PN ABC-708

SOCIAL MARKETING STRATEGIES for FOOD and NUTRITION PROGRAMS

NUTRITION INSTITUTE FOR CENTRAL AMERICA AND PANAMA
ACADEMY FOR EDUCATIONAL DEVELOPMENT

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Maggie Fischer from the Transference Program of Science and Technology from INCAP was instrumental in conceptualizing the goals and objectives for the curriculum and worked closely with the team through the whole process. Clara I. Olaya, Program Officer for Latin America–Nutrition Communication Project provided coordination with INCAP and the various authors and experts involved in its preparation.

A group of four communications experts developed the curriculum in collaboration with INCAP and AED: Dr. Alan R. Andreasen, Professor of Marketing at Georgetown University, wrote the introductory module to Social Marketing. Dr. Carol Bryant, Dr. Elizabeth Gulitz and Dr. Terrance L. Albrecht from the University of Southern Florida prepared four modules: Contributions of Other Disciplines to Social Marketing, Planning and Research, Strategy Development, and Evaluation.

The curriculum was revised by consultants Dr. Royal Colle, Professor and Chairman of Communication, Cornell University, Dr. Diva Sanjur, Professor, Division of Nutritional Sciences, Cornell University and Dr. Rina Alcalay, Associate Professor of Communications at The University of California, Davis. AED staff who contributed to the curriculum include: Margaret Parlato, Clara I. Olaya, Peter Spain, Caby Verzosa, Valerie Uccellani and Beverly Schwartz.

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SOCIAL MARKETING STRATEGIES FOR FOOD AND NUTRITION PROGRAMS

Schedule of Sessions

Module I: Introduction

1. Introduction to Social Marketing
2. Use of Consumer Models
3. Segmentation and Strategic Planning

Module II: Contributions of Other Disciplines to Social Marketing

4. Public Health and Behavioral Change Models
5. Overview of Social Marketing and Applications
6. Theoretical Contributions: Marketing
7. Theoretical Contributions: Communication and Anthropology
8. Theoretical Contributions: Behavioral Analysis
9. Communication Exercises and Team Building
10. Ethics of Behavioral Change

Module III: Planning and Research

11. Health Problem Analysis
12. Formative Research: An Overview of Research Design
13. Qualitative Research Methods I: Participant Observation and Indepth Interviews
14. Qualitative Research Methods II: Focus Groups
15. Qualitative Research Methods III: Interpretation
16. Field Work
17. Other Qualitative Research Methods
18. Qualitative Analysis

Module IV: Strategy Development

19. Strategy Development: Overview of Strategy Development and Objective Setting
20. Audience Segmentation
21. Product Strategy
22. Pricing
23. Message and Creative Strategy
24. Place: Media Strategy
25. Place: Distribution and Training Strategy
26. Writing the Operational Plan

Module V: Evaluation

27. Mobilizing Resources: Selecting and Working with the Production Team
28. Pretesting Strategies and Materials
29. Management Issues
30. Testing Strategies and Materials: Student Presentations
31. Evaluation
32. Student Reports
33. Class Review: Strengths and Weaknesses of the PHC model, Political Issues, Ethics

Optional Session: Production (Recommended to follow Session 27)

SOCIAL MARKETING STRATEGIES FOR FOOD AND NUTRITION PROGRAMS

This course is designed for the second year of the new postgraduate course at INCAP. The overall goal is to provide students with the theoretical and practical basis for managing social marketing strategies for food and nutrition programs.

The class is designed primarily for students who have major responsibilities for planning and management of health and other community development activities associated with their respective sectors. Prior to entering this course, students will have taken an introductory anthropology course and research methods courses that exposes the students to research design principles and a variety of qualitative and quantitative methodologies.

This course will use a combination of didactic and interactive methods, with a strong emphasis on the latter. Class discussions and a project requiring a variety of team activities outside of class are central features of the teaching format. In addition, case studies, panel discussions, field trips and other activities are recommended.

The proposed teaching methodology will enable students to build on the analyses of their in-country food and nutrition situation developed during the first year of their master's program. This will be done by having students select one of three food or nutritional issues identified by the instructor.

The instructor will design two to three case studies, at least one dealing with a nutrition topic (e.g., oral rehydration therapy) and at least one concerning a food topic (e.g., infant weaning foods) that are relevant for all countries. Students will select one of these topics and work in groups to develop a social marketing plan for that topic. The instructor will identify or prepare materials (focus group transcripts, coding lists, qualitative and quantitative reports) for use in class exercises. Prepared data sets will be used to augment data collected by students. Students will also draw on their in-country analyses to identify cross-cultural differences and ways that a plan must be modified to fit a local community's needs.

Throughout the course, students will work individually and in teams based on countries or regions. These teams should be identified early so that they can begin preparing for their final assignment: the compilation of all information into a social- marketing plan dealing with the class topic. In this way, they will learn to use the social-marketing approach to plan, design, manage and evaluate one of the food/nutrition problems identified for their country.

The main instructor will need two assistants to lead team exercises, such as protocol development and message design, conducted during class sessions.

By the end of the course, students will be able to:

1) Identify food and nutrition practices that are feasible to change using social-marketing strategies;

2) Design a social-marketing strategy for a food or nutrition program;

3) Develop skills needed to develop, implement/manage, and evaluate social marketing programs for food and nutrition in the region;

4) Apply social marketing strategies to specific needs of their local communities; and

5) Prepare a social marketing plan for a food or nutrition program that could be applied in their local community.

This curriculum guide is designed for 33 one and one-half hour sessions. In the outline that follows, a brief description, objectives, teaching methodology, references, student assignments and content outline is given for each session. It is divided into five modules. These are described below.

Module I: Introduction

This module gives the student an understanding on how social marketing concepts and processes can apply to a wide range of behavior change opportunities and how mass communication is inadequate by itself to achieve sustained effects. Participants will be able to understand the marketing mindset and how one detects its absence, and will also become aware of the basic elements of the social marketing process.

Module II: Contributions of Other Disciplines to Social Marketing

This module gives the student an overview of social change theories and the theoretical contributions of marketing, communication, anthropology and other disciplines that make up the social-marketing approach. The teaching methodology employed in this curricula is highly interactive and, like the social marketing process itself, requires students to work well in teams. Therefore, a session is included on communication and team work. Ethical considerations associated with social-change models, in general, and social marketing, in particular, are also introduced in this module.

Module III: Planning and Research

This module provides an overview of various research methods used in the public health communication planning process. Both qualitative and quantitative methods are explored. This module is largely interactive, drawing on the course work students have completed in research design and methodology. Several options are offered to enable the instructor to adapt the curriculum to the students level of training and experience with qualitative and quantitative research.

Module IV: Strategy Development

This module focuses on the principles and practices associated with strategy development - the translation of research into a social marketing plan. This is one of the most difficult but important steps, and therefore, eight sessions are devoted to this aspect of the social marketing process: 1) overview of strategy development and objective setting; 2) audience segmentation; 3) product strategy; 4) pricing; 5) promotion: message and creative strategy; 6) place: media strategy, 7) place: distribution and training strategy; and 8) writing the operational plan. Strategy development is not only difficult to do, but even more difficult to teach. For this reason, this module should be almost completely interactive. Students should be actively involved in this decision-making process so that they are able to translate research findings into the development of a measurable, time-specific social-marketing plan. If students are unable to grasp this step during the class time allotted, they should continue to work in teams outside of class until each step of this important process is correctly completed.

Module V: Evaluation

The final module covers issues related to program management, implementation, and evaluation: 1) Selecting and working with the production team, 2) pretesting materials, 3) management issues, 4) student presentations of pretesting results, 5) evaluation, and 6) final reports and course review. This module is largely interactive, drawing on students' experience in program management and evaluation.

TEXTBOOK

Communication for Child Health (1988). Washington, DC: Academy for Educational Development.

RECOMMENDED REFERENCE MATERIALS

Debus, M. (1988). *Handbook for excellence in focus group research.* Washington, DC: HEALTHCOM Project special report series. Porter/Novelli.

Doak, Cecilia, Leonard G. Doak and Jane H. Root (1984) *Teaching patients with low literacy skill.* Philadelphia. J.B. Lippincott Co.

Fine, Seymore (1990) Introduction to Social marketing in Fine, Symore, *Social Marketing.* Needham Heights, MA: Alyn and Bacon.

Griffiths, Marcia et al. (1988) *Improving young child feeding during diarrhea: a guide for investigators and program managers.* Washington, DC. Manoff International Inc. and Pritech.

HEALTHCOM Project. (1986) Field Notes: *Communication for child survival.* Washington, DC: Academy for Educational Development.*

Petty, R.E., & Capioppopi, J.T. (1981). *Attitudes and persuasion: Classic and contemporary approaches.* Dubuque, IA: Wm C. Brown.

Rogers, E.M. (1983). *Diffusion of innovations* (3rd ed.) New York: The Free Press.

Zaltman, G. & Duncan, R. (1977). *Strategies for planned change.* New York: John Wiley.

**Available in Spanish*

VIDEOTAPES ON DEVELOPMENT AND COMMUNICATION

Number in Brackets indicate the tape number in the collection. All are available through Cornell University.

1. Edu-tainment. This program was produced by the Center for Communication Studies at Johns Hopkins University. it provides an overview of various efforts to use entertainment formats, including soap opera and popular songs (music videos) in television for health and development messages. Approx. 25 minutes. (21)

2. Health Communication: Partnership for Child Survival. This production identifies the steps that make up a health communication strategy. It was produced by the Academy for Educational Development and borrows heavily on its Healthcom projects. 30 minutes (17) (21)

3. National Immunization Campaign Syria 1986-87. This is a case study that illustrates UNICEF's "social mobilization" approach to development. It includes the steps used in the communication strategy. It's useful in showing how leaders and opinion leaders were brought into the program. 26 minutes (20) (21)

4. A Way to Bridge the Distance. Two way radio, satellite radio links, and radio broadcasts have been used by health services to reach families and outreach workers who are isolated from conventional health services. Approx. 20 minutes. (22)

5. Communication and Change. This is the story of the Basic Village Education Program in Guatemala that was launched in the middle 1970's. The project tested three channels for reaching farm families, including radio, extension workers and farmer listening groups (using audio cassettes). Particularly useful is the use of formative evaluation to adjust the content of the radio programs. Approx.. 18 minutes. (22)

6. A New Voice in the Village. The case of "Dr. Hakim" radio series shows the five steps needed to create effective broadcasts to train and motivate families in Tunisia on health issues. Approx. 20 minutes. (22)

7. Promoting a Miracle. This is the story of the Masagna 99 campaign in the Philippines that was designed to increase the production of rice. It concentrates on the mass information and training aspect of the program, showing how both mass communication and interpersonal communication were integrated to achieve the impact desired. Deals effectively with how different media can be used in an integrated and complementary way. (Note that the first few words of this program did not get recorded so it starts in mid-sentence.) Approximately 25 minutes. (22)

8. Radio Math. This program shows how Stanford University, with USAID support, worked with the Nicaraguan government in the 1970's to develop math lessons for broadcast to rural Nicaraguan school children. This was one of the first efforts to use radio in an interactive way, although the children's responses to the radio broadcasts were given in the local classroom, not to the radio teacher directly. The experiment shows how radio can stimulate people to respond and therefore does not have to be a passive medium. Approx. 25 minutes. (9) (22)

9. Video for Family Planning. Describes the use of video and television to motivate, educate, inform and train audiences about family planning. Excerpts from around the world on uses of video. A bit repetitive and the principle messages do not come out prominently. After the final credits, a scroll outlines six important points regarding the use of video. 26 minutes. (24)

10. Pop Persuaders. Demonstrates the use of pop culture in social programs. Produced by Population Communication Services, Center for Communication Programs at Johns Hopkins University. (23).

11. Moving Images. Demonstrates the used of pop culture in social programs. Produced by Population Communication Services, Center for Communication Programs at Johns Hopkins University. (23)

12. Family Planning First. 30 minutes. (25) (3)

13. Audio Conferencing- Link to the Future. 20 minutes (2)

14. Interactive Teacher. 20 minutes. (2)

15. Cheerful Revolution. (3)

16. Social marketing. Describes the uses of social marketing techniques in family planning and health. Excerpts from Jamaica, Bangladesh, etc. (3)

17. Family Planning First. (3)

18. Facts of Life. Shows how the Facts of Life book published by UNICEF, ENESCO and WHO can be used by "intermediaries" in the social mobilization context. (4)

19. Communication - Agent for Change. Describes the role that communication can play in social development programs. (4) (22)

20. Nimai. Shows the Training and Visit System (World Bank) in action in India. (10)

21. RADECO: Interactive Radio Instruction in the Dominica Republic. 18.5 minutes. (11)

22. China's One Child Policy. Recording from PBS on China's efforts to meet the population crisis. Shows Persuasion, monitoring, information giving, reinforcement. (12)

23. Tatiana and Johnny. TV spots and music videos on family planning made by Mexican couple. (5)

MODULE I: INTRODUCTION

SESSION ONE
INTRODUCTION TO SOCIAL MARKETING

SESSION DESCRIPTION

The instructors will begin the session by reviewing the syllabus, and explaining the class format, along with all upcoming assignments. Students and faculty will introduce themselves to each other (if necessary). The remainder of the session will devoted to introducing the basic elements of the social marketing approach to behavior change.

TEACHING METHODOLOGY

Students will first be asked to reflect on their own experiences with social change. Then, the instructor will guide them through the elements of a social marketing mindset and process. The session will end with a group exercise and an overnight assignment.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Understand how social marketing concepts and processes can apply to a wide range of behavior change opportunities,
- Understand how mass communication is inadequate by itself to achieve sustained effects,
- Understand the marketing mindset and how one detects its absence, and
- Become aware of the basic elements of the social marketing process.

MODULE I: INTRODUCTION

SESSION ONE
INTRODUCTION TO SOCIAL MARKETING

REFERENCES FOR INSTRUCTOR

.Andreasen, A. R. (forthcoming), *Marketing for Social Change.* San Francisco: Jossey-Bass.

Kotler, P. and A.R. Andreasen (1991), *Strategic Marketing for Nonprofit Organizations* (4th ed.). Englewood Cliffs, NJ: Prentice Hall, Inc.

Kotler, P. and E. L. Roberto (1989), *Social Marketing.* New York: The Free Press.

Andreasen, A.R. (1982) "Non-Profits: Check Your Attention to Customers," *Harvard Business Review*, 60, 3 (May-June), 105-110.

STUDENT ASSIGNMENTS

None for this session. One assignment for next session.

MODULE I: INTRODUCTION

SESSION ONE
INTRODUCTION TO SOCIAL MARKETING

CONTENT OUTLINE

1. Introduce topic and set out course objectives:

- To train students to think like a marketing professional
- To introduce students to the basic principles of social marketing
- To train students to use these principles in a wide range of behavior change contexts
- To teach students basic models of consumer behavior that underlie sound social marketing strategies and how to use them
- To teach students how to carry out effective and efficient social marketing research before, during, and after social marketing programs
- To teach students how to develop and carry out effective social marketing strategies and tactics
- To give students opportunities to work in teams on projects of immediate relevance to their future careers

The major point to emphasize here is that the course is a combination of the theoretical and the practical.

2. Introduce faculty and students to each others. Students should be asked to give:

- present job title and responsibilities
- previous educational experience, especially any business or marketing courses;
- work experience, especially any involvement in a behavior change program of any kind.

3. Lead a class review of their own experiences (or knowledge) of behavior change programs. Select three or four students in the course who have indicated in the introduction some familiarity/involvement with behavior change programs. Have them describe the program with which they are familiar focusing on:

- Program objectives
- Basic strategies
- Outcomes
- Problems in implementation

A master list of sources and types of program missteps and failures should be developed and posted on the wall. Among the points that will be exposed:

- Lack of long term commitment
- Overemphasis on communications
- Ignoring distribution issues
- Not securing needed partnerships
- Not conducting needed formative, pretesting, or monitoring research

- Lack of attention to institutionalizing program
- Lack of training of management and staff

4. Develop list of desirable characteristics for behavior change programs.

5. Define social marketing and discuss key components. Social marketing is the adaptation of commercial marketing technologies to programs designed to influence the voluntary behavior of target audiences in order to improve their personal welfare and that of the society of which they are a part.

The key terms are:

- "Commercial marketing" (social marketers use what works in the private sector);
- "influence" (social marketers emphasize influence over coercive strategies)
- "voluntary" (consumers have the option not to act — and this is a source of real problems)
- "behavior" (the bottom line is behavior, not knowledge or attitudes)
- "target audiences" (as the course will show, marketers focus on segments not masses and treat segments differently with respect to the amount and type of program effort)
- "personal welfare and that of ... society" (sometimes people will act to benefit themselves, sometimes to benefit society and sometimes for both reasons).

6. Lead discussion of where one can apply social marketing. Point out that social marketing can have many kinds of target audiences and many kinds of behavior it might wish to influence. Draw up a two-column list as follows:

Target Public	Target behavior
Housewives	Food selection
Village leaders	Vocal support
Health care workers	Distribute materials
School teachers	Teach nutrition
Staff	Work more hours
Ministry people	Approve advertising
etc	etc.
etc.	etc.

Emphasize that social marketing can be used in almost every aspect of a program where some kind of behavior must be influenced.

CONTENT OUTLINE

BONUS:

Show how social marketing can be use by participants in their private lives. Draw another chart with target audiences like spouse, parent, or co-worker and simple behaviors like going to lunch, helping with a project, and so on.

7. **Describe examples of successful social marketing programs.** Here, instructors can use their own experiences. Alternatively, they can describe:

   - The National High Blood Pressure Education Program
   - The Pawtucket Heart Health Program
   - The HEALTHCOM Projects
   - The Stanford Five-City Project Smoker's Challenge

   Descriptions of these four programs are included in the Appendix.

8. **Set forth the basic elements of good social marketing. Instructors must stress that social marketers must possess the "right" way of thinking about marketing and behavior change as well as an understanding of how to do social marketing.** Thus, the three key elements are:

   - The proper mindset
   - A sound planning and implementation process
   - An appreciation — and ability to use — a wide range of concepts and tools (many adopted from private sector marketing)

9. **Explain the proper social marketing mindset.** This topic will take up the rest of the first day because it is so central to the effective social marketing.

   - Describe alternative concepts of marketing (product, selling and customer)
   - Show how one goes about detecting a selling orientation
   - Enumerate the characteristics of a good customer-centered orientation

10. **Show the implications of the social marketing mindset for the social marketing process.** Show the following:

    - The need for consumer research at the start of every social marketing program
    - The need for pretesting of program elements
    - The need for customer tracking for program adjustment

MODULE I: INTRODUCTION

SESSION ONE
INTRODUCTION TO SOCIAL MARKETING

CONTENT OUTLINE

OVERNIGHT ASSIGNMENT:

Students should be formed into groups of 6 to 8. Each group is to assume that it is in charge of a program to reduce smoking. Group members are to interview one current smoker (perhaps a member of their group) to find out what it would take to get the person to quit. One member of the group should be prepared to present the results to entire group — both what the interview revealed and what the implications are for a future strategy.

MODULE I: INTRODUCTION

SESSION TWO
USE OF CONSUMER MODELS

SESSION DESCRIPTION

The instructors will use the insights gained from the overnight exercise to show the need for consumer research and, in turn, why one must have some model or framework of consumer behavior to guide both research and subsequent strategies. The session will then present such a framework.

TEACHING METHODOLOGY

Students will be encouraged to use their "research" experience to develop tentative models. This will then lead into the presentation and discussion of one particular model and its implications for social marketing strategy. The model will be compared to other social science behavior change models.

LEARNER OBJECTIVES

By the end of the session, participants will be expected to:

- Develop an insight into the value of consumer research in creating marketing strategy
- Learn a serviceable consumer behavior model
- Learn how to begin to use such a model in the development of strategy

REFERENCES FOR INSTRUCTOR

Ajzen, I. "The Theory of Planned Behavior: Some Unresolved Issues," *Organizational Behavior and Human Decision Processes*, 1991, 50, 179-211.

Andreasen, A. R. (1995), *Marketing for Social Change*. San Francisco: Jossey-Bass.

Bandura, A., "Self-Efficacy: Toward a Unifying Theory of Behavior Change," *Psychological Review*, 1977, 84, 191-215.

Engel, J.F, R.D. Blackwell, and P.W. Miniard, *Consumer Behavior* (7th Ed.). New York: The Dryden Press, 1993

Fishbein, M. and I. Ajzen. *Belief, Attitude, Intention, and Behavior: An Introduction to Theory and Research*. Reading, MA: Addison-Wesley, 1975.

Graeff, J. A., J.P. Elder, and E. M. Booth, *Communication for Health and Behavior Change: A Developing Country Perspective*. San Francisco: Jossey-Bass 1993.

Prochaska, J. O. and C. C. DiClemente. "Stages and Processes of Self-Change of Smoking: Toward an Integrative Model of Change," *Journal of Consulting and Clinical Psychology*, 1983, 51, 390-395.

Rogers, E. M. *Diffusion of Innovations* (3rd Ed.). New York: The Free Press, 1983.

Rosenstock, I. M. "The Health Belief Model: Explaining Health Behavior Through Expectancies," in K. Glanz, F. M. Lewis, and B. K. Rimer (eds.), *Health Behavior and Health Education*. San Francisco: Jossey-Bass Publishers, 1990, 39-62.

STUDENT ASSIGNMENTS

Students are to report on their overnight interview assignment, both what they found and what the implications are for future strategy. A similar assignment will be made for this evening.

MODULE I: INTRODUCTION

SESSION TWO
USE OF CONSUMER MODELS

CONTENT OUTLINE

1. Review first day's major points.

2. Conduct a discussion of overnight assignments. Representatives of each group should make formal presentations of their smoker interview results and the implications for strategy. Instructors should make sure that student inferences are supported by the research data (i.e that students are not projecting too much beyond specific respondent comments). Their strategic recommendations should be tied closely to their data. Major points to make:

- Common themes in group reports:
- Role of personal consequences (what it means for the individual)
- Role of other people
- Role of self-efficacy (i.e. whether the person thinks he or she can actually quit)
- How difficult it is to know what to ask if one does not have a framework to begin with.
- The broad outlines of such a framework.
- How the framework could lead to specific strategies (e.g. a personal benefit that is mentioned by several groups could then be the basis for a promotional message).

3. Present overview of social marketing process. Here, instructor should show students how an understanding of consumers fits into the strategy process. The strategy process is a constant oscillation between listening to consumers and carrying out actions as follows:

- Listen to consumers (formative research)
- Plan strategy and tactics
- Develop organization structure
- Pretest specific tactics (e.g. ads, package designs)
- Implement strategies
- Monitor results and revise tactics and strategies where necessary

4. Describe the role a consumer framework would have. Instructor should show students how consumers can "tell" the social marketer what strategy to use (formative research), whether a proposed tactic is likely to be effective (pretesting) and how a program is progressing (monitoring).

5. Describe the characteristics of good consumer research. A good model should:

- Be comprehensive
- Be researchable (i.e. lead to obvious questions to be asked of consumers)
- Lead to specific program strategies and tactics

SESSION TWO
USE OF CONSUMER MODELS

CONTENT OUTLINE

The instructor should point out at this point that strategies will involve two broad sets of decisions that can be assisted by consumer research:

1. Determination of segmentation strategies:

    - How to divide up the consumer market
    - How much resources to allocate to each segment
    - How to address each segment

2. Determination of behavior change strategy (or strategies).

6. Describe the major elements of consumer decision making. Here, the instructor sets out the major concepts and relationships that will guide much of the research and strategy formulation discussions that will take place throughout the course. The central elements of the consumer framework are the following:

- Decisions to change behavior come about in stages
- Choices are based on a comparison of alternatives (i.e. there are always competitors and one of those is inevitably the status quo)
- Each choice is analyzed by the consumer through a comparison of benefits and costs
- Benefits and costs vary in <u>importance</u>:
    - Across individuals
    - Across stages of the process
- Social influence is also important
    - Others are a source of information
    - Norms transmitted by the culture or individuals have influence
    - Others can exert direct pressure to act
- Behavioral control is important
    - Consumers must believe that it is <u>possible</u> to act (i.e. that necessary products and services are available)
    - Consumers must believe that they have the knowledge and skills to carry out the act or acts (perceived self-efficacy)
- Reinforcement and rewards are important once the behavior is undertaken.

Students must realize that what is critical is what the consumer <u>thinks</u> is the situation (e.g whether group norms support the proposed behavior) not what is <u>really</u> true (i.e. what the group norms really are). That is, it is perceptions that matter.

7. Description and discussion of stages. The instructor should lay out the four stages of consumer decision making and then ask how each of the other elements of the framework would differ by stage (compare to Prochaska's Stage model — see references). The four stages are:

- *Precontemplation:* where the consumer is not thinking about the action for one of three reasons:
  - Lack of awareness
  - Belief that the behavior is against social norms (e.g. religious proscriptions)
  - Belief that the behavior has no personal relevance.
- *Contemplation:* where the consumer is thinking about whether or not to undertake the action
- *Action:* where the consumer has decided to act and is now planning how to do it or is doing it for the first time
- *Maintenance:* where the consumer is repeating the behavior and learning how to do it more correctly.

Students should be asked how the following would differ in importance and content across the four stages:

- Perceived costs and benefits
- Perceived social influence
- Perceived social control

8. Comparison of model to other consumer behavior or communications models. Depending on the time available, the instructor should show the relationship of the social marketing consumer behavior model to other social science models such as (see instructor references):

- Health Beliefs Model (Rosenstock)
- Theory of Reasoned Action (Fishbein and Ajzen)
- Theory of Planned Action (Ajzen)
- Self-efficacy Theory (Bandura)
- Applied Behavioral Analysis (Graeff, Elder, and Booth)
- Diffusion of Innovations Theory (Rogers)

The proposed model is closest to that of Ajzen.

9. Overnight Assignment. Students should be asked to repeat their interview assignment of the previous night with a new smoker. Questions should now be based on the consumer model developed in class. Again, some <u>different</u> spokesperson should be prepared to report to the next class (a) what was learned and (b) what the implications were for marketing strategy.

SESSION THREE
SEGMENTATION AND STRATEGIC PLANNING

SESSION DESCRIPTION

The instructors will use the insights gained from the second overnight exercise to show how one uses formative research to develop market segments and strategic plans.

TEACHING METHODOLOGY

Students will be encouraged to use their "research" experience as well as their own previous exposure to behavior change programs to develop alternative ways of segmenting markets. The session will feature a full discussion of the value of segmentation and how this, in turn, fits within an overall marketing strategy.

LEARNER OBJECTIVES

By the end of the session, participants will be expected to:

- Understand the value of market segmentation
- Learn the various ways in which markets can be segmented
- Learn how one proceeds from formative research to segmentation and then strategy development

SESSION THREE
SEGMENTATION AND STRATEGIC PLANNING

REFERENCES FOR INSTRUCTOR

Andreasen, A. R. (1995), *Marketing for Social Change*. San Francisco: Jossey-Bass.

Kotler, P. and G. Armstrong, *Principles of Marketing* (6th Edition). Englewood Cliffs, NJ: Prentice Hall, Inc. 1994, Chapter 9.

Haley, R. (1984) "Benefit Segmentation: Backwards and Forwards," *Journal of Advertising Research*, (February-March), 19-25.

STUDENT ASSIGNMENTS

Read case for analysis on Day 4.

MODULE I: INTRODUCTION

SESSION THREE
SEGMENTATION AND STRATEGIC PLANNING

CONTENT OUTLINE

1. Review previous day's major points.

2. Conduct discussion of overnight assignments. Representatives of each group should make a formal presentation of their interview results and the implications for strategy. Students should be asked how this exercise differed from that of the previous day. The instructor should emphasize the ways in which the consumer behavior model helped them formulate better questions and then helped them translate the answers into specific strategies.

3. Conduct discussion of ways of segmenting markets. Students will now have interviewed and discussed 6 to 8 smokers. They should be asked:

- Should all consumers be treated alike? (Here, the instructor should point out that (a) treating everyone alike means that all consumers — probably incorrectly — are equally deserving of attention and the same amount of effort and (b) one best strategy will not be well matched to anyone's needs, wants and perceptions, but will be some — often unsatisfactory — "average.")
- If consumers should be treated differently, should they be treated individually? (Here, the instructor should point out that such an approach is possible where the strategy involves only face-to-face contact. However, it is very expensive if mass communications techniques of any kind are going to be used. The manager faces a trade-off: as more and more segments are added, costs rise, but also response rates increase — because the approach is more precisely targeted. However, at some point, the increase in costs exceeds the increase in program payoffs.)
- If one is going to use neither a "mass" nor an "individualized" approach, how should the consumers be grouped?

4. Discuss the value of allocating resources differently across segments. There are two main reasons for segmenting markets. The first of these is to make decisions about allocating resources — money, personnel, and management attention. Students should be asked:

- What are some of the reasons you would want to allocate extra effort to some specific group of customers?

Some of the criteria that students may use are the following:

- Need (e.g. proportion having some social problem; severity of the problem for each potential target consumer)
- Readiness to change
- Ability to take care of their own problems
- Accessibility
- Extent to which they are being served by other programs/products

Students should be asked whether there are any consumers who deserve zero effort. The main points to make here are:

a. Target consumers do differ significantly in the extent to which they deserve attention and effort;
b. Some markets **do** deserve zero attention
c. Some systematic approach is needed to allocate resources across segments.

5. Group assignment. If the instructor has time, students should be asked (in groups) to develop some scoring system for allocating a million peso budget among a hypothetical set of 10 segments using the criteria they have developed.

6. Discuss the value of differing strategies across target segments. Students should be asked to specify in simple terms an ideal communications message for each of the 6 to 8 smokers. The instructor should then use these messages to point out:

- How each message will be tailored to whatever the research has shown is most likely to bring about action for that consumer
- When the latter happens, consumers are more likely to respond (i.e. a mass communications approach is rarely best).

7. Discuss all of the possible ways in which markets can be segmented. A useful framework the instructor may use is to distinguish between:

- Objective and subjective approaches; (the former, like age or place of residence, can be easily described and measured; the latter, like attitude toward health care, are hard to describe and harder to measure);
- General and behavior specific; (the former, like age or attendance at a health clinic, can apply to a great many behavior change programs; the latter, like cigarette consumption or past quitting attempts, are specific to individual programs).

A two-by-two table as follows should be put on the blackboard and students asked to give examples in each cell:

	General	Specific
Objective		
Subjective		

The instructor should point out that objective, general measures such as age or gender, have the advantage that data are available in secondary sources and are easy to understand. However, they offer very little direct information on how to communicate with members of a given segment (e.g. women under 30). On the other hand, subjective specific measures, such as perceptions of the costs of quitting smoking, are directly helpful in devising communication strategies, but they usually require costly, original research.

SESSION THREE
SEGMENTATION AND STRATEGIC PLANNING

CONTENT OUTLINE

8. Relate the segmentation discussion to the first two stages of the strategic planning process. The discussion so far has emphasized the first two steps of the strategic planning process:

- Listening to customers (formative research)
- Developing strategy

The instructor should review the major elements of the anti-smoking strategy the class has developed in terms of:

- Market segments to be addressed
- How the segments would be treated differently with respect to resource allocations
- How the marketer would seek to bring about behavior change in one or two segments (one should not discuss them all)

The instructor should make sure that, for each segment considered, the strategy proposed includes consideration of issues raised in the consumer behavior discussion:

- How benefits will be increased and costs decreased
- How social influences will be brought into play
- How target consumers will be made to believe that they can, in fact, carry out the necessary behavior
- How consumers ready to act will actually be encouraged to take the first steps
- How consumers who have already acted will be encouraged to repeat and improve their behavior.

9. Introduce the remaining stages of the strategic marketing process. Once strategic plans have been formulated managers have four additional steps to take:

- Develop organizational systems and structures to implement and monitor the program
- Pretest key program elements
- Implement the strategy
- Monitor and, where necessary, revise strategy and tactics

A brief discussion about these four stages should be held using the stop-smoking strategy as the basis. Students should be asked such questions as:

- Who should be put in charge of what? Should there be different managers for different customer segments? Should there be a manager for advertising and someone else for face-to-face interventions? Should someone be in charge of contacting and influencing physicians and nurses?

CONTENT OUTLINE

- What parts of the strategy should be pretested and, if so, how?
- During implementation, should all segments be "attacked" at the same time or should some precede others? Should advertising precede face-to-face programs and, if so, how?
- How will the program be monitored? What measures should be taken? How should the measures be carried out?

10. Assign case for Day 4. (Possibly the Rayana case.)

Some Success Stories

What is most exciting about social marketing is that IT works. From its beginnings 20 years ago in early public health and family planning programs, social marketing has developed a coherent philosophy and a set of strategies and procedures that its adherents now know can be extremely effective. The success stories to follow not only demonstrate this point very clearly but also outline many of the key elements of the social marketing approach that will be elaborated upon in succeeding chapters.

1. The National High Blood Pressure Education Program

The National High Blood Pressure Education Program (NHBPEP) is, I believe, the longest running behavior change program to use social marketing concepts, processes and tools. It is certainly one of the most successful.

The NHBPEP was established in 1972 by the National Heart, Lung, and Blood Institute (NHLBI) after a series of epidemiological, clinical, and actuarial studies made clear that high blood pressure was a major risk factor for stroke and heart disease. The NHBPEP's objective was to increase awareness of the linkage between these two conditions and to influence those with high blood pressure to obtain treatment for their problem.

When the NHBPEP began, 23 million Americans were estimated to be hypertensive (National Heart, Lung, and Blood Institute 1991) according to a relatively strict definition. In subsequent years, the definition of high blood pressure was changed to include about 60 million people with blood pressure over 140/90 mm Hg or taking hypertensive medication. The program evolved over time as the audience changed. Initially, only 29% of the public know of the link between high blood pressure and stroke and only 24% knew that high blood pressure causes heart disease (National Heart, Lung, and Blood Institute 1973). Only about one-half of all hypertensives were aware of their problem. Thus, the behavioral focus in the early stages of the social marketing project was to get people to get their blood pressured checked. The principal approach to achieving this end was educating people about the link between high blood pressure and disease.

Ten years later, 59% of the population knew the relationship between high blood pressure and stroke and 71 percent know it caused heart disease. Ninety-two percent knew that it cannot be cured and that a hypertensive person must always stay on a treatment program (National Heart, Lung, and Blood Institute 1986). Even further progress was made by 1985, when 91% knew of the link to heart disease and 77% knew the link to stroke (Roccella et al 1986).

By 1985, the NHBPEP had brought much of the target market into what we shall call later "the Contemplation Stage," i.e. aware of the problem and actively thinking about doing something about it. According to a 1985 National Health Interview Survey, 94 percent of Americans knew their blood pressure was high normal, or low (Roccella et al 1986). About one-half of those with hypertension had moved beyond the contemplation stage to plan and take action to control their blood pressure. However, almost one-half still had not taken action. The project therefore shifted its focus in 1985 to "aware hypertensives" and securing greater levels of compliance from this group. This change in strategy was effective in raising compliance to 73% by 1988-91 (National Heart, Lung, and Blood Institute 1992).

Other behavior changes have also been manifested. Over 95% of hypertensives report cutting salt/sodium in their diets, 89% diet to lose weight, and 86% exercise (Roccella et al 1986). However, research has shown that (a) aware hypertensives have trouble staying with their new behaviors and (b) there remain variances in awareness and compliance across racial and gender groupings. Thus, in recent years, the NHBPEP has emphasized the Maintenance Stage of the behavior change process and has continued to develop segmented programs for men and women, for Blacks and Hispanics, for young, middle aged and elderly and people in high-incidence sections of the country. Plans for the decade of the 1990s involve closer targeting of Black males over 45 where prevalence rates are high and treatment compliance is low and hypertensives in that area of the Southeastern United States known as the Stroke Belt where the incidence of strokes among hypertensives is 10% higher than for hypertensives in any other part of the United States.

The program began with — and continues to use — a number of important social marketing principles:

a. It **focuses on behavior**. The concern is not with educating and communicating information, but with getting hypertensives to undertake and stay with treatment programs.

b. It works **through intermediaries**. It recognizes that the problem is too large for one organization to tackle and, besides, many other health care institutions have an important stake in reducing the incidence of high blood pressure. NHLBI coordinates high blood pressure programs through 41 other partner organizations.

c. It insists on a **unified communication approach**. Working in cooperation with Porter/Novelli, a Washington, D.C. social marketing consultant, NHBPEP regularly develops carefully articulated communications objectives and strategies, defines target audiences, and establishes roles for intermediary groups. All messages are designed to reinforce one another.

d. The development of strategy begins with an **understanding of target audience members** and their perceptions.

e. Program **strategy changes as the target audience evolves** through various stages of the behavior change process.

f. Careful attention was paid to developing **differentiated strategies** for different **market segments.**

g. Message strategies have **focused on consequences**, both positive and negative, to the hypertensive person of both going through the treatment regimen (the behavioral process) and being successful in controlling their blood pressure (the behavioral outcomes).

h. Message strategies have also focused on social influence and hypertensives' sense of self-efficacy as factors that can impede or support the desired behaviors.

2. The Pawtucket Heart Health Program

The Pawtucket Heart Health Program (PHHP) is an example of a short-term social marketing program. It focused on reducing the blood cholesterol levels of residents of the city of Pawtucket, Rhode Island in March and April in 1985. The program began by studying the characteristics of the target audience and their particular needs and wants. Three groups were targeted. All adults were the major interest. In addition, special focus was given to (a) physicians who were most likely to treat people with high cholesterol levels and (b) middle-aged men who had made initial contact with the PHHP program. Different strategies were developed for each segment.

The Pawtucket program offered both products and services to its major target market. Program staff developed and pretested a self-help "Nutrition Kit" designed to assist target audience members change their diet. They held events where target audience members could get Screening, Counseling, and Referral (SCOREs). Mass print campaigns were conducted in local media and print media were made available at worksites, churches, and schools. In addition, the campaign used direct mail and telemarketing aimed at middle-aged men. Efforts were made to reduce the costs of actually getting to the SCORE events by locating them at major life path points such as grocery stores and shopping malls.

Pricing tactics involved a charge of $5.00 for the SCORE with a $1.00 discount to men targeted by the telemarketing and direct mail program. Other promotion features included a kick-off SCORE event during the St. Patrick's Day parade and six weeks of newspaper columns on diet and cholesterol.

The campaign was extremely successful despite its short duration:

Briefly, 39 SCOREs were attended by 1,439 adults, 60% of whom were identified as having elevated blood cholesterol levels. Two months after the campaign, 72.3% of these persons had returned for a second measurement. Nearly 60% of this group had reduced their blood cholesterol level by an average of 29.1 mg/dl. More important than these short-term results has been the integration of the essential components of this campaign into the on-going PHHP activities. This marketing strategy has led to over 10,000 persons having had their blood cholesterol measured in the subsequent tow years, all of whom have received information on how to help themselves make dietary changes to manage elevated levels, and many have subsequently been referred to their physician for more intensive treatment. Interestingly, a recent survey of local physician's attitudes and practice ... found them to be more aggressive in initiating either drug or diet therapy [due in part to] patient requests for blood cholesterol measurements and/or dietary information (Lefebvre and Flora 1988, pp 310-311).

3. The HEALTHCOM Projects

HEALTHCOM (Health Communications for Child Survival) is a long-term program sponsored by the U.S. Agency for International Development applying communications and marketing technologies to increase rates of child survival in selected developing countries. The program has worked in 17 countries in Asia, Africa, and Latin America and has focused on immunization, the control of diarrhea, breastfeeding, nutrition, growth monitoring, and hygiene. While initially described as a "health communication" project, the managers of HEALTHCOM ultimately recognized that social marketing was the project's "organizing principle." (Seidel et all 1988, p. 10). Indeed, the project is now called "Health Communications and Marketing for Child Survival."

Individual HEALTHCOM projects have made extensive of use of formative research and have used a fully coordinated marketing mix that paid attention to the positioning of the sought-for behavior (the Product), the costs that the target audience would have to bear to undertake the behavior (the Price), the locations at which necessary products or services could be obtained (Place), and both mass media and personal communications designed to bring about the desired actions (Promotion). Each project was subject to careful monitoring and evaluation in order to fine-tune tactics and strategies "on the run."

Specific HEALTHCOM projects include the following:

a. The PREMI Project

The PREMI project, carried out in Ecuador between October 1985 and June 1988, has been described as "a milestone . . . in child survival efforts worldwide" (Hornik et al 1991, p. 2). Working in cooperation with the local National Institute of the Child and Family (INNFA) and the Ministry of Health, PREMI focused primarily on promoting increased immunization of young children and the control of diarrhea through the use of ORS packets, with a secondary emphasis on breastfeeding and growth monitoring. The major "product" of the PREMI program was seven *jornadas* or vaccination days where children were vaccinated and sometimes weighed and where mothers could receive ORS packets. These events were backed by both continuing health communications and *jornadas*-specific promotions through mass media and in-person through the health system. Cooperative activities by the Ecuadoran Ministry of Health and UNICEF also supported the program.

Immediate results from the program were dramatic. If one uses the very strict standard of verified immunizations (issuing immunization cards marked by health workers), the proportion of children fully immunized by the age of one went from 15% before PREMI to 31% after PREMI. More generous estimates adjusting for underreporting indicate an increase from 22% to 43%. And if the latter calculation is used for children up to 18 months, coverage rises to 66% (Hornik et al, pp. v, vi). Evaluation research indicated that not only had coverage at least doubled, it was occurring at an earlier age.

With respect to diarrheal control, PREMI could claim not only substantially increased usage of oral rehydration solutions (ORS) from about 5% of cases to around 20% but also increases in awareness and knowledge. After 18 months of the program, almost all mothers were aware of ORS, 60% had tried it, and three-quarters of mothers could prepare it accurately.

The PREMI project also experienced two major setbacks that provide very useful lessons for other social marketing projects. First, the ORS project was not as successful as it could have been because there was not careful integration of promotional efforts generated by the jornadas and the mass media with practices in the Ministry of Health (MOH). About 30% of all cases of diarrhea were treated at MOH clinics. Yet, despite the presumed greater seriousness of these cases and despite the apparent commitment of MOH to the PREMI project, only one-third of the children were given ORS. Further, evaluators discovered that there was not full distribution of ORS packets to the clinics which suggested that future use of ORS after the conclusion of the PREMI project would be restricted.

The second major setback was in the institutionalization of the social marketing methodology in the Ministry of Health. This never materialized. In their evaluation of the project, Hornik and his colleagues offer the following insightful explanation:

Essentially the social marketing effort was entirely located in INNFA; it received both the funds and the technical advice to support this area. Those activities were run within the broad PREMI framework and reflected many joint meetings with MOH personnel. Nonetheless, operationally they were carried out in isolation. It was clear that these activities were not part of the MOH. Also, it was generally believed that the entire social marketing approach with its heavy emphasis on mass media promotion was also ideologically alien to many MOH personnel, particularly in the health education department. This department historically had emphasized smaller scale community-level promotion efforts; their failure to be incorporated into, or be funded by, or obtain any credit for, the social marketing efforts of PREMI did little to win them over. (Hornik et al 1991, pp. ix-x)

b. The Philippines National Urban Immunization Program

HEALTHCOM carried out both a pilot test and a national program in municipal centers in the Philippines designed to increase the rate of immunization among children 12 to 23 months. The project was, in part, in response to President Aquino's pledge to achieve a goal of vaccination of 90% of the eligible population. Based on research for the Metro Manila pilot test, managers decided that the program should position itself as a measles campaign. Measles was the most common communicable disease recognized by mothers and was the third largest killer of infants in the country. Also, the measles shot was the last in the typical childhood vaccination series and mothers seeking measles shots would be "forced" to get full coverage.

The project used a number of important marketing principles. It sharply focused the campaign on a single day for free immunization each week in order to reduce the cost to mothers who might worry about coming on a day on which they could not be served. In addition, "sales conferences" were held with critical municipal and regional health care leaders around the country, local mayors, and with the critical local clinical workers to insure their cooperation. The promotional campaign involved the mass media, four television and four radio spots and a newspaper announcement, backed with a wide range of promotional pieces including posters, bunting, and welcome streamers for health centers, stickers for jeepneys and tricycles and T-shirts for health center staff.

The national project took place over a relatively short period of time, six months in the summer of 1990. Even in such a short time, the project reported two significant accomplishments. First, complete vaccination coverage based on both cards and verbal reports went up from 54% to 64%. Second, more significantly, the proportion of children who had complete coverage by age one increased from 32% to 56%. Evaluations by Annenberg School of Communications at the University of Pennsylvania concluded that "the program produced timely vaccination largely by realizing sharp improvements in client knowledge, particularly about the logistics of vaccination" (Hornik, Zimicki and Less 1991, p. 11). By focusing on the days of free coverage, the campaign may well have increased mothers perception that they could actually carry out what the campaign and the President were urging them to do. That is, there was an increase in **perceived self-efficacy**, a concept we shall discuss further in Chapter 4.

c. Central Java Vitamin A Campaign

The HEALTHCOM Vitamin A (ROVITA) project in Central Java beginning in October 1988 again points up the value of having a coordinated strategy. In partnership with the Indonesian Department of Health, Diponegoro University and Helen Keller International, HEALTHCOM carried out formative research, trained health

workers, developed, pretested, and disseminated mass media communications (primarily radio spots), developed motivational activities for health workers, and conducted monitoring, evaluation and professional development activities for health department officials and university staff.

Comparisons of results from one of the two intervention regencies (districts) in Central Java with a control regency indicated clearly that the media campaign alone was not effective. Only when the campaign was conducted in areas where there was a health post where worker training and motivation were carried out and where Vitamin A products were easily available was there an effect. In the latter cases, Vitamin A capsule coverage of eligible children increased from 24% to 40%. There were no significant changes in communities without a health post. The project evaluators recommended exploration of additional personal channels of outreach through village leaders and their wives as ways of supplementing the mass media and health worker interventions (McDivitt and McDowell 1991).

d. Other Sites

The HEALTHCOM project has also been effective in Lesotho. There, there was a significant increase in the use of oral rehydration therapy both at home and in health centers and, while there was no increase in the already-high rates of immunization, there was an improvement in the age at which the immunizations were given (Yoder and Zheng 1991). Results in Lubumbashi, Zaire (Yoder, Zheng and Zhou 1991) and in West Java (McDivitt, McDowell and Zhou 1991) were more modest.

4. The Stanford Five-City Project Smoker's Challenge

The Stanford Heart Disease Prevention program has frequently been cited as an example of social marketing (Kotler and Roberto 1989). One component of the lengthy Five-City Project (FCP) in California attempted to reach and influence smokers not highly motivated to quit who were not being affected by other components of the FCP. The project managers used a great many of the social marketing practices that will be described at length in subsequent chapters of this book:

- **They chose a specific target audience** for influence: moderately motivated male smokers[1]
- They set several **behavioral objectives** for the program:
  - Induce a large number of smokers (particularly in the target audience) to sign up for the program;
  - Achieve at least a 20% quit rate;
  - Provide skills for quitters so that they can remain nonsmokers for at least one year.
- They developed an initial "**product**" (a 6-week quit smoking contest), a product "**brand**" (the Smokers Challenge) and a potential promotional strategy (a contest prize) based on initial **needs analysis** of the target audience.
- All three elements were **pretested** on potential target audience members. The contest and label were tested in informal interview settings and alternative **incentives** were tested in 2 random telephone **surveys** of 97 smokers.
- Channels for contest promotion were selected on the basis of experience and **media usage data**.
- **Cooperating organizations** (e.g. the local TV station) were induced to assist in the project in order to stretch the budget and broaden market penetration.

- Attempts were made to **minimize both economic and psychological costs** of the recommended behaviors.
- Both process and outcome objectives of the smoking contest were **monitored** throughout the six weeks by means of quitting data and **focus group discussions.**
- An end-of-campaign **evaluation** was carried out revealing that 501 smokers had signed up for the program with a higher proportion of men than other FCP projects in the community, 45% had quit for a short time, and 22% "permanently" quit with a one year maintenance rate of 15% (King et al 1987)
- Revisions in the "product" elements of the project strategy were made the basis of Smokers' Challenge II. As noted in Lefebrve and Flora (1988, p. 312):
- New quitting materials were developed that were more directive and gave smokers a day-by-day set of guidelines for quitting in 12 days. This revised self-help program was supported by a 12-day radio show that reinforced the principles in the booklet. Based on smokers' preferences for "cold turkey" approaches to quitting, this new guide was titled "Cool Turkey."
- These new materials were the only quitting approach advertised in the recruitment materials: they were mailed to all participants requesting them, thus improving access to quitting information.
- The contest was expanded from six weeks to three months. Smokers could earn chances for both the final prize and for smaller prizes if they sent in monthly "quit cards."

Evaluation of Smoking Challenge II revealed similar enrollment rates as Smoking Challenge I and the same proportion of males participating. However, the revised strategy yielded higher quit rates of 30%.

[1] This target audience was in an advanced portion of the Contemplation Stage as discussed in Chapter 4.

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING
SESSION FOUR
PUBLIC HEALTH AND BEHAVIORAL CHANGE MODELS

SESSION DESCRIPTION

The instructors will open the session by reviewing the syllabus, explaining the class format and all upcoming assignments. This session is an overview of models for leading social change in group and community settings.

TEACHING METHODOLOGY

This session is a mix of didactic and interactive, with time allotted for students to discuss their own experiences with social change.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Recognize that public health efforts require the ability to direct social change,
- Explain what constitutes a behavioral change model, and
- Define the key elements of social/behavioral change and diffusion models.

REFERENCES FOR INSTRUCTOR

McGuire, W. (1984). Public communication as a strategy for inducing health promoting behavioral change. *Preventive Medicine*, 13, 299-319.

Zaltman, G. & Duncan, R. (1977). *Strategies for planned change*. New York: John Wiley.

Rogers, E.M. (1983). *Diffusion of innovations* (3rd ed.). New York: The Free Press.

STUDENT ASSIGNMENTS

None

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION FOUR
PUBLIC HEALTH AND BEHAVIORAL CHANGE MODELS

CONTENT OUTLINE

Introduction

1. Review syllabus and explain class format, upcoming assignments. Note the course will be highly interactive, drawing on the knowledge, backgrounds, expertise, and depth of experience of participants. Begin by acknowledging their future roles as managers, encourage them to share what they don't know. Class will expose them to new information, also building on what they already do know.

2. Lead class discussion of their experience with primary, secondary and tertiary public health prevention strategies. Point out that they are all involved in social change. Also discuss the difficulties they have experienced in bringing about this change at individual and group levels. This discussion should include identifying ways existing health promotion methods/programs have failed to bring about desired change, waste money, waste time, frustrate change agents.

3. Discuss common reasons for failure of health communication programs:

- *lack of long term commitment*
- *failure to base strategy on research*
- *failure to institutionalize program*

4. Diffusion of Innovation:

A. Components
- potential adopters
- social network of adopter
- advocate for change (change agent)
- the innovation

B. Change advocate
- characteristics: personality, prestige, credibility, homophily, power, personal network relationships

C. Potential adopters
- differences in beliefs, values, attitudes, behavioral intentions, behavior
- characteristics: demographics, access to information, access to personal networks, pride/face, dignity, expectation of change, previous experience with change, dependence on authority

SESSION FOUR
PUBLIC HEALTH AND BEHAVIORAL CHANGE MODELS

CONTENT OUTLINE

- *three elements of behavioral practice:*
  - antecedents
  - behavior characteristics
  - consequents

- *the normal distribution of adopters/adoption rates: Rogers)*
  - innovators
  - early adopters
  - early majority
  - late majority
  - laggards

D. Characteristics of innovation

- compatibility with current beliefs
- relative advantage of change
- efficiency of change
- how change will affect health, personal relationships
- costs of change
- legal/religious concerns that may impede change
- public reaction to change

E. Types of adoption

- compliance
- identification
- knowledge-based
- internalization

F. Components of adopting behavior:

- *trigger learning*
  - sources:
    - personal
    - nonpersonal
    - adoption experience itself

CONTENT OUTLINE

G. feeling (triggers attitudes)

- influences on feeling:
  - beliefs about outcomes
  - need to be accepted and loved
  - desire for excitement and novelty
  - need for catharsis and acting out
  - need to imitate and match
  - people uncertain about feelingsmay engage in trial adoption to ascertain attitudes toward product and attitude will in part be shaped by:
    - physical surrounding
    - social surrounding
    - time, date, season
    - target perceptions
    - antecedent states

H. Trial adoption determinants

- social, psychological, physical, functional, financial risk
- participation levels
- definition of commitment in adoption

I. Types of resistance (see Zaltman & Duncan)

- **Briefly introduce social marketing as a relatively new social change approach.**

  - Ask students to discuss social marketing projects in their regions and how these differ from other models. Note that social marketing is distinguished by its consumer orientation, but save detailed discussion of the model for next session.

SESSION FIVE
OVERVIEW OF SOCIAL MARKETING

SESSION DESCRIPTION

This session gives students a brief overview of the distinctive features of the social marketing approach, its interdisciplinary nature and the steps used in designing, implementing and evaluating social marketing programs.

TEACHING METHODOLOGY

This session is largely didactic with time allocated for questions and comments.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Discuss the distinctive or defining features of the social marketing approach,
- List the steps in the social marketing process,
- Describe two successful applications of social marketing to nutrition and other related public health issues in Latin America, and
- Examine the potential role of social marketing in a variety of food and nutrition problems (e.g., chronic malnutrition among children living in abject poverty; food fortification; food supplement programs) in their countries.

SESSION FIVE
OVERVIEW OF SOCIAL MARKETING

REFERENCES FOR INSTRUCTOR

Kotler, P. and Andreason, A.R. (1991). Developing a core marketing strategy: segmenting the market, *Social Marketing: Strategies for Changing Public Behavior.* New York: The Free Press.

Fine, Seymore (1990) Introduction to social marketing in Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Israel, R. et al. (1987). Unit I. Seeing what can be done. Operational guidelines for social marketing projects inpublic health and nutrition. *Nutrition Education Series* Issue 14. UNESCO. ED-87/WS/52. Paris

STUDENT ASSIGNMENTS

Read Introduction and Chapter One of the textbook
Read case study and bring questions regarding process to next class session

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION FIVE
OVERVIEW OF SOCIAL MARKETING

CONTENT OUTLINE

1. Lead class discussion of difficulties they have experienced in trying to bring about individual or community level behavior change. Help them identify ways existing health promotion methods/programs have failed to bring about desired change, waste money, waste time, and frustrate change agents. Draw on these examples in remainder of lecture to illustrate need for social marketing.

2. Review the defining features of social marketing and public health communication. Major points to be covered include:

- *Social marketing refers to a social change strategy*
- *The heart of the social marketing approach is its audience centered thinking or consumer orientation.*
- *This approach relies upon research or systematic listening to understand the audience. Because social marketing focuses on the audience, marketers listen to the audience. This requires strong research skills.*
- *Social marketing promotes ideas and causes that are socially beneficial.*
- *Social marketing encompasses "the design, implementation, and control of programs (Kotler and Zaltman: 1971:5).*

3. Discuss the various terms used to describe this approach: Social Marketing, Community Responsive Planning, Health Communication, Development Communication, Communication for Community Development and Change. Ask students to give examples of case studies that they associate with each label and discuss how they are or are not consistent with the defining features of the social marketing approach. For example, was research used to understand consumer needs?

- *Alert students to the inconsistent use of terms in reading assignments. Note that Public Health Communications is used in the text to refer to the same approach called Social Marketing in the course and many readings.*

4. Briefly review each of the disciplines that make up this approach, highlighting the contributions that they make to social marketing: marketing, anthropology, behavioral analysis, mass communication and education.

5. Point out that social marketing is often mistakenly equated with the use of mass media to resolve public health problems but is actually a more far reaching social change strategy that relies upon a carefully coordinated, multifaceted set of activities.
These typically include a mix of:

- *public information*
- *consumer education*
- *professional training*
- *policy development*
- *community-based activities*

SESSION FIVE
OVERVIEW OF SOCIAL MARKETING

CONTENT OUTLINE

6. Use a case study to explain and illustrate the steps in the social marketing process.

A. *planning*
- health problem analysis
  - epidemiological analysis
  - behavior Analysis

- *developmental or formative research*
  - review of recent literature and existing programs.
  - interview staff of exemplary programs and review existing program materials.
  - design research plan
  - collect data
  - analyze data
  - prepare summary of research findings
  - strategy development
    - audience segmentation
    - product strategy
    - pricing strategy
    - promotion: messages and creative strategy
    - place: media plan
    - place: distribution and training plan

- *writing an operational plan*

- *testing materials and strategies*

- *intervention*
  - production
  - training
  - distribution
  - maintenance and institutionalization

- *program monitoring and evaluation*

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION FIVE
OVERVIEW OF SOCIAL MARKETING

CONTENT OUTLINE

Note: *Because the course is covered in the same order as the social marketing process, it is important to be sure students understand the overall process before focusing in detail on each step. This is perhaps best done with case studies. In reviewing the steps for the first time in class, one case study can be used. A different case study can then be assigned as a reading to be completed before the next session. This will give them a second exposure to the steps involved in the process. It is important to select a case study that gives ample data to illustrate the translation of research findings into a strategy dealing with product, price, place and promotion. Because strategy development is the most difficult, and most important aspect of the social marketing process, it is critical to present it clearly in the beginning. Otherwise students may not understand the uniqueness of this behavior change approach, mistakenly equate social marketing with mass media campaigns, and fail to understand the relevance of all 4 P's. Recommended case studies include: the DMD project in Peru, the breastfeeding promotion project in Brazil, the ANEP Project in the Dominican Republic.*

8. **Lead a discussion of potential or existing applications of social marketing approach** to nutrition and other related public health issues in Latin America.

9. **Note that all social marketing programs have not succeeded and point out most common reasons why:** lack of long term commitment, failure to base strategy on research, failure to institutionalize program.

10. **Present students with the topics they may select from for their class project.** Allow them to meet briefly in teams to review their topic.

SESSION SIX
THEORETICAL CONTRIBUTIONS: MARKETING

SESSION OUTLINE

Social marketing differs from its commercial counterpart in its objective to promote products and causes that benefit the people not the producer. However, the marketing principles and practices are the same, and this session examines those principles and practices.

TEACHING METHODOLOGY

This session is largely didactic, with lecture and class discussion.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Discuss the contributions of commercial marketing,
- Discuss the ways in which social marketing differs from its commercial counterpart, and
- Recognize the importance of creating linkages between the public and private sectors.

SESSION SIX
THEORETICAL CONTRIBUTIONS: MARKETING

REFERENCES FOR INSTRUCTOR

Lefebvre, C.R. and Flora, J. A. (1988) Social marketing and public healthintervention. *Health Education Quarterly* 15(3):299-315.

Fine, S. (1990) Product management in social marketing and the parties to the process, In Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Joyce, M. and Morris M (1990) Pricing considerations in social marketing, In Fine, S. *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Bloom, P and Novelli, W. D. (1981) Problems and challenges of social marketing. *Journal of Marketing* 45 (Spring): 79-88.

Kotler, P. and Andreason, A.R. (1991). Developing a core marketing strategy: segmenting the market, In *Social Marketing: Strategies for Changing Public Behavior.* New York: The Free Press.

STUDENT ASSIGNMENTS

Chapter Two in the textbook.
Read *The Story of Fire*, Ahmed el-Bedavid, Tales of the Dervishes

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION SIX
THEORETICAL CONTRIBUTIONS: MARKETING

CONTENT OUTLINE

1. **Discuss the eight components of the marketing perspective that distinguish this approach from most other health education approaches** (Lefebvre and Flora 1988; Kotler and Andreason 1990). **These are:**
   - *Exchange theory plays a central role*
   - *Consumer orientation or audience centered thinking*
   - *Use of market research to develop, monitor and revise program strategies and products*
   - *Audience segmentation*
   - *Channel analysis and selection*
   - *The marketing mix:*
     - Product
     - Price
     - Place (noting need to consider private and public distribution channels)
     - Promotion
   - *Careful marketing management* careful attention to timelines, coordination of diverse activities (public information, consumer education, policy development, professional training and community based activities.
   - *Process tracking or monitoring*

2. **Discuss the ways in which social marketing is different than commercial marketing** and the challenges this can present. Note that private sector channels can be used. Use the class project topic as an example for the following key points:
   - *Social products are often more complex to use than commercial products. (People are frequently asked to change deeply personal, complex behaviors such as dietary habits that must be repeated over a long period of time)*
   - *Social marketers have less flexibility in how products can be modified to meet consumer needs*
   - *Social products are often more controversial or "sensitive"*
   - *Their benefits are often less immediate*
   - *Distribution channels for social products are harder to utilize and control*
   - *The market for social products is more difficult to analyze*
   - *Audiences for social products often have limited resources*
   - *The measure of successful "sales" or adoption of social products is more stringent than for commercial products.*
   - *Social marketers face public scrutiny*
   - *They must meet extravagant expectations*
   - *They are often asked to create demand*
   - *They often target nonliterate audiences*
3. **Discuss the importance of building linkages** between the private and public sector. Ask class to give examples of how this can be done.

4. **Explain assignment** (ask students to bring the food/nutrition analysis conducted during phase one to class. Explain that this will be used to identify problems that are appropriate for a social marketing program.)

SESSION SEVEN
THEORETICAL CONTRIBUTIONS: COMMUNICATION AND ANTHROPOLOGY

SESSION DESCRIPTION

This session is focused on the theoretical aspects of human communication, with particular emphasis on the persuasion process as applied to public health programs.

TEACHING METHODOLOGY

This session is primarily didactic with time allotted for questions and discussion.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Define communication,
- Define the nature of persuasion,
- Differentiate between attitude and behavior change, and
- Describe at least two strategies for persuasion in public health communication.

THEORETICAL CONTRIBUTIONS: COMMUNICATION AND ANTHROPOLOGY

REFERENCES FOR INSTRUCTOR

Albrecht, T.L., Johnson, G., & Walther, J.B. (1993). Understanding communication processes in focus groups. In D. Morgan, (Ed.), *Successful focus groups: Advancing the state of the art.* Newbury Park, CA: Sage.

McGuire, W. (1984). Public communication as a strategy for inducing health promoting behavioral change. *Preventive Medicine,* 13, 299-319.

Sanjur, D. (1980). Parametros Ambientales y socioculturales que Afectan la Alimentacion in los Paises del Tercer Mundo, In *Archvos Latin Amenicanos de Nutricion.* 4

Petty, R.E., & Cacioppo, J.T. (1981). *Attitudes and persuasion: Classic and contemporary approaches.* Dubuque, IA: Wm. C. Brown.

Burgoon, J.K., Burgoon, M., Miller, G.R., & Sunnafrank, M. (1981). Learning theory approaches to persuasion. *Human Communication Research,* 7, 161-179.

Zaltman, G., & Duncan, R. (1977). *Strategies for planned change.* New York: Wiley-Interscience.

Freimuth, V.S. (1987). The diffusion of supportive information. In T.L. Albrecht, M.B. Adelman, & Assoc., *Communicating social support* (pp. 212-236). Newbury Park, CA: Sage.

Bryant, C., et al. (1985). *Introduction to food and society: The cultural feast.* St Paul: West Publishing Co. (Chap. 9).

Kotler, P. & Andreasen, A. (1991). *Strategic marketing for nonprofit organizations.* New Jersey: Prentice-Hall.

STUDENT ASSIGNMENTS

Read Chapter Two in textbook

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION SEVEN

THEORETICAL CONTRIBUTIONS: COMMUNICATION AND ANTHROPOLOGY

CONTENT OUTLINE

1. Clarify the following definition:

- *(Albrecht): Communication is "a transactional, symbolic process of mutual influence that occurs between two or more individuals that alters their affective, cognitive, or behavioral states."*

2. Key points:

A. *communication occurs within a structure of relationships;* interaction between people never occurs in a vacuum apart from a larger system; rather, people are linked in networks to others outside the encounter.The norms, values and speech patterns of those networks reinforce the effects of the interaction and also counteract against the messages given and received/

B. *communication can occur on two levels:*
- a content level (the information being given about food/nutrition practice)
- a relational level (people develop trust, distrust, face, shame, affinity or dissociation/repulsion—generally based in attributions made through reading nonverbal cues) in encounters

C. *health communicators need to project credibility:*
- trustworthiness
- competence
- dynamism

D. *message channels*
- vary in number and type of sensory modalities
- most cues/stimuli read in face to face exchanges, lessens as the channel becomes increasingly mediated
- vary in when/where they reach you in daily routine
- other ways channel vary

E. *audience*
- consider demographics
- patterns of information processing
- ego strength
- personality traits
- ability to give feedback, seek information, understand and participate in process
- evaluate relevant cultural patterns in health beliefs, practices, attitudinal dispositions

F. *persuasion* is the process of altering beliefs, attitudes, values and/or behavior(action—needs to be distinct from "behavioral intention").
- *a change in one does not presuppose a change in any other* (e.g., self report of attitude or intent to adopt new eating pattern does not necessarily mean behavior will follow—often does not)

G. *Key points about promoting health programs:*
- most personal opinions formed through communication with others, not in isolation
- individuals make decisions about various actions based on reactions that significant others will have to their actions
- social interaction affects opinion formation and opinion articulation through three processes:
  - *compliance*—responding in ways one believes he/she is expected to respond in anticipation of some reward
  - *identification*—participant's opinion is similar to someone with whom he/she seeks solidarity
  - *internalization*—participants report opinions that are deeply ingrained and personal (potentially most valuable)
- may need to hear things through different channels many times over time.

3. Persuasive Messages:

A. *Address:*
- need for program
- describe the plan
- discuss how plan will meet the need
- describe and address costs (financial, behavioral, attitudinal, cultural, etc.)

B. *Learning theory approaches*
- classical conditioning of stimulus-response
- learning to associate positive and negative attributes with object; includes understanding of message facts/arguments and developing appropriate emotional responses through conditioning (Petty & Cacioppopi; Burgoon et al.)
- inoculation theory: receivers who are "inoculated" with weak counter arguments against the position already held will develop their own supporting arguments, thus resisting subsequent attacks.
- learning processes need rewards to be effective; motive and reward appeals need to be audience specific
- simple messages more effective when presented orally, visually
- complex messages best through multiple channels with follow up.

C. *Elaboration likelihood model of attitude change* (Petty & Cacioppopi)
- see diagram from p. 264 of the manual
- enduring attitude change relies on likelihood that issue or argument will be elaborated upon — e.g., thought about in ways that fix and integrate the messages internally

SESSION SEVEN
THEORETICAL CONTRIBUTIONS: COMMUNICATION AND ANTHROPOLOGY

CONTENT OUTLINE

4. Have students work in groups to:

- *Identify at least three preexisting attitude and behavior patterns for a given targeted population* for a nutrition program.
- *Explain how these disciplines help us to better select and train effective change agents* in a given "foreign culture" (Kotler & Andreasen, 1991).

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION EIGHT
THEORETICAL CONTRIBUTIONS: BEHAVIORAL ANALYSIS

SESSION DESCRIPTION

This section reviews the components of behavioral analysis, barriers to changing behavior, and provides for practice in analyzing a behavior.

TEACHING METHODOLOGY

This session is comprised of lecture and class discussion.

LEARNER OBJECTIVES

By the end of the session, the learner will be able to:

- Identify the contributions of behavioral analysis to public health communication,
- Review the key elements of behavioral analysis,
- Determine barriers to successfully changing behaviors,
- List the evaluation criteria, and
- Participate in analyzing a health behavior.

SESSION EIGHT
THEORETICAL CONTRIBUTIONS: BEHAVIORAL ANALYSIS

REFERENCES FOR INSTRUCTOR

Smith, N., Pareja, R., & Booth, M.E., touchette P. A.E.D. *Behavioral analysis applied to health communications.* Field Note 3, 1981. Healthcom Communication for Child Survival. Field Notes, 1985.

Healthcom Project, *Selecting Messages and Improving Instruction and Health Practice Studies.*

AED. (1987). *Public Health Communication Model.*

STUDENT ASSIGNMENTS

Read Chapters Two and Three of text.

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION EIGHT
THEORETICAL CONTRIBUTIONS: BEHAVIORAL ANALYSIS

CONTENT OUTLINE

1. **Review contributions of behavioral analysis to public health communication:**

   A. altering existing behavior

   B. creating new behaviors by:
   - increasing precision of desired behavior
   - ensuring long term maintenance
   - promoting trials of beneficial new practices

   C. assumptions
   - *behavior shaped by consequences
   - *behavior amenable to change

3. **Selecting Target Behaviors:** discuss reasons for absence of desirable behaviors

   - *absence of skills or necessary knowledge*
   - *inability to identify when skill or practice is necessary*
   - *lack of available resources or materials (cost)*
   - *no positive consequences for engaging in desired behavior*
   - *existence of positive consequences for engaging in incompatible behavior*
   - *existence of punishing consequences which may discourage the desired behavior pattern*

4. **Present examples of behavioral analyses** (hand washing; home gardening; etc.):

5. **Review and explain evaluation behavior criteria** (exhibit IV-C-1 in textbook, p 7):
   - *health impact*
   - *positive consequences*
   - *cost of engaging*
   - *compatibility with existing practices*
   - *complexity of behavior*
   - *frequency of behavior*
   - *persistence*
   - *observability*
   - *approximations available*

SESSION NINE
COMMUNICATION EXERCISES AND TEAM BUILDING

SESSION DESCRIPTION

This session is an overview of team building principles for developing a strong and successful social marketing group.

TEACHING METHODOLOGY

This session is partially didactic with most of the time allocated for discussion and team building exercises.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Know what kind of technical skills and disciplines are needed on a team and where to look for this kind of talent if you don't have it in house,
- Describe the characteristics of a successful, professional team,
- Understand several key communication dynamics of the team building process, and
- Apply principles of team building for creating a successful team structure.

SESSION NINE
COMMUNICATION EXERCISES AND TEAM BUILDING

REFERENCES FOR INSTRUCTOR

Larson, C.E., & FaFasto, F.M.J. (1989). *TeamWork:what must go right/what can go wrong.* Newbury Park, CA: Sage.

Versoza, Cabanero C. A.E.D. Report of the Sixth International Conference of the International Planners Forum, (1991). *Effective nutrition communication for behavior change.* Nutritionists and Communicator's can work together: nutrition interventions in Peru and Nigeria.

STUDENT ASSIGNMENTS

None

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION NINE
COMMUNICATION EXERCISES AND TEAM BUILDING

CONTENT OUTLINE

1. **Teams are Multidisciplinary**

   A. Goals
   - most important characteristic of a goal is clarity
   - teamgoals should be "elevating": is personally challenging and performance itself makes a difference (and creates a sense of urgency)

   B. Team Failure
   - teams fail because team goals are subsumed by politics and personal agenda

2. **Team Structure:**

   A. Four necessary features:
   - clear roles and accountabilities
   - effective communication system (information is easily accessible, from credible sources, opportunities exist for members to raise issues not on the agenda)
   - individual performance is monitored and feedback provided
   - sound judgments and decision making are based largely on facts, evidence

3. **Competencies of Team Members:**

   A. Types of competencies
   - technical knowledge, skills, abilities
   - personal characteristics (qualities, skills, abilities to identify, address and resolve issues and work well with others)

   B. Common features of competent team members
   - essential skills and abilities
   - strong desire to contribute
   - capability of collaborating effectively

4. **Team Climate:**

   A. A climate of trust
   - trust allows team to stay problem-focused
   - promotes efficient communication and coordination
   - improves quality of collaborative outcomes
   - leads to compensating

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION NINE

COMMUNICATION EXERCISES AND TEAM BUILDING

CONTENT OUTLINE

5. Team standards for performance:

A. Common features of standards for excellence

- establish set of standards that include other variables: individual commitment, motivation, self esteem, performance
- require one another to perform according to the standards
- team should make changes to improve standards

6. Principled leadership and membership:

A. Leadership commitment

- avoid compromising team goals with politics
- show personal commitment to goals
- don't overload team with excessive priorities
- social justice for team members
- willing to surface, confront, resolve issues
- be open to innovative ideas, information from members

B. Members' commitment

- show realistic understanding of role/accountabilities
- make objective/fact-based decisions
- collaborate effectively with other team members
- subsume personal goal under team goal
- devote effort for success
- share information
- provide help to others
- have high standards for performance
- support team decisions
- show courage of conviction
- demonstrate leadership for team success
- respond constructively to others' feedback

SESSION NINE
COMMUNICATION EXERCISES AND TEAM BUILDING

CONTENT OUTLINE

Student Assignment:

Divide students into small (5-6) groups. Have students discuss the following questions:

- *From your experiences, what are the biggest obstacles to team work in a health care campaign?*
- *Create an "elevating" goal for a social marketing team in your community.*
- *Explain to your group your own principles of leadership and the competencies you will bring to a team.*
- *Be specific.*

SESSION TEN
ETHICS OF BEHAVIORAL CHANGE

SESSION DESCRIPTION

Students are given an opportunity early in the course to consider the ethical issues involved in social marketing and other social change programs.

TEACHING METHODOLOGY

This session is largely interactive with the instructor presenting concepts and facilitating a group discussion.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Enumerate ethical issues associated with social marketing and other social change approaches,
- Create a set of ethical guidelines that can be used in designing and implementing social marketing projects, and
- Correctly identify appropriate and inappropriate applications of the social marketing approach.

SESSION TEN
ETHICS OF BEHAVIORAL CHANGE

REFERENCES FOR THE INSTRUCTOR

Fine, S. (1987) Social and nonprofit marketing: some trends and issues. In Belk, R., (ed.), *Advances in Nonprofit Marketing,* 2nd ed., Greenwich, CT: JAI Press, pages 71-98.

Kent, G., (1981) Nutrition education as an instrument of empowerment. *Journal of Nutrition Education* 20 (4) 80-89.

Murphy, P. E., Bloom P. N (1990). Ethical issues in social marketing. In Fine, S. *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Salmon (ed.) (1989). *Information campaigns: balancing social values and social change.* Chapter I. Newbury Park, California, Sage Publications.

Wallack L. (1990). Improving health promotion: media advocacy and aocial marketing approaches. Atkin and Wallack (eds) *Mass Communication and Public Health.* Newbury Park, California, Sage Publications.

STUDENT ASSIGNMENTS

Bring a list of food/nutrition problems from the home country to be used in class for discussion of ethical issues.

MODULE II: CONTRIBUTIONS OF OTHER DISCIPLINES TO SOCIAL MARKETING

SESSION TEN
ETHICS OF BEHAVIOR CHANGE

CONTENT OUTLINE

1. Discuss the importance of ethics:

- *Fairness is central to the concept of exchange.*
- *A successful exchange requires that the consumer truly benefits.*
- *Social marketing, like all forms of social change, involves values. Whose values will be given priority?*
- *Social marketing, like other forms of social change, involves the use of power and has a tremendous potential to do harm.*
- *Social marketing gives people access to information, new ideas, and services. How are decisions made about who gets access to this information?*
- *Social marketing can be used to empower or manipulate.*

2. Review six "theories" of ethics and their implications to social marketing:

- *Natural law* - peoples' right to self-determination. Will the program give the government the right to make decisions on behalf of individuals? Do people have access to resources (food, knowledge) to support the recommended choice? Can social marketing be used to identify consumers concerns and design programs that reflect their decisions rather than those of the government?

- *Utilitarianism* - greatest good for the greatest number. Will the cost of the program use funds that could be better spent on other approaches or topics? Will the program serve as an inappropriate substitute or distraction from needed political change?

- *Paternalism* - governments and other institutions have the right to intervene if they are advancing the good of society. How can social marketers be sure that their "products" are good? Is the program fostering dependence or self sufficiency/self determination?

- *Distributive Justice* - both rewards and burdens should be shared by all citizens. This theory supports the use of public funds to distribute programs and information to groups in need. What are the rewards? Burdens? Who is served?

- *Moral rights* - justifiable claims or entitlement such as those embodied in law. This requires social marketers to be truthful and respect rights of individuals. Is the program informing consumers of the side effects of products being promoted?

- *Virtue* - Certain virtues such as honesty, compassion, loyalty, and justice are considered in evaluating the means as well as the ends. Are the messages offensive to some people? Can the use of fear be justified if it is contributing to consumer paranoia?

- *(Optional: Omit discussion of "theories" and present these as a list of questions or ethical issues to consider)*

SESSION TEN
ETHICS OF BEHAVIOR CHANGE

CONTENT OUTLINE

3. **Discuss generic ethical problems for social marketers** (see Murphy and Bloom 1990):

   - *how to ensure that social marketing is fair*
   - *how to make it empowering rather than manipulative*
   - *how to identify and prevent unintended, negative consequences such as cynicism, reinforcement of stereotypes, etc.*
   - *how to prevent social marketing from becoming intrusive and offensive*

4. **Using the questions that emerge from previous discussion, examine the ethical concerns associated with the class project.**

   - *Ask students to be aware of ethical concerns that emerge as they develop their social marketing plan. Inform them that they will be given another opportunity at the end of the class to discuss these concerns.*

5. **Lead a discussion in which students learn to recognize the dangers that result from using social marketing for inappropriate topics.**

   - *Ask them to list the major food/nutrition problems identified in their countries. Then have them discuss which problems are appropriate to approach through social marketing.*

6. **Lead a discussion in which students identify the ethical constraints associated with social marketing.**

   - *Refer to appropriate and inappropriate examples listed previously and reinforce the need to avoid using social marketing to mask political inaction or distract people from the need for more radical forms of social change. (An example is the fortification of sugar with vitamin A).*

7. **Lead a discussion in which students identify ethical guidelines that they can use in designing and implementing social marketing programs**

   - *(e.g., products must be available, needed and truly beneficial; consumers must be given information about the disadvantages/side effects as well as advantages).*

MODULE III: PLANNING AND RESEARCH

SESSION ELEVEN
HEALTH PROBLEM ANALYSIS

SESSION DESCRIPTION

This session reviews how to analyze the health problem to be addressed. Discussions center around using existing data, contributions of epidemiologic research and use of behavior analysis and behavioral profile. Students will do a behavioral analysis and profile using their case study.

TEACHING METHODOLOGY

This session briefly reviews concepts related to health problem analysis, but primarily is a working session where students are guided through the process of behavioral analysis using their case study.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Present various approaches about the importance of health problem analysis in planning effective public health communication/social marketing projects,
- Discuss the role of epidemiology in analyzing health problems,
- Review the components of behavior analysis, and
- Complete a behavioral analysis and profile using case study.

SESSION ELEVEN
HEALTH PROBLEM ANALYSIS

REFERENCES FOR INSTRUCTOR

AED. (1987). *Public health communication model.* Document from the Nutrition Education Project. p 77.

Healthcom Project. *Selecting messages and improving instruction and health practices studies.*

Office of Cancer Communications (1989). *Making health communication programs work: A planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

McGuire,W. (1984) Public communication as a strategy for inducing health promoting behavioral change. *Preventive Medicine,*13, 299-319.

STUDENT ASSIGNMENTS

Summarize epidemiological data from case study and bring to class.
Review Chapter Three in text.
Optional: field assignment (see session outline)

MODULE III: PLANNING AND RESEARCH

SESSION ELEVEN
HEALTH PROBLEM ANALYSIS

CONTENT OUTLINE

1. **Discuss the importance of health problem analysis as key step in planning a communication program.**

   - *Enables identification of attributes of the behaviors under study. This will be critical later in identifying message content and in designing instructional strategies.*

2. **Review general questions that should be asked in this phase of planning.** Apply these questions to case study for discussion.

   - *What is the health problem to be addressed?*
   - *Who is affected and how?*
   - *Are they aware?*
   - *Wo is interested in the problem?*
   - *What activities have been addressing the problem?*
   - *Are the media doing anything?*
   - *What can we say or do to alleviate the problem and to whom?*
   - *Wat do we want to accomplish?*
   - *What resources are available?*

3. **Discuss the types of data and information you should have to complete a health problem analysis.**

   A. Description of the problem
   - incidence
   - effects on individual and the community
   - causes and preventive measures
   - current solutions, treatments, remedies

   B. Description of who is affected (potential target audiences)
   - age, sex, ethnicity, places of work and residence
   - causative/preventive factors
   - related KAP's (Knowledge, Attitudes and Practices)
   - patterns of use of health related services
   - media preferences and habits
   - information sources considered credible by target audience

SESSION ELEVEN
HEALTH PROBLEM ANALYSIS

CONTENT OUTLINE

4. Review the types of data collection that is necessary to acquire the above information.

A. *Available data:*
- sources: epidemiological studies, census records, community records, birth records, agency records, etc
- advantages: less costly and time consuming, multiple measures of a single variable,
- disadvantages: may be obsolete, lack of a direct fit, lack of knowledge on how data was collected

B. *Epidemiological analysis* (Israel, p 19; text, p 22-23)
- definition and description
- uses: when there is a need to understand the nature and prevalence of health-related problems among the target population
- essential when social marketing intervention is intended to specifically improve the health status of a community
- allows documentation of morbidity/mortality patterns
- most useful where data is lacking, e.g., developing countries and rural areas

C. *Behavioral analysis*
- review concepts of behavioral analysis
- refer to page 24 of text for detailed list of behaviors and categories as a model.
- lead a discussion in which students apply behavioral design principles to at least five of the categories on page 24 of text.
- lead class discussion and exercise in which students begin to identify the specific behaviors involved in their topic. Have student list research questions that will be generated.

(Optional :students could break into small groups and design a model(s) for their case study. Have students refer to figure 3-1 and 3-2 in text as a sample).

- a recommended assignment is for students to do a behavioral profile on their case study after completing the group assignment above.

- another recommended assignment is to participate in a field experience that gives direct experience with behavior you are attempting to change (use clinic services, make food purchases and prepare the weaning food at home, observe a woman as she makes traditional weaning foods to get a better idea of discrete behaviors that comprise overall behavior, etc.

MODULE III: PLANNING AND RESEARCH

SESSION TWELVE
FORMATIVE RESEARCH: AN OVERVIEW OF RESEARCH DESIGN

SESSION DESCRIPTION

This module provides an overview of various research methods used in social marketing planning process. Both qualitative and quantitative methods are explored. Students should review basic material from their research course.

TEACHING METHODOLOGY

This session is largely interactive with the instructor leading a discussion to assist students in designing the planning research. A matrix format or set of questions will be used to guide students in considering the appropriateness and limitations of each design strategy, and methods.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Describe the goals of planning research,
- Enumerate various research designs and their advantages and disadvantages for planning research,
- Identify the uses of qualitative and quantitative research methods in public health communication,
- Identify resources available at the local leve, and
- Discuss the coordination issues related to the research planning phase.

SESSION TWELVE
FORMATIVE RESEARCH: AN OVERVIEW OF RESEARCH DESIGN

REFERENCES FOR INSTRUCTOR

Israel, R., et al. (1987). Operational guidelines for social marketing projects in public health and nutrition. *Nutrition Education Series* Issue 14, UNESCO.

Debus, M. *Handbook for excellence in focus group research.* Washington: AED. Section 1 and 2.

Public health communication model. (1987). AED. p 78-82.

Making health communication programs work.(1989). NIH.

STUDENT ASSIGNMENTS

Read sections One and Two of Debus.
Read Chapter Four in text.

MODULE III: PLANNING AND RESEARCH

SESSION TWELVE
FORMATIVE RESEARCH: AN OVERVIEW OF RESEARCH DESIGN

CONTENT OUTLINE

1. **Review definitions and uses for planning research.**(Israel)

   A. Panning research-goals
   - to establish measurable behavior change objectives and goals
   - collect baseline information on target audience
   - knowledge, attitudes and practices (consumer orientation important)

   B. Planning research facilitates the social marketing process by identifying: the target audiences
   - the health status bench marks
   - KAP's
   - adoption motivating factors
   - how health information gets transmitted among community members

   C. Research considerations
   - clear objectives (questions)
   - a strategy that will elicit responses from the target sample in a consistent manner
   - objective documentation of respondents' answers and comments
   - staff and organizational resources to fully implement the research protocol
   - timely feedback of useful information to project personnel (Kotler and Andreasen in Lefebvre p 7)

2. **Discuss what information (facts) should be gathered** (AED, p 78-80).

   - *facts about the caretaker or consumer*
   - *facts about the provider*
   - *facts about the service delivery system*
   - *information about media*
   - *information about government and program policies*
   - *information about background influences and constraints*

SESSION TWELVE
FORMATIVE RESEARCH: AN OVERVIEW OF RESEARCH DESIGN

CONTENT OUTLINE

3. Provide overview of formative research strategies.(Debus)

- *Overview of differences between qualitative and quantitative research*

Qualitative	Quantitative
• provides depth of understanding	• measures level of occurrence
• asks "why"	• asks "how many" & "how often"
• studies motivations	• studies actions
• is subjective	• is objective
• enables discovery	• provides proof
• is exploratory	• is definitive
• allows for insights into behavior, trends	• measures level of actions, trends, etc
• interprets	• describes

4. Briefly mention various research techniques and designs. Discuss the appropriate use and sequencing of each technique as used in social marketing planning research. These methods will be discussed further in later sessions.

- *individual in-depth interviews*
- *focus groups*
- *ethnographic studies*
- *behavior observations*
- *surveys/structured interviews*
- *central location intercept interviews*

5. Discuss research benefits of qualitative planning research.

- *allows for high participation of community*
- *can uncover socio-cultural barriers to change*
- *help understand the community's conceptual universe*
- *helps understand the motivation and perceptions of the target audience*
- *its exploratory nature allows for continuous feedback*

- *enhances the validity and reliability of quantitative research instruments*
- *generates hypotheses/identifies problem (about target population's KAP's) for testing by quantitative means*
- *helps define ways in which a behavior or product is positioned*
  - cause of health problem
  - attributes of a desired cure
  - resistance points
- *allows information to be obtained from small "elite" groups*

6. Review pragmatic benefits of qualitative research.

- *cost*
- *timing*
- *flexibility*
- *direct link with target public*
- *technical facilities unnecessary*

7. Discuss the benefits of quantitative data.

- *valuable base line for tracking changes as a result of the intervention*
- *information for setting priorities*
- *information about segments within a target population who are more in need of attention*

8. Discuss procedures and methods of obtaining research data in students' own community settings.

- *barriers-especially cultural*
- *time lines*
- *resources*
- *costs*
- *monitoring data collection*

9. Begin to discuss with the students the feasibility of applying the various research methods to their case studies by at least addressing:

- *research questions*
- *selection of research method and design*
- *sample size and target population*
- *time tables*
- *costs*
- *research data collector issues*
- *monitoring and managing data collection*

SESSION THIRTEEN
QUALITATIVE RESEARCH METHODS I: PARTICIPANT OBSERVATION, IN-DEPTH INTERVIEW

SESSION DESCRIPTION

This session covers the use of participant observation and in-depth interviews as qualitative research techniques. Students should review previous research course content.

TEACHING METHODOLOGY

This session is both didactic presentation and small group work. Students will practice developing an interview guide.

LEARNER OBJECTIVES

By the end of the session, the learner will be able to:

- Discuss the uses of participant observation and in-depth interviewing in social marketing planning research,
- Identify the components of participant observation and in-depth interviews,
- Discuss the advantages and disadvantages of the different types of qualitative research methods,
- .Be familiar with conducting interview and participant observation techniques,
- Write an interview guide,
- Conduct an in-depth interview, and
- Use participant observation skills by observing a clinic system, market place, etc.

SESSION THIRTEEN

QUALITATIVE RESEARCH METHODS I: PARTICIPANT OBSERVATION, IN-DEPTH INTERVIEW

REFERENCES FOR INSTRUCTOR

Debus, M. (1990). *A handbook for excellence in focus group research.* AED.

Fetterrman, D. (1989) *Ethnography: step by step.* Newbury Park, Sage.

STUDENT ASSIGNMENTS

Conduct an in-depth interview using the guide developed in class or provided by the instructor. Bring a transcript of interview to session twelve.

Observe in a clinic setting, marketplace, or other relevant setting. Take field notes and bring to session twelve.

Review pages 32-36 in text.

MODULE III: PLANNING AND RESEARCH

SESSION THIRTEEN

QUALITATIVE RESEARCH METHODS I: PARTICIPANT OBSERVATION AND INDEPTH INTERVIEWS

CONTENT OUTLINE

Sections 1-3 may not need to be reviewed thoroughly if students are familiar with qualitative methods from previous classes.

1. Discuss ethnographic methods (Israel, p 11 and 31).

- *definition-observation and key informant interviews*
- *benefits: in-depth knowledge of prevailing health practices that are normally hard to obtain*
- *selecting key informants*
- *ethnographic interview style*

2. Briefly review key elements of observational studies.

- *useful where no other technique or tool will supply desired information*
- *used to analyze the target audience*
- *to observe socio-demographic and psychographic segmentation*
- *to observe various delivery or promotional programs*
- *review with students observation assignment.*

(Option: two students conduct observation together, but independently, and then compare and contrast findings.)

3. Discuss uses and components of in-depth interviews-unstructured.

A. Definition

- used to uncover feelings and attitudes
- use open-ended questions-broad to more specific
- questions adjusted to needs of situation

B. In-depth interviews are appropriate when (Debus):

- complex subject matter and knowledgeable respondents
- highly sensitive subject matter
- geographically dispersed or hard to reach respondents
- peer pressure/social desirability

C. Mechanics of interview

- developing the guide

- using experienced interviewers
- time allotment

D. *Pitfalls to keep in mind:*
- there may be substantial variation in the interview setting.
- there may be a large gap between the respondent's knowledge and that of the interviewer
- feedback is limited

E. *Appropriate interviewer behaviors:*
- accurately receive information
- accurately recall information
- critically evaluate information
- sensitive to needs of client
- acting upon information in order to alter interview as needed.

F. *Review assignment of developing interview guide and conducting interview. Allow class time to begin development of interview guide*

(Option: for assignment: students could tape their interview and write summary ,two students could do guide together and each conduct an interview with the other observing. The observer will then review/critique the interviewer's verbal and nonverbal behavior.)

SESSION FOURTEEN
QUALITATIVE RESEARCH METHODS II: FOCUS GROUPS

SESSION DESCRIPTION

This session is an overview of focus group research and techniques. Students should review previous research course content.

TEACHING METHODOLOGY

This session uses presentation of didactic content related to focus group research with time for discussion of developing focus group protocols.

LEARNER OBJECTIVES

By the end of the session the learner will be able to:

- List the uses of focus group research,
- Discuss the advantages and disadvantages of focus groups,
- Identify key decisions to be made when implementing focus group research,
- Be familiar with using focus group techniques, and
- Discuss issues related to analysis of focus group research.

SESSION FOURTEEN
QUALITATIVE RESEARCH METHODS II: FOCUS GROUPS

REFERENCES FOR INSTRUCTOR

Debus, M. (1990). *A handbook for excellence in focus group research.* AED.

Israel, R., et al. (1987). Unit VII: Formative and summative evaluation. Operational guideline for social marketing projects in public health nutrition. *Nutrition Education Series* Issue 14. UNESCO. ED-87/WS/52. Paris.

Krueger, R. (1988) *Focus groups: A practical guide for applied research.* Newbury Park, Sage.

Morgan, D. (1988) *Focus groups as qualitative research.* Newbury Park, Sage.

Bryant, C. A. and Bailey, D. (1990) The use of focus groups in program development. *National Association of Practicing Anthropologist Bulletin* 10:24-39.

Goldman, A. E. and McDonald S. S. (1987) *The group depth interview: principles and practice.* Englewood Cliffs, New Jersey: Prentice Hall, Inc.

STUDENT ASSIGNMENTS

Read Debus

MODULE III: PLANNING AND RESEARCH

SESSION FOURTEEN
QUALITATIVE RESEARCH METHODS II: FOCUS GROUPS

CONTENT OUTLINE

1. Review key points about focus groups.

A. Definition

- group interviewing based on theory of social interaction
- exploratory technique to understand language and terminology, insight into KAP's, motivations of groups
- also used to test messages, products and services
- used to stimulate a discussion that functions to simulate a microcosm of the larger community

B. Advantages

- allows emergence of suppressed themes
- relatively small sample needed
- less expensive than quantitative surveys
- less threatening to some clients/consumers
- helps clarify ideas of which there is a consensus in the community

C. Dsadvantages

- highly dependent on skill of moderator
- cannot use to make reliable quantitative estimates
- not useful to determine variation of opinion within a community
- requires skill in interpreting results

D. Implications for conducting focus group research

- moderator role be given critical consideration:competence, style, knowledge of subject, experience, acceptance by members of the group (recommend that table 1 on p 20 of Israel be used)
- several threats to validity exist related to the communication phenomenon: social desirability, low levels of trust, face/politeness needs, researcher bias and deception
- implications of appropriate sampling: number, group size, demographic composition have implications for language choices, cultural ways of speaking and disclosure levels.
- third world problems may impede successful use of focus groups. Have students discuss possible problems from their experiences.

2. Discuss the process of developing a topic (protocol) guide (Debus). Select a nutrition topic, e.g., DMD.

- *What is a topic guide?*
- *how to prepare a topic guide (Review Table 4-1 and 4-2 in Debus)*
- *what to include*
- *show class various types of protocols and discuss*

MODULE III: PLANNING AND RESEARCH

SESSION FOURTEEN
QUALITATIVE RESEARCH METHODS II: FOCUS GROUPS

CONTENT OUTLINE

(Option: review the "tricks of the trade"in Debus, p 6.)

- *discussion of what is a good protocol and need for managers to have input into protocol development.*

3. **Discuss need for appropriate analysis of focus groups.** Although this course does not have the time for an in-depth look at analysis, review issues related to procuring qualified personnel to do so, time lines, identifying themes, writing reports.

4. **Practice developing protocol** (can use students' case study topic)

SESSION FIFTEEN
QUALITATIVE RESEARCH METHODS III: INTERPRETATION

SESSION DESCRIPTION

This session introduces students to methods for summarizing and interpreting qualitative data.

TEACHING METHODOLOGY

This class is comprised of lecture and class discussion.

LEARNER OBJECTIVES

By the end of the session participants will be able to:

- Discuss the principles of analyzing qualitative research,
- Explain the steps in the analysis process,
- List the most common mistakes in analysis, and
- Discuss components of quality reports.

SESSION FIFTEEN
QUALITATIVE RESEARCH METHODS III: INTERPRETATION

REFERENCES FOR THE INSTRUCTOR

Debus, M. (1990). *Handbook for excellence in focus group research.* Washington, DC.: Academy for Educational Development.

Bryant, C. A. and Bailey, D. (1990) The use of focus groups in program development. *National Association of Practicing Anthropologist Bulletin* 10:24-39.

Goldman, A. E. and McDonald S. S. (1987) *The group depth interview: principles and practice.* Englewood Cliffs, New Jersey: Prentice Hall, Inc.

Krueger, R. A. (1989 *Focus groups: a practical guide for applied research.* Newbury Park, California: Sage Publications, Inc.

STUDENT ASSIGNMENTS

Read Debus
Develop protocol guide

MODULE III: PLANNING AND RESEARCH

SESSION FIFTEEN
QUALITATIVE RESEARCH METHODS III: INTERPRETATION

CONTENT OUTLINE

1. Discuss the principles of analyzing qualitative research

- *analysis is an ongoing continuous process*
- *good analysis can't help bad data*
- *there is no absolute "right" way to analyze*
- *quality improves with feedback from moderator team, participants, clients, etc.*
- *relax and enjoy: immerse yourself in data and let your brain do the work..*

2. Discuss need for appropriate analysis of focus groups. Although this course does not have the time for an indepth look at analysis, review issues related to procuring qualified personnel to do so, time lines, identifying themes, writing reports.

3. (Option: Explain the steps in the analysis process.)

- *Reread all transcripts or listen to all cassettes at one sitting.*
- *Make notes of potential trends and patterns.*
- *Read all sorted passages for one category.*
  - consider the words
  - consider the context
  - consider the internal consistency
  - consider the specificity of responses
- *It may be necessary to separate results by different respondent qualifications (teens vs. older women; users vs. non-users, breast- vs. bottle-feeders)*
- *Write statements summarizing the major points or themes.*
- *Note different points of view and assess the strength of each.*
- *Pull out quotations that best represent each position.*
- *Synthesize the group discussion.*
- *Create an overall, global synthesis.*
- *Find the big ideas.*
- *Consider the purpose of the report.*

4. Discuss the most common mistakes in qualitative analysis:

- *quantifying results*
- *taking respondents' comments at face value*
- *failing to synthesize and conceptualize findings*

MODULE III: PLANNING AND RESEARCH

SESSION FIFTEEN
QUALITATIVE RESEARCH METHODS III: INTERPRETATION

CONTENT OUTLINE

5. Discuss methods for reporting qualitative findings:

- *consider the audience*
- *consider the purpose*

6. Review the structure and content of a focus group report.

7. Distribute folders containing sorted passages and explain assignment for next session (to analyze the data and prepare a brief report of the findings for that topic).

8. Discussions of what comprises a good qualitative report. What to demand from marketing researchers. Distribute copies of good and bad reports for review and discussion. For example, use reports that are overly academic and difficult to translate into recommendations as well as those that are easily interpreted. Note need to review previous reports in selecting research teams. Discuss other issues associated with locating and selecting research teams.

SESSION SIXTEEN
FIELD WORK

SESSION DESCRIPTION

This session is a review of students results of interview and participant observation experiences as well as focus group .

TEACHING METHODOLOGY

This session uses primarily discussion of students' reactions and perceptions of field assignment.

LEARNER OBJECTIVES

At the end of the session the learner will be able to:

- Appreciate the skills necessary for conducting qualitative research,
- Analyze how research data links to the 4 P's,
- Describe third world realities which weaken the effectiveness of qualitative techniques and discuss ways of resolving these issues, and
- Discuss the coordination of qualitative planning research.

SESSION SIXTEEN
FIELD WORK

STUDENT ASSIGNMENTS

Prepare written document of field work.

MODULE III: PLANNING AND RESEARCH

SESSION SIXTEEN
FIELD WORK

CONTENT OUTLINE

1. **Discuss students' experiences doing interviews and participant observations.**

2. **Various methods can be used to give students practice developing a protocol.**

   - *Critique segments of video or audio tapes of focus groups.*
   - *Have students come to class with a draft that was prepared in small groups. Each group present their protocol and have class — critique it.*
   - *Present copies of protocols and have students critique them.*
   - *Instructor will present a beginning draft of protocol and students will develop it further.*
   - *Students will practice (role play) a focus group discussion, each taking turns being moderator.*
   - *Students conduct a focus group using each other as participants. This could be tape recorded and transcribed to be used in next class.*
   - *Encourage students to evaluate each other conducting a group (use evaluation form in Debus).*

3. **Discuss with the students the issues related to difficulties of conducting qualitative planning research for social marketing campaigns in their own countries.**

4. **Review coordination issues:**

   - *time lines*
   - *training and monitoring of personnel to collect data*
   - *access to computers and analysis*
   - *making sure data results are linked with and or drive quantitative research*
   - *equipment needs eg tape recorders,etc*

MODULE III: PLANNING AND RESEARCH

SESSION SEVENTEEN
OTHER QUALITATIVE RESEARCH METHODS

SESSION DESCRIPTION

This session does not attempt to provide an in-depth lock at quantitative research mthods, but rather introduce participants to the basic issues involved in planning and coordinating this type of research activity. Special emphasis is given to survey design. Students are expected to review materiais from previous research course.

TEACHING METHODOLOGY

The session is largely didactic presentation of quantitative research methods.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- .List appropriate uses of quantitative research techniques,
- List methods commonly used to collect quantitative data for public health communication projects.
- List the advantages and disadvantages of surveys in development research,
- Discuss methods for determining sampling method and size,
- List the steps in the development of an instument,
- Develop a structured interview instrument that reflects sound survey design principles, and
- Discuss coordination of survey research.

SESSION SEVENTEEN
OTHER QUANTITATIVE RESEARCH METHODS

REFERENCES FOR THE INSTRUCTOR

Sarvela, P. and McDermott, R.J., (1993). *Health education evaluation and measurement: a practicioner's perspective.* Madison, WI: Brown and Benchmark.

Borg, W.R., and Gall, M.D. (1989) *Educational research: an introduction*, 5th ed. New York: Longman.

STUDENT ASSIGNMENTS

Bring reports to class for review and discussion.

Review Chapter Four: Developmental Research in textbook.

MODULE III: PLANNING AND RESEARCH

SESSION SEVENTEEN
OTHER QUALITATIVE RESEARCH METHODS

CONTENT OUTLINE

(Sections 1-8 are optional, depending on the needs of the students.)

1. **Appropriate uses of quantitative research techniques within the context of intervention:**
   - *audience segmentation*
   - *create profile of audience knowledge, attitudes, epidemiological trends, media patterns*
   - *develop baseline for summative evaluation*
   - *gauge audience reactions to message and materials.*

2. **Quantitative data collection methods:**
   - *use of secondary data sources and epidemiological surveys*
   - *consumer panels*
   - *targeted intercept studies*
   - *unobtrusive measures*
   - *large scale surveys (discussion of central location intercept, house to house survey, phone, mail, and other sampling designs)*

3. **Advantages of surveys:**
   - *provide objective data on which to substantiate hypotheses*
   - *make valid projections to large numbers of the target audience*

4. **Disadvantages of surveys:**
   - *more costly in terms of time and money than other research techniques (Estimated time is six to eighteen weeks: two to six weeks to design and pretest instrument; two to six weeks to gather data; two to six weeks to code and analyze data.)*
   - *cannot identify new areas of concern to the audience. This can be overcome by using qualitative research to identify variables to be included in structured survey instruments.*
   - *limited to self reported behavior.*

5. **Elements comprising research design:**
   - *identifying research objectives*
   - *selecting a sample*
     - audience segmentation: Who should be surveyed?
     - review classification variables typically used in audience segmentation research
     - How many should be surveyed?
     - How should respondents be selected?
   - *designing the data collection instrument*
   - *analysis: How will the responses be interpreted?*

SESSION SEVENTEEN
OTHER QUALITATIVE RESEARCH METHODS

CONTENT OUTLINE

6. **Sampling methods** (only if needed:)
   - *common mistakes made in sampling*
   - *defining the population*
   - *sampling techniques*
     simple random sampling
     systematic sampling
     stratified sampling
     cluster sampling
   - *sample size*
     small sample studies
     estimating needed sample size
     correlational studies
   - *determining local resources to assist with sampling issues*

7. **Threats to validity and methods for assessing and improving reliability.** (only if needed)
   - *instrument validity*
   - *determining test reliability*

8. **Steps involved in the development of a quantitative instrument:**
   - *determine purpose and objectives of this phase of the research.*
   - *develop instrument specifications*
     what is the purpose of the questionnaire or other data collection instrument?
     who is the audience that will be interviewed?
     what content areas are to be examined?
     what types of sites will be used?
     how many items are to be used?
   - *review existing instruments for specific items or types of items to be used.*
   - *develop new items*
   - *develop directions for questionnaires*
   - *establish scoring procedures*
   - *conduct a preliminary review with experts*
   - *plot test with twenty to fifty subjects*
   - *assess reliability and validity of the instrument and make needed revisions*
   - *retest if necessary*
   - *produce the final instrument*

MODULE III: PLANNING AND RESEARCH

SESSION SEVENTEEN

OTHER QUALITATIVE RESEARCH METHODS

CONTENT OUTLINE

9. **Lead class exercise in which students begin to design a structured interview instrument.**
   Following the steps noted above, students design a short survey. To teach students the value of combining qualitative and quantitative research methods, use results of qualitative data as the starting point.

10. **Discuss resources available to acquire skills associated with survey design and methods for locating specialists to consult on social marketing research projects.**

11. **Discuss issues in hiring, training and coordinating large survey projects.**

12. **Discuss cost issues related to survey research.**

13. **Distribute survey and explain assignment** (to interview 5 or more people and bring results tonext class session.)

14. **Explain assignment** (to bring reports to class for review and discussion.)

SESSION EIGHTEEN
QUANTITATIVE ANALYSIS

SESSION DESCRIPTION

This session is designed to teach students how to analyze and interpret quantitative data. It also enables them to compare and integrate qualitative and quantitative research results.

TEACHING METHODOLOGY

Students are given a first-hand experience at analyzing data and interpreting results.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Conduct basic analyses of quantitative data,
- Integrate qualitative and quantitative research findings, and
- Identify key components of final report.

SESSION EIGHTEEN
QUANTITATIVE ANALYSIS

REFERENCES FOR THE INSTRUCTOR

Sarvela, P. and McDermott, R.J., (1993). *Health education evaluation and measurement: a practicioner's perspective*. Madison, WI: Brown and Benchmark.

Borg, W.R., and Gall, M.D. (1989) *Educational research: an introduction*, 5th ed. New York: Longman.

STUDENT ASSIGNMENTS

Interview 5 or more people. Bring results to class. Bring calculator.

MODULE III: PLANNING AND RESEARCH

SESSION EIGHTEEN
QUALITATIVE ANALYSIS

CONTENT OUTLINE

1. **Lead discussion of interviewing experience.**

2. **Break class into groups to conduct quick tabulation of results.**
(frequency distributions and cross tabulations of key variables)

3. **Review results and discuss findings.**

4. **Compare quantitative findings with qualitative findings.**

5. **Discuss the concept of Triangulation.**

6. **Present examples of how qualitative and quantitative findings can be presented**
(separate sections, integrated reporting.)

7. **Discuss needs for further research.**

8 **Discuss resources available** to assist with quantitative research design and analysis.

MODULE IV: STRATEGY DEVELOPMENT

SESSION NINETEEN
OVERVIEW OF STRATEGY DEVELOPMENT AND OBJECTIVE SETTING

SESSION DESCRIPTION

The social marketing strategy specifies the objectives and a plan for achieving those objectives. This session introduces the student to the components of the social marketing strategy and teaches them to set specific, measurable objectives.

TEACHING METHODOLOGY

The session begins with a brief didactic review of each strategy component. Using the class projects as an illustration, participants are then involved in an exercise to develop specific objectives.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Identify the components in a social marketing strategy,
- Enumerate six criteria for making good behavioral objectives, and
- Prepare objectives for a social marketing program.

SESSION NINETEEN
OVERVIEW OF STRATEGY DEVELOPMENT AND OBJECTIVE SETTING

REFERENCES FOR INSTRUCTOR

Kotler, P. and Roberto, E. (1989) *The social marketing approach to social change in social marketing: strategies for changing public behavior.* New York: The Free Press.

Communications Strategy (Unit IV) in Israel et al.

Office of Cancer Communications (1989). *Making health communication programs work: a planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

STUDENT ASSIGNMENTS

Read Strategy Development (Chapter Five) in the textbook.

MODULE IV: STRATEGY DEVELOPMENT

SESSION NINETEEN

OVERVIEW OF STRATEGY DEVELOPMENT AND OBJECTIVE SETTING

CONTENT OUTLINE

1. **Briefly review the components of the social marketing process** (previously presented in Session Two):

   - *audience segmentation and objectives*
   - *product strategy*
   - *price*
   - *promotion: message and creative strategy*
   - *place: media, interpersonal and institutional delivery strategies and channel integration*

2. **Discuss the first task involved in developing a social marketing strategy: Setting Behavioral Objectives**

   A. *Discuss difference between health problems and communication objectives.*
   B. *Review the difference between goals and objectives, example:*
      - goal: to increase by 15% the number of mothers who breastfeed for six months or longer.
      - objective: to increase by 25% the number of obstetrical providers who counsel their patients about breastfeeding.

   C. *Discuss importance of making objectives:*
      - specific
      - attainable
      - prioritized
      - measurable
      - time specific

   D. *Dscuss types of messages, noting that the ultimate goal is behavioral change. (Refer to behavior change models discussed in Module One.):*
      - promotion
      - motivation
      - education

   E. *Discuss the importance of making objectives specific, measurable, and attainable.*

3. **Discuss the importance of setting measurable objectives that can be used as the basis of summative evaluation.**

4. **Using this as a model, lead an exercise in which students develop a set of specific objectives for achieving goals related to the class project.** Note the type of behavior being targeted and type of messages (promotional, motivational, educational) that would be appropriate for achieving the objective.(See Kotler and Roberto 1989:43 for excellent examples of specific objectives derived from broader program goals. This is also a good point to reinforce key points about the relationship

between information, attitude and behavior change made in previous sessions.)

5. **Distribute copies of a final research report containing both qualitative and quantitative findings.** This can serve both as a model for reporting and material for class assignment.

6. **Explain class assignment** (to read report carefully and return to class prepared to apply these in a strategy development sessions.)

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY
AUDIENCE SEGMENTATION

SESSION DESCRIPTION

This session discusses the issues associated with audience segmentation.

TRAINING METHODOLOGY

This session is comprised of lecture and class discussion.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Explain the concept of audience segmentation,
- Describe the criteria used to segment the target population,
- Define primary, secondary and tertiary audience segments for a specific program topic, and
- Define objectives for each audience segment.

AUDIENCE SEGMENTATION

REFERENCES FOR INSTRUCTOR

Kotler, P. and Roberto, E. (1989) *Social marketing: strategies for changing public behavior.* New York: The Free Press. page 147.

Kotler, P. and Andreason, A.R. (1991). *Developing a core marketing strategy: segmenting the market,* In Social Marketing: Strategies for Changing Public Behavior. New York: The Free Press.

Fine, Seymore (1990) Introduction to social marketing in Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Fine, Seymore (1981) *The marketing of Ideas and social issues.* New York, New York: Praeger Publications.

Lefebvre, C. *Social marketing and health promotion.* Bunton, R. and MacDonald G. (eds). The Health Promotion Disciplines.

Fine, S. H. (1980) Toward a theory of segmentation by objectives in social marketing. *Journal of Consumer Research* 7 (June): 1-13.

Young, S, Ott, L., Feigin, B. (1978) Some practical considerations in market segmentation. *Journal of Marketing Research* XV (August): 405-12.

Sheth, J.N (199)) Segmenting the health care market, in Fine, S. (ed) *Social Marketing.* Boston: Allyn and Bacon.

Planning and strategy selection in Office of Cancer Communications (1989) *Making health communication programs work,* Bethesda, MD: National Cancer Institute.

Audience analysis. DTCP/UNDP referenced in family planning curricula

STUDENT ASSIGNMENTS

Read Strategy Development (Chapter Five) in text.
Read report carefully. Bring report to class for use in strategy formation session.

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY
AUDIENCE SEGMENTATION

CONTENT OUTLINE

1. **Review reasons for segmenting the target population.**

   - *audience segmentation is closely tied to product management, enabling the social marketer to develop or tailor products to meet audiences needs, provide greater satisfaction and enhance adoption*
   - *importance for developing and refining messages*
   - *importance for tailoring distribution to meet needs and win adoptions*

2. **Discuss the concepts of primary, secondary and tertiary audiences.**

3. **Discuss methods used to select target audiences and how to obtain information on these groups**

   - *review criteria most commonly used to select segmentation variables (demographic, attitudinal, behavioral, etc.)*
   - *note need for segmentation criteria to be appropriate for a particular product so that the size, number and composition reflects the way individuals within each segment react to the product.*

4. **Lead discussion in which class lists all potential audiences and then identifies the primary, secondary, and tertiary audiences for the class project.**

5. **Lead class exercise in which objectives are set for each audience segment.**

SESSION TWENTY-ONE
PRODUCT STRATEGY

SESSION DESCRIPTION

This session discusses the issues associated with product management.

TEACHING METHODOLOGY

This session is comprised of lecture and class discussion.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Enumerate principles of product management, and
- Develop a product strategy.

SESSION TWENTY-ONE
PRODUCT STRATEGY

INSTRUCTOR REFERENCES

Kotler, P. and Roberto, E. (1989) *Social marketing: strategies for changing public behavior.* New York: The Free Press. page 147.

Fine, Seymore (1990) Introduction to social marketing in Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Fine, Seymore (1981) *The marketing of ideas and social issues.* New York, New York: Praeger Publications.

Lefebvre, C. *Social marketing and health promotion,* in Bunton, R. and MacDonald G. (eds). The Health Promotion Disciplines. Table 2.

Office of Cancer Communications (1989). *Making health communication programs work: a planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

STUDENT ASSIGNMENTS

Read Strategy Development (Chapter Five) in text.
Read report carefully. Bring report to class for use in strategy formation session.

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-ONE
PRODUCT STRATEGY

CONTENT OUTLINE

1. **Discuss the importance of carefully defining the product or offer being made to the target audience.**

   - *"A marketing offer is a proposal by a marketer to make available to a target customer a set of positive or negative consequences if, and only if, the customer undertakes a desired action" (Kotler and Andreason 1991: 381),*

2. **Reinforce the commitment of social marketers to modify the product to meet consumers' needs and wants.** This may be done by changing the idea, service or tangible good offered or altering how they "product" is positioned.

3. **Discuss the concept of product positioning:** the image the consumer holds of the product and its abilities to meet his/her needs.

4. **Note relevance of concepts such as the attributes of the innovation -** relative advantage, compatibility, complexity, trialability and observability - discussed in previous sessions.

   - *Have class list:*
     - competing products
     - most important criteria by which consumers choose products under study
   - *Note need for "product differentiation" to meet needs of varying audience segments.*

5. **Discuss differences in positioning concepts, services, and tangible products.**

6. **Discuss product branding or naming.**

7. **Discuss product packaging.**

8. **Discuss product positioning.**

9. **Lead class exercise in which students develop a product strategy for the class project.**

   - *list competing products or services currently available*
   - *select the products or services that will be offered through the program*
   - *for each product determine how it should be positioned:*
     - general public image
     - visible benefits that could be presented to public
     - unique aspects of the product (that distinguish it from competing products)

SESSION TWENTY-ONE
PRODUCT STRATEGY

CONTENT OUTLINE

- major benefit consumer will get from using product

- *for each product determine:*
  - name or brand
  - appearance/appeal
  - cost
  - packaging
  - composition
  - other aspects

SESSION TWENTY-TWO
PRICING

SESSION DESCRIPTION

This session gives an overview of the issues associated with price.

TEACHING METHODOLOGY

This session is largely interactive.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Discuss the importance of price in social marketing,
- List the major types of price, and
- Translate research findings into a strategy to minimize the price consumers must pay and make that price acceptable.

SESSION TWENTY-TWO
PRICING

REFERENCES FOR INSTRUCTOR

Kotler, P. and Andreason, A.R. (1991). *Social marketing: strategies for changing public behavior.* New York: The Free Press.

Kotler, P. and Roberto, E. (1989) *Social marketing: strategies for changing public behavior.* New York: The Free Press.

Fine, S. (1981) Product strategy, In Fine, S. *The marketing of ideas and social issues.* New York: Praeger Publishers.

Fine, Seymore (1990) Introduction to social marketing in Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Israel, R. et al. (1987). Unit I. Seeing what can be done. Operational guidelines for social marketing projects in public health and nutrition. *Nutrition Education Series* Issue 14. UNESCO. ED-87/WS/52. Paris, 42-44.

STUDENT ASSIGNMENTS

Read Chapter Five: Strategy Development in the textbook.

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-TWO
PRICING

CONTENT OUTLINE

1. **Discuss the importance of social price.**

    - *note the differences in the concept of price in commercial and social marketing*

2. **Discuss the most common types of price encountered in marketing social products:**
    - *monetary price*
    - *time*
    - *effort and inconvenience*
    - *psychic energy*
        - anxiety involved in lifestyle changes
        - loss of pride and dignity
        - embarrassment

3. **Lead an exercise in which research findings are used to identify the price associated with each product identified in the previous session.** For each product list the social costs: time, money, etc.

4. **For each product, discuss ways to lower cost.**

5. **Discuss ways to make the price acceptable.**

6. **Identify criteria and methods to determine if products are priced accordingly.**

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-THREE
MESSAGE AND CREATIVE STRATEGY

SESSION DESCRIPTION

This session examines the development of what will be said to different audience segments about the product(s), including the content, appeal, image, mood or tone and ways in which messages are phased for optimal impact.

TEACHING METHODOLOGY

This session should be linked with the theoretical contributions discussed previously, i.e., the diffusion of innovation and behavioral analysis.

LEARNER OBJECTIVES

By the end of the session, the participants will be able to:

- Identify and discuss the major types of messages,
- Identify and discuss the characteristics of effective messages,
- Discuss each of the components of the message strategy, and
- Develop a creative message strategy.

SESSION TWENTY-THREE
MESSAGE AND CREATIVE STRATEGY

REFERENCES FOR THE INSTRUCTOR

Message Content, in Green, C. (1989). *Media promotion of breastfeeding: a decade's experience.* Washington DC: Academy for Educational Development.

Unit IV. *Communications Strategy.* In Israel et.al.

Office of Cancer Communications (1989). *Making health communication programs work: a planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

Petty, R. E., and J.T. Cacioppopi (1981). "Message Factors" in Petty, R. E., and J.T. Cacioppopi (eds), *Attitudes and persuasion;classic and contemporary approaches.* Dubuque, IA: William C. Brown

Alcalay, R., A. Ghee, and S. Scrimshaw (1993). "Designing prenatal care messages for low-income mexican women" in *Public Health Reports*

STUDENT ASSIGNMENTS

Read Chapter Five in the textbook
Cannels de Communicacion (INCAP)

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-THREE
MESSAGE AND CREATIVE STRATEGY

CONTENT OUTLINE

1. **Review the Social Marketing Message Typology** and explain that social marketing messages are carefully crafted to transmit a single idea to sensitize, inform or motivate a target audience. They may be used to encourage consumers to: a) purchase or use; b) access and compliance, c) skill and adherence (Israel :31-2)
2. **Point out that messages are linked to the behavioral goals, to the target group and to the medium being used.**
3. **Discuss the attributes of an effective message:** clear, focused on a single concept or behavior, culturally relevant, believable, doable, memorable, persuasive.
4. **Discuss the components of the message and creative strategy:**

   - *content*
   - *appeal*
   - *image*
   - *mood/tone*
   - *spokespersons or information sources*
   - *phasing messages - timing messages throughout campaign to create awareness, motivate and reinforce behavior*
   - *integrating messages*

5. **Review the importance of behavioral analysis as part of message and instructional strategy design.**
6. **Lead an exercise in which the class identifies key elements in the message strategy for the designated social marketing project.** (It is important that they draw on research findings and the behavioral analysis criteria presented earlier in this discussion. This is also an opportune time to reinforce key points made about the communication/persuasion process earlier.)

   - *What should the content of the message be?*
   - *Which types of appeals would be most effective?*
     - logical
     - emotional
     - authoritarian
     - fear
   - *What is the product image that must be communicated?*
   - *What is the most appropriate mood or tone?*
   - *What are the appropriate vehicles for the message?*
   - *How can the message be made more personally meaningful or relevant? (consider data regarding relative advantage, and previous decisions regarding product position, etc.) Message, audience, tone, medium, etc., all need to be compatible.*

7. **Note the importance of using a consistent tone or approach throughout a campaign**, and dangers of competing for attention with other parts of your own campaign if all messages are not guided by a consistent strategy.

SESSION TWENTY-FOUR
PLACE: MEDIA STRATEGY

SESSION DESCRIPTION

This session gives an overview of the issues involved in developing a media strategy.

TEACHING METHODOLOGY

This session is primarily interactive with the instructor guiding the class in the development of a media strategy.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Discuss the importance and meaning of "place,"
- Explain the concept of "media mix,"
- List the criteria used to identify appropriate channels and information sources helpful in the selection of these channels,
- Explain the benefits and limitations of each media channel, and
- Develop a media plan.

SESSION TWENTY-FOUR
PLACE: MEDIA STRATEGY

REFERENCES FOR INSTRUCTOR

Academy for Educational Development. *Three decades of development communication* A.d. Washington, DC.

Office of Cancer Communications (1989). *Making health communication programs work: A planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

Green, C. (1989). *Media promotion of breastfeeding: a decade's experience.* Washington DC: Academy for Educational Development.

Fernandez, S., & Colle, R.D., n.d. Comunicacíon en la Pila. New York: Cycle Publications

Fine, S. (1990). "The parties to the process" in S. Fine Introduction to Social Marketing in Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

Flora, J.A., Maibach, E. W., Maccoby, N. (1989) The role of media across four levels of health promotion intervention. *Annual Review of Public Health* 10:181-201.

Wallack, L. (1990) Media advocacy: promoting health through mass communications. In Glanz, K. Lewis, M, and Rimer, B. (eds.) *Health Behavior and Health Education,* 370-387.

STUDENT ASSIGNMENTS

Read Chapter Five in the textbook

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-FOUR
PLACE: MEDIA STRATEGY

CONTENT OUTLINE

1. **Discuss the important function of the channel as a way to ensure that the product is available at the right time and place.**

2. **Discuss the importance of the study of channels.**

3. **Discuss the strengths and weaknesses of word of mouth, media, advocacy groups and pressure groups.**

4. **Have students list some potential channels** (private firms, NGO's, churches, etc.)

6. **Explain the concept of "media mix":** the combination of all channels-interpersonal, radio, television, posters, flyers, newspapers, billboards, transit cards, announcements at community organizations.

7. **Discuss the criteria used to identify appropriate channels and information sources** helpful in the selection of these channels: reach, coverage, intensity, frequency, credibility, appropriateness for selected message and tome. (A medium has its won conventions.)

8. **Ask students to list the benefits and limitations of each media channel**

9. **Lead an exercise in which students begin developing a media plan by discussing channels they would use to transmit the messages.** Consider these questions:

   - *Which channels are most appropriate for the health problem and message?*
   - *Which channels are most likely to be credible to the audience?*
   - *Which will have the optimal reach and frequency?*
   - *Which channels best fit the type of message (inform and sensitize, motivate, educate)?*
   - *Which and how many channels are feasible, considering likely time and budget constraints?*
   - *Review the elements of a media plan: who, where, when, and communication channels.*

10. **Discuss other ways to use the media such making news and other forms of "media advocacy" and public relations.**

11. **Explain assignment:** to work in teams comprised of students from the same country or region to complete a media plan for implementing the communications strategy in that area. Give attached outline to guide students in developing their plan.

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-FOUR
PLACE: MEDIA STRATEGY

CONTENT OUTLINE

Questions to Guide Class Assignment
Place: Channel Analysis and Media Strategy Development

Determine the most appropriate steps to inform, promote, help people remember, and persuade people to accept each new product (or behavioral change).

Define the best ways to use the media to reach the public during each program phase: launch, penetration, maintenance, and follow up.

Define the way each media channel can be used to carry out each step in the campaign.

Define how the commercial offerings, physical products, promotional specials and other products will be integrated.

Make a media plan:

- for radio and television, the station or channel, format, times of days, spokespersons for each message. How will you assure the stations will cover?
- for print and other forms of media, the format, size and illustrations for each message.
- specify the most effective broadcast or print times: days of the weeks, times of days with greatest target audience reach.
- calculate the costs for each media channel.
- figure out reach and coverage rates for radio, tv, health facility based education, etc., in "your" project area. What data sources are typically available? What are some methods to use in situations where there are no media studies? What are sources of data on media users, readership, etc?

SESSION TWENTY-FIVE
PLACE: DISTRIBUTION AND STRATEGY

SESSION DESCRIPTION

This session gives an overview of the issues involved in developing a distribution and training strategy.

TEACHING METHODOLOGY

This session is largely interactive, with the instructor providing guidance as students develop their distribution and training strategy.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Develop a training strategy,
- Develop a distribution or supply strategy, and
- Discuss the importance of integrating distribution channels.

SESSION TWENTY-FIVE
PLACE: DISTRIBUTION AND STRATEGY

REFERENCES FOR INSTRUCTOR

Fine, S. (1990). "The parties to the process" in S. Fine Introduction to Social Marketing in Fine, S., *Social Marketing.* Needham Heights, MA: Allyn and Bacon.

STUDENT ASSIGNMENTS

Review Chapter Five of textbook
Bring media plan to class for review

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-FIVE

PLACE: DISTRIBUTION AND STRATEGY

CONTENT OUTLINE

1. **Review and discuss media plans prepared by each team.**

2. **Discuss the need to integrate media channels and other distributions systems** (professionals, volunteers, private organizations, product distribution channels, etc.).

3. **Discuss need for strategy delineating the organization responsible for each activity.**
   - *note that public and private agencies may work in a variety of models.*

4. **Discuss the importance of establishing effective distribution networks** for making commodities, services and information available to the consumer. Also discuss role of social marking experts in this area.

5. **Discuss the selection of distribution channels for tangible products:**
   - *attributes of the target market*
   - *nature of available distribution channels*
   - *condition of the local physical infrastructure in terms of size, number of vehicles, warehouses and stores*
   - *conditions of roads and other transportation networks*

6. **Lead a discussion in which students select distribution channels for concept, commodity and service products.** For each product:
   - *determine how to make "distribution" as consumer friendly as possible.*
   - *determine the most appropriate channels of distribution*
   - *estimate the amount of initial supplies and replacements needed for each product*
   - *identify ways that institutions promoting program products will be affected by the program and ways to minimize changes they will need to make*
   - *determine how the product should be displayed at each point of distribution and identify the support materials or activities needed (e.g., signs, display racks, audiovisual equipment, reorganization of waiting room)*

7. **Identify criteria to determine if products were distributed correctly.**

8. **Lead a discussion in which students identify points of distribution for training and support:**
   - *list the specific activities that front line staff or other promoters will be asked to carry out and the number of contacts each person will be expected to make.*
   - *estimate the amount of time required for each contact*
   - *determine training requirements for each type of promoter: what do they need to know, who should do the training, how long will the training take, how many will need to be trained?*
   - *determine the support materials needed by promoters*
   - *identify criteria and methods to determine if promoters were trained correctly.*

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-SIX
WRITING THE OPERATIONAL PLAN

SESSION DESCRIPTION

Students are assisted in developing an operational plan for implementing the designated project in their country.

TEACHING METHODOLOGY

Students break into teams to prepare an operational plan for implementing the project in their country. The instructor assists groups as they begin work during the class session and remains available throughout the week to assist as needed.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- .List the components included in an operational plan, and
- Prepare an operational plan.

SESSION TWENTY-SIX
WRITING THE OPERATIONAL PLAN

INSTRUCTOR REFERENCES

Chapter Seven: Writing the Operational Plan in the textbook

STUDENT ASSIGNMENTS

Chapter Seven: Writing the Operational Plan in the textbook

MODULE IV: STRATEGY DEVELOPMENT

SESSION TWENTY-SIX
WRITING THE OPERATIONAL PLAN

CONTENT OUTLINE

1. **Review the major components of an operational plan.**

2. **Review the assignment** (to work in teams, with students from each country or region preparing an operational plan.)

3. **Allow teams to meet in groups during class.** Assist each team as they discuss their progress and divide remaining tasks. Be sure that they are clear on the need to prepare a complete plan.

4. **Inform class of times they can obtain additional consultation.**

SESSION TWENTY-SEVEN
MOBILIZING RESOURCES: SELECTING AND WORKING WITH THE PRODUCTION TEAM

SESSION DESCRIPTION

This session is intended to give an overview of how to select and work with the production team.

TEACHING METHODOLOGY

This session is largely didactic with time allocated for questions and comments. This session would be enhanced by having students interview a producer/director or other member of a production agency.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Identify the roles and function of the production team in the development of a campaign,
- Review guidelines for selecting a production agency,
- Describe the production process,
- .Discuss the roles of the client and of the production team in the development of a campaign, and
- Discuss alternative resources to using an AD agency.

SESSION TWENTY-SEVEN
MOBILIZING RESOURCES: SELECTING AND WORKING WITH THE PRODUCTION TEAM

REFERENCES FOR INSTRUCTOR

Debus, M. *How to get what you want from an advertising agency.* Unpublished manuscript.

HealthCom Academy for Educational Development. Washington, DC.

Zucker, D. (1989). *The advertizing agency: Your partner in communications.* Document prepared for the AIDSCOM Project.

STUDENT ASSIGNMENTS

Students should read at least one of the above documents or similar documents in Spanish.

MODULE V: EVALUATION

SESSION TWENTY-SEVEN

MOBILIZING RESOURCES: SELECTING AND WORKING WITH THE PRODUCTION TEAM

CONTENT OUTLINE

1. **Discuss the importance of selecting specialists** to produce high quality educational materials and reinforce the need for special care in developing materials for cross-cultural, particularly illiterate, audiences.

2. **Discuss the roles and principles tasks of client and production agency.** (Debus)

   A. *Agency:*
      - planning, development and distribution

   B. *Client:*

      - direct, to inform, and to evaluate
      - clearly communicate a specific, actionable objective
      - set priorities
      - provide all learning material and impart as much knowledge as possible
      - effectively evaluate the plan and the agency's work

3. **Selecting the right agency.** Review the list of "do's" (Debus)

   - *know what you are looking for*
   - *know what your buying*
   - *be sure the individuals who will work with the agency on a day-to-day basis are involved in the agency selection process*
   - *start with a broad list of potential agencies*
   - *narrow the list of agencies quickly*
   - *visit each agency on "short list"*
   - *avoid speculative creative*
   - *pay close attention to intangibles*

4. **Review the organizational structure of a typical AD agency.**

   A. *Account service*
      - directs the initial development of the plan
      - key contact between client and agency

B. *Creative department*
- actual development of copy and visuals take place here
- ultimately responsible for the quality of agency's creative product

C. *Media department*
- primary resource for all information re the various media that can be used to deliver a message
- work directly with the media
- post buy analysis

D. *Research department*

- work with outside suppliers to design and implement research studies
- not all agencies have this dept.

E. *Production department*
- oversees conversion of advertising materials into print media

F. *Traffic department*
- sometimes function of production department
- responsible for timely flow of materials

G. *Billing department*
- coordinates payment

5. **Review the process in the development of a campaign.** Use Debus or Zucker for an analysis of action required by the client and the agency in each of the steps.

- *analyzing the situation*
- *formulating the plan*
  - target audience
  - product development and distribution
  - copy strategy
  - media plan
  - research plan
  - budget
  - action plan

SESSION TWENTY-SEVEN
MOBILIZING RESOURCES: SELECTING AND WORKING WITH THE PRODUCTION TEAM

CONTENT OUTLINE

- *implementing the plan*
  - developing the message
  - message testing
  - preparing and distributing materials
  - contracting for media space
  - verifying space and billing

- *evaluating the plan: has campaign met its objective*

6. Lead a discussion about the production resources available in students' home countries.

7. (Optional: Have students interview a producer/director or other member of a production agency.)

- *discuss production process: time line, budget considerations*
- *discuss the roles of the social marketing manager and creative staff. Include practical guidelines such as the importance of being on site for production of video and radio spots, ways to make the relationship an effective one.*

MODULE V: EVALUATION

SESSION TWENTY-EIGHT
PRETESTING STRATEGIES AND MATERIALS

SESSION DESCRIPTION

This session emphasizes the importance of careful testing of all strategy components to ensure that products and materials are attractive, understandable, acceptable and effective.

TRAINING METHODOLOGY

A didactic overview of the principles and practices associated with strategy and materials testing is followed by a more interactive work session in which participants develop interview guides for pretesting pamphlets and radio spots.

LEARNER OBJECTIVES

By the end of the session the participants will be able to:

- Explain the basic elements of product testing, market testing, behavior trials and materials testing,
- Describe techniques for pretesting materials,
- Develop interview guides to pretest materials, and
- Perform a pretest of pamphlets and radio spots.

SESSION TWENTY-EIGHT
PRETESTING STRATEGIES AND MATERIALS

REFERENCES FOR INSTRUCTOR

Gussler, Judith D. (ed) (1989) *Nutrition education opportunities: strategies to help clients with limited reading skills.* Report of the Second Ross Roundtable on Current Issues in Public Health. Columbus, OH Ross Laboratories.

Nitzke, S. (1987) "Reaching low-literate adults with printed nutrition materials. *Journal of the American Dietetic Association* 89: 1612-1614.

Doak, Cecilia, Leonard G. Doak and Jane H. Root (1984) *Teaching patients with Low Literacy skill.* Philadelphia. J.B. Lippincott Co.

Bertrand, J. (1978) *Communications pretesting.* Chicago, Il: University of Chicago.

Office of Cancer Communications (1989). *Making health communication programs work: A planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

Harland, A. (1984) *Pretesting communication materials.* Rangoon, Burma: UNICEF.

Harland, A. (1984) *Pretesting communication materials.* Rangoon, Burma: UNICEF.

Also see the excellent bibliography in the textbook.

STUDENT ASSIGNMENTS

Read Chapter Six: Testing Concepts and Materials in the textbook

MODULE V: EVALUATION
SESSION TWENTY-EIGHT
PRETESTING STRATEGIES AND MATERIALS

CONTENT OUTLINE

1. **Discuss the importance of product testing and give examples of pretesting methods.**

2. **Discuss the importance of market testing and give examples of pretesting methods.**

3. **Discuss the importance of behavior trials and give examples of pretesting methods.**

4. **Discuss the importance of materials pretesting.**

5. **Note that pretesting can occur during formative research stage, at concept testing stage, prototype stage, etc.**

6. **Describe the following techniques and methods for pretesting materials**
   - *Cloze test*
   - *Oral Miscue*
   - *Comprehension Restatement*
   - *Signalled Stopping*
   - *Readability tests*

   - *Self Administered Questionnaires*
   - *Focus Group Interviews*
   - *Structured Interviews*
   - *Gatekeeper or Program Partner Reviews*

7 **Break the class into teams.** Assist them in developing interview guides to pretest a pamphlet and a radio spot dealing with the topic designated as the class project.

8. **Distribute sample educational materials and explain assignment:** to use interview guides to pretest an educational pamphlet or radio spot. Interview 3-5 people using at least two methods discussed in class. Meet with team members to prepare a brief summary of findings and recommendations for revising the material(s) to be presented in the next class session.

SESSION TWENTY-NINE
MANAGEMENT ISSUES

SESSION DESCRIPTION

This session reviews management issues including institutionalization and sustainabilty of programs.

TEACHING METHODOLOGY

This session uses primarily didactic presentation with time for comments and questions.

LEARNER OBJECTIVES

By the end of the session, the learner will be able to:

- List the issues related to program management,
- Discuss the component of institutionalizing programs, and
- Identify the issues surrounding sustainability.

SESSION TWENTY-NINE
MANAGEMENT ISSUES

REFERENCES FOR INSTRUCTOR

Israel, R. (1987). *Operational guidelines for social marketing projects in public health and nutrition.* Nutrition Education Program.

Chapter 10 in text.

Lefebvre, C. *Social marketing and health promotion.* Bunton, R. and MacDonald, G., eds. Health Promotion Disciplines.

Stinson, W. (1987). *Creating sustainable community health projects: The PRICOR experience.* Primary Health Care Operations Research Center for Human Services, Maryland.

Public health communication model. (1987). AED. p 91-98.

Lefebvre, C. *Strategies to maintain and institutionalize successful marketing programs.*

STUDENT ASSIGNMENTS

Read Chapter 10 in text.

MODULE V: EVALUATION
SESSION TWENTY-NINE
MANAGEMENT ISSUES

CONTENT OUTLINE

1. Discuss various management models (text 84-85 and Israel p 51).

- *self contained model: ministry of health carries out all aspect of project*
- *interministerial model: collaboration among other units of government*
- *public-private collaborative model*
- *contractor model*

2. Explain key skills required to manage programs.

- *research*
- *communication planning*
- *design and production*
- *management*

3. Inform the class of the four types of management issues that confront most projects. (Israel, p 50)

- *resource allocation*
- *Institutional issues*
- *program design issues*
- *program implementation issues*
- *political issues, e.g., ignore aspects of formative research in favor of certain audiences, regions, etc.*

4. Discuss the management tasks related to:

- *planning*
- *implementation*
  - organization of training activities
  - managing product distribution/service delivery
  - managing dissemination of messages and materials
  - coordinating overall efforts to ensure project goals are reached

5. Discuss with class reasons why organizations may make management of social marketing programs be difficult. (Lefefvbre and Flora,1988)

- *Marketing connotes manipulation and thus has no place in health field.*

CONTENT OUTLINE

- *It will require more resources than are available.*
- *Audiences should not be segmented because it will lead to more underserved groups.*
- *Terms associated with social marketing are not appropriate for health promotion.*
- *All the emphasis on research will impede service delivery.*
- *Agencies rarely have the staff with marketing expertise or with top level media/materials production skills.*
- *Demands unacceptable level of planning and action that may be disruptive to the agency and staff.*

6. Review the issue of institutionalization by discussing what it means. (text)

A. *Definition*
B. *Importance of institutionalization for sustaining programs*
C. *Guidelines for increasing chances for continuance of a program*
   - funding
   - consensus
   - skills training and post descriptions
   - change procedures and norms
   - regionalization
   - build and interdisciplinary constituency
   - look for new institutional linkages
   - foster an atmosphere of success
   - learn to work the system
   - focus on obtainable objectives

D. *Measuring success by monitoring:* (AED, 1987)

   - number of personnel who have been trained in areas relevant to social marketing
   - the extension of the social marketing strategy from one program to another
   - strengthening or restructuring of services or activities along lines suggested by the methodology
   - changes in administrative norms and procedures

E. *(Optional: discuss slogans related to institutionalization (in Kotler and Andreasen.)*

SESSION TWENTY-NINE
MANAGEMENT ISSUES

CONTENT OUTLINE

7 . Discuss issues related to sustaining programs.

A. Definition of sustainability

B. Use Stinson's (1987) steps in analyzing sustainabiltiy issues

- analyze sustainability problems and objectives
- ascertain community needs, interests, and resources
- strengthen program design and management
- determine community financing objectives
- select financing methods
- make basic design decisions
- implement design

C. (Optional: discuss slogans related to sustainability (in Kotler and Andreasen.)

MODULE V: EVALUATION

SESSION THIRTY: PRETESTING STRATEGIES STUDENT PRESENTATIONS

SESSION DESCRIPTION

This session gives students an opportunity to present the findings of their pretesting exercise, discuss problems encountered in that process and work with the instructor to identify revisions needed in educational materials.

TEACHING METHODOLOGY

This session is fully interactive.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Correctly apply standard pretesting methods, and
- Use pretesting methods to identify revisions needed in educational materials.

SESSION THIRTY: PRETESTING STRATEGIES
STUDENT PRESENTATIONS

REFERENCES FOR THE INSTRUCTOR

Nitzke, S. (1987) "Reaching low-literate adults with printed nutrition materials. *Journal of the American Dietetic Association* 89: 1612-1614.

Doak, Cecilia, Leonard G. Doak and Jane H. Root (1984) *Teaching patients with low literacy skills.* Philadelphia. J.B. Lippincott Co.

Bertrand, J. (1978) *Communications pretesting.* Chicago, Il: University of Chicago.

Office of Cancer Communications (1989). *Making health communication programs work: a planner's guide.* National Cancer Institute, Public Health Service, National Institutes of Health, NIH Publication No. 89-1493.

Harland, A. (1984) *Pretesting communication materials.* Rangoon, Burma: UNICEF.

Also see the excellent bibliography in textbook.

STUDENT ASSIGNMENTS

Use interview guides to pretest an educational pamphlet or radio spot. Interview 3-5 people using at least two methods discussed in class. Meet with team members to prepare a brief summary of findings and recommendations for revising the material(s) to be presented in the next class session.

MODULE V: EVALUATION
SESSION THIRTY
STUDENT PRESENTATIONS

CONTENT OUTLINE

1. **Students present brief overview of method(s) used and findings.**

2. **Lead class discussion of problems** (e.g., participants approve of all materials, interviewer fails to probe for ways to improve them).

3. **Lead class discussion** in which students agree upon the revisions they would make in each item tested.

SESSION THIRTY-ONE
EVALUATION

SESSION DESCRIPTION

This session provides an overview of types of evaluation, issues related to evaluation, specifics of how to develop an evaluation plan.

TEACHING METHODOLOGY

None

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Define the differences between formative and summative evaluation,
- Discuss the purposes and guidelines for designing evaluation,
- Review common evaluation issues and concerns, and
- Propose formative and summative evaluation plans as related to case study.

SESSION THIRTY-ONE
EVALUATION

REFERENCES FOR INSTRUCTOR

Clark & Mc Caffrey, J., (1979) *Demystifying evaluation.* New York: World Education.

Hornik, R., (1986). *An approach to evaluation for breastfeeding campaigns.* Working paper No 123. Annenberg School for Communication, University of Pennsylvania.
(also published in Hollis, C. ed. (1986). *Using communications to solve nutrition problems:* A compendium. Newton, MA: INCS Publications.

Israel, R., et al. (1987). Unit VII: Formative and summative evaluation. Operational guideline for social marketing projects in public health nutrition. *Nutrition Education Series* issue 14. UNESCO. ED-87/WS/52. Paris.

Making health communication work: A planner's guide. (1989).
National Institutes of Health Publication No.89-1493. p 63-74.

Chapter 9 in text.

STUDENT ASSIGNMENTS

Read Chapter 9 in text.

MODULE V: EVALUATION
SESSION THIRTY-ONE
EVALUATION

CONTENT OUTLINE

1-6 need only to reviewed if needed.

1. Briefly review definitions of evaluation and differences between formative and summative evaluation (refer to Hornik and Israel)

2. Discuss the focus of monitoring or formative evaluation.

- *distribution systems and implementation process*
- *internal administration*
- *interim tracking of audience levels of knowledge, acceptance and practices*
- *content of the project's materials and messages*

3. Go over purposes of monitoring efforts.

A. *Provides information to improve or strengthen program but keeping in mind the objectives and overall nature of the social marketing program*

B. *Diagnoses problems related to coverage and access: questions to ask*
   - How much of intended audience is being reached?
   - Any subgroups not receiving access to intervention?
   - Is there true coverage?
   - Any bias influencing the extent to which different subgroups are affected in different amounts?
   - Any previously unidentified constraints influencing access or response of target population?
   - How are adopters and non-adopters different and why?

C. *Evaluate issues related to delivery of service: questions that can be asked.*
   - How much training and recruiting has been done?
   - How active are personnel in program? are they only serving a subset of target group?
   - How well are distribution systems functioning for materials and products?
   - Are there competing or counter messages in project environment?
   - Any unanticipated outcomes?
   - Cost savings?

3. Comment on considerations that should guide design of formative evaluation.

- *timeliness-need to get information quickly*
- *initial detection of major problems is much more important than estimating magnitude*

CONTENT OUTLINE

- *appropriate level of effort: collect process information until it gets "boring"*
- *decisions to be made should determine the research methods used*
- *informal data collection is better than none or depending on opinions*

4. Discuss summative evaluation: measures outcomes and total program effectiveness

A. *Measures outcomes*
B. *Measures total program effectiveness*
- do multiple channels have a greater impact on the transition from knowledge to practice
- to what extent individual and community support influence the decision to adopt new practices
- the length of time people retain knowledge, and patterns involve in learning and forgetting

C. *Provides agenda for future direction*

5. Review three main classes of dependent variables relevant to summativie evaluation.

A. *Implementation variables-intermediate outputs of the project (effort or performance variables)*
B. *Outcome variables*
- proximal-relate to knowledge and behavior change
- distal-relate to prevalence of disease, mortality, etc

C. *Efficiency-relationship between cost (effort) and outcomes*

6. Explain summative evaluation methods.

A. *Large scale surveys-before and after include*
- process of program planning
- potential exposure to program activities
- actual exposure to program activities
- change in knowledge, attitudes and practices
- change in health status

7. Discuss with class some considerations related to evaluation (refer to Hornik, 1986).

A. *Often evaluation focuses on the big issue of "did it work" and try to provide an overall judgement of effectiveness- this may not be feasible.*
- political influences

CONTENT OUTLINE

B. *Evaluator tasks*
- deciding what questions to ask-most difficult
- deciding how to answer them

(Optional: go over the systematic approach to generating potential questions by using conceptual and operational models. Have students design these models based on their case study.)
- *generating descriptive and causal potential questions*

C. *Choosing evaluation questions you can afford*

- scarce evaluation resources should only be spent to answer a question is the program is ready to make use of the information in an important way.
- focus resources where previous experience suggest there is likely to be trouble.
- answer questions that there are funds and tools to answer.

Optional: *Go over Hornik's Design I, II, III on page 17.*
a class activity may be to use these design types applied to case study.)

D. *There is more discussion of constraints on p 63 of MakingHealth Communication Programs Work.*

8. *(Optional: Discuss common concerns related to evaluation. You may use Hornik's list (p 21) and ask students to discuss these or add to them.)*
- *sorting out the effects of component of a campaign*
- *estimating media effects*
- *distinguishing between knowledge/attitude and practice*
- *social vs cognitive model of effects*
- *self-reported behavior*
- *data collection and sampling issues: Individual interview and focus groups*
- *institutional evaluation*
- *making evaluation responsive to the needs of projects*

9. Explain the components of writing an evaluation report including and executive summary.
10. Discuss management issues related to evaluation including:
- *"selling" evaluation as a key component of social marketing campaign*
- *evaluation as part of ongoing feedback, planning and revision*
- *evaluation of social marketing campaign as part of a larger program*
- *monitoring of evaluation-who, when, how*

MODULE V: EVALUATION

SESSION THIRTY-TWO
TEAM REPORTS

SESSION DESCRIPTION

This session gives students an opportunity to present their team reports to the entire class for discussion and critique.

TEACHING METHODOLOGY

This session is fully interactive.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Identify strengths and weaknesses in each teams social marketing plans, and
- Use other students recommendations to revise their social marketing plan.

SESSION THIRTY-TWO
TEAM REPORTS

REFERENCES FOR THE INSTRUCTOR

NONE

STUDENT ASSIGNMENTS

Prepare a 20 minute presentation of the social marketing plan, highlighting key elements of each aspect of the social marketing strategy to be employed. Be sure to point out the research findings upon which strategic decisions were made.

MODULE V: EVALUATION
SESSION THIRTY-TWO
TEAM REPORTS

CONTENT OUTLINE

1. **Each team gives a twenty minute overview of their social marketing plan,** highlighting key elements of each aspect of the social marketing strategy they would employ. The instructor should be sure that the team shows how research findings were used to make strategic decisions.

2. **Lead students in a discussion of the strengths and weaknesses of each plan, and make recommendations for improving the plan.**

MODULE V: EVALUATION

SESSION THIRTY-THREE
REVIEW AND WRAP UP

SESSION DESCRIPTION

This session gives students an opportunity to review strengths and weaknesses of the social marketing approach, discuss political constraints and ethical issues they have encountered in developing their plans and provide the instructor with recommendations for improving the course curriculum.

TEACHING METHODOLOGY

This session is fully interactive.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- .List the strengths and weaknesses of the social marketing approach,
- Discuss political constraints they would encounter in their home countries in applying social marketing to food and nutrition topics, and
- Discuss ethical issues associated with the social marketing plans they developed for class and other food and nutrition topics.

SESSION THIRTY-THREE
REVIEW AND WRAP UP

REFERENCES FOR THE INSTRUCTOR

NONE

STUDENT ASSIGNMENTS

Review social marketing plan to identify strengths and weaknesses of this approach relative to other social marketing strategies.

Review social marketing plan to identify ethical constraints that must be considered in implementing the project.

Bring recommendations for improving the course curriculum.

MODULE V: EVALUATION

SESSION THIRTY-THREE
REVIEW AND WRAP UP

CONTENT OUTLINE

1. **Lead a discussion in which students review the strengths and weaknesses of the social marketing approach.** Create a matrix of strengths and weaknesses of social marketing and other social change models discussed in Session One.

2. **Lead a discussion of the political constraints students would encounter in their home countries in applying social marketing to the topic studied in class or other food and nutrition topics.**

3. **Lead a discussion of the ethical issues associated with the social marketing plans they developed for class and other food and nutrition topics.** Although this was covered earlier, this is an excellent time to review key points and ensure that students are able to apply them to social marketing applications that they are likely to undertake in their home countries.

4. **Ask students to give suggestions for improving the course curriculum.** Students can be given an opportunity to make recommendations in class for other students to discuss as well as submit a list of suggestions anonymously.

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MODULE V: EVALUATION

OPTIONAL SESSION
PRODUCTION

SESSION DESCRIPTION

This session reviews the considerations of video and radio as social marketing message toosl. Discussion centers around advantages, disadvantages, features, costs, and design issues. The session ends with an examination of the use of video for training.

TEACHING METHODOLOGY

Didactic review with sample videos to demonstrate concepts.

LEARNER OBJECTIVES

By the end of the session, participants will be able to:

- Identify and discuss the reasons, advantages, and disadvantages of using videoand radio as a medium to convey social marketing messages,
- Describe the features of video and radio production,
- List major design issues including field testing, and
- List the major steps in production process.

OPTIONAL SESSION
PRODUCTION

REFERENCES FOR INSTRUCTOR

Cartwright, S. (1986). *Training with video* (chapters 1,2,3). Knowledge Industry Publ. White Plains, NY.

Clearinghouse on Development Communication (1988) *Interactive radio instruction handbook: a guide to planning and implementation.* Washington, DC: Academy for Educational Development.

Field Note: *Producing a training video-the case of "!Comuniquémonos, Ya!.* AED, Nutrition Communication Project

STUDENT ASSIGNMENTS

Read Field Note: *Producing a training video-the case of "!Comuniquemónos, Ya!.*AED, Nutrition Communication Project.

Optional: Take a field trip to observe the production of a training video and interview the producer/director. This will help demystify the process and enhance memory of the key points covered in this session. It will also give students an opportunity to learn more about how to structure their relationship with the production team.

MODULE V: EVALUATION
OPTIONAL SESSION
PRODUCTION

CONTENT OUTLINE

1. General considerations in producing a training video:

- *who is the target audience and what do you want to accomplish*
- *who will use it, any barriers?*
- *what is currently being used or not used*
- *what are the behaviors now*
- *how similar or different are the members of the audience*
- *interest and concerns of the audience concerning the problem*

2. Review advantages of using video:

- *capture reality*
- *reinforce new skills, motivational*
- *can be used to explore issues in great depth*
- *increases efficiency*
  - *saves resources: time, money, human resources*
- *provides flexibility*
- *ensures consistency of information*
- *inherently interesting (visual images, color and sound can increase learning)*

3. Review the disadvantages of using video:

- *cost-financial and time*
- *availability of video equipment and other delivery problems*
- *availability of on screen talent*
- *availability of skilled production team*
- *need to train and monitor for appropriate use of video as integrated component of social marketing strategies*

4. Discuss cost issues:

- *determining cost- per program, per minute, per viewer*

- *program sophistication*
  - level one: no script, only talking head, no preparation
  - level two: partial script or outline, content expert, some demonstration, minimum editing. Used for training procedures and usually shot in studio.
  - level three: fully scripted, visualized and storyboarded. studio and field shots, usually no on screen talent, require careful editing
  - level four: found in commercial market, fully scripted, shot on location with on screen talent. sound tracts and special effects. Used for product introduction.

MODULE V: EVALUATION
OPTIONAL SESSION
PRODUCTION

CONTENT OUTLINE

production time considerations that add to cost: (can use example in Cartwright,p. 35-37)
research needed
- design: design goals, identification of audience and problem, learning strategy, sequencing and pace
- writing
- producing
- editing
- distribution

5. Program Design Issues:

A. Defining the problem-can the problem truly be solved by the use of video? (Cartwright, chapter 4)
- *ask these four questions:*
  1. Can the video help correct the problem?
  2. Can the audience be trained to solve the problem?
  3. How are you going to evaluate the results?
  4. How important is the problem to the overall goal of the campaign?

B. Defining the Audience/ audience profile
- *ask these questions:*
  1. How much does the audience already know about the material being presented?
  2. Is the audience motivated to watch the program?
  3. What are the demographics of the audience (especially age and education)?
  4. How large is the audience?
  5. How will the audience see the program (climate)?

C. Setting objectives
- should describe desired performance/behavior, conditions of the performance and the standards of the performance

D. Developing learning strategies
- cognitive
- psychomotor
- affective (attitudes, values and motivation)

MODULE V: EVALUATION
OPTIONAL SESSION
PRODUCTION

CONTENT OUTLINE

6. Discuss differences between videos used for information only versus training/behavior change

- *see table on page 55 of Cartwright*
- *guidelines to ensure adoption of behaviors from a training video:*
    1. film people with whom the audience can identify
    2. select priority messages and present these simply and clearly
    3. show the behavior happening in a realistic context
    4. show benefits of desirable behavior
- *discuss use of supplemental training material*