iii.</td>
<td>Physical Environment / Evidence</td>
</tr>
<tr>
<td>a.</td>
<td>Tools and Techniques</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>Summary Remarks</td>
</tr>
</tbody>
</table>


The Verb™ Campaign

Introduction and description of campaign. The “Verb™ It’s what you do” piloted social marketing campaign was initially developed the late 1990s in Lexington, Kentucky as a community-based prevention program, namely to encourage healthy active behaviors and offset their unhealthy behavior, i.e., sedentary lifestyle contributing to obesity. The success of the local Lexington program was noticed and adapted by the U.S. Department of Health and Human
Services’ CDC. In 2001, the CDC received $125 million as start-up funding for a five-year pilot social marketing campaign (Agaronovi, 2013). Despite favorable results and promising expansion, the government funding incrementally decreased across the five years and the program was concluded in September 2006 (Center for Disease Control [CDC], 2007).

**Problem and research.** Evaluation of children’s health data in the late 1990’s showed that obesity percentages had dramatically increased over a 30-year period, where youths 6-11 years old had tripled and youths 12-19 years old had doubled (CDC, 2007). Closer examination of the data found that approximately 19% if 6-11 year olds and 17% of 12-19 year olds were overweight (body mass index >/= 95% percentile for age and gender). The rates for at-risk conditions are approximately 37% and 34%, for 6-11 and 12-19 year olds, respectively. A youth epidemic was not only acknowledged but quantified.

Research found that these age groups are not interested in health-related messaging, e.g., disease prevention (CDC, 2007). Given this, promotion of physical activity was identified as the most straightforward means of intervention, behavior change, across these age groups. The children’s health data trends and surveys of the communities’ youths and their parents provided baseline information against which in-process and post-program results could be compared (CDC, 2007).

**Competitive analysis.** Competition to the desired behavior, here the sedentary lifestyle vs. increased physical activity, was identified as watching television and playing video games. (This competition was identified in 2000 and would certainly include computer use today.)

**Stakeholder analysis.** Aside from the identified youths, stakeholders included many individuals and organizations were affected, directly or indirectly, by the youths’ health-related behavior and resulting lack of well-being (e.g., emotional damage) and economic considerations
(e.g., future health care costs). Just in Lexington, Kentucky alone, the Verb™ campaign attracted many individuals and 55 organizations to help promote a healthier, more active lifestyle for these youths. This coalition of stakeholders included (CDC, 2007):

- Local public health, parks and recreation departments
- YMCA
- Faith-based organizations
- Community centers
- Children’s museum
- Various businesses, in particular those serving the targeted youth audience
- School administrators
- Teachers and coaches
- Health care providers

To gauge the stakeholders’ perspectives on participating in a youth obesity-prevention program, members from each coalition organization were interviewed. While most were extremely interested in preventing obese person’s health and emotional issues, the coalitions’ did not believe they could actually make a difference. Perhaps this was due to thinking from an isolated, not collective, point of view and not recognizing strength in numbers.

Additionally, interview results showed that many believed that their time would be wasted in meetings and that progress would be limited. This information was gathered directly from stakeholders, actual program participants, and led to careful organization of meetings, goals-setting, defined participation and ownership. Participants’ time was respected and even small, incremental successes were celebrated.
Behavior aims and objectives. The primary goal of the Verb™ program was to prevent childhood obesity. Those involved in the campaign, the coalition, identified the following “protective” behaviors to promote (Hastings, 2007, p. 273):

- Physical activity in the community setting
- Physical education in public schools
- Regular breakfast
- Reduced sweetened beverages
- Parental involvement promoting healthy eating habits

The funded pilot campaign combined extensive partnerships, marketing strategies and paid advertising to reach the U.S.-wide target audiences.

Formulation of strategy. An evaluation of the Verb™ program has been performed in terms of its marketing plan, target audience segmentation, positioning and the 4Ps follows (CDC, 2007).

The campaign’s audience segmentation concentrated on moderately-active and passive youths, i.e., those who were active but not enthusiastic about any particular sport or activity and those who are only active when bored, respectively. Due to the campaign’s primary goal of obesity-prevention, positioning (i.e., participation in activities versus just observing), was approached in terms of fun, not force, and being part of an active, friendly-competing group. The program separated boys and girls as they are inherently different physically, emotionally and socially different. It intentionally did not target high-risk youths who had limiting environmental or physical conditions, did not have parental support or the resources to participate outside of school.
Starting with the 4Ps, the behavior change’s benefit, or product, offered to satisfy these particular age groups was related to fun, being with friends and opportunities to do new and exciting things. Note that healthy messaging was “strictly avoided” in order to not distract the youths (Hastings, 2007, p. 275).

The behavior change’s price, or cost(s) and/or barriers, to adopt a more active lifestyle was perceived by the youths as related to 1) fear of embarrassment in front of peers, 2) parents fear for children’s safety, and 3) free or discounted opportunities to be active.

Promotional and persuasive activities were multifold during the campaign (CDC, 2007). The colorful Verb™ scorecards captured the youths’ activity levels during the summer months and over fall and holiday breaks from school. Through the participation of campaign partners and vendors, prizes and special benefits, rewards, and grand prizes were offered. Vendors took the opportunity to advertise themselves through their participation, e.g., placement of their logo or name on promotional materials. Every Verb™ participant received some award and those scoring high on the activity scorecards were eligible for grand prizes. Along with gifts, acknowledgement of accomplishments in public and in front of friends and family were strong motivators for participation.

Placement and timing of opportunities for physical activities with friends were offered consistently through the summer months and school breaks. For those youths in low-income disadvantaged areas, free or low-cost opportunities were always offered.

**Monitoring of outcomes and feedback.** The level of youth participation was noted by organizers on activity days and through scorecard entry results. Sample interviews with Lexington-area parents after the Verb™ summer activities indicated that (CDC, 2007):

- 65% of children were more active
• 47% of parents said siblings were more active (due likely to the positive influence)
• 70% of parents were more aware of their child’s physical activity levels due to the Verb™ campaign’s communications and activities

Survey results from children in the Lexington community found approximately 43% were aware of its VerbTM summer program and messaging. Over 90% of these children were aware of the piloted national Verb™ campaign, likely through children’s programming partners such as Nickelodeon. Those participating youths who were exposed to both the local and national programs experienced higher levels of physical activities than those exposed to only one (CDC, 2007).

**Lessons learned.** Those involved in the Verb™ program learned how to use proven marketing principles and practices, namely to analyze the situation, set goals and objectives, develop marketing plans, implement and monitor progress.

As McKenzie-Mohr suggests (2011, p. 13), the promoted behavior change, or target behavior to reduce or prevent childhood obesity, was as divisible as possible. The message, “be active and have fun with friends”, was straightforward. There was no confusion with other messaging such as to not eat sweets or count calories. The simplicity was effective.

The five-year, national pilot program was set to depend on top-down promotion through expensive media, namely television programming which would, other than Lexington, attract attention and involvement at the local level. As the government’s supportive funding decreased each year, alternative funding was not sought. To offset use of the expensive outlet, restructuring the marketing strategy was also not performed. As a result, when the government funding ceased after five years, the national Verb™ social marketing campaign quietly concluded and the local initiatives soon followed. If the campaign’s infrastructure was
monitored as closely as its progress, then dependable funding and alternate promotional strategies may have supported the campaign’s continuance.

**Missed opportunities.** As mentioned, the Verb™ campaign was progressing as long as funding was available. Weaknesses in the national program from the start were the lack of long term, sustained funding as well as its single source (government). The threat of the diminishing funding was not properly addressed early enough to have made a difference.

Regarding the 3Ps, the marketing mix element of Process, i.e., development and delivery of the campaign message, was also not properly evaluated. As a result, the relationship with the target audience was not able to be maintained. Appropriate development would include how to sustain the messaging, including assumptions which may or may not change over time.

Other interrelated elements which were not completely understood are People and Physical Environment (or Evidence). The campaign messengers and partners were effective locally likely due to personal interest, direct, and possibly immediate, benefits. Nationally however, there was no plan or strategy to tie-in to greater, more visible initiatives that would motivate people towards dedicated, long-term volunteerism or nonprofit involvement.

**Reaching and influencing the target group.** The Verb™ campaign benefitted, whether intentionally designed or not, from various behavior-related marketing tools. Four of these are considered significantly-applicable, primarily for the young target group, and are explored.

Predominant in the Verb™ campaign is the Persuasion Model, namely how the children’s attention was captured and resulted in many being more active. Messaging and promotion appealed to the children’s sense of fun, need for companionship and belonging to a group doing something new and exciting.
Behavioral learning theories also took affect where the children participating in the Verb™ campaign activities, made a connection, here a positive one, between an active lifestyle, being with friends, and feeling better both physically as well as mentally.

Although young, the Exchange Theory applied to the Verb™ target group. Common elements of marketing information are described from this social marketing campaign’s perspectives. Barriers (or costs) were that time and effort were given and a sedentary lifestyle was given up. Benefits were feelings of accomplishment, being with friends and healthy, friendly competition. Competition was continuing to do nothing, being inactive. What was to gain was a more active lifestyle at the cost of time, effort, and possibly physical discomfort. Many children thought the cost was worth what they gained in return. Influential others were those to whom the children paid attention, namely parents, teachers and coaches, all of whom encouraged the new behavior.

The Behavior Change Model also is applicable since a campaign to increase physical activity can be understood as an intervention for individuals, here children, to be more active. How children within the target group responded to the campaign’s messaging depended on at least three of the model’s constructs: social psychology foundations (i.e., family and friends), self-efficacy (i.e., worth) and behavioral sensitivity (i.e., awareness and understanding of surrounding environment) seem appropriate for this young age group.

**Summary remarks.** To summarize, the Verb™ pilot program concluded in September 2006 even with positive recommendations made by parents, program partners and the participating youths. By 2006, another 15 U.S. communities had joined Lexington and initiated the Verb™ approach, however since no government funding was received, neither was a
nationally-organized Verb™ program initiated nor the pilot program extended into 2007 (Agarovoni, 2013).

After study and evaluation of the Verb™ social marketing campaign, its success raising awareness and combating childhood obesity must be praised. It has, however, been seven years since the pilot program’s conclusion and childhood obesity remains a great concern. Of the 42 Healthy People 2020 initiatives, no less than seven deal directly with children’s health. If such a social marketing campaign is re-initiated, association with these national Healthy People objectives would be beneficial in terms of visibility and possible non-governmental funding for more dependable, long-term support. To date, the “Verb™ It’s what you do” campaign remains unfunded and inactive but continues to be, according to research for this report, one of the most referenced and studied social marketing campaigns in the U.S.

Done 4 Campaign

Introduction and description of campaign. The Done 4 campaign was conducted at San Diego State University in 2000. The campaign was developed by the University as one of its many preventative, health-related initiatives for students. Specifically, the campaign sought “to correct the students’ misconceptions of the campus drinking norms” (Russell, Clapp, & DeJong, 2005, p. 58). That is, the students’ perceived norm of drinking (quantity) was higher than that actually occurring at the University and the university believed that this perception induced students to drink more to meet the norm. A professional advertising agency was hired by the university to be responsible for identifying and pilot-testing the campaign’s primary means of communication, print advertising.
The University approached the campaign as it had for other awareness or prevention-type initiatives by employing various communication channels to reach the target audience, the students. The channels were (Russell et al., 2005, p. 58):

- 1000 large campaign posters printed and displayed campus-wide
- Full-page campaign advertisements placed every week of the semester (four months/16 weeks) in the university's newspaper
- 2500 campaign magnets given out across the campus at the campaign's start
- A week-long “Toss Your Cookies” promotional activity held (for prizes, students tossed rubber cookies into a toilet)
- Four newspaper articles published on the campaign throughout the same semester

**Problem definition.** Research conducted by H. W. Perkins (1997) and separately by Clapp & McDonnell (2000) found that “college students commonly believe that their peers engage in higher levels of dangerous drinking than is actually the case” (as cited by Russell et al., 2005, p. 57). Perkins further suggested that university marketing campaigns, specifically campaigns using mass-media, could be used to “correct this misconception” thereby reducing both the social norm, or peer pressure, to drink as well as the “high-risk alcohol consumption” (as cited by Russell et al., 2005, p. 58).

**Research and analysis.** The University’s approach to communicating the campaign was similar to other initiatives, such as blood drives and calls for volunteerism. At the heart of this campaign, however, was a professionally-developed marketing slogan, brief messaging (also known as a tag line) which was derived from recent campus surveys, and a black and white photo. All were featured as the campaign’s widely-displayed poster. The photo showed empty beer cans, a pizza box, and a white male leaning over a toilet with the top of his behind showing.
A caption, in large letters at the top, stated “Bottoms up!”. The campaign’s slogan and messaging were at the bottom stating “Done 4” and “Over ¾ of students drink 4 of fewer drinks when they party,” respectively (Russell et al., 2005, p. 58).

This poster, the primary communication representing the campaign, was developed by the agency in typical market-research manner. The agency developed and tested various options (slogans, pictures, messages, and combinations) with focus groups, presumably representing the University’s student population. Once identified, the ad agency piloted the print media messaging at another university, again presumably representing San Diego State University’s large, urban student population. Feedback “suggested that the advertisement was effective in correcting students’ misconceptions of drinking norms” (Russell et al., 2005, p. 58). The university paid the advertising agency for this part of the campaign, arranged for the newspaper articles and executed the campaign.

**Behavior aims and objectives.** The desired behavior change that the Done 4 campaign sought to bring about was to decrease the students’ overall alcohol use and thereby reduce associated problems on campus and in San Diego.

**Formulation of strategy.** Evaluation, as drawn from the Russell et al. journal article (2005) and this report’s research, has been performed on the Done 4 campaign in terms of its marketing plan, target audience segmentation, positioning and the marketing mix 4Ps.

The campaign’s target audience segmentation was the students who either already drank alcohol or could be influenced to start drinking. Its positioning (i.e., students paying attention to the campaign messaging vs. maintaining the perception of common, excessive alcohol use) was approached in terms of print media articles throughout the semester that played up the poster’s toilet scene, and carnival-type games.
Regarding the 4Ps, the behavior change benefit, Product, offered to students and its Price, costs and/or benefits, were confused by the poster’s photo and messaging, again the campaign’s primary source of communication. Per Russell et al. (2005), results of student surveys found that the photo was distracting (e.g., distasteful) to some student such that the messaging was not even read (p. 59). Others either did not believe or understand the message of “Over ¾ of students drink 4 or fewer drinks when they part” and its connection to the photo above it (Russell et al., 2005, pp. 59-60).

Promotional and persuasive activities and placement/timing of the marketing message were consistent on the university campus throughout the semester. Promotion was conducted through print media, the university’s newspaper, magnets and posters. The week-long “Toss Your Cookies” contest for prizes was intended to not only get the word out but also persuade students to rethink what they believed to be normal, or typical, levels of drinking.

**Monitoring of outcomes and feedback.** To gauge the effectiveness of this marketing campaign, the university’s social work department, separate from the campaign’s plan, conducted surveys of the student population one month into the campaign and again at its end, after another three months and at the end of the semester (Russell et al., 2005, p. 59). The results of each survey were analyzed when executed. (It could not be determined if or when the social work department shared survey results with the campaign managers.)

Only 13.9% and 9.5% of students even recognized the campaign slogan at one and four months, respectively. Of those who recognized the slogan, 45.6% and 31.6% knew the purpose of the campaign at one and four months, respectively.

Upon completion of the campaign, further analysis of the surveys’ data demonstrated statistically-similar drinking rates were perceived by the surveyed students regardless if they...
recognized the campaign slogan or not (Russell et al., 2005, p. 59). The primary objective of the campaign, to drive down student drinking by correcting students’ misconceptions that high drinking rates were normal, was not successful.

**Lessons learned.** The involved university individuals learned to more carefully select advertising agencies as well as challenge how proposed campaigns are designed, justified being executed. At the one-month mark, when the results of the first student survey showed an ineffective start of the campaign, the involved university individuals could have suspended the campaign and further evaluated, with the ad agency, what was working, what was not and why. Once understood, the campaign’s marketing plan could have been revised and an improved campaign launched. The university could take a systematic, project-management approach and use feedback (positive, neutral, and negative) from past initiatives to improve the strategy and effectiveness of future ones.

**Missed opportunities.** The weakness of the primary print media, the poster photo, its messaging and the confusing promotional activities were not recognized in time to redesign the campaign and have successful results. The threats competing for the students’ time and attention are not known to have been identified, e.g., the advertisement practices of local bars and liquor stores.

Regarding the 3Ps, the marketing mix elements of People and Process were not considered. Campaign messengers, people, could have communicated the Done 4 message with the students for it to be reinforced and clearly received. Campaign messengers, however, are not known to have been present throughout the four-month campaign so an informative, interactive opportunity with students was missed.
The Process, how the campaign’s message was developed, delivered and maintained with the target audience, is related to People and also unclear, especially to sustain the desired behavioral change of less drinking on campus. The campaign’s meaning and purpose were not communicated well enough to the students for the campaign to have had the chance to be successful. Competition to the desired behavior, here perceptions of high alcohol use and related social pressures vs. reduced alcohol use, was not clearly defined in the marketing campaign. Apart from the specialized poster, the university apparently conducted the Done 4 campaign as it had other campus initiatives, a one-size-fits-all approach regardless of the social complexity, e.g., consider blood drives compared to the Done 4 campaign.

Competition could have been identified as other forms of advertising and promotions from local bars, fraternity and sorority gatherings and alcoholic beverage companies. Once identified, competitors could have been evaluated and counteractions added to the campaign strategy which reduced their influences and distractions.

Stakeholder analysis, as part of Process, was also not performed in the University’s campaign. Aside from the obvious stakeholders, the university’s drinking students, unidentified and unaddressed stakeholders included non-drinkers, parents, university employees (in particular campus police), housing authorities (dorms and apartments), local eating and drinking businesses, and citizens of San Diego. In this case, once identified, these stakeholders could have been evaluated and actions taken to increase their influences and visible support.

The element of Physical Evidence is especially interesting in the Done 4 campaign as the primary evidence of the campaign’s message, its print media, was distracting, confusing and/or inconsistent to the students, its target audience. Even though the print media offered consistent
tangible proof that the campaign was real, the campaign’s seriousness and worth was
unfortunately lost.

**Reaching and influencing the target group.** The Done 4 campaign could have
significantly benefitted if certain behavior-related marketing tools were considered initially and
correctly applied to understand the target group of students and other stakeholders. Along with
social psychology, five of the behavior-related concepts are found directly-applicable to
understand how to change an incorrectly-perceived state by properly communicating the actual.
If the importance of marketing’s science and theories had been realized and applied, especially
for this campaign, the university and advertising agency could have developed more suitable
messaging to capture the students’ attention and interest.

By applying aspects of social psychology and the Social Norm Theory, the university
would have had the opportunity to better understand the social forces which influence thoughts
and actions, in this case to accept and conform to drinking levels which are perceived more
excessive than actual. Of note are the following human characteristics which could have been
evaluated and included in an effective campaign:

1) When following and being obedient to a group’s influence overrides personal values:
   obviously more detrimental when the group influence is negative
2) Acceptance of stereotypes and expectations (e.g., fraternity parties)
3) Describing and accounting for similarities and differences in the student population
4) Understanding how attitudes have been formed in order to change them

The concepts of Planned Behavior and Social Cognitive Theories are relevant since both
also approach understanding human, here university students, behavior as reactions from
external influences. Inherent in each is how the individual and/or group of similar individuals
perceive themselves. An example is whether or not the feeling of self-worth is predominantly influenced by peers.

Social Cognitive Theory defines another relationship by describing the two-way affect between individuals’ behavior influencing their environment and the environment in turn influencing, actually collectively reinforcing, the same behavior. In the case of negative or misconceived behavior norms, a well-constructed social marketing campaign can break this cycle through meaningful, thought-provoking messaging.

The Behavior Conditioning Model core concepts of Character, Soul, and Spirit are believed to be applicable since based on an individual’s awareness of his/her behavior patterns as well as other’s awareness of the individual’s behavior pattern. This model goes further to understand the individual behind the behavior. The Done 4 campaign could have applied at least five of the model’s other constructs: social psychology foundations (i.e., group and community), self-efficacy; behavioral sensitivity (i.e., awareness to environment); intended intervention (i.e., how well reactions to signals are controlled); and mental processing (i.e., internal and external factors such as memories and discussions, respectively).

Summary remarks. To summarize, the Done 4 campaign was structured similar to other health-related initiatives executed at the university plus contracted help from a professional advertising agency. The advertising agency’s inaccurately-developed media messaging and the university’s associated activities were not successful in correcting the misconception of high alcohol use among students. Accordingly, there was no reduction in alcohol-related problems at the university or surrounding city. Retrospective evaluation found that the Done 4 campaign organizers did not follow standard proven marketing/consumer research methods, namely they did not apply behavior-related science and theories that concentrated on assessing group
dynamics, stereotyping and peer pressure. If attempted again, the university would be more aware and optimistically expect to achieve campaign objectives by understanding and following a basic social marketing plan. This would include research into how to reach the specific target market of its students, understand their surrounding influences and communicate in appealing, convincing ways.
Discussion and Conclusion of Research

The research for this report has sought after and identified scholarly and professional literature which serves to expose the need for appealing to groups and societies to improve their health-related behaviors. This need is especially evident as the ACA laws go into effect and demands on health care services increase. The more individuals make positive behavior changes, the need for health care services can be reduced. How individuals and groups can be induced to consider such life-altering changes was identified as the application of standard strategic marketing methods, tools, and techniques. Proven tools and techniques, which have been used by commercial marketers for decades and more recently by social marketers (working for or in government agencies and nonprofit organizations), have been highlighted and discussed. Of particular applicability and necessity are the behavior-related theories and science which hone in on target group individuals’ real needs, desires, beliefs, and attitudes. Dominant in the literature sources is the role of environmental influences, perception of self and individual sensitivities. These tools, in their own way, provide insights into how to intervene and influence individuals to voluntarily make, and maintain, positive behavior changes.

Once the theories and science are applied as part of marketing research into the target groups, social marketers can better understand how to effectively communicate to the identified individuals. Inherent in the methodology is persuading individuals there is a reward in making a behavior change and long-term value sustaining it. Once adopted by many, a new positive social norm is established and maintained from the inside out.

Research has further shown that social problems are identified through various sources, primarily through statistical analysis of available government and organizational data. Evaluation of potential campaigns must be ethical and consider human rights such as cultural and
religious beliefs. Accordingly, agreement in selecting a social problem to correct can be difficult. Continued research found well-known entities, the UN, WHO and the U.S. CDC (e.g., Health People), which have already identified large-scale societal problems. Considering these as sources of identified problems for possible campaign ideas can help avoid the difficulty agreeing on appropriateness. Additionally, if a social marketing campaign is associated with these large-scale, visible societal problems, then securing funding and support from government agencies, private organizations and private citizens could be more likely and last longer.

After a social problem has been identified and funding secured, the social marketing plan can be developed and executed. Research finds marketing plan models, both government and private sector, which are currently being used. For the purpose of this report, two actual social marketing campaigns were retrospectively evaluated by applying a modified and enhanced model. The in-depth assessments yielded insights into how their successes and failures occurred, the missed opportunities, and how the campaigns’ effectiveness could be improved if revisited in the future. Overall, this report’s research finds well-structured social marketing campaigns as one key instrument to better the lives of individuals and their surrounding societies.
Findings

Through this report’s research and evaluation, certain discoveries have been identified, namely in the currently-accepted models of social marketing plans and the appropriate application of behavior-related theories and science. The following sections explain the discoveries and how they can improve the development, execution and results of social marketing campaigns.

Expanded Social Marketing Plan Model, with the 3Ps

A new social marketing plan model has been constructed using components of established models along with elements (the 3Ps) included by this report’s author. (See Table 8, Breakdown of a Social Marketing Campaign.) The latter elements cover lessons learned, missed opportunities and commentary. These elements are offered through perspectives gained from research discussed earlier in the report and intended to show what worked, what did not and why for each evaluated campaign. The analyses can be considered for the either the development of future social marketing campaigns or the restructuring and re-execution of a campaign that did not meet its goals and objectives.

Of particular note is this author’s addition of the service marketing mix elements, the 3Ps of People, Process, and Physical Environment or Evidence. Their application in the development of a marketing strategy appears necessary to appropriately address the service-related aspects of a behavior-change campaign; a social marketing strategy need not be limited to the goods-based elements, the 4Ps of Product, Price, Place and Time and Promotion. (See Table 3, Marketing Mix Elements, the 7Ps of Social Marketing, for details.) The retrospective evaluations of the Verb™ and Done 4 campaigns would have benefitted, it is believed, from the inclusion of the 3Ps since more meaningful assessment of the roles played by the communicator, communication
channel and setting in campaigns. Instead of relying on assumptions or luck, these elements would have been intentionally included in the marketing campaign strategy.

**Emphasis on Appropriate Use of Tools and Techniques**

The retrospective evaluations, especially on the Done 4 campaign, have also demonstrated the appropriate or non-use of the standard marketing tools and techniques, namely the behavior-related theories and science. As mentioned in the Verb™ campaign evaluation, use of the behavioral tools appears to be evident in the appropriateness of the messaging, related activities and challenges for the age groups. Results showed that the messaging was received and typical, or normal, activity levels were increasing.

The Done 4 campaign, however, missed communicating the intended messaging in multiple ways: the distracting poster photo; unclear facts on drinking; confusing “Toss Your Cookies” game; and the multiple newspaper articles and features repeating the same misconceived messaging. The most obvious behavior-related tools not applied were the Social Norm Theory and social psychology, which concentrate on individual behavior affected by group behavior. If the university had researched how to attract student attention, the advertising agency would have needed to use those insights in developing the campaign strategy, including messaging. Overall, this campaign’s apparent absence of studying the students’ behavioral characteristics allowed the Done 4 campaign to be more like a short-lived, comical advertisement rather than the intended health-related movement.

The importance of effectively applying the behavior-related tools to reach and persuade the target group individuals cannot be understated. Without these tools, a social marketing campaign lacks the insights necessary for the behavior change to be wide-spread, sustained and a new social norm established.
Social Marketing Challenges

Challenges faced by social marketers and the campaign agencies and organizations appear to include difficulties related to breaking into the crowded marketing environment and not following proven marketing plan elements. Society is saturated by media messaging and attracting individuals’ time and attention is difficult enough when promoting the obvious value of new goods and services. The promotion of behavior-change is considerably more difficult and persuasion more complicated especially due to the personal long-term effort (Price) involved. Social marketers have the temptation of limiting marketing research, either intentionally (to save time, money, and effort), or due to the lack of understanding its necessity for strategy development. Challenges for social marketers are to be as creative and thoughtful as possible to reach as many target individuals as possible. They also should avoid the temptation of discounting the importance strategic marketing planning’s proven elements, such as thoroughly studying target groups through the behavior-related tools and understanding marketing mix elements, the Ps.

Recommendations

This report’s research into social marketing has led to an even greater appreciation of its applicability, opportunity, and need for expanded use. Accordingly, education of more people in the discipline is recommended through the following possibilities: 1) expand current commercial/service marketing courses to include at least a module on social marketing and 2) develop and offer social marketing courses separate from commercial/service marketing. These new courses could be available to students seeking degrees, or professionals taking continuing education courses, in business administration, marketing, public health, medicine, social work, health care administration and management, political science, etc. The addition of social
marketing courses would educate practitioners in those organizations or agencies of social marketing’s potential and use and at the same time potentially attract more for-profit marketers to nonprofit organizations or government agencies. With the ACA expanding health care coverage, tens of millions more Americans now have access to health care resources and this will lead to more demands on the health care system. Better deployment of social marketing through training and practice will help reduce dependence on private and public health care services.

Through education, social marketing could be better recognized for its effective use, proven marketing strategies, tools, and techniques to combat societal issues, including those health-related. This could lead to its increased use, familiarity and confidence turning awareness of social problems into action correcting them.

**Final Conclusion**

Social marketing is known to be successful in persuading individuals and groups to adopt positive behaviors, including those related to health. This success is based on marketers applying proven commercial marketing research and planning methods and behavior-related tools. There is evidence that the discipline is under-utilized yet many identified societal problems are waiting to be addressed. More practitioners are needed who not only understand the discipline and its great potential but also can act as guides implementing the social marketing process in their agencies and organizations.

Executing social marketing campaigns for as many health-related societal problems as possible will help society move away from a culture of treatment and create a culture of health. All along the way, this will lead to sustaining positive health behaviors and demonstrate the power of social marketing.
References


