

Chapter 1

DEFINING SOCIAL MARKETING

I believe the genius of modern marketing is not the 4Ps, or audience research, or even exchange, but rather the management paradigm that studies, selects, balances, and manipulates the 4Ps to achieve behavior change. We keep shortening "the marketing mix" to the 4Ps. And I would argue that it is the "mix" that matters most. This is exactly what all the message campaigns miss—they never ask about the other 3Ps and that is why so many of them fail.

—Dr. Bill Smith
Executive Vice President
Academy for Educational Development

Social marketing, as a discipline, has made enormous strides since its distinction in the early 1970s, and has had a profound positive impact on social issues in the areas of public health, injury prevention, the environment, community involvement, and more recently, financial well-being. Fundamental principles at the core of this practice have been used to help reduce tobacco use, decrease infant mortality, stop the spread of HIV/AIDS, prevent malaria, help eradicate guinea worm disease, make wearing a bike helmet a social norm, decrease littering, stop bullying, increase recycling, encourage the homeless to participate in job training programs, and persuade pet owners to license their pets and "scoop their poop."

Social marketing as a term, however, is still a mystery to most, misunderstood by many, and increasingly confused with others such as behavioral economics (a framework we consider in this book) and social media (one of many potential promotional tactics to choose from). A few even worry about using the term with their administrators, colleagues, and elected officials, fearing they will associate it with socialism, manipulation, and sales. This chapter is intended to create clear distinctions and to answer common questions. How does social marketing differ from commercial marketing, nonprofit marketing, cause marketing, and public education? Everyone argues it is more than communications, but what's the "more"? Do people who do social marketing actually call themselves social marketers? Where do they work?

We support the voices of many who advocate an expanded role for social marketing and social marketers, challenging professionals to take this technology "upstream" to influence other factors that effect positive social change, including laws, enforcement, public policy, built environments, school curricula, community organizations, business

practices, and the media. We also encourage distinguishing and considering "midstream" audiences, those influential others closer to our target audiences (e.g., family, friends, neighbors, healthcare providers).

We begin this and all chapters with an inspiring case story, this one from Africa. We conclude with one of several Marketing Dialogues that feature discourses among practitioners on the social marketing listserve seeking to shape, evolve, and transform this discipline.

MARKETING HIGHLIGHT

Sustainable Malaria Prevention NetMark's Success Story in Africa (1999–2009)

Background

In Africa alone, almost 3,000 people die from malaria every day.¹ That number bears repeating: Almost 3,000 people die from malaria every day in Africa, more than 1 million each year. Additional statistics² are just as astonishing:

- Malaria is the number one cause of death for pregnant mothers and children under five years of age
- One out of 20 children in Africa dies of malaria before the age of five
- The primary cause of absenteeism in African schools is malaria
- Families spend approximately 20% of their income on malaria treatments
- Public health institutions spend up to 40% of their budgets on outpatient treatment for malaria

And perhaps the greatest tragedy is that many of these illnesses, deaths, and related expenditures are preventable. The World Health Organization (WHO) recommends insecticide-treated nets (ITNs) as the best way for families to protect themselves from

malaria, proven to reduce the risk of infection by up to 45% and the risk of death by 30%. In 1999, the United States Agency for International Development (USAID) funded an effort called NetMark to increase demand for and appropriate use, availability, and affordability of ITNs, through the commercial sector if possible. At the time, ITNs were not even available for sale in most African countries. ITNs were provided by governments and donors. By 2009, more than 60 million nets had been sold by NetMark's partners in its seven countries of operation.³

This case highlight describes the program's rigorous application of social marketing principles, including the use of all 4Ps in the traditional marketing mix. Case information was provided by Dr. Willard Shaw at the Academy for Educational Development (AED) in Washington, D.C., the agency implementing the project.

Target Audiences and Desired Behaviors

Although primary audiences (*downstream*) were the most-at-risk populations—pregnant

women and children under five—net availability and affordability would depend on strategies that would also reach and influence net and insecticide manufacturers, national product distributors, and retailers (*midstream*) as well as policy makers (*upstream*).

For families, the desired behavior was to purchase, properly hang, and consistently use an ITN. NetMark would also need to persuade multinational manufacturers to invest in the retail market, help them identify national distributors for their brands, assist distributors in introducing ITNs into the marketplace and recruiting retailers, and convince the public sector to allow the commercial sector to build ITN markets and to focus its limited resources on providing ITNs to high-risk populations who could not afford to pay.

Audience Insights

Extensive consumer research was conducted regarding knowledge of and beliefs about mosquitoes and malaria. Barriers to purchasing and using ITNs included lack of awareness of ITNs, the perceived high cost of the nets, little or no availability of commercial ITNs, concern about potential adverse health effects from treated nets, and perceived “hotness” when sleeping. In Nigeria, for example, 92% of respondents said that the nearest place they could buy an untreated net “was an outdoor market, and that the average time to get there would be approximately one hour by bus.”⁴

Strategies

Product strategies focused on ensuring an adequate supply chain of at least two to five competing, high-quality ITN brands in each country. Supplies were enhanced by helping

distributors manage stocks, cash flow, and financing, and by providing technical support to expand local manufacturing capacity and quality. A “seal of quality” (see Figure 1.1) was developed to reassure consumers that products carrying the seal met international standards, including the use of WHO-recommended insecticides. Partners incorporated the seal into their packaging designs, which served to link their brand with the generic marketing campaign. And new, unpatented technology for producing long-lasting ITNs was developed and adopted by several manufacturers.

NetMark worked to lower the *price* of the nets through market competition and price reviews with distributors, as well as to make them available for those who could not pay the full retail price. As a stronger and more compelling messenger for policy makers than for-profit businesses could have been, NetMark successfully advocated reducing taxes and tariffs in the interest of the public good in

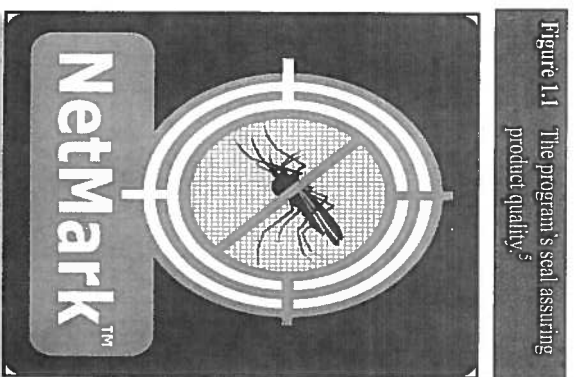


Figure 1.1 The program's seal assuring product quality.⁵

all its countries. It constantly encouraged public health authorities to promote market segmentation by focusing publicly funded free and highly subsidized ITNs on high-risk and poor populations while allowing the commercial sector to market to the people who could afford to buy an ITN. It also lobbied national regulatory agencies to streamline the process of registration for quality ITN brands. After convincing multinational net and insecticide manufacturers to invest in developing retail ITN markets, NetMark helped them identify country distributors (*place*) willing to invest in promoting retail sales.

NetMark worked with both groups on annual brand marketing plans using a joint risk/joint investment process, with NetMark investing in market research, generic promotion of ITNs, and coordination with the public sector and donors, and the commercial firms doing what they do best—manufacturing, distributing, and promoting their own brands. NetMark provided some “matching funds” to distributors for activities aimed at expanding the reach of their retail networks (e.g., sales teams, marketing materials), reimbursing distributors for 50% of specific investments. Manufacturers also provided distributors with brand promotion support and technical assistance. The confidential brand marketing plans identified special audiences to target, with some distributors targeting special groups (nongovernmental organizations, churches, boarding schools, etc.) in addition to the general public. There was ongoing tension between NetMark's public health focus on reaching as many at-risk people as possible and the commercial sector's more conservative approach of managing risk and ensuring return on investment.

NetMark's *promotional* efforts sought to build demand for ITNs by informing the public about the dangers of malaria and the benefits of sleeping under treated nets. Two multinational advertising and product promotion agencies helped develop an advertising and communication campaign with region- and country-specific components. The initial tagline “Mosquitoes KILL. KILL Mosquitoes” (see Figure 1.2) was based on research showing that consumers valued the killing power of any insect control product. Each brand conducted a marketing campaign of its own, which was coordinated with the generic campaign. The generic campaign included mass media (print, television, and radio) as well as special promotions such as wall murals, point-of-purchase materials, street theatrics, and road shows (see Figure 1.3).

Figure 1.2 Initial campaign tagline.⁶

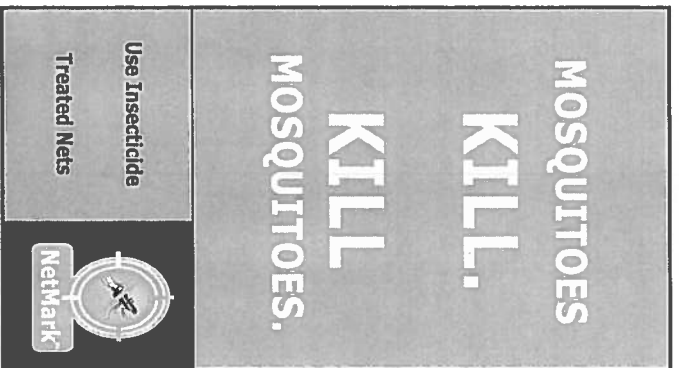


Figure 1.3 Painted wall murals promoting benefits.



Outcomes

A quick summary of accomplishments included the following:

- *Creating Supply:* In 1999, there were only 2 ITN brands commercially available in Africa; by 2008, there were 22, with 50 commercial partners providing increased access, higher net quality, lower prices, more brands in the marketplace, and creation of jobs for manufacturing, promoting, distributing, and selling ITNs.
- *Creating Demand:* In 2009, awareness of ITNs among women ages 15 to 49 was more than 90% and ownership was as high as 64% in Ghana and 91% in Ethiopia. NetMark partners sold more than 60 million nets by 2009.
- *Ensuring Equity:* NetMark's commercial discount voucher program enabled 2.2 million families with children under five to buy an ITN in a local shop at discounts from 40% to 100% and served as an excellent tool to attract new retailers. In addition, NetMark helped governments and donors distribute 2.3 million ITNs.
- *Ensuring Sustainability:* NetMark partnered with 42 African and 9 multinational commercial partners who invested over \$90 million in creating national ITN markets and made organizational changes to support growing retail markets. This will help ensure a sustainable supply of ITNs when donors are no longer willing or able to supply free nets.

WHAT IS SOCIAL MARKETING?

Social marketing is a distinct marketing discipline, one that has been labeled as such since the early 1970s and refers primarily to efforts focused on influencing behaviors that will improve health, prevent injuries, protect the environment, contribute to communities, and, more recently, enhance financial well-being. Several definitions from social marketing “veterans” are listed in Box 1.1, beginning with one we have adopted for use in this text. It seems clear there are several common themes. Social marketing is about (a) influencing behaviors, (b) utilizing a systematic planning process that applies marketing principles and techniques, (c) focusing on priority target audience segments, and (d) delivering a positive benefit for society. Each of these themes is elaborated upon in the next four sections.

Box 1.1 Definitions From a Few Social Marketing Veterans

Social Marketing is a process that uses marketing principles and techniques to influence target audience behaviors that will benefit society as well as the individual. This strategically oriented discipline relies on creating, communicating, delivering, and exchanging offerings that have positive value for individuals, clients, partners, and society at large.

—Nancy R. Lee, Michael L. Rothschild, and Bill Smith, 2011

Social Marketing is the application of commercial marketing concepts and tools to influence the voluntary behavior of target audiences to improve their lives or the society of which they are a part.

—Alan Andreasen, 2011

Social Marketing 2.0, more specifically, 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.

—Jay Bernhardt, 2011

Social Marketing is the application of commercial marketing principles and tools where the primary goal is the public good.

—Rob Donovan, 2011
(Continued)

(Continued)

Social Marketing is a set of evidence- and experience-based concepts and principles that provide a systematic approach to understanding behaviour and modifying it for social good. It is not a science but rather a form of 'technik', a fusion of science, practical know-how, and reflective practice focusing on continuously improving the performance of programmes aimed at producing net social good.

—Jeff French, 2011

Social Marketing critically examines commercial marketing so as to learn from its successes and curb its excesses.

—Gerard Hastings, 2011

Social Marketing is the application of marketing principles to shape markets that are more effective, efficient, sustainable, and just in advancing people's well-being and social welfare.

—Craig Lefebvre, 2011

Social Marketing is a process that involves (a) carefully selecting which behaviors and segments to target, (b) identifying the barriers and benefits to these behaviors, (c) developing and pilot testing strategies to address these barriers and benefits, and, finally, (d) broad scale implementation of successful programs.

—Doug McKenzie-Mohr, 2011

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 to make behaviors "fun, easy, and popular." 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.

—Mike Newton-Ward, 2011

Social Marketing is the activity and processes for understanding, creating, communicating, and delivering a unique and innovative offering to overcome a societal problem.

—Sharyn Rundle-Thiele, 2011

Social Marketing is the use of marketing principles and techniques to promote the adoption of behaviors that improve the health or well-being of the target audience or of society as a whole.

—Nedra Weinreich, 2011

We Focus on Behaviors

Similar to commercial sector marketers whose objective is to sell goods and services, social marketers' objective is to successfully influence desired behaviors. We typically want to influence target audiences to do one of four things: (a) *accept* a new behavior (e.g., composting food waste); (b) *reject* a potentially undesirable behavior (e.g., starting smoking), which is why we refer more often to behavior influence than behavior change; (c) *modify* a current behavior (e.g., increase physical activity from three to five days of the week or decrease the number of fat grams consumed); or (d) *abandon* an old undesirable behavior (e.g., talking on a cell phone while driving). It may be the encouragement of a one-time behavior (e.g., installing a low-flow showerhead) or the establishment of a habit and the prompting of a repeated behavior (e.g., taking a five-minute shower). More recently, Alan Andreasen suggested a fifth arena, in which we want to influence people to *continue* a desired behavior (e.g., giving blood on an annual basis), and a sixth, in which we want people to *switch* a behavior (e.g., take the stairs instead of the elevator).⁸

Although benchmarks may be established for increasing knowledge and skills through education and efforts may need to be made to alter existing beliefs, attitudes, or feelings, the bottom line for the social marketer is whether the target audience adopts the behavior. For example, a specific behavior that substance abuse coalitions want to influence is women's consumption of alcohol during pregnancy. They recognize the need to inform women that alcohol may cause birth defects and convince them that this could happen to their baby. In the end, however, their measure of success is whether the expectant mother abstains from drinking.

Perhaps the most challenging aspect of social marketing (also its greatest contribution) is that it relies heavily on "rewarding good behaviors" rather than "punishing bad ones" through legal, economic, or coercive forms of influence. And in many cases, social marketers cannot promise a direct benefit or immediate payoff in return for adopting the proposed behavior. Consider, for example, the task of influencing gardeners to pull their dandelions instead of using harmful chemicals. It's tough to show the healthier fish their actions helped to support. And it's tough to convince youth who want to look good to use sunscreen so they will (maybe) avoid skin cancer later in life. As you will read in subsequent chapters, this is why a systematic, rigorous, and strategic planning process is required—one that is inspired by the wants, needs, and preferences of target audiences and focuses on real, deliverable, and near-term benefits. It should be noted, however, that many believe this heavy reliance on individual voluntary behavior change is outdated and have moved on to applying social marketing technologies to influence other change factors in the environment (e.g., laws, policies, media). These are elaborated upon later in this chapter.

We Use a Systematic Planning Process That Applies Traditional Marketing Principles and Techniques

The American Marketing Association defines marketing as "the activity, set of institutions, and processes for creating, communicating, delivering, and exchanging offerings

that have value for customers, clients, partners, and society at large.⁹ The most fundamental principle underlying this approach is application of a *customer orientation* to understand barriers target audiences perceive to adopting the desired behavior and benefits they want and believe they can realize. The process begins with an *environmental scan* to establish a purpose and focus for the plan. A *situation analysis* (SWOT) helps identify organizational strengths the plan can maximize and weaknesses to minimize, as well as environmental opportunities to take advantage of and threats to prepare for. Marketers then select *target audiences* they can best affect and satisfy. We establish clear *behavior objectives* and *goals* the plan will be developed to achieve. *Formative research* is conducted to identify audience barriers, benefits, and the competition. This inspires the *positioning* of the offer, one that will appeal to the desires of the target audience, and the game requires that we do this more effectively than the competition. We then consider the need for each of the major intervention tools in the marketer's toolbox, the "4Ps," to influence target audiences: Product, Price, Place, and Promotion, also referred to as the *marketing mix*. An *evaluation methodology* is established, leading to a *budget* and *implementation* plan. Once a plan is implemented, ideally first with a pilot, results are *monitored* and *evaluated*, and strategies are altered as needed. Table 1.1 summarizes this strategic planning process using the 10-step model this text follows. Examples of marketing techniques are included.

We Select and Influence a Target Audience

Marketers know that the marketplace is a rich collage of diverse populations, each having a distinct set of wants and needs. We know that what appeals to one individual may not appeal to another and therefore divide the market into similar groups (market segments), measure the relative potential of each segment to meet organizational and marketing objectives, and then choose one or more segments (target audiences) on which to concentrate our efforts and resources. For each target, a distinct mix of the 4Ps is developed, one designed to uniquely appeal to that segment's barriers, benefits, and the competition.

Considering, again, a more expanded view of social marketing, Robert Donovan and Nadine Henley (among others) advocate also targeting individuals in communities who have the power to make institutional policy and legislative changes in social structures (e.g., school superintendents). In this case, efforts move from influencing (just) an individual with a problem or potentially problematic behavior to influencing those who can facilitate behavior change in individuals.¹⁰ Techniques, however, remain the same.

The Primary Beneficiary Is Society

Unlike commercial marketing, in which the primary intended beneficiary is the corporate shareholder, the primary beneficiary of the social marketing program is society. The question many pose and banter about is, who determines whether the social change created by the program is beneficial? Although most causes supported by social marketing efforts tend to draw high consensus that the cause is good, this model can also be used by

Table 1.1 Social Marketing Planning Process: Phases, Steps, Techniques, and Feedback Loops

Phase	Scoping		Selecting		Understanding	Designing		Managing		
Step	1. Purpose and focus	2. Situation analysis	3. Target audience	4. Behavior objectives and goals	5. Barriers, benefits, and competition	6. Positioning	7. Marketing mix: The intervention tools	8. Evaluation plan	9. Budget	10. Plan to implement
Technique examples	Literature reviews, epi and scientific data	SWOT analysis, peer interviews	Andreasen's nine criteria (see Chapter 6)	McKenzie-Mohr's three criteria (see Chapter 7)	Knowledge, attitudes, and practice studies	Perceptual maps	The 4Ps	Logic model	Objective and task method	Include a pilot prior to rollout
Feedback loops					Findings at this step may suggest adjustments to the target audience and/or behavior objectives and goals		A pretest of draft strategies may suggest changes in the 4Ps design			A pilot may suggest changes, especially in the marketing mix

Figure 1.4 “Rosie the Riveter,” created by the War Ad Council to help recruit women!!



organizations who have the opposite view of what is good. Abortion is an example of an issue where both sides argue that they are on the “good” side, and both use social marketing techniques to influence public behavior. Who, then, gets to define “good”? Some propose the United Nations’ Universal Declaration of Human Rights (<http://www.un.org/en/documents/udhr/>) as a baseline with respect to the common good, while other perspectives and discussions are elaborated upon in the Marketing Dialogue at the end of Chapter 2.

WHERE DID THE CONCEPT ORIGINATE?

When we think of social marketing as “influencing public behavior,” it is clear that this is not a new phenomenon. Consider efforts to free slaves, abolish child labor, influence women’s right to vote, and recruit women into the workforce (see Figure 1.4).

Launching the discipline formally more than 40 years ago, the term *social marketing* was first introduced by Philip Kotler and Gerald Zaltman, in a pioneering article in the *Journal of Marketing*, to describe “the use of marketing principles and techniques to advance a social cause, idea or behavior.”¹² In intervening decades, growing interest in and use of social marketing concepts, tools, and practices has spread from public health and safety to use by environmentalists, community advocates, and poverty workers, as is evident in the partial list of seminal events, texts, and journal articles in Box 1.2. (See Appendix B for additional resources.)

Box 1.2

Social Marketing: Seminal Events and Publications

- 1970s
1971: A pioneering article by Philip Kotler and Gerald Zaltman, “Social Marketing: An Approach to Planned Social Change” in the *Journal of Marketing*, coins the term *social marketing*.
More distinguished researchers and practitioners join the voice for the potential of social marketing, including Alan Andreasen (Georgetown University), James Mintz

(Federal Department of Health, Canada), Bill Novelli (cofounder of Porter Novelli Associates), and Dr. Bill Smith.

1980s

The World Bank, World Health Organization, and Centers for Disease Control start to use the term and promote interest in social marketing.

1981: An article in the *Journal of Marketing* by Paul Bloom and William Novelli reviews the first 10 years of social marketing and highlights the lack of rigor in the application of marketing principles and techniques in critical areas of the field, including research, segmentation, and distribution channels.

1988: An article in the *Health Education Quarterly*, “Social Marketing and Public Health Intervention” by R. Craig LeFebvre and June Flora, gives social marketing widespread exposure in the field of public health.

1989: A text by Philip Kotler and Eduardo Roberto, *Social Marketing: Strategies for Changing Public Behavior*, lays out the application of marketing principles and techniques for influencing social change management.

1990s

Academic programs are established, including the Center for Social Marketing at the University of Strathclyde in Glasgow and the Department of Community and Family Health at the University of South Florida.

1992: An article in the *American Psychologist* by James Prochaska, Carlo DiClemente, and John Norcross presents an organizing framework for achieving behavior change, considered by many the most useful model developed to date.

1994: A publication, *Social Marketing Quarterly* by Best Start Inc. and the Department of Public Health, University of South Florida, is launched.

1995: A text by Alan Andreasen, *Marketing Social Change: Changing Behavior to Promote Health, Social Development, and the Environment*, makes a significant contribution to both the theory and practice of social marketing.

1999: The Social Marketing Institute is formed in Washington, DC, with Alan Andreasen from Georgetown University as interim executive director.

1999: A text by Doug McKenzie-Mohr and William Smith, *Fostering Sustainable Behavior*, provides an introduction to community-based social marketing.

2000s

2003: A text by Rob Donovan, *Social Marketing: Principles & Practice*, is published in Melbourne, Australia.

(Continued)

(Continued)

- 2005: The National Social Marketing Centre, headed by Jeff French and Clive Blair-Stevens, is formed in London, England.
- 2005: The 10th annual conference for Innovations in Social Marketing is held.
- 2005: The 16th annual Social Marketing in Public Health conference is held.
- 2006: A text by Alan Andreasen, *Social Marketing in the 21st Century*, describes an expanded role for social marketing.
- 2007: Gerard Hastings's book *Social Marketing: Why Should the Devil Have All the Best Tunes?* is published.
- 2008: The first World Social Marketing Conference is held in Brighton, England.
- 2010s
- 2010: The 20th annual Social Marketing in Public Health conference is held.
- 2010–2011: More books are published, including the second edition of *Hands-On Social Marketing* by Nedra Weinreich; *Social Marketing for Public Health: Global Trends and Success Stories* by Hong Cheng, Philip Kotler, and Nancy Lee; *Social Marketing to Protect the Environment: What Works* by Doug McKenzie-Mohr, Nancy Lee, Wesley Schultz, and Philip Kotler; *Social Marketing and Public Health: Theory and Practice* by Jeff French; and the third edition of *Fostering Sustainable Behavior* by Doug McKenzie-Mohr. The *Journal of Social Marketing* is launched in Australia.
- 2011: The second World Social Marketing Conference is held in Dublin, Ireland, and the International Social Marketing Association is launched.

HOW DOES SOCIAL MARKETING DIFFER FROM COMMERCIAL MARKETING?

There are a few important differences between social marketing and commercial marketing.

In the commercial sector, the primary aim is selling goods and services that will produce a *financial gain* for the corporation. In social marketing, the primary aim is influencing behaviors that will contribute to *societal gain*. Given their focus on financial gain, commercial marketers often favor choosing primary target audience segments that will provide the greatest volume of profitable sales. In social marketing, segments are selected based on a different set of criteria, including prevalence of the social problem, ability to reach the audience, readiness for change, and others that will be explored in depth in Chapter 6 of this text. In both cases, however, marketers seek to gain the greatest returns on their investment of resources.

Although both social and commercial marketers recognize the need to identify and position their offering relative to the competition, their competitors are very different in nature. Because, as stated earlier, the commercial marketer most often focuses on selling goods and services, the *competition is often identified as other organizations offering similar goods and services*. In social marketing, the *competition is most often the current or preferred behavior of our target audience* and the perceived benefits associated with that behavior, including the status quo. This also includes any organizations selling or promoting competing behaviors (e.g., the tobacco industry).

For a variety of reasons, we believe social marketing is more difficult than commercial marketing. Consider the financial resources the competition has to make smoking look cool, yard cleanup using a gas blower easy, and weed-free lawns the norm. And consider the challenges faced when trying to influence people to do any of the following:

- Give up an addictive behavior (e.g., stop smoking)
- Change a comfortable lifestyle (e.g., reduce thermostat settings)
- Resist peer pressure (e.g., be sexually abstinent)
- Go out of their way (e.g., take unused paint to a hazardous waste site)
- Be uncomfortable (e.g., give blood)
- Establish new habits (e.g., exercise five days a week)
- Spend more money (e.g., buy recycled paper)
- Be embarrassed (e.g., let lawns go brown in the summer)
- Hear bad news (e.g., get an HIV test)
- Risk relationships (e.g., take the keys from a drunk driver)
- Give up leisure time (e.g., volunteer)
- Reduce pleasure (e.g., take shorter showers)
- Give up looking good (e.g., wear sunscreen)
- Spend more time (e.g., flatten cardboard boxes before putting them in recycling bins)
- Learn a new skill (e.g., create and follow a budget)
- Remember something (e.g., take reusable bags to the grocery store)
- Risk retaliation (e.g., drive the speed limit)

Despite these differences, we also see many similarities between the social and commercial marketing models:

- *A customer orientation is critical*. The marketer knows that the offer (product, price, place) will need to appeal to the target audience, solving a problem they have or satisfying a want or need.
- *Exchange theory is fundamental*. The target audience must perceive benefits that equal or exceed the perceived costs they associate with performing the behavior.¹³ As Dr. Bill Smith often purports, we should think of the social marketing paradigm as “Let’s make a deal!”¹⁴

- *Marketing research is used throughout the process.* Only by researching and understanding the specific needs, desires, beliefs, and attitudes of target adopters can the marketer build effective strategies.
- *Audiences are segmented.* Strategies must be tailored to the unique wants, needs, resources, and current behavior of differing market segments.
- *All 4Ps are considered.* A winning strategy requires an integrated approach, one utilizing all relevant tools in the toolbox, not just relying on advertising and other persuasive communications.
- *Results are measured and used for improvement.* Feedback is valued and seen as “free advice” on how to do better next time.

HOW DOES SOCIAL MARKETING DIFFER FROM NONPROFIT MARKETING, PUBLIC SECTOR MARKETING, AND CAUSE PROMOTIONS?

As you will read, social marketing efforts are most often initiated and sponsored by those in the public and nonprofit sectors. However, in the nonprofit sector, marketing is more often used to support utilization of the organization's services (e.g., ticket sales), purchases of ancillary products and services (e.g., at museum stores), volunteer recruitment, advocacy efforts, and fundraising. In the public sector, marketing activities are also used to support utilization of governmental agency products and services (e.g., the post office, community clinics) and engender citizen support and compliance. In summary, social marketing efforts are only one of many marketing activities conducted by those involved in nonprofit or public sector marketing.

Cause promotions primarily focus on efforts to raise awareness and concern for a social issue (e.g., global warming, domestic violence) but typically stop short of changing themselves with influencing specific behaviors. This change in knowledge and belief may be a necessary prelude to impacting behaviors, and social marketers may contribute to this awareness building and attitude change—but the ball their eyes will be on is whether the desired behavior was adopted.

WHAT IS SOCIAL MARKETING'S UNIQUE VALUE PROPOSITION?

In March 2011, Nancy Lee, Mike Rothschild, and Bill Smith wrote a document to address two very narrow questions: What does social marketing add to the already considerable understanding of social change developed by many other disciplines? What is social marketing's unique value proposition? See Box 1.3 on pages 16 and 17 for their response.

WHO DOES SOCIAL MARKETING?

In most cases, social marketing principles and techniques are used by those on the front lines responsible for improving public health, preventing injuries, protecting the environment, engendering community involvement, and, more recently, enhancing financial well-being. It is rare that these individuals have a social marketing title. More often, they are program managers or those working in community relations or communication positions. Efforts usually involve multiple change agents who, as Robert Hornik points out, may or may not be acting in a consciously coordinated way.¹⁵ Most often, organizations sponsoring these efforts are *public sector agencies*: international agencies such as WHO; national agencies such as the Centers for Disease Control and Prevention, departments of health, departments of social and human services, the Environmental Protection Agency, the National Highway Traffic Safety Administration, and departments of wildlife and fisheries; and local jurisdictions, including public utilities, fire departments, schools, parks, and community health clinics.

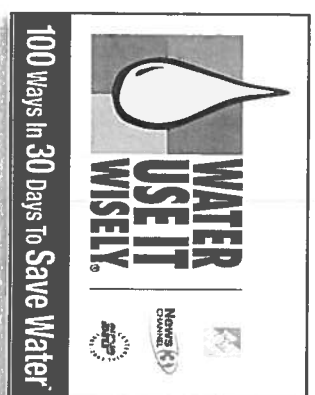
Nonprofit organizations and foundations also get involved, most often supporting behaviors aligned with their agency's mission. For example, the American Heart Association urges women to monitor their blood pressure, the Kaiser Family Foundation uses their Know HIV/AIDS campaign to promote testing, and the Nature Conservancy encourages actions that protect wildlife habitats.

Professionals working in a for-profit organization in positions responsible for corporate philanthropy, corporate social responsibility, marketing, or community relations might support social marketing efforts, often in partnership with nonprofit organizations and public agencies that benefit their communities and customers. Although the primary beneficiary is society, they may find that their efforts contribute to organizational goals as well, such as a desired brand image or even increased sales. Safeco Insurance, for example, provides households with tips on how to protect rural homes from wildfire; Crest supports the development of videos, audiotapes, and interactive lesson plans to promote good oral health behaviors; and thousands of customers at Home Depot's stores have attended weekend workshops focusing on water conservation basics, including drought-resistant gardening (see Figure 1.5).

Finally, there are marketing professionals who provide services to *organizations*

Figure 1.5 Home Depot's Arizona stores

offered weekend workshops on water conservation basics, including drought-resistant gardening. More than 3,100 consumers attended.



Box 1.3

A Declaration of Social Marketing's Unique Principles and Distinctions

Nancy R. Lee, Michael L. Rothschild, Bill Smith

March 2011

Principles Shared With Other Disciplines

Many of social marketing's key characteristics have been widely adopted by other fields, and in turn social marketing has integrated practices developed elsewhere. Among the important characteristics it shares with others are:

- **AUDIENCE ORIENTATION:** Social marketers view their audience as decision-makers with choices, rather than students to be educated, or incorrigibles to be regulated. Social Marketing begins with a bottom-up versus a top-down perspective, and therefore rejects the paternalist notion that "experts know what is best and will tell people how to behave for their own good" in favor of an audience-centered approach which seeks to understand what people want and provides them support in acquiring it.
- **SEGMENTATION:** In order to enhance efficiency and effectiveness, subsets of populations are selected, evaluated, and then prioritized as targets based on useful aggregation variables. The segments selected are those most likely to adopt the intended behavior or most important to the organization's goals, and to provide value in yielding societal benefit. Even among difficult to reach populations, strategies are developed that appeal to those within the chosen population that are the "most ready for action."
- **BEHAVIOR FOCUS:** Behavior is defined as an individual's observable action or lack of action. Social marketing is interested in behavior that results in societal benefit. Many marketing strategies also have intermediate responses, but Social Marketing success is ultimately measured on whether the desired behavior was adopted. It is not sufficient to merely change awareness, knowledge, attitudes, or behavioral intentions.
- **EVALUATION:** Efforts are evaluated, focusing on ongoing measurement of outcomes (levels of target audience behavior change), and the intended impact this has had on societal benefits. Social Marketing is a continuous process in which evaluation and monitoring provide data on the audience's preferences and the environmental changes necessary to maintain and expand the impact of programs.
- **CONSIDERATION OF UPSTREAM & MIDSTREAM TARGET AUDIENCES:** Efforts to influence individuals downstream are often enhanced by also targeting those who are upstream (policy makers, corporations), and/or those who are midstream (e.g. friends, family and influential others).

Unique Principles

While social marketing integrates many characteristics common to other forms of behavior change, four core principles remain truly unique to social marketing.

- **VALUE EXCHANGE:** Social Marketing is unique with respect to other behavior change tools in that the offer that is made is based on an understanding of the target audience's perceived self-interest that will be rewarded for performing the desired behavior. The concept of value exchange states that consumers will choose a behavior in exchange for receiving benefits they consider valuable and/or reducing barriers that they consider to be important. An exchange may result when the marketer has created a program that is perceived by each side to provide value.
- **RECOGNITION OF COMPETITION:** In a free-choice society there are always alternative options available. Competition can be described in terms of choice offerings available in the environment that lead to alternative behaviors. Social Marketing strategies lead to a unique exchange offering that is perceived by the audience to have greater value than that of any other available option.
- **THE 4Ps OF MARKETING:** Product, Place, Price and Promotion represent the fundamental building blocks of Social Marketing interventions. These tools are used to reduce the barriers that make it difficult for people to behave as desired, and to increase the benefits that induce people to be more likely to behave. The tools are used in concert to develop a favorably perceived relationship that is more appealing than all alternate choices. Social marketers assess and then balance the need for, and use of, these four elements to influence optimal change.
- **SUSTAINABILITY:** Sustainability results from continuous program monitoring and subsequent adjustment to changes occurring in the audience and environmental condition. This is necessary to achieve long run behavior.

Distinctions

It also is important to be clear about how it differs from other important approaches to behavior change. Being different does not make any approach superior to any other, but these distinctions signal opportunities for Social Marketing to make a unique contribution.

- **COMMERCIAL MARKETING:** Social marketing is built upon many of the traditional processes and principles of commercial marketing, especially Customer Orientation, Exchange Theory, Competition, Segmentation, the 4Ps, Relationships, and a Service Orientation. Social Marketing differs in that the primary responsibility of commercial marketers is to increase the company's wealth by increasing individuals' well-being, whereas the primary responsibility of social marketers is to increase individual and societal well-being.
- **COMMUNICATIONS:** Communications is a process involved with every human activity and is widely used by many approaches to behavior change. In Social Marketing, communications refers to the activity that describes the benefits of the offering, its price and accessibility to the target audience. Communicating the integrated value of the marketing mix is unique to social marketing, and is not offered by any other communication discipline. Communications alone generally is not sufficient to influence behaviors.
- **REGULATION:** Regulation also seeks to influence behaviors for the benefit of society, but often does so by increasing the cost of undesired competing behaviors (e.g., penalties for breaking laws), rather than increasing the benefits of desired behaviors. Those regulations that offer a benefit for an appropriate behavior (e.g., various tax incentives) more closely fit within the rubric of social marketing. Social marketers also have a role to play in influencing policy makers to adopt regulations (upstream changes) that complement and accelerate behavior changes among large-scale audiences, and to increase compliance with existing regulations.
- **SOCIAL MEDIA:** Social media leverage the social networks of target audiences, and are more personal and interactive forms of message delivery than are the traditional mass media. From a conceptual perspective, though, these electronic systems are similar to print, broadcast, and outdoor, in that each are ways of delivering messages and are, therefore, a subset of Communications.
- **NONPROFIT MARKETING:** The marketing function for nonprofit organizations often focuses on fund-raising, advocacy and program development, as well as supporting utilization of the organization's products and services.
- **BEHAVIORAL ECONOMICS:** Behavioral economics merges economics, psychology, sociology, and anthropology theory and research that focus on how changes in the external environment prompt and promote voluntary individual level behavior change. Social marketing is a process that should apply these insights along with others to maximize the efficiency and effectiveness of large-scale behavior change.

Unique Value Proposition

Social Marketing's unique position in the marketplace of behavior change ideas is to integrate the shared and unique characteristics described above into a program of behavior change. Social marketing is a process rooted in the belief that more than words and/or regulations are needed in order to succeed at influencing people's behavior. Social marketers understand and build upon the consumer's perception of:

- Self-interest
- Barriers to behavior, and
- Competitive forces that create attractive choices.

These lead to interventions that

- Reduce barriers, and
- Increase benefits that matter to the audience and, in the end, move people to action.

Acknowledgements

We wish to thank the following colleagues whose feedback and insights were invaluable to this document. Alan Andreasen, John Bromley, Carol Bryant, Stephen Dann, Rob Donovan, Jeff French, Phil Harvey, Gerard Hastings, Phil Kotler, Francois Lagarde, Craig Leteuvre, Rowena Merritt, Mike Newton-Ward, Sharyn Rundle-Thiele. Ultimately any flaws are ours, not theirs.

engaged in social marketing campaigns, firms such as advertising agencies, public relations firms, marketing research firms, and marketing consulting firms—some that specialize in social marketing.

WHAT SOCIAL ISSUES CAN BENEFIT FROM SOCIAL MARKETING?

Table 1.2 presents 50 major social issues that could benefit from the application of social marketing principles and techniques. This is only a partial list but representative of the aforementioned five major arenas social marketing efforts usually focus on: health promotion, injury prevention, environmental protection, community involvement, and financial well-being. For each of the social issues listed, the status could improve if and when we are successful in increasing the adoption of desired related behaviors.

Table 1.2 50 Major Issues Social Marketing Can Impact

Health-Related Behaviors to Impact	
Tobacco Use	One in five (20.6%) adults 18 and older smokes cigarettes. ^a
Heavy/Binge Drinking	More than a fourth (26%) of 18- to 24-year-olds binge drink (have five or more drinks on one occasion). ^b
Fetal Alcohol Syndrome	3.3% of pregnant women binge drink and 8.3% drink frequently. ^c
Obesity	Almost half (49.4%) of adults do not exercise at recommended levels. ^d
Teen Pregnancy	37% of sexually active 9th through 12th graders did not use a condom during their last sexual intercourse. ^e
HIV/AIDS	About a fourth (24% to 27%) of Americans living with HIV are unaware of their infection. ^f
Fruit and Vegetable Intake	More than three out of four adults (76.5%) do not consume the recommended five or more servings a day. ^g
High Cholesterol	23% of adults have never had their cholesterol checked. ^h
Breastfeeding	57% of mothers do not meet recommendations to breastfeed infants until they reach at least six months. ⁱ
Breast Cancer	25% of women 40 and older have not had a mammogram within the past two years. ^j
Prostate Cancer	48% of men 40 and older have not had a PSA test within the past two years. ^k
Colon Cancer	In 2010, 35% of adults 50 and older had never had a sigmoidoscopy or colonoscopy. ^l
Birth Defects	60% of women of childbearing age are not taking a multivitamin containing folic acid. ^m

Immunizations	10% of 29- to 35-month-old children are not receiving all recommended vaccinations. ⁿ
Skin Cancer	Only 9% of youths wear sunscreen most of the time. ^o
Oral Health	30% of adults have not visited a dentist or dental clinic in the past year. ^p
Diabetes	One third of 20.8 million Americans with diabetes are not aware that they have the disease. ^q
Blood Pressure	30% of the estimated 60 million Americans with high blood pressure don't know they have it. ^r
Eating Disorders	57% of college students cite cultural pressures to be thin as a cause of eating disorders. ^s
Injury Prevention-Related Behaviors to Impact	
Drinking and Driving	16% of high school students report having ridden one or more times in the past year in a car driven by someone who had been drinking. ^t
Scabbelts	Observation surveys nationwide indicate that at least 16% of people do not wear a seatbelt. ^u
Head Injuries	More than a third (35%) of children riding bicycles wear helmets improperly. ^v
Proper Safety Restraints for Children in Cars	83% of children ages four to eight ride improperly restrained in adult safety belts. ^w
Suicide	8.4% of 9th through 12th graders attempted suicide one or more times during the past 12 months. ^x
Domestic Violence	Around the world, at least one woman in every three has been beaten, coerced into sex, or otherwise abused in her lifetime. Most often the abuser is a member of her own family. ^y
Gun Storage	An estimated 3.3 million children in the United States live in households with firearms that are always or sometimes kept loaded and unlocked. ^z
School Violence	5% of students in high schools reported carrying a gun onto school property during a given month. ^{aa}
Fires	Roughly half of home fire deaths result from fires in the small percentage (4%) of homes with no smoke alarms. ^{ab}
Falls	More than one third of adults 65 and older fall each year. In 2003, more than 13,700 people 65+ died from injuries related to falls. ^{ac}
Household Poisons	More than 4 million accidental poisonings are reported each year; 65% of those involve children, and the most common poisoning agents among small children are vitamins, aspirins, cleaning products, and beauty supplies. ^{ad}
Environmental Behaviors to Impact	
Waste Reduction	Only 50% of all paper, 45% of all aluminum beer and soft drink cans, and 34% of all plastic soft drink bottles are recycled. ^{ae}

(Continued)

Table 1.2 (Continued)

Wildlife Habitat Protection	Roughly 70% of the major marine fish stocks depleted from overfishing are being fished at their biological limit. ^r
Forest Destruction	About 1.5 million trees are cut down annually to produce the estimated 10 billion paper bags we go through each year in the United States. ^{ss}
Toxic Fertilizers and Pesticides	An estimated 76% of households use harmful insecticides, and an estimated 83% have at least one pesticide in storage. ^{tt}
Water Conservation	A leaky toilet can waste as much as 200 gallons a day. ⁱⁱ
Air Pollution From Automobiles	An estimated 76% of commuters in the United States drive alone to work. ^{jj}
Air Pollution From Other Sources	If every household in the United States replaced their five most frequently used light fixtures with bulbs that have the ENERGY STAR® label, more than 1 trillion pounds of greenhouse gas emissions would be prevented. ^{kk}
Composting Garbage and Yard Waste	30% to 50% of all trash that ends up in a landfill in the United States could have been composted. ^{ll}
Unintentional Fires	An average of 106,400 wildfires are estimated to break out each year in the United States; about 9 out of 10 are started by carelessness. ^{mm}
Litter	Each year, over 4.5 million nonbiodegradable cigarette butts are littered worldwide. ⁿⁿ
Watershed Protection	At least 40% of Americans don't pick up their dogs' waste. ^{oo}
Community Involvement Behaviors to Impact	
Organ Donation	As of June 30, 2011, 111,814 patients were on a waiting list for an organ transplant. ^{pp}
Blood Donation	60% of the U.S. population is eligible to give blood, but only 3% do in a given year. ^{qq}
Voting	Only 64% of the eligible voting-age population voted in the 2008 U.S. presidential election. ^{rr}
Literacy	Only 16% of children are read a bedtime story every night compared to 33% of their parents' generation. ^{ss}
Identity Theft	About 3.6 million U.S. households (3%) were victims of at least one type of identity theft during a six-month period in 2004. ^{tt}
Animal Adoption	Over 10 million animals in shelters are not adopted and are euthanized each year. ^{uu}
Financial Behaviors to Impact	
Establishing Bank Accounts	Nearly a quarter of the workforce in the U.S. has no bank account. ^{vv}
Bankruptcy	Job loss is a big cause of bankruptcy because people who don't have emergency funds often live off credit cards while they are unemployed. ^{ww}
Fraud	More than a quarter (26%) of U.S. adults have been victimized by fraudulent telemarketing techniques at some point in their lives. ^{xx}

Note: Statistics are estimated and approximate. Data are for the United States, and dates for these statistics are given in Chapter 1 Table Notes.

WHAT ARE OTHER WAYS TO IMPACT SOCIAL ISSUES?

Social marketing is clearly not the only approach to impacting a social issue, and social marketers are not the only ones who can be influential. Other forces and organizations, which some describe as upstream factors and midstream influential others, can affect individual behaviors downstream. Included upstream are technological innovations, scientific discoveries, economic pressures, laws, improved infrastructures, changes in corporate business practices, new school policies and curricula, public education, and the media. Midstream influences are family members, friends, neighbors, church leaders, healthcare providers, entertainers, Facebook friends, and others our target audiences listen to, observe, or look up to.

Technology: Many new gas pumps inhibit the ability to top off the tank, thus avoiding ozone-threatening spillage. Some cars have automatic seatbelts that wrap around the passenger when the door is closed. In some states, ignition locks require Breathalyzers for serious offenders, and Mothers Against Drunk Driving (MADD) is advocating that automobile manufacturers be required to include high-tech alcohol sensors in all new cars. Imagine the impact on trip reduction if cars were designed to give feedback on how much that trip to the grocery store just cost, given the current price of a gallon of gas.

Science: Medical discoveries may eventually provide inoculations for certain cancers, such as one released in 2009 for 11- to 26-year-olds to help prevent cervical cancer. And in 2006, researchers at the Mayo Clinic announced they felt they were close to discovering a shot that could be given that would help a smoker to quit (if not ensure smoking cessation).¹⁶

Legal/political/policy making: Sometimes when all else fails, the laws have to get tougher, especially when the vast majority of the market has adopted the behavior and only the most resistant are still holding out (late adopters and laggards, as they are labeled in marketing). As of April 2011, 31 states and the District of Columbia ban text messaging for all drivers.¹⁷ All U.S. states now have a 0.08% blood alcohol level limit for drinking and driving, more strict than the prior 0.10%. Some states have considered laws requiring deposits on cigarettes similar to those requiring deposits on beverage containers (and rewarding their return). And in a policy statement published in December 2006 in the journal *Pediatrics*, the American Academy of Pediatrics asked Congress and the Federal Communications Commission to impose severe limits on children-targeted advertising, including banning junk food ads during shows viewed predominantly by those under age eight.¹⁸

Improved infrastructures and built environments: If we really want more people to ride bikes to work, we'll need more bike lanes, not just bike paths. If we really want to reduce cigarette butt littering on roadways, perhaps automobile manufacturers could help out by building in smoke-free cigarette butt containers so that disposing a cigarette inside the car is just as convenient as tossing it out the window. If we want to reduce electricity consumption, perhaps more hotels could ensure that lights in rooms can only be turned on when the room key is inserted in a master switch and therefore automatically turned off when guests leave the room with their key. And if we want more people at work to take the stairs instead of the elevators, we may want to have elevators skip the first three floors except in cases of emergency or to accommodate those with a physical disability,

Figure 1.6 Making the calories per container more obvious.



and we certainly want to take a look at the cleanliness and lighting of the stairway. How about a little music? And social marketers can play a huge role in influencing policy makers and corporations to make these changes.

Changes in corporate policies and business practices: In 2010, the American Beverage Association announced their Clear on Calories initiative in support of First Lady Michelle Obama's antiobesity campaign. Instead of printing the number of calories per serving on the back of a can in small print, members will print the number in large print on the front of the can—and the number will

represent the total calories per container, versus per serving, since most consumers drink the entire can (see Figure 1.6).

Each of these efforts will positively impact the same social issues that social marketers are trying to address.

Schools: School district policies and offerings can contribute significantly in all social arenas, providing channels of distribution for social marketing efforts: health (e.g., offering healthier options in school cafeterias and regularly scheduled physical activity classes), safety (e.g., requiring students to wear ID badges), environmental protection (e.g., providing recycling containers in each classroom), and community involvement (e.g., offering school gymnasiums for blood donation drives).

Education: The line between social marketing and education is actually a clear one, with education serving a useful tool for the social marketer, but one that does not work alone. Most often, education is used to communicate information and/or build skills but does not give the same attention and rigor to creating and sustaining behavior adoption. It primarily applies only one of the four marketing tools, that of promotion. Many in the field agree that when the information is motivating and “new” (e.g., the finding that secondhand tobacco smoke increases the risk of sudden infant death syndrome), it can move a market from inaction—even resistance—to action very quickly. This, however, is unfortunately not typical. Consider the fact that death threats for tobacco use have been posted right on cigarette packs for decades, and yet WHO estimates that 29% of youths and adults (ages 15 and older) worldwide still smoke cigarettes.¹⁹ Marketing (benefits in exchange for behaviors) has often been missing in action.

Media: News and entertainment media have powerful influences on individual behaviors as they shape values, are relied on for current events/trends, and create social norms. Many argue, for example, that the casual and sensational attitude of movies and television toward sex has been a major contribution to the problems we see among young people today.²⁰ On the flip side, the media was a powerful factor influencing people to donate time and resources to victims of the earthquake in Haiti and the tsunami in Japan.

WHAT IS THE SOCIAL MARKETER'S ROLE IN INFLUENCING UPSTREAM FACTORS AND MIDSTREAM AUDIENCES?

As noted earlier, many believe that to date we have been placing too much of the burden for improving the status of social issues on individual behavior change and that social marketers should direct some of their efforts to influencing upstream factors and midstream influencers. We agree.

Alan Andreasen, in his book *Social Marketing in the 21st Century*, describes this expanded role for social marketing well:

Social marketing is about making the world a better place for everyone—not just for investors or foundation executives. And, as I argue throughout this book, the same basic principles that can induce a 12-year-old in Bangkok or Leningrad to get a Big Mac and a caregiver in Indonesia to start using oral dehydration solutions for diarrhea can also be used to influence politicians, media figures, community activists, law officers and judges, foundation officials, and other individuals whose actions are needed to bring about widespread, long-lasting positive social change.²¹

Consider the issue of the spread of HIV/AIDS. Downstream, social marketers focus on decreasing risky behaviors (e.g., unprotected sex) and increasing timely testing (e.g., during pregnancy). If they moved their attention upstream, they would notice groups and organizations and corporations and community leaders and policy makers that could make this change a little easier or a little more likely, ones that could be a target audience for a social marketing effort. The social marketer could, with others, influence pharmaceutical companies to make testing for HIV/AIDS quicker and more accessible. They could work with physician groups to create protocols to ask patients whether they have had unprotected sex and, if so, encourage them to get an HIV/AIDS test. They could encourage offices of public instruction to include curricula on HIV/AIDS in middle schools. They could support needle exchange programs. They could provide the media with trends and personal stories, maybe even pitching a story to producers of soap operas or situation comedies popular with the target audience. They might look for a corporate partner that would be interested in setting up testing at their retail location. They could organize meetings with community leaders such as ministers and directors of nonprofit organizations, even providing grants for them to allocate staff resources to community interventions. If they could, they might visit hair salons and barbershops, engaging owners and staff in spreading the word with their clients. They could testify before a senate committee to advocate increased funding for research, condom availability, or free testing facilities. And midstream, they might appeal to parents to talk with their teens about how HIV/AIDS is spread and to midwives to speak to pregnant women about the importance of testing.

The marketing process and principles are the same as those used for influencing individuals: utilizing a customer orientation, establishing clear objectives and goals, conducting audience research, crafting a position statement, developing a marketing mix, and conducting monitoring and evaluation efforts. Only the target audience has changed.²²

CHAPTER SUMMARY

Social marketing is a process that uses marketing principles and techniques to promote target-audience behaviors that will benefit society as well as the individual. This strategically oriented discipline relies on creating, communicating, delivering, and exchanging offerings that have positive value for individuals, clients, partners, and society at large.²³

There are a few important differences between social marketing and commercial marketing. Social marketers focus on influencing behavior for societal gain, whereas commercial marketers focus on selling goods and services at a financial gain for the organization. Commercial marketers position their products against those of other companies, while the social marketer competes with the audience's current behavior and its associated benefits.

Social marketing principles and techniques are most often used to improve public health, prevent injuries, protect the environment, increase involvement in the community, and enhance financial well-being. Those engaged in social marketing activities include professionals in public sector agencies, nonprofit organizations, corporate marketing departments and advertising, public relations, and market research firms. A social marketing title is rare, and social marketing is most likely to fall within the responsibility of a program manager or community relations or communications professional.

Other approaches to changing behavior and impacting social issues include technological innovations, scientific discoveries, economic pressures, laws, improved infrastructures, changes in corporate business practices, new school policies and curricula, public education, and the media. Many agree that influencing these factors and audiences is well within the purview of social marketers—and even their responsibility.

MARKETING DIALOGUE

When Is Social Marketing “Social Marketing”? When Is It Something Else?

In February 2010, a member of the social marketing listserv of 2,000-plus members sent a message with the subject line “To Stir the Pot.” The message included a link to an announcement of a new type of speed bump unveiled in West Vancouver, Canada, one intended to persuade motorists to slow down in the vicinity of an elementary school. A pavement painting appears to rise up as the driver gets closer

to it, reaching a full 3D image of a child playing, creating the illusion that the approaching driver will soon hit the child (link: <http://beta.news.yahoo.com/blogs/upshot/canada-unveils-speed-bump-optical-illusions-children.html>). As anticipated, several members were adamant that this effort was not social marketing: “This is not marketing. Where’s the exchange? What does the driver get [benefit] in

exchange for slowing down?” Counterarguments stressed that “by slowing down [the cost], the driver gets a great benefit—a reduced probability of hitting a child!” Some were troubled by unintended secondary effects (“cultivating resentful drivers not liking to be tricked”), and others weren’t impressed with the potential efficacy, convinced that “it might work once but then wouldn’t be sustainable.” A few felt it met the basic criteria for social marketing: “Since social marketing’s basic purpose is to change behavior for the good or betterment of society as a whole, I think this initiative seems to fit well into that criteria. However, I question whether or not it will work.”

The authors of this text offer the following opinions on common questions and reactions, such as whether an effort is social marketing—or not. As will be apparent, we make a distinction between what defines social marketing and what are its best practices:

- *Does the effort have to use all 4Ps in order to be called social marketing?* No, but this is a best practice. Your efforts will be more successful when you do, because most of the time all four intervention tools are needed to overcome audience barriers, increase benefits, and upstage the competition.
- *Does there have to be a narrowly defined and targeted audience segment?* No, but this is also a best practice, based on there being very few homogeneous populations, and that different segments within these populations have different barriers and benefits and therefore require different interventions.
- *Is a communications-only campaign a social marketing campaign?* It might be. A campaign intended to influence a behavior (e.g., putting infants on their back to sleep) to benefit individuals and society (e.g., prevent sudden infant death syndrome) but that uses only words (e.g., “Back to Sleep” printed on the strip of a newborn diaper) meets the basic criteria for a social marketing effort. However, it is more likely to be successful if other influence tools are used as well (e.g., demonstrations as part of a free class for new moms at a local hospital).
- *What needs to be present for an effort to be called social marketing?* An effort can be considered a social marketing effort when it is intended to influence a target audience behavior to benefit society as well as the target audience. And we should keep in mind that the target audience may be a school district or corporation upstream.

CHAPTER 1 NOTES

1. Retrieved September 7, 2010, from AED NetMark Web site: <http://www.netmarkafrica.org/>
2. Ibid.
3. Ibid.
4. Netmark. *NetMark Baseline Survey on Insecticide Treated Materials (ITMs) in Nigeria* (p. 10) (2001, May). Retrieved June 29, 2011, from <http://www.netmarkafrica.org/research/index.html>

5. Academy for Educational Development for Netmark.
6. Ibid.
7. Ibid.
8. Personal communication from Alan Andreasen to Philip Kotler, April 28, 2011.
9. American Marketing Association. (2007, December 17). *AMA definition of marketing*. Retrieved July 31, 2007, from <http://www.marketingpower.com/img-dictionary.php?SearchFor=marketing&Searched=1>
10. Donovan, R., & Henley, N. (2003). *Social Marketing: Principles and Practices*. Melbourne, Australia: IP Communications.
11. Provided by National Archives and Records Administration, Washington, DC.
12. Kotler, P., & Zaltman, G. (1971, July). Social marketing: An approach to planned social change. *Journal of Marketing*, 35, 3–12.
13. Bagozzi, R. P. (1978, March/April). Marketing as exchange: A theory of transactions in the marketplace. *American Behavioral Science*, pp. 535–556.
14. Smith, W. (2002, Summer). Social marketing and its potential contribution to a modern synthesis of social change. *Social Marketing Quarterly*, 8(2), 46.
15. Hornik, R. (2002, Summer). Some complementary ideas about social change. *Social Marketing Quarterly*, 8(2), 11.
16. Marchione, M. (2006). Doctors test anti-smoking vaccine. Retrieved July 31, 2007, from <http://www.foxnews.com/printer-friendly/wires/2006Jul27/04675.TobaccoVaccine.00.html>
17. Governors Highway Safety Association. (2011, April). *Cell phone and texting laws*. Retrieved April 27, 2011, from http://www.ghsa.org/html/stateinfo/laws/cellphone_laws.html
18. Teinowitz, I. (2006, December 4). Pediatricians demand cuts in children-targeted advertising: Doctors' group asks federal government to impose severe limits. *Advertising Age*. Retrieved June 29, 2011, from http://adage.com/print?article_id=113558
19. World Health Organization, Tobacco Free Initiative. (2003). Statistics for the year 2000, published in the HNP Discussion Paper No. 6, Economics of Tobacco Control Paper No. 6, The World Bank.
20. Andreasen, A. R., & Kotler, P. (2003). *Strategic marketing for non-profit organizations* (6th ed., p. 490). Upper Saddle River, NJ: Prentice Hall.
21. Andreasen, A. R. (2006). *Social marketing in the 21st century* (p. 11). Thousand Oaks, CA: Sage.
22. Kotler, P., & Lee, N. (2006). *Marketing in the public sector: A roadmap for improved performance*. Upper Saddle River, NJ: Wharton School.
23. Lee, N. R., Rothschild, M. L., & Smith, W. (2011, March). *A declaration of social marketing's unique principles and distinctions*. Unpublished manuscript.

CHAPTER 1 TABLE NOTES

- a. Centers for Disease Control and Prevention. (n.d.). *Adult cigarette smoking in the United States: Current estimate*. Retrieved April 27, 2011, from http://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm
- b. Centers for Disease Control and Prevention. (2010, October 8). *Vital signs: Binge drinking among high school students and adults. Morbidity and Mortality Weekly Report*. Retrieved April 27, 2011, from http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5939a4.htm?is_cid=mm5939a4_w

- c. March of Dimes. (n.d.). *Alcohol and drugs*. Retrieved April 27, 2011, from http://www.marchofdimes.com/alcohol_indeph.html
- d. Centers for Disease Control and Prevention. (2009). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved April 27, 2011, from <http://www.cdc.gov/brfss/index.htm>
- e. Centers for Disease Control and Prevention. (2006, June 9). *Youth risk behavior surveillance—United States, 2005. Morbidity and Mortality Weekly Report*, 55(SS-5).
- f. Fleming, P., Byers, R. H., Sweeney, P. A., Daniels, D., Karon, J. M., & Janssen, R. S. (2002, February). *HIV prevalence in the United States, 2000* [Abstract #11]. Paper presented at the ninth Conference on Retroviruses and Opportunistic Infections, Seattle, WA.
- g. Centers for Disease Control and Prevention. (2009). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved April 27, 2011, from <http://www.cdc.gov/brfss/index.htm>
- h. Centers for Disease Control and Prevention. (2005). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved October 20, 2006, from <http://www.cdc.gov/brfss/reportcard2.htm>
- i. Centers for Disease Control and Prevention. (n.d.). *Breastfeeding report card, United States: Outcome indicators*. Retrieved July 1, 2011, from <http://www.cdc.gov/breastfeeding/data/reportcard2.htm>
- j. Centers for Disease Control and Prevention. (2004). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved October 20, 2006, from <http://www.cdc.gov/brfss/index.htm>
- k. Ibid.
- l. Centers for Disease Control and Prevention. (2010). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved July 1, 2011, from <http://www.cdc.gov/brfss/index.htm>
- m. Medical News Today. (2004, September 18). *Folic acid vitamin use by women reaches all-time high, March of Dimes survey finds*. Retrieved October 20, 2006, from <http://www.medicinenews.com/medicalnews.php?newsid=13625>
- n. Centers for Disease Control and Prevention, CDC Online Newsroom. (2010, September 16). *CDC survey finds childhood immunization rates remain high* [Press release]. Retrieved July 2, 2011, from <http://www.cdc.gov/media/pressrel/2010/r100916.htm>
- o. Centers for Disease Control and Prevention. (2006). *Youth risk behavior surveillance—United States, 2005*.
- p. Centers for Disease Control and Prevention. (2004). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved October 20, 2006, from <http://www.cdc.gov/brfss/index.htm>
- q. American Diabetes Association. (n.d.). *All about diabetes*. Retrieved October 20, 2006, from <http://www.diabetes.org/about-diabetes.jsp>
- r. American Heart Association. (2002). *High blood pressure statistics*. Retrieved October 20, 2006, from <http://www.americanheart.org/presenter.jhtml?identifier=2139>
- s. National Eating Disorders Association. (2006, September 26). *National Eating Disorders Association announces results of eating disorders poll on college campuses across the nation* [Press release]. Retrieved October 20, 2006, from http://www.edap.org/nedaDir/files/documents/PressRoom/CollegePoll_9-26-06.doc
- t. Centers for Disease Control and Prevention. (2005). *Behavioral Risk Factor Surveillance System prevalence and trends data*. Retrieved October 20, 2006, from <http://www.cdc.gov/brfss/index.htm>

- u. National Highway Traffic Safety Administration. (2010, May 24). *U.S. DOT targets 45 million Americans still not buckling up*. Retrieved July 1, 2011, from <http://www.nhtsa.gov/PRTDOT-101-10>
- v. National Safe Kids Campaign. (2004, May). *Headed for injury: An observational survey of helmet use among children ages 5 to 14 participating in wheeled sports*. Retrieved October 20, 2006, from http://www.usa.safekids.org/content_documents/ACFC7.pdf
- w. Safe Kids USA. (n.d.). *Preventing accidental injury: Injury facts: Motor vehicle occupant injury*. Retrieved November 20, 2006, from http://www.usa.safekids.org/liter3_cd.cfm?content_item_id=1133&folder_id=540
- x. Centers for Disease Control and Prevention. (2006). *Youth risk behavior surveillance—United States, 2005*.
- y. Heise, L., Ellsberg, M., & Gottemoeller, M. (1999, December). *Ending violence against women*. (Population Reports, Series L, No. 11). Baltimore, MD: Johns Hopkins University School of Public Health, Population Information Program.
- z. Safe Kids. (n.d.). *Facts about unintentional firearm injuries to children*. Retrieved November 20, 2006, from http://www.usa.safekids.org/content_documents/Firearm_facts.pdf
- aa. Centers for Disease Control and Prevention. (2006). *Youth risk behavior surveillance—United States, 2005*.
- bb. National Fire Protection Association. (n.d.). *Smoke alarms*. Retrieved November 20, 1996, from <http://www.nfpa.org/categoryList.asp?categoryID=278&URL=Research%20&%20Reports/Fact%20sheets/Fire%20protection%20equipment/Smoke%20alarms>
- cc. Centers for Disease Control and Prevention. (n.d.). *Falls among older adults: An overview*. Retrieved June 29, 2011, from <http://www.cdc.gov/nceip/factsheets/adultfalls.htm>
- dd. Powell, A. (2006, March 20). *Happy Birthday Mr. Yik* [Web log post]. Retrieved November 20, 2006, from <http://pittsburgh.about.com/b/2006/03/20/happy-birthday-mr-yik.htm>
- ee. U.S. Environmental Protection Agency. (n.d.). *Municipal solid waste—recycling*. Retrieved November 20, 2006, from <http://www.epa.gov/epaoswer/non-hw/municipal/states.htm>
- ff. Bill Moyers reports: Earth on edge. (2001, June). *Discussion guide* (p. 4). Retrieved October 10, 2001, from <http://www.pbs.org/earthedge/>
- gg. Gore, A. (2006). *An inconvenient truth* (p. 316). New York, NY: Rodale.
- hh. Northwest Coalition for Alternatives to Pesticides. (n.d.). *Pesticide use reporting program*. Retrieved January 31, 2007, from <http://www.pesticide.org/PUR.html>
- ii. U.S. Environmental Protective Agency. (n.d.). *At home*. Retrieved January 29, 2007, from <http://epa.gov/climatechange/wycd/home.html>
- jj. U.S. Census Bureau. (n.d.). *United States—selected economic characteristics: 2007–2009*. Retrieved July 1, 2011, from http://factfinder.census.gov/servlet/ADPTable?_bm=y&-q_&-name=ACS_2009_3YR_G00_DP3YR3&-geo_id=01000US&-gc_url=null&-ds_name=ACS_2009_3YR_G00_&-lang=en&-redoLog=false
- kk. U.S. Environmental Protective Agency. (n.d.). *At home*. Retrieved January 29, 2007, from <http://epa.gov/climatechange/wycd/home.html>
- ll. Van Cleef, L. (2001, April 30). *Landfill sewer: Put a pile of rotting waste to work in your garden and save the world, too* (InformationWeek BreakAway). Retrieved June 30, 2011, from <http://www.informationweek.com/breakaway/835/landfill.htm>
- mm. Only You Can Prevent Wildfires. (n.d.). Retrieved January 31, 2007, from <http://www.smokeybear.com/couldbe.asp>
- nn. CigaretteLitter.org. (2001). *Facts about cigarette butts and litter*. Retrieved September 19, 2001, from <http://www.cigarettelitter.org>
- oo. Watson, T. (2002, June 7). *Dog waste poses threat to water*. Retrieved January 6, 2002, from <http://www.usatoday.com/news/science/2002-06-07-dog-usat.htm>
- pp. United Network for Organ Sharing Web site. <http://www.unos.org/>
- qq. American Red Cross. (n.d.). *50 quick facts*. Retrieved January 31, 2007, from <http://www.givelifelife2.org/sponsor/quickfacts.asp>
- rr. U.S. Census Bureau. (n.d.). *Voting and registration in the election of November 2008*. Retrieved April 27, 2011, from <http://www.census.gov/prod/2010pubs/p20-562.pdf>
- ss. *Reading research: Parent reading*. (n.d.). Retrieved January 31, 2007, from <http://www.m2books.com/research>
- tt. Bureau of Justice Statistics. (2006, April 2). *Identity theft, 2004* [Press release]. Retrieved June 30, 2011, from <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=454>
- uu. American Humane™. *Protecting Children & Animals Since 1877*. (n.d.). *Care & issues: Spay and neuter*. Retrieved January 31, 2007, from http://www.americanhumane.org/site/PagesServer?pagename=pa_care_issues_spay_neuter
- vv. Get a New Bank Account: Banks That Do Not Use ChexSystems. (n.d.). *The plight of the unbanked population*. Retrieved April 28, 2011, from <http://www.getanewbankaccount.com/the-plight-of-the-unbanked-population.html>
- ww. TFCI.com. (n.d.). *The top five causes for bankruptcy*. Retrieved April 28, 2011, from <http://www.tfc.com/201003/the-top-five-causes-for-bankruptcy/>
- xx. Retirement Industry Trust Association. (n.d.). *Senior fraud initiative*. Retrieved April 28, 2011, from <http://www.riatus.org/mc/page.do?sitePageId=77992&orgId=tiia>

FOURTH EDITION

SOCIAL MARKETING

Influencing Behaviors for Good

Nancy R. Lee
Social Marketing Services, Inc.

Philip Kotler
Northwestern University

This book is dedicated to all current and future social marketers working to influence behaviors that improve health, decrease injuries, protect the environment, build communities, and enhance financial well-being.

We hope you'll find that this 10-step strategic planning approach enhances your success.



Los Angeles | London | New Delhi
Singapore | Washington DC