Think of social marketing as the social change version of “Let’s Make a Deal.” We believe that all men and women have a right to determine what is valuable to them. Our job is not to change their values. That may be the mission of education or religion, but not of marketing. Our job is to offer people something they already value in exchange for a behavior which we believe will benefit not only them as individuals, but society as a whole. 

Our most fundamental principle, the principle of exchange, is radically democratic and populist.

—Dr. Bill Smith
Emeritus editor, Social Marketing Quarterly

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

Social marketing as a term, however, is still a mystery to most, misunderstood by many, and increasingly confused with other terms such as behavioral economics (a framework that can inspire social marketing strategies and is described later in this book), social
media (one of many potential promotional tactics to choose from), and health communications (which only uses one of the marketing intervention mix tools . . . promotion). A few even worry about using the term with their administrators, colleagues, and elected officials, fearing they will associate it with socialism, manipulation, and sales. This chapter is intended to create clear distinctions and to answer common questions:

- What is social marketing?
- When did it originate?
- How does it differ from information/education campaigns?
- How does it differ from health communication?
- How does social marketing differ from commercial marketing, nonprofit marketing, and public sector marketing?
- What is its relation to behavioral economics, nudge, social change, community-based social marketing, community-based prevention marketing, social media, and cause promotion?
- Do people who do social marketing actually call themselves social marketers? Where do they work?
- What social issues can benefit from social marketing?
- When is a behavior change strategy social marketing? When is it something else?

We support the voices of many who advocate an expanded role for social marketing and social marketers, challenging professionals to take this same technology “upstream” to influence other factors that affect positive social change, including laws, enforcement, public policy, built environments, school curricula, community organizations, business practices, celebrities, and the media. We also encourage distinguishing and considering “midstream” audiences, those influential others closer to our priority audiences, such as family, friends, neighbors, health care providers, teachers, and community leaders.

We begin this chapter, like the rest of the chapters in the book, with an inspiring case story; this one is from Massachusetts. We conclude with one of several Marketing Dialogues that feature discourses among practitioners seeking to shape, evolve, and transform this discipline.

**MARKETING HIGHLIGHT**

**Reducing Deaths From Drug Overdoses**

**Background**

Drug overdoses are, as of 2016, the leading cause of accidental death in the United States, surpassing traffic accidents and gun violence, with more than 50,000 Americans dying from drug overdoses in 2015.\(^2\) Overdoses are also the leading cause of death in
Americans under age 50. This surge has been pushed to new heights primarily by the rising abuse of heroin and prescription painkillers, a class of drugs known as opioids. Robert Anderson, who has overseen death statistics at the CDC, commented “I don’t think we’ve ever seen anything like this. Certainly not in modern times.”

Promising strategies encouraged by CDC for states to focus on include: prescription drug monitoring programs, policy options relating to pain clinics, appropriate prescribing of opioid pain relievers, expanding first responder access to naloxone, supporting the use of CDC’s guidelines for prescribing opioids for chronic pain, and increasing access to substance abuse treatment services.

This case highlights one community’s creative and impactful social marketing effort to address this “wicked problem” with a unique focus on priority audiences most ready for change, providing them “Hope Not Handcuffs.”

**Priority Audience and Desired Behavior**

In June of 2015 in Gloucester, Massachusetts, the then–Police Chief Leonard Campanello told CNN’s Sanjay Gupta he had “had enough.” He shared that this small community of 30,000 residents had just seen its fourth fatal drug overdose, the first Friday of March that year, surpassing the prior year’s total number. Campanello and his team had been fighting the drug war “the old-fashioned way,” primarily targeting dealers and addicts in popular locations such as strip-mall parking lots and then arresting them and putting them in jail.

On the morning of May 4 that year, he decided to try a new approach, some described as a “defiant one.” He logged into the Gloucester Police Department’s Facebook account for the first time and wrote, “Starting June 1, any addict who walks into the police station with the remainder of their drug equipment (needles, etc.) or drugs and asks for help will NOT be charged. I’ve never arrested a tobacco addict, nor have I ever seen one turned down for help.”

**Marketing Intervention Mix Strategies**

**What Did “Help” Look Like?**

When an addict came into the Gloucester Police Department asking for help, there was no arrest or jail sentence (price). An officer took them to a local hospital, where they were paired with a volunteer “ANGEL” who helped guide them through the process (product), including ensuring they received care from one of more than a dozen treatment centers that could receive them immediately (place). Working with partners in the community, the police department secured scholarships in order to fully fund in-patient programs for addicts (price). The department also developed an agreement with local drug stores to give people struggling with addiction access to free naloxone without a prescription (place). The program was referred to as Hope Not Handcuffs and was promoted on the department’s website, through social media (e.g., Facebook, Twitter), by word of mouth from fellow addicts, and in news stories (promotion).
Outcomes

The police chief’s post instantly went viral, shared by more than 30,000 people, “liked” by 33,000, and viewed more than two million times. Over the next few weeks, Campanello’s office received notes of support, numerous thank you letters, and calls from reporters from around the world.

In 2016, a year and a half after opening the police department’s doors for help, only two people had overdosed on opioids, close to 525 people had been placed into treatment programs, and there had been a 30 percent reduction in crimes associated with addiction: “breaking-and-entering, smash-and-grab, shoplifting.” And on the national level, more than 200 law enforcement departments in 28 states had joined the movement.

WHAT IS SOCIAL MARKETING?

Social marketing is a distinct marketing discipline, one that has been labeled as such since the early 1970s. Early efforts adopting a social marketing approach were those focused on family planning, tobacco, and HIV/AIDS, and now include additional efforts to improve public health, prevent injuries, protect the environment, contribute to communities, and, more recently, enhance financial well-being. Several definitions from social marketing veterans are listed in Box 1.1 of this chapter, beginning with one we have adopted for use in this text and one from the International Social Marketing Association (iSMA).

We believe that after you have reviewed these definitions, it will seem clear there are several common themes. Social marketing is about (a) influencing behavior change, (b) utilizing a systematic planning process that applies marketing principles and techniques, (c) focusing on priority audience segments, and (d) delivering a positive benefit for individuals and society. Each of these themes is elaborated upon in the next four sections.

We Focus on Behavior Change

Similar to commercial sector marketers’ objective, which is to sell goods and services, social marketers’ objective is to successfully influence behavior change. We typically want to influence priority audiences to do one of four things: (1) accept a new behavior (e.g., composting food waste); (2) reject a potentially undesirable behavior (e.g., starting smoking); (3) modify a current behavior (e.g., increase physical activity from three to five days of the week or decrease the number of fat grams consumed); or (4) abandon an old undesirable behavior (e.g., texting while driving). We may be encouraging a one-time behavior (e.g., installing a low-flow showerhead) or hoping to establish a habit and prompt a repeated behavior (e.g., taking a five-minute shower). More recently, Alan Andreasen suggested a fifth arena, in which we want to influence people to continue a desired behavior (e.g., giving blood on an annual basis), and a sixth, in which we want people to switch a behavior (e.g., take the stairs instead of the elevator).
Although benchmarks may be established for increasing knowledge and skills through education, and although efforts may need to be made to alter existing beliefs, attitudes, or feelings, the bottom line for the social marketer is whether the priority audience actually adopts the behavior. For example, a specific behavior that substance abuse coalitions want to influence is women’s consumption of alcohol during pregnancy. They recognize the need to inform women that alcohol may cause birth defects and convince them that this could happen to their baby. In the end, however, their measure of success is whether the expectant mother abstains from drinking.

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

We Use Systematic Planning Processes

The American Marketing Association defines marketing as “the activity, set of institutions, and processes for creating, communicating, delivering, and exchanging offerings that have value for customers, clients, partners, and society at large.” For social marketing, the most fundamental principle underlying this approach is application of a customer orientation to understanding barriers that priority audiences perceive to adopting the desired behavior and benefits they want and believe they can realize. The process begins with alignment on the social issue to be addressed and an environmental scan to establish a purpose and focus for a specific plan. A situation analysis (SWOT) helps identify organizational strengths to maximize and weaknesses to minimize, as well as external opportunities to take advantage of and threats to prepare for. Marketers then select a priority audience they can best influence and satisfy. We establish clear behavior objectives and target goals the plan will be developed to achieve. Formative research is conducted to identify audience barriers, benefits, motivators, the competition, and influential others. This inspires the positioning of the offer, one that will appeal to the desires of the priority audience, and the game requires that we do this more effectively than the competition. We then consider the need for each of the major intervention tools in the marketer’s toolbox, the “4Ps,” to influence priority audiences: product, price, place, and promotion, also referred to as the marketing intervention mix. As will be noted several times in this text, not all 4P intervention tools are always needed for a given behavior
BOX 1.1

Definitions From a Few Social Marketing Veterans (Obtained via Personal Correspondence) and the International Social Marketing Association (iSMA)

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

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

Social Marketing seeks to develop and integrate marketing concepts with other approaches to influence behaviours that benefit individuals and communities for the greater social good. Social Marketing practice is guided by ethical principles. It seeks to integrate research, best practice, theory, audience and partnership insight, to inform the delivery of competition sensitive and segmented social change programmes that are effective, efficient, equitable and sustainable.

—iSMA, 2014

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

—Alan Andreasen, 2014

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

—Jeff French, 2014

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

—Doug McKenzie-Mohr, 2014

Social Marketing is a way to reduce the barriers and increase the facilitators to behaviors that improve the quality of life for individuals and society. It uses concepts and planning processes from commercial marketing to make behaviors “fun, easy, and popular.” It goes beyond communication, public service announcements, and education to give you a 360-degree view of potential causes and solutions for health and human service problems.

—Mike Newton-Ward, 2014

change effort. They should, however, be considered in order to determine if they are needed to more effectively and efficiently reduce barriers to behavior change and provide personal desired benefits. An evaluation methodology is established, leading to a budget and implementation plan. Once a plan is implemented, ideally first with a pilot, results are monitored and evaluated, and strategies are altered as needed.
We Select a Priority Audience

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

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

The Primary Beneficiary Is Society

Unlike commercial marketing, in which the primary intended beneficiary is the corporate shareholder, the primary beneficiary of the social marketing program is society. The question many pose and banter about is, who determines whether the social change created by the program is beneficial? Although most causes supported by social marketing efforts tend to draw high consensus that the cause is good, this model can also be used by organizations who have the opposite view of what is good. Abortion is an example of an issue where both sides argue that they are on the “good” side, and both use social marketing techniques to influence behavior change. Who, then, gets to define “good”? Some propose the United Nations’ Universal Declaration of Human Rights (http://www.un.org/en/documents/udhr/) as a baseline with respect to the common good. Some share the opinion of social marketing consultant Craig Lefebvre, who posted the following on the Georgetown Social Marketing Listserv:

“Good” is in the eye of the beholder. What I consider to be an absolute right and therefore worthy of extensive publicly funded social marketing campaigns, you may consider to be an absolute wrong. Organ donation is an absolute wrong for those whose religious beliefs preclude the desecration of bodies yet it is considered an important cause worthy of social marketing dollars by those not constrained by the same belief structure.

Alan Andreasen’s comments on the listserv focused on the role of the social marketing consultant versus the client or funder:

We need to be clear that social marketers are “hired guns” (excuse the metaphor). That is, give us a behavior you want influenced and we have some very good ways of making it happen. Each of us is free to work on behavior-influence challenges with which we feel comfortable and
“comfort” is both a matter of personal ethics and a matter of expertise. The decision about which behaviors ought to be influenced is not ours to make. Clients, or even societies or governments, make those judgments.¹⁶

WHERE DID THE CONCEPT ORIGINATE?

When we think of social marketing as “behavior change for social good,” it is clear that this is not a new phenomenon. Consider efforts to free slaves, abolish child labor, influence women’s right to vote, and recruit women into the workforce (see Figure 1.1).

Launching the discipline formally more than 40 years ago, the term social marketing was first introduced by Philip Kotler and Gerald Zaltman, in a pioneering article in the *Journal of Marketing*, to describe “the use of marketing principles and techniques to advance a social cause, idea or behavior.”¹⁷ Their focus was on answering the question whether marketing could be used to persuade people to adopt behaviors that would be better for them, their families and friends, and the society in general. “We decided to call such marketing actions Social Marketing as a short term for Social Cause Marketing. Little did we know that Social Marketing would later be confused with Social Media Marketing.”¹⁸ In intervening decades, interest in and use of social marketing concepts, tools, and practices has spread from the arena of public health and safety and into the work of environmentalists, community advocates, and poverty workers, as is evident in the partial list of seminal events, texts, journal articles, and more in Appendix E of this text, History Annex.

HOW DOES IT DIFFER FROM COMMERCIAL MARKETING?

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

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

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

For a variety of reasons, we believe social marketing is more difficult than commercial marketing. Consider the financial resources the competition has to make drinking alcohol look cool, yard cleanup using a gas blower easy, fried food look tasty, and bright green lawns the norm. And consider the challenges faced in trying to influence people to do any of the following:

- Give up an addictive behavior (e.g., stop smoking)
- Change a comfortable lifestyle (e.g., reduce thermostat settings)
- Resist peer pressure (e.g., be sexually abstinent)
- Go out of their way (e.g., take unused paint to a hazardous waste site)
- Be uncomfortable (e.g., give blood)
- Establish new habits (e.g., exercise five days a week)
- Spend more money (e.g., buy recycled paper)
- Be embarrassed (e.g., let lawns go brown in the summer)
- Hear bad news (e.g., get an HIV test)
- Risk relationships (e.g., take the keys from a drunk driver)
- Worry about unintended consequences (e.g., get an HPV vaccine for your 12-year-old to help prevent sexually transmitted diseases)
- Give up leisure time (e.g., volunteer)
- Reduce pleasure (e.g., take shorter showers)
- Give up looking good (e.g., wear sunscreen)
- Spend more time (e.g., flatten cardboard boxes before putting them in recycling bins)
• Learn a new skill (e.g., create and follow a budget)
• Remember something (e.g., take reusable bags to the grocery store)
• Risk retaliation (e.g., drive the speed limit)

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

• *A customer orientation is critical.* The marketer knows that the offer (product, price, place) will need to appeal to the priority audience by promising to solve a problem they have or satisfy a want or need.

• *Exchange theory is fundamental.* The priority audience must perceive benefits that equal or exceed the perceived costs they associate with performing the behavior. As Bill Smith says in this chapter’s opening quote, we should think of the social marketing paradigm as “Let’s make a deal!”

• *Marketing research is used throughout the process.* Only by researching and understanding the specific needs, desires, beliefs, and attitudes of target adopters can the marketer build effective strategies.

• *Audiences are segmented.* Strategies must be tailored to the unique wants, needs, resources, and current behaviors of differing market segments.

• *All 4Ps (product, price, place, promotion) are considered.* A winning strategy requires an integrated approach, one utilizing all relevant intervention tools in the toolbox, not just relying on advertising and other persuasive communications.

• *Results are measured and used for improvement.* Feedback is valued and seen as “free advice” on how to do better next time.

**HOW DOES IT DIFFER FROM OTHER DISCIPLINES?**

Social marketing is often confused or equated with several other related disciplines (nonprofit marketing, public sector marketing, and education), emerging behavior change theories and frameworks (behavioral economics, nudge, social change, community-based social marketing, community-based prevention marketing), and popular promotional tactics (social media, advertising, cause promotion). This section briefly helps distinguish 11 of these from the social marketing discipline, and the following section elaborates on the application of social marketing by corporations, nonprofit/nongovernmental organizations, and public sector agencies. Note as well that each of the behavior change theories and frameworks is elaborated on in Chapter 4 and that promotional tactics are described further in Chapters 13 and 14.
• **Nonprofit/NGO marketing.** Those responsible for marketing in the nonprofit/NGO sector most often focus on supporting utilization of the organization’s programs and services (e.g., ticket sales for a new museum exhibit), purchases of ancillary products and services (e.g., at museum stores), volunteer recruitment (e.g., for museum docents), advocacy efforts (e.g., inviting elected officials to visit a museum), and fundraising (e.g., for expansion efforts).

• **Public sector marketing.** In this domain, marketing efforts are most often counted on to support utilization of governmental agency products and services (e.g., the post office, community clinics), engender citizen support (e.g., for road improvements), and increase compliance (e.g., with policies regarding public health practices at farmers’ markets).

• **Education.** Educational efforts designed to address social issues focus primarily on increasing awareness and understanding. Although social marketers may use education as a tactic (e.g., sharing information about why pet waste is dangerous for fish), it is rarely sufficient to actually influence behaviors, as it does not often address major barriers, benefits, and motivators a priority audience has in regard to adopting the behavior (e.g., access to plastic bags to pick up pet waste).

• **Health communications.** Efforts with this label typically use only one of the marketing intervention strategies, those associated with promotion.

• **Behavioral economics.** This psychological framework proposes theories on why and when people make irrational choices, and then focuses on how changes in the external environment can prompt and promote positive, voluntary, individual-level behavior change. Social marketers can (and do) explore these insights when developing social marketing strategies.

• **Nudge.** This framework, introduced by Richard Thaler and Cass Sunstein in 2009, proposes that behaviors that improve health, wealth, and happiness can be influenced by presenting choices (e.g., children in a school cafeteria can be influenced to choose healthier options by placing them at eye level and/or at the beginning of the food display). This is an innovative strategy that can inspire social marketers.21

• **Social change.** We see social marketing as only one approach to creating positive social change. Others include advocacy (e.g., for gay marriage), innovation (e.g., electric cars), technology (e.g., the iPhone), infrastructure (e.g., bike lanes), science (e.g., a cure for HIV/AIDS), corporate business practices (e.g., calories posted on menu boards), funding (e.g., for malaria nets), and laws (e.g., prohibiting texting while driving). Although the focus of social marketing is on individual behavior change, you will read in the final sections of this chapter the role we see for social marketers to play in influencing these alternate social change strategies.
• **Community-based social marketing (CBSM).** This behavior change approach, developed by Doug McKenzie-Mohr in 1999, focusing, at the time, primarily on behaviors to protect the environment. It emphasizes several of the steps in the 10-step social marketing planning model presented in this text: selecting behaviors, identifying barriers and benefits, developing strategies, piloting, and then broad-scale implementation and evaluation.22

• **Community-based prevention marketing.** This practice engages influential and relevant community members in the process of identifying problems, mobilizing resources, planning and implementing strategies, and tracking and evaluating progress toward objectives and goals. It is not focused just on achieving behavior change but also on building community.23 Social marketers can (and do) benefit from this practice by engaging community members and organizations in the planning, implementing, and evaluation process.

• **Social media.** This is a communication channel that social marketers use and includes Facebook, Twitter, blogs, YouTube, and other social networking sites. It is only one of numerous promotional tactics that social marketers use.

• **Cause promotion.** These promotional efforts are designed to increase awareness and concern for a social cause (e.g., global warming). Social marketers leverage these efforts by focusing on behaviors to alleviate these concerns.

**WHAT IS ITS VALUE PROPOSITION?**

In March 2011, Nancy Lee, Mike Rothschild, and Bill Smith wrote a document to address two very narrow questions: (a) What does social marketing add to the already considerable understanding of social change developed by many other disciplines? and (b) What is social marketing’s unique value proposition? See Box 1.2 for their response.

**WHO DOES SOCIAL MARKETING?**

In most cases, social marketing principles and techniques are used by those on the front lines who are responsible for influencing public behaviors to improve public health, prevent injuries, protect the environment, engender community involvement, and, more recently, enhance financial well-being. It is rare that these individuals have a social marketing title. More often, they are program managers or those working in community relations or communication positions. Efforts usually involve multiple change agents who, as Robert Hornik points out, may or may not be acting in a consciously coordinated way.24 Most often, organizations sponsoring these efforts are public sector agencies: international agencies such as WHO; national agencies such as the Centers for Disease Control and Prevention, the Ministries of Health, the Environmental Protection Agency, and the National Highway Traffic Safety Administration; state agencies such as departments of health, social and human services, and fish and wildlife; and local jurisdictions, including public utilities, fire departments, schools, parks, and community health clinics.
BOX 1.2

A Declaration of Social Marketing’s Unique Principles and Distinctions

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

March 2011

Principles Shared With Other Disciplines

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

- AUDIENCE ORIENTATION: Social marketers view their audience as decision-makers with choices, rather than students to be educated, or incorrigibles to be regulated. Social Marketing begins with a bottom-up versus a top-down perspective, and therefore rejects the paternalist notion that “experts know what is best and will tell people how to behave for their own good” in favor of an audience-centered approach which seeks to understand what people want and provide them support in acquiring it.

- SEGMENTATION: In order to enhance efficiency and effectiveness, subsets of populations are selected, evaluated, and then prioritized as targets based on useful aggregation variables. The segments selected are those most likely to adopt the intended behavior or most important to the organization’s goals, and most likely to provide value in yielding societal benefit. Even among difficult to reach populations, strategies are developed that appeal to those within the chosen population that are the “most ready for action.”

- BEHAVIOR FOCUS: Behavior is defined as an individual’s observable action or lack of action. Social Marketing is interested in behavior that results in societal benefit. Many marketing strategies also have intermediate responses, but Social Marketing success is ultimately measured on whether the desired behavior was adopted. It is not sufficient to merely change awareness, knowledge, attitudes, or behavioral intentions.

- EVALUATION: Efforts are evaluated, focusing on ongoing measurement of outcomes (levels of target audience behavior change) and the intended impact this has had on societal benefits. Social Marketing is a continuous process in which evaluation and monitoring provide data on the audience’s preferences and the environmental changes necessary to maintain and expand the impact of programs.

- CONSIDERATION OF UPSTREAM & MIDSTREAM TARGET AUDIENCES: Efforts to influence individuals downstream are often enhanced by also targeting those who are upstream (policymakers, corporations) and/or those who are midstream (e.g. friends, family and influential others).

(Continued)
Unique Principles

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

• VALUE EXCHANGE: Social Marketing is unique with respect to other behavior change tools in that the offer that is made is based on an understanding of the target audience's perceived self-interest, which will be rewarded for performing the desired behavior. The concept of value exchange states that consumers will choose a behavior in exchange for receiving benefits they consider valuable and/or reducing barriers that they consider to be important. An exchange may result when the marketer has created a program that is perceived by each side to provide value.

• RECOGNITION OF COMPETITION: In a free-choice society there are always alternative options available. Competition can be described in terms of choice offerings available in the environment that lead to alternative behaviors. Social Marketing strategies lead to a unique exchange offering that is perceived by the audience to have greater value than that of any other available option.

• THE 4Ps OF MARKETING: Product, Place, Price, and Promotion represent the fundamental building blocks of Social Marketing interventions. These tools are used to reduce the barriers that make it difficult for people to behave as desired, and to increase the benefits that induce people to be more likely to behave. The tools are used in concert to develop a favorably perceived relationship that is more appealing than all alternate choices. Social marketers assess and then balance the need for, and use of, these four elements to influence optimal change.

• SUSTAINABILITY: Sustainability results from continuous program monitoring and subsequent adjustment to changes occurring in the audience and environmental condition. This is necessary to achieve long run behavior.

Distinctions

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

• COMMERCIAL MARKETING: Social Marketing is built upon many of the traditional processes and principles of commercial marketing, especially Customer Orientation, Exchange Theory, Competition, Segmentation, the 4Ps, Relationships, and a Service Orientation. Social Marketing differs in that the primary responsibility of commercial marketers is to increase the company's wealth by increasing individuals' well-being, whereas the primary responsibility of social marketers is to increase individual and societal well-being.

• COMMUNICATIONS: Communications is a process involved with every human activity and is widely used by many approaches to behavior change. In Social Marketing, communications
refers to the activity that describes the benefits of the offering, its price and accessibility to the target audience. Communicating the integrated value of the marketing mix is unique to social marketing, and is not offered by any other communication discipline. Communications alone generally is not sufficient to influence behaviors.

- **REGULATION:** Regulation also seeks to influence behaviors for the benefit of society, but often does so by increasing the cost of undesired competing behaviors (e.g., penalties for breaking laws) rather than increasing the benefits of desired behaviors. Those regulations that offer a benefit for an appropriate behavior (e.g., various tax incentives) more closely fit within the rubric of Social Marketing. Social marketers also have a role to play in influencing policymakers to adopt regulations (upstream changes) that complement and accelerate behavior changes among large-scale audiences, and to increase compliance with existing regulations.

- **SOCIAL MEDIA:** Social media leverage the social networks of target audiences, and are more personal and interactive forms of message delivery than are the traditional mass media. From a conceptual perspective, though, these electronic systems are similar to print, broadcast, and outdoor, in that each are ways of delivering messages and are, therefore, a subset of communications.

- **NONPROFIT MARKETING:** The marketing function for nonprofit organizations often focuses on fund-raising, advocacy, and program development, as well as supporting utilization of the organization’s products and services.

- **BEHAVIORAL ECONOMICS:** Behavioral economics merges economics, psychology, sociology, and anthropology theory and research that focus on how changes in the external environment prompt and promote voluntary individual level behavior change. Social Marketing is a process that should apply these insights along with others to maximize the efficiency and effectiveness of large-scale behavior change.

**Unique Value Proposition**

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

- self-interest
- barriers to behavior, and
- competitive forces that create attractive choices.

These lead to interventions that

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

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

Professionals working in for-profit organizations in positions responsible for corporate philanthropy, corporate social responsibility, marketing, or community relations might support social marketing efforts, often in partnership with nonprofit organizations and public agencies that benefit their communities and customers. Although the primary beneficiary is society, they may find that their efforts contribute to organizational goals as well, such as a desired brand image or even increased sales. Safeco Insurance, for example, provides households with tips on how to protect rural homes from wildfire; Crest supports the development of videos, audiotapes, and interactive lesson plans to promote good oral health behaviors; and thousands of customers at Home Depot’s stores have attended weekend workshops focusing on water conservation basics, including drought-resistant gardening (see Figure 1.2).

Finally, there are marketing professionals who provide services to organizations engaged in social marketing campaigns, firms such as advertising agencies, public relations firms, marketing research firms, and marketing consulting firms—some that specialize in social marketing.

**WHAT SOCIAL ISSUES CAN BENEFIT?**

Table 1.1 presents 50 major social issues that could benefit from the application of social marketing principles and techniques. This is only a partial list, with data only for the United States, but representative of the aforementioned five major arenas social marketing efforts usually focus on: health promotion, injury prevention, environmental protection, community involvement, and financial well-being. For each of the social issues listed, the status could improve if and when we are successful in increasing the adoption of desired related behaviors.

**OTHER WAYS TO IMPACT SOCIAL ISSUES**

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

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

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

Legal/political/policymaking/law enforcement: Sometimes when all else fails, the laws have to get tougher, especially when the vast majority of the market has adopted the behavior and only the most resistant are still holding out (late adopters and laggards, as they are labeled in marketing). As of August 2017, 44 states, the District of Columbia, Puerto Rico, Guam, and the U.S. Virgin Islands have banned text messaging for all drivers. All U.S. states now have a 0.08% blood alcohol level limit for drinking and driving, more strict than the prior 0.10%. Some states have considered laws requiring deposits on cigarettes similar to those requiring deposits on beverage containers (and rewarding their return). And in a policy statement published in December 2006 in the journal Pediatrics, the American Academy of Pediatrics asked Congress and the Federal Communications Commission to impose severe limits on children-targeted advertising, including the banning of junk food ads during shows viewed predominantly by those under age eight. And, in 2013, a law enforcement crackdown on sex trafficking rescued dozens of victims.

Improved infrastructures and built environments: If we really want more people to ride bikes to work, we'll need more bike lanes, not just bike paths. If we really want to reduce cigarette butt littering on roadways, perhaps automobile manufacturers could help out by building in smoke-free cigarette butt containers so that disposing a cigarette inside the car is just as convenient as tossing it out the window. If we want to reduce electricity consumption, perhaps more hotels could ensure that lights in rooms can be turned on only when the room key is inserted in a master switch and therefore are automatically turned off when guests leave the room with their key. And if we want more people at work to take the stairs instead of the elevators, we may want to have elevators skip the first three floors except in cases of emergency or to accommodate those with a physical disability, and we certainly want to take a look at the cleanliness and lighting of the stairway. How about a little music? Social marketers can play a huge role in influencing policymakers and corporations to make these changes.
### Table 1.1 50 Major Issues Social Marketing Can Impact in the U.S. Alone

<table>
<thead>
<tr>
<th>Health-Related Behaviors to Impact</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco Use</td>
<td>Cigarette smoking is the leading cause of preventable disease and death in the U.S., accounting for more than 480,000 deaths every year, or one of every five deaths.(^a)</td>
</tr>
<tr>
<td>Heavy/Binge Drinking</td>
<td>More than a fourth (28.2%) of 18- to 24-year-olds binge drink (have five or more drinks on one occasion).(^b)</td>
</tr>
<tr>
<td>Fetal Alcohol Syndrome</td>
<td>About 1 in 20 women (5%) take street drugs during pregnancy including cocaine, heroin, and ecstasy.(^c)</td>
</tr>
<tr>
<td>Obesity</td>
<td>Almost half (48.3%) of adults do not meet guidelines for aerobic physical activity levels.(^d)</td>
</tr>
<tr>
<td>Teen Pregnancy</td>
<td>43% of sexually active 9th- through 12th-graders did not use a condom during their last sexual intercourse.(^e)</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>One in seven Americans living with HIV are unaware of their infection.(^f)</td>
</tr>
<tr>
<td>Fruit and Vegetable Intake</td>
<td>More than three out of four adults (82%) do not consume the recommended five or more servings a day.(^g)</td>
</tr>
<tr>
<td>High Cholesterol</td>
<td>19% of adults have never had their cholesterol checked.(^h)</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>59% of mothers do not meet recommendations to breastfeed infants until they reach at least six months.(^i)</td>
</tr>
<tr>
<td>Breast Cancer</td>
<td>23% of women 50–74 have not had a mammogram within the past two years.(^j)</td>
</tr>
<tr>
<td>Prostate Cancer</td>
<td>60% of men 40 and older have not had a PSA test within the past two years.(^k)</td>
</tr>
<tr>
<td>Colon Cancer</td>
<td>35% of adults 50 and older have never had a sigmoidoscopy or colonoscopy.(^l)</td>
</tr>
<tr>
<td>Birth Defects</td>
<td>60% of women of childbearing age are not taking a multivitamin containing folic acid.(^m)</td>
</tr>
<tr>
<td>Immunizations</td>
<td>28% of 19- to 35-month-old children are not receiving all recommended vaccinations.(^n)</td>
</tr>
<tr>
<td>Skin Cancer</td>
<td>Only 9% of youth wear sunscreen most of the time.(^o)</td>
</tr>
<tr>
<td>Oral Health</td>
<td>26% of adults have not visited a dentist or dental clinic in the past year.(^p)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>More than a third of U.S. adults have prediabetes, and the majority don’t know it.(^q)</td>
</tr>
<tr>
<td>Blood Pressure</td>
<td>19% of the estimated 78 million Americans with high blood pressure don’t know they have it.(^r)</td>
</tr>
<tr>
<td>Eating Disorders</td>
<td>57% of college students cite cultural pressures as a cause of eating disorders.(^s)</td>
</tr>
</tbody>
</table>
### Injury Prevention–Related Behaviors to Impact

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drinking and Driving</td>
<td>39.3% of high school students report having ridden one or more times in the past year in a car driven by someone who had been drinking.†</td>
</tr>
<tr>
<td>Texting or Emailing While Driving</td>
<td>41.5% of high school youth reported texting or emailing while driving.¹</td>
</tr>
<tr>
<td>Head Injuries</td>
<td>Among the 68% of high school youth who had ridden a bicycle in the past year, 80.1% had rarely or never worn a bicycle helmet.⁴</td>
</tr>
<tr>
<td>Proper Safety Restraints for Children in Cars</td>
<td>83% of children ages four to eight ride improperly restrained in adult safety belts.⁵</td>
</tr>
<tr>
<td>Suicide</td>
<td>8.6% of 9th- through 12th-graders have attempted suicide one or more times during the past 12 months.⁶</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>One in four women and one in seven men have been victims of physical violence by an intimate partner in their lifetime.⁷</td>
</tr>
<tr>
<td>Gun Storage</td>
<td>One out of three homes with kids have guns, and 1.7 million children live with unlocked, loaded guns.²</td>
</tr>
<tr>
<td>School Violence</td>
<td>16.2% of students in high schools reported carrying a weapon (e.g., gun, knife, or club) onto school property during a given month.⁸</td>
</tr>
<tr>
<td>Fires</td>
<td>60% of reported home fire deaths resulted from fires in homes with no operational smoke alarm.⁹</td>
</tr>
<tr>
<td>Falls</td>
<td>More than one third of adults 65 and older fall each year, and one out of five falls causes a serious injury such as broken bones or a head injury.⁵</td>
</tr>
<tr>
<td>Household Poisons</td>
<td>Medications are the leading cause of child poisoning. In 2013, over 59,000 children were seen in an emergency room for medicine poisoning. That’s one child every nine minutes.¹⁰</td>
</tr>
</tbody>
</table>

### Environmental Behaviors to Impact

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waste Reduction</td>
<td>Only 55% of aluminum beer and soda cans, 34% of glass containers, and 31% of plastic bottles and jars are recycled.⁹⁹</td>
</tr>
<tr>
<td>Wildlife Habitat Protection</td>
<td>Nearly 90% of global fish stocks are either fully fished or overfished.¹⁰</td>
</tr>
<tr>
<td>Forest Destruction</td>
<td>About 15 million trees are cut down annually to produce the estimated 10 billion paper bags we go through each year in the United States.⁹⁹</td>
</tr>
<tr>
<td>Toxic Fertilizers and Pesticides</td>
<td>An estimated 75% of households use harmful pesticides indoors.¹⁰</td>
</tr>
</tbody>
</table>

(Continued)
### Environmental Related Behaviors to Impact

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Impact Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water Conservation</td>
<td>A leaky toilet can waste as much as 200 gallons a day.ii</td>
</tr>
<tr>
<td>Air Pollution From Automobiles</td>
<td>An estimated 86% of workers commuted to work by private vehicle.ii</td>
</tr>
<tr>
<td>Air Pollution From Other Sources</td>
<td>If every household in the United States replaced their five most frequently used light fixtures with bulbs that have the ENERGY STAR® label, more than 1 trillion pounds of greenhouse gas emissions would be prevented.kk</td>
</tr>
<tr>
<td>Composting Garbage and Yard Waste</td>
<td>An estimated 20% to 30% of all trash that ends up in a landfill in the United States could have been composted.11</td>
</tr>
<tr>
<td>Unintentional Fires</td>
<td>90% of wildland fires in the United States are caused by human carelessness.mm</td>
</tr>
<tr>
<td>Litter</td>
<td>Tobacco products comprise 38% of all U.S. roadway litter.</td>
</tr>
<tr>
<td>Watershed Protection</td>
<td>An estimated 40% of Americans don’t pick up their dogs’ waste.sas</td>
</tr>
</tbody>
</table>

### Community Involvement Behaviors to Impact

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Impact Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organ Donation</td>
<td>As of November 2017, 116,592 patients were on a waiting list for an organ transplant.pp</td>
</tr>
<tr>
<td>Blood Donation</td>
<td>38% of the U.S. population is eligible to give blood, but less than 10% do in a given year.sq</td>
</tr>
<tr>
<td>Voting</td>
<td>Only 61% of the eligible voting-age population voted in the 2016 U.S. presidential election.rr</td>
</tr>
<tr>
<td>Screen Time</td>
<td>Children 8–18 are now (2017) averaging 7.5 hours of screen time each day.ss</td>
</tr>
<tr>
<td>Bullying</td>
<td>At least 10% of children are bullied regularly.tt</td>
</tr>
<tr>
<td>Animal Adoption</td>
<td>Approximately 1.5 million dogs and cats in shelters are not adopted and are euthanized each year.uu</td>
</tr>
</tbody>
</table>

### Financial Behaviors to Impact

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Impact Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identity Theft</td>
<td>About 15 million U.S. residents have their identities used fraudulently each year, with financial losses totaling upwards of $50 billion.xx</td>
</tr>
<tr>
<td>Establishing Bank Accounts</td>
<td>7% of household in the U.S. do not have a bank account.www</td>
</tr>
<tr>
<td>Fraud</td>
<td>More than a quarter (26%) of adults have been victimized by fraudulent telemarketing techniques at some point in their lives.xx</td>
</tr>
</tbody>
</table>

*Note:* Statistics are estimated and approximate. Data are for the United States, and dates for these statistics are given in the table notes.
Changes in corporate policies and business practices: In 2010, the American Beverage Association announced their Clear on Calories initiative in support of First Lady Michelle Obama’s anti-obesity campaign. Instead of printing the number of calories per serving on the back of the can in small print, members will print the number in large print on the front of the can—and the number will represent the total calories per container, versus per serving, since most consumers drink the entire can (see Figure 1.3).

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

Information/Education: As mentioned earlier, the line between social marketing and information/education is actually a clear one, with education serving a useful tool for the social marketer but one rarely working alone. Most often, education is used to communicate information and/or build skills but does not give the same attention and rigor to creating and sustaining behavior adoption. It primarily applies only one of the four marketing intervention tools, that of promotion. Many in the field agree that when the information is motivating and “new” (e.g., the finding that secondhand tobacco smoke increases the risk of sudden infant death syndrome), it can move a market from inaction—even resistance—to action very quickly. This, however, is unfortunately not typical. Consider the fact that death threats for tobacco use have been posted right on cigarette packs for decades, and yet WHO estimates that 1 billion youth and adults (ages 15 and older) worldwide still smoke cigarettes. Marketing (reducing barriers and offering benefits in exchange for behaviors) has often been missing in action.

Media: News and entertainment media exert a powerful influence on individual behaviors, as they shape values, are relied on for current events and trends, and create social norms. Many argue, for example, that the casual and sensational attitude of movies and television toward sex has been a major contributor to the problems we see among young people today. On the flip side, the media were a powerful factor influencing people to donate time and resources to victims of the earthquake in Haiti, the tsunami in Japan, the shootings at Sandyhook Elementary school in Connecticut, and the severe and destructive hurricane in New Jersey.

SOCIAL MARKETING UPSTREAM AND MIDSTREAM

As noted earlier, many believe that to date we have been placing too much of the burden for improving the status of social issues on individual behavior change and that
social marketers should direct some of their efforts to influencing upstream factors and midstream influentials. We agree. (See Box 1.3 for examples of audiences midstream and upstream.)

Alan Andreasen describes this expanded role of social marketing well:

Social marketing is about making the world a better place for everyone—not just for investors or foundation executives. And, as I argue throughout this book, the same basic principles that can induce a 12-year-old in Bangkok or Leningrad to get a Big Mac and a caregiver in Indonesia to start using oral dehydration solutions for diarrhea can also be used to influence politicians, media figures, community activists, law officers and judges, foundation officials, and other individuals whose actions are needed to bring about widespread, long-lasting positive social change.31

Consider the issue of the spread of HIV/AIDS. Downstream, social marketers focus on decreasing risky behaviors (e.g., unprotected sex) and increasing timely testing (e.g., during pregnancy). If they moved their attention upstream, they would notice groups and organizations and corporations and community leaders and policymakers that could make this change a little easier or a little more likely, ones that could be a priority audience for a social marketing effort. Social marketers could, with others, influence pharmaceutical companies to make testing for HIV/AIDS quicker and more accessible. They could work with physician groups to create protocols to ask patients whether they have had unprotected sex and, if so, encourage them to get an

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**BOX 1.3**

*Examples of Potential Midstream and Upstream Audiences to Influence*

<table>
<thead>
<tr>
<th>Potential Midstream Audiences</th>
<th>Potential Upstream Audiences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family members</td>
<td>Policymakers</td>
</tr>
<tr>
<td>Friends</td>
<td>Corporations</td>
</tr>
<tr>
<td>Neighbors</td>
<td>Media</td>
</tr>
<tr>
<td>Colleagues</td>
<td>Law enforcement</td>
</tr>
<tr>
<td>Health care providers</td>
<td>Celebrities</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>School districts</td>
</tr>
<tr>
<td>Teachers</td>
<td>Nonprofit organizations</td>
</tr>
<tr>
<td>Librarians</td>
<td></td>
</tr>
<tr>
<td>Community leaders</td>
<td></td>
</tr>
<tr>
<td>Church members</td>
<td></td>
</tr>
<tr>
<td>Checkout clerks at retail stores</td>
<td></td>
</tr>
</tbody>
</table>
HIV/AIDS test. They could encourage offices of public instruction to include curricula on HIV/AIDS in middle schools. They could support needle exchange programs. They could provide the media with trends and personal stories, maybe even pitching a story to producers of soap operas or situation comedies popular with the target audience. They might look for a corporate partner that would be interested in setting up testing at their retail location. They could organize meetings with community leaders such as ministers and directors of nonprofit organizations, even providing grants for them to allocate staff resources to community interventions. They could visit hair salons and barbershops, engaging owners and staff in spreading the word with their clients. They could testify before a senate committee to advocate increased funding for research, condom availability, or free testing facilities. And midstream, they might appeal to parents to talk with their teens about how HIV/AIDS is spread and to midwives to speak to pregnant women about the importance of testing.

The marketing process and principles are the same as those used for influencing individuals: utilizing a customer orientation, establishing clear behavior objectives and target goals, conducting audience research, crafting a position statement, developing a marketing intervention mix, and conducting monitoring and evaluation efforts. Only the priority audience has changed.32

CHAPTER SUMMARY

Social marketing is a process that uses marketing principles and techniques to change priority audience behaviors that will benefit society as well as the individual. This strategically oriented discipline relies on creating, communicating, delivering, and exchanging offerings that have positive value for individuals, clients, partners, and society at large.33

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

Social marketing is often confused or equated with several other related disciplines (nonprofit marketing, public sector marketing, education and health communications), emerging behavior change theories and frameworks (behavioral economics, nudge, social change, community-based social marketing, community-based prevention marketing), and popular promotional tactics (social media, cause promotion).

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

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

**MARKETING DIALOGUE**

**When Is Social Marketing “Social Marketing”?**

In February 2010, a member of the Georgetown Social Marketing Listserve of 2,000-plus members sent a message with the subject line “To Stir the Pot.” The message included a link to an announcement of a new type of speed bump unveiled in West Vancouver, Canada, one intended to persuade motorists to slow down in the vicinity of an elementary school. A pavement painting appears to rise up as the driver gets closer to it, reaching a full 3D image of a child playing, creating the illusion that the approaching driver will soon hit the child (link: http://beta.news.yahoo.com/blogs/upshot/canada-unveils-speed-bump-optical-illusions-children.html). As anticipated, several members were adamant that this effort was not social marketing: “This is not marketing. Where’s the exchange? What does the driver get [benefit] in exchange for slowing down?” Counterarguments stressed that “by slowing down [the cost], the driver gets a great benefit—a reduced probability of hitting a child!” Some were troubled by unintended secondary effects (“cultivating resentful drivers not liking to be tricked”), and others weren’t impressed with the potential efficacy, convinced that “it might work once but then wouldn’t be sustainable.” A few felt it met the basic criteria for social marketing: “Since social marketing’s basic purpose is to change behavior for the good or betterment of society as a whole, I think this initiative seems to fit well into that criteria. However, I question whether or not it will work.”

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

- **Does the effort have to use all 4Ps in order to be called social marketing?** No, but your efforts will be more successful when you at least consider all four intervention tools to overcome audience barriers, increase benefits, consider audience-reported motivators, upstage the competition, and engage key influencers.

- **Does there have to be a narrowly defined and priority audience segment?** No, but this is also a best practice, based on there being very few homogeneous populations, and the fact that different segments within these populations have different barriers and benefits and therefore require different interventions.

- **Is a communications-only campaign a social marketing campaign?** It might be. A campaign that is intended to influence a behavior (e.g., putting infants on their back to sleep) to benefit individuals and
society (e.g., prevent sudden infant death syndrome) but uses only words (e.g., “Back to Sleep” printed on the strip of a newborn diaper) meets the basic criteria for a social marketing effort. However, it is more likely to be successful if other influence tools are used as well (e.g., demonstrations as part of a free class for new moms at a local hospital).

• **What needs to be present for an effort to be called social marketing?** An effort can be considered a social marketing effort when it is intended to influence a priority audience behavior to benefit society as well as the individual. And we should keep in mind that the priority audience may be a school district or corporation upstream.

---

**DISCUSSION QUESTIONS AND EXERCISES**

1. How does social marketing, as described in this chapter, differ from what you thought it was in the past?

2. Share an example of a social marketing effort that you are aware of.

3. What is the biggest distinction between social marketing and commercial marketing?

4. How does social marketing differ from education? Health communications? Social media? Behavioral economics?

5. Reflect back on the Marketing Highlight. What was the key to success in influencing addicts to come to the police station for help?