

Social Marketing for Behavior Change

Critical Elements for Project LAUNCH Grantees at All Stages, Part 3: NOW We Can Talk about Promotion



By Rebecca Brookes

This tool has been developed for Project LAUNCH Grantees, and it is intended to be used in conjunction with a webinar titled *Social Marketing for Behavior Change: Critical Elements for Project LAUNCH Grantees at All Stages, Part 3*.

This tool and the associated webinar are designed to support Project LAUNCH grantee social marketing efforts, regardless of the project's stage.



By watching the accompanying webinar and utilizing the tools provided, grantees will be able to:

- Describe elements of effective messaging, including the use of Plain Language
- Utilize answers from the Creative Plan Worksheet as a foundation to develop a Communications Plan
- Translate theories into concrete steps by using a template and an example of a real world initiative

This tool is the third in the Social Marketing series (see archived webinar listing and associated tools in the box below). Other tools provide background information on social marketing theories and concepts, as well as concrete steps for grantees to follow when thinking through and planning social marketing efforts. The steps provided are based on the systematic model for social marketing. This tool continues with background information and concrete examples of community-based social marketing initiatives.

Project LAUNCH Social Marketing Series

Archived Webinars:

- [Social Marketing for Behavior Change: Critical Elements for Project LAUNCH Grantees at All Stages, Part 1](#)
- [Social Marketing for Behavior Change: Critical Elements for Project LAUNCH Grantees at All Stages, Part 2](#)

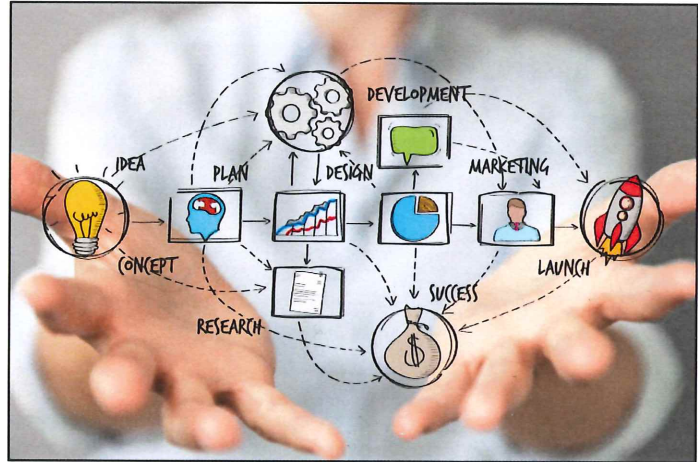
Associated Tools:

- [Social Marketing for Behavior Change: Critical Elements for Project LAUNCH Grantees at all Stages, Part 1](#)
- [Social Marketing for Behavior Change: Critical Elements for Project LAUNCH Grantees at All Stages, Part 2](#)

Now that you have an understanding of the elements of social marketing for behavior change from the first two webinars and tools, we can focus on the promotional part of the Social Marketing Mix.

The Communications Plan

The previous webinar discussed the start of the creative development of your campaign by developing the Creative Brief, which is the foundation for all promotion and outreach of your project. The tool accompanying that webinar was the Creative Platform Worksheet, and it provided guidance on how to draft the Creative Brief.



The Creative Brief is a consistent roadmap for all stakeholders of your initiative. It gets everyone on the same page about your vision. It establishes expectations. It is useful to share with anyone connected to your program: partners; vendors (like an ad agency, graphic designer, or media buyer); staff; and board. It is not, however, for distribution to the public. Your creative brief is a “living” document. Projects change, requirements are added or removed, and new insights are discovered. You can update this document as the project evolves to make sure everyone remains on the same track.

There is a difference between a Creative Brief and a Communications Plan. The Creative Brief is a concise summary statement for the over-arching project (usually one page) while the Communications Plan goes into detail about communication openings (times, locations, and situations with highest leverage for you), communication vehicles, and how you will monitor success. While the Creative Brief is useful to share with stakeholders, the Communications Plan is generally an internal document.

The webinar will share tips for effective message development, the importance of using “plain language,” and examples of communications strategies and tactics.

Social Marketing for Behavior Change, Part 3

The Communications Plan



Please don't attempt to fill in this Communications Plan Worksheet without completing the [Creative Platform Worksheet](#) from the [previous webinar](#). These worksheets build on one another.

The answers to the steps from the Creative Platform Worksheet will be necessary to finalize this one. Those steps were:

- State the problem you want to solve; the behavior you want to change.
- Restate your primary audience. Remember, you want to use specific segmentation (no "general public").
- Restate the Exchange for this audience. What benefits do you promise if they engage in the behavior?
- What do you want your Target Audience to THINK, FEEL, AND DO as a result of your campaign?
- What information, emotional elements, promises, reassurance, etc. do you need to provide so that they think, feel and do the above?
- What are my core messages? (not copy or slogans!).
- What tone and manner are best for this audience?

Building on those answers, fill in the steps below:



STEP 1 – (Rational appeals) – What does your audience expect to hear?
What might be unexpected and therefore create a new way to think about the issue?





STEP 2 – (Emotional appeals) - How can you evoke an authentic emotional response?



STEP 3 – What rewards will your message promise the audience for taking action?



STEP 4 – How will your communications make this promise credible? (Testimonials? Credible spokesperson? How-to demonstration? Other?)





STEP 5 – What are the key “openings” for your primary audience? (times, locations, situations where they will be more likely to hear and absorb your message)



STEP 6 – Based on these openings, which communication vehicles should you use?





STEP 7 – List one of your communications strategies and accompanying tactics (note: you will likely have several strategies, but this is for the worksheet exercise). (A strategy is a broad approach to achieve a given objective, whereas tactics are detailed steps that you take to achieve a given strategy.)

Strategy	Tactics for that Strategy
1)	1)
	2)
	3)
	4)



STEP 8 - What indicators will you use to measure success of your communications?

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Social Marketing for Behavior Change, Part 3

The Communications Plan



An example of the template in action using the Vermont Department of Health Tobacco Control Program (VDH TCP) and their outreach to providers statewide to increase tobacco counseling in their practices.

About the example

Significant disparity in tobacco burden among those insured by Medicaid indicated need for the Vermont Tobacco Control Program to target Medicaid members. Upstream efforts with Vermont Medicaid on expansion of the cessation benefit applied to all Medicaid members 18 and over. Promotional efforts focused on two audiences: tobacco users of lower socio-economic status and statewide providers, segmented by type.

Research with providers demonstrated four separate segments; focusing on “all providers” would not have been an effective use of limited resources. The primary audience turned out to be “frequent frontline providers,” which equated to Primary Care Providers (PCPs). They felt compassion for their smoking patients and saw cessation coaching as a way to engage with them. They needed increased knowledge about the universe of cessation resources, tools for having challenging conversations, support for their patients, and a simple, easy way to refer to one hub.



STEP 1 – (Rational appeals) – What does your audience expect to hear?
What might be unexpected and therefore create a new way to think about the issue?



Research with PCPs showed that they expected to hear facts about the harms of tobacco and the benefits of cessation from the Vermont Department of Health, which they already knew (and said they didn’t need to be educated about). After years of “educating” providers, VDH TCP focused instead on the crucial role of providers in cessation and how they could make provider/patient communications easier and less stressful for providers.



STEP 2 – (Emotional appeals) - How can you evoke an authentic emotional response?



Research with PCPs through in-depth interviews showed that they used Motivational Interviewing frequently with patients. This helped them feel compassion for patients using tobacco. VDH TCP therefore switched all mass media from a “scary” message from the smoker’s point of view (the CDC Tips from Former Smokers campaign) to an empathetic appeal. The tag line became “no judgments.” While this appeal was for tobacco users, providers saw the promotion as well. It helped to reinforce that the VDH TCP and provider were on the same wavelength in terms of understanding and helping the tobacco user.



STEP 3 – What rewards will your message promise the audience for taking action?



Your patients will be twice as likely to quit if you have a conversation about quitting, and we will make that conversation easy for you. By sending your patients to one hub, 802Quits, they will be guided to the right resources for their needs.

A secondary promise involved the turning on of CPT codes from the Medicaid office, which gave practices reimbursement for doing the counseling. (In social marketing, this is considered an “upstream” intervention, and again demonstrates that social marketing is so much more than ads, social media, or a website.) By changing this policy, which took years, another barrier to the behavior was eliminated.



STEP 4 – How will your communications make this promise credible? (Testimonials? Credible spokesperson? How-to demonstration? Other?)



The TCP filmed testimonials from real patients, many of whom described the importance of their provider in their efforts and success in quitting. Several doctors were filmed on video for peer-to-peer testimonials. They talked about why tobacco counseling was so critical and how it can be done in just a few sentences (addressing the amount of time was an important way to reduce a barrier).



STEP 5 – What are the key “openings” for your primary audience? (times, locations, situations where they will be more likely to hear and absorb your message)



PCPs told us that their primary “go to” resources were self-directed learning online: reading, websites, and apps (UptoDate). They also believed that intrapersonal conferences and meetings were of benefit to their learning. It was clear that the VDH TCP needed to be present at those times and locations where online learning might be necessary and where gatherings of providers were occurring in the state.



STEP 6 - Based on these openings, which communication vehicles should you use?



The TCP focused communication resources online by establishing a robust provider section on 802Quits.org.

To promote the website, they used hyper-targeted digital ads, using search terms providers would use to find help about tobacco counseling.



STEP 7 – List one of your communications strategies and accompanying tactics (note: you will likely have several strategies, but this is for the worksheet exercise). (A strategy is a broad approach to achieve a given objective, whereas tactics are detailed steps that you take to achieve a given strategy.)

Strategy

Tactics for that Strategy

1) Develop a robust provider section online at 802Quits.org	1) Using research with PCPs, revamp the existing website to delete unnecessary information and fill in information gaps.
	2) Create resources to make the conversations easier for providers (reducing the best practice for counseling from five steps to three steps; talking points)
	3) Have a separate section for billers and coders rather than mixing the “administrative” details in with provider resources

	4) Use existing video footage with providers and edit into at least one online digital ad
	Note: this is just the tip of the iceberg for this strategy, but it provides a quick example.



STEP 8 - What indicators will you use to measure success of your communications?



Online Metrics for 802Quits.org provider section: visits to key pages; time on pages
Number of resources on 802Quits.org provider section downloaded

Use of CPT codes (monitored by Medicaid office). CPT codes indicate when short or long-term counseling was done with a patient.

Number of prescriptions of NRT among Medicaid members (also monitored by Medicaid)

Final note: you will notice the number of times “based on research” or “PCPs told us” was mentioned in the answers on the template. This is another example of how research is critical throughout the social marketing process.

Social Marketing for Behavior Change

Critical Elements for Project LAUNCH Grantees at All Stages

Earned Media Tips



By Rebecca Brookes

How to get more earned media for your work

Reporters are just people. Like us, they have particular interests and passions, and very limited time. When you have a story you want to share with the media, you can increase the chances of getting it published by connecting your story to a reporter's interests, highlighting the locally-relevant angle of your story, and making it easy for the reporter to get the information they need to write a compelling piece. You can "pitch" a potential reporter your story.

How is a "pitch" different than a press release?

Press releases are generally sent to all media outlets in a geographic area. A pitch is a crafted, personalized communication to a specific reporter. It says to the reporter that you've taken the time to understand their work.

Pitches are done by email. The only exception to this is if you personally know the reporter, and then a call *might* be OK. It all depends on your relationship. It is best to err on the side of caution and send an email if in doubt. And don't follow up with a call – if they like your suggestion, they will reach out.

It is extremely important to make it clear that you aren't sending your pitch out to the masses. Use the reporter's name and customize the email. Reporters can sense boilerplate from a mile away.

Remember to KISS (keep it short & sweet) – a couple paragraphs at most. No jargon.

6 tips for a compelling pitch:

1. Choose the right reporter.

Make sure the reporter you target is a good fit for what you're pitching. If you don't already know the reporter and their work, do a Google News search and read their most recent work to get an idea of what stories they cover and the themes in their articles. Then, look for ways your story can supplement or expand on their subject matter. Reporters for smaller newspapers may cover everything, but still it's a good idea to know their work.

2. You are not the audience!

Reporters are interested in stories that are locally relevant or solve problems for their readers. Highlighting the “disease of the month” is not likely to get a second glance. Connect your program to a local problem with a local solution. Monitor the news in your community for opportunities to connect your activities. There may be a surge in national or regional stories that are directly related to some of the work happening in your community. If so, connect the dots for the reporter.

3. Make it clear why your content is important to readers.

Make sure the “why you should care” part of the pitch is clear. Clearly tell the reporter why your story is interesting or useful to their readers. Translate it for them. Give them concrete examples. Too often we assume that what WE care about is what a reporter should care about.

4. Give ‘em data.

Research and statistics are extremely useful to reporters and an essential ingredient to any fact-based story. Including relevant data to back up your story idea will make your pitch more valuable to the reporter.

5. Don’t follow up multiple times.

There is a reason why the reporter has not gotten back to you, and 99% of the time it’s not because they forgot to. In a perfect world, you would get a response to every single one of your pitches, whether or not the reporter chose to use it, but unfortunately that’s just not the way it is. The only thing following up multiple times will remind a journalist to do, is block your email address.

6. Don’t get discouraged!

Most people don’t get press the first time they send out a pitch. Getting press is not easy, and you will probably be unsuccessful more than you will be successful. Don’t be afraid to strike out and keep at it. Understand that seeking press opportunities should be a consistent part of your local communications strategy, within the time constraints of your work load.

The views, opinions, and content expressed in this tool, which was developed under Contract #HHSS28342003T, do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).