

A RATIONALE FOR NEW APPROACHES

Information is Not Enough

ccurate information about AIDS is critical to halting its spread. In the epidemic's early days, the U.S. Centers for Disease Control and Prevention (CDC) focused on giving Americans the facts they needed to protect themselves and to care for those who are infected.

But time has demonstrated that information is not enough. Now, almost everyone knows the basic facts about HIV and its transmission. People need more than facts; they need help in changing behaviors that put them at risk.

Today, one of CDC's top priorities is to promote healthy behaviors among Americans 25 years old and under that will prevent the sexual transmission of HIV and other sexually transmitted diseases (STDs).

Government Funding is Not Enough

rom the start, the energy and creativity to fight the AIDS epidemic has come from groups with deep commitment and differing perspectives. Community-based organizations, AIDS service organizations, people with and affected by AIDS, faith communities, and state and local health departments provide critical links to different populations.

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Equally important, positive behavior change related to HIV prevention is closely associated with social norms, beliefs, and attitudes. Even those who are "hard for us to reach" (and often at highest risk) are part of unique social networks and are heavily influenced by social factors.

Lastly, we have learned from those on the front lines that the HIV/AIDS epidemic is much more than a threat to public health. It forces us to address social

inequities, discrimination, grief, and loss, and the continued need to support one another and develop new leaders for this fight. For all of these reasons, intensified community collaboration and united action are central to effective HIV prevention programs.

STARTING WITH SOCIAL MARKETING

o respond to these challenges, the CDC has launched a nationwide HIV Prevention Marketing Initiative (PMI). The principles of this Initiative come from the discipline of social marketing.



Social marketing uses many of the tools of commercial marketing—such as systematic audience research, the theories of "exchange"

and "competition," and creative promotional strategies—to encourage specific audiences to voluntarily adopt practices or ideas that benefit both the individual and society.

Over the last 40 years, social marketing interventions to discourage smoking, promote seat belt use, and prevent heart disease have shown that tailored messages conveyed through credible channels and supported by appropriate services can change behavior.

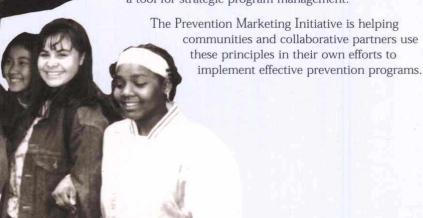
These successes are linked to more than simply "mass media" or "advertising" campaigns. Social marketing brings to the challenge of HIV prevention three important features:

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 a focus on understanding how and why individuals behave as they do,

• creation of beneficial exchange relationships to influence those behaviors, and

· a tool for strategic program management.



THE AUDIENCE AS THE MEASURE

ocial marketing is part science, part art. It studies what influences and motivates given behaviors among groups of people. It then designs strategies to affect those behaviors—either to change or sustain them over time.

Virtually all program decisions are therefore based on *audience research*. Any single behavior is viewed as a choice among many competing options. The task is to know why one option is more compelling to people than other options.

Define the problem. Epidemiology and behavioral science help identify the behaviors that put people at risk for HIV. But knowledge of the target group's perspective helps planners understand the *barriers* to performing preventive behaviors, and the *benefits* that are meaningful to a given audience.

Segment audiences. Demographics provide an obvious way to divide groups, but not necessarily the most useful one. Within communities and within age groups, people share different values, are affected by different pressures, and receive their information through different channels. Researchers sometimes define groups according to such *lifestyle* characteristics.

Even those who share lifestyles, however, can be at different levels of *readiness* for new behaviors. In a single peer group, one teenager might be committed to sexual abstinence, another might be sexually active but willing to try condoms, another might deny he or she is at any risk of sexually transmitted disease. *Behavioral science* offers key insights into the factors most associated with these different attitudes and behaviors. Those insights usually suggest distinct message approaches.

Set behavioral goals. Guided by extensive audience research, social marketers define audience segments critical to their overall program goals and set measurable targets for each. Interventions then aim to change specific practices; to influence specific beliefs; and to increase specific skills and areas of knowledge.

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INFLUENCING THE MARKET

ocial marketing includes *the concept of exchange*—the assumption that people do things in exchange for benefits they hope to receive. People weigh options and make these behavioral choices within complex environments. In the commercial world, this context is called the *marketing mix*. It consists of four elements, often called the **Four Ps—price, product, place, and promotion**. Socially oriented programs also use this framework for analyzing consumer decisions.

Product: what is being offered to the target audience. Products often are behaviors to be changed or maintained, such as correct and consistent condom use or ways to negotiate safer sex. Behavioral research and epidemiological data help identify the behaviors most crucial to affect, and the benefits people value most. Social marketing then "positions" these behaviors as offering benefits that are meaningful to the target audience.

Price: what the audience must give up or overcome to receive the product's benefits. The most basic price is monetary—like the cost of a condom. The highest prices are often social and psychological—inconvenience, embarrassment, loss of status. Messages and services attempt to address the various barriers an audience must face. This might mean making abstinence easier to talk about or condoms less embarrassing to purchase.

Place: audience-preferred channels and locations for receiving the product or related information and support services. Planners must identify places that offer maximum reach and greatest audience receptivity. Planners must also aim to help audiences overcome key barriers by expanding access to products or services; for example, by training peer counselors or creating anonymous telephone hotlines.

Promotion: *efforts to persuade the target audience to try or adopt the product being offered.* The promotional strategy includes not only the content of messages, but also their tone and appeal, their timing, and the credible channels and spokespersons that will deliver them.



A PROGRAM MANAGEMENT TOOL

- ocial marketing outlines a cyclical process for planning, carrying out, and evaluating interventions.
 - **Step 1: Assess** the nature and extent of local HIV prevention problems for a specific audience, available program partners and resources, and barriers to program development.
 - Step 2: Plan a program that brings messages and support services to a specific audience segment through channels in ways that are credible and appealing, and provide repeated exposure.
 - **Step 3: Develop and pretest** strategies and materials for appropriate channels. Whether face-to-face counseling, print, mass media, or community activities, all approaches should be audience tested.
 - Step 4: Deliver materials, messages, and support (such as training and other services) in an integrated way so that activities are mutually reinforcing.
 - Step 5: Evaluate and alter strategies, messages, materials, and channels as needed to meet evolving audience needs.

Feedback is the major feature of this entire process. At each step, planners listen to their target audience. The final step of the intervention is to feed evaluation results back into the planning process, so that programs evolve according to audience needs.

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AN INTEGRATED FRAMEWORK

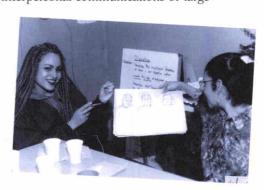
ocial marketing is most effective when it draws upon various technical skills and resources—audience research, behavioral science, creative media and message development—to design risk reduction programs that offer meaningful benefits and reduce felt barriers for the people it aims to reach. These technical tools and their strategic management are best complemented by solid community mobilization and services, as well as supportive and responsive state and national policies.

Even if a single organization is responsible for managing a social marketing program, success will depend upon the combined resources, support, and participation of many groups, including the target audiences themselves. Support from the mass media can dramatically expand the reach of messages. Policy makers can focus public attention on program issues. Credible community spokespersons, such as business and religious leaders, can validate public discussion.

Often the most powerful channels for reaching a target audience are the least obvious. TV spots and posters leave a different impact than messages carried through grassroots networks or by peers. Knowing whether to go with interpersonal communications or large-

scale productions requires a deep understanding of local realities.

Integrating these many voices to achieve common prevention objectives is the cornerstone of an effective social marketing program.



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PREVENTION MARKETING AND THE CDC

Experience has shown that community interventions are most effective when designed and managed by communities themselves. The Prevention Marketing Initiative supports this goal. The CDC offers "prevention marketing" as a practical framework that combines the strategic tools of social marketing, the powerful insights of behavioral science, and the expertise and commitment of community participation, to help diverse groups design effective prevention programs.

Much of the expertise and many of the principles associated with social marketing interventions are already being employed in HIV prevention programs. What social marketing offers is a process for designing HIV prevention programs around behavioral goals and perceived audience benefits for behavior change.

CDC is contributing funds for pilot prevention marketing interventions and is providing technical assistance to state and local health departments, as well as to collaborative partners and community coalitions. Further information on activities under the Prevention Marketing Initiative is available in the brochure, "HIV Prevention and America's Youth."

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