Using Social Marketing to Promote Preventive Behaviors Related to COVID-19

Marzeyeh Soleymani Nejad1, Javad Harooni2, Abdurrahman Charkazi3, Mohsen Shams4, Marzieh Latifi1,*

1Health Education & Health Promotion, School of Health and Safety Environment, Shahid Beheshti University of Medical Sciences, Tehran, 2Health Education, School of Health, Yasuj University of Medical Sciences, Yasuj, 3Health Education and Health Promotion, Environmental Health Research Center, Faculty of Health, Golestan University of Medical Sciences, Gorgan, 4Health Education & Health Promotion, Social Determinants of Health Research Center, Yasuj University of Medical Sciences, Yasuj, Iran

Coronavirus disease 2019 (COVID-19), is an infectious disease caused by SARS-CoV-2 virus, a newly discovered coronavirus [1]. The virus is very contagious and has spread globally [1]. On 30 January 2020, COVID-19 was declared as a Public Health Emergency of International Concern [2]. World Health Organization (WHO) also, characterized the disease as a pandemic on 11 March 2020 [3]. Data as received by WHO from national authorities shows that there were 10 185 374 cases and 503 862 deaths globally by 10:00 CEST, 30 June 2020 [4]. Increased cases globally have highlighted the need for effective actions.

Key Words: Social marketing, COVID-19, Preventive behaviors

INTRODUCTION

Coronavirus disease 2019 (COVID-19), is an infectious disease caused by SARS-CoV-2 virus, a newly discovered coronavirus [1]. The virus is very contagious and has spread globally [1]. On 30 January 2020, COVID-19 was declared as a Public Health Emergency of International Concern [2]. World Health Organization (WHO) also, characterized the disease as a pandemic on 11 March 2020 [3]. Data as received by WHO from national authorities shows that there were 10 185 374 cases and 503 862 deaths globally by 10:00 CEST, 30 June 2020 [4]. Increased cases globally have highlighted the need for effective actions.
Therefore, the best strategy to deal with the infection is prevention aimed at reducing transmission in the community [1]. Based on the current evidence, the virus spread mainly through respiratory droplets, bodily fluids, fecal-oral, direct contact, and environmental surfaces [5]. Therefore, to prevent infection and to slow transmission of COVID-19, people should involve in special behaviors, including: maintaining physical distance from others; washing hands, wearing face masks, avoiding touching face, covering mouth and nose when coughing or sneezing; staying home in case of feeling unwell [6]. Some studies show that most people have a sufficient knowledge about COVID-19 [7-9]. However, they don’t completely adherence to [9]. Therefore, using effective behavior change strategies are needed to control COVID-19.

There are three main strategies to change or modify social behaviors: For people who consider the behavior change but do not have the required knowledge or skills, education is effective. Enforcement of laws and regulation is appropriate for the entrenched people who have no desire to change and resist deliberately. Marketing can be useful to bridge the gap between these two approaches and will be a good solution for those who are aware of the need to change but have not considered changing [10]. Therefore, social marketing is the key to behavior change, when education or law is not helping.

**SOCIAL MARKETING**

Theories of communication and social change are useful to the extent that they are able to lead to the solution of social problems [11]. The concept of social marketing has been defined in the health education literature for over years. According to Andreasen, “Social marketing is the application of commercial marketing technologies to the analysis, planning, execution, and evaluation of programs designed to influence the voluntary behavior of target audiences in order to improve their personal welfare and that of their society” [5]. It is typically defined as a program-planning process that applies commercial marketing concepts and techniques to promote voluntary behavior change [5,12]. Social marketing facilitates the acceptance, rejection, modification, abandonment, or maintenance of particular behaviors by groups of individuals, often referred to as the target audience [12].

The six benchmark criteria for social marketing interventions, according to Andreasen, include:

1. **Behavior change**
   
   Social marketing interventions seek to change behavior and have specific measurable behavioral objectives.

2. **Customer research**
   
   Evaluating and monitoring a social marketing intervention is necessary from begin at the first of the planning process till end. As program interventions are implemented, each is monitored to assess its effectiveness to determine if it is worthy of being sustained, and to identify activities that require mid-course revision. Formative research and intervention elements are pre-tested with target group [11].

3. **Audience segmentation**
   
   Social marketers know it is not possible to be “all things to all people.” Rather, marketing differentiates populations into subgroups or segments of people who share needs, wants, lifestyles, behavior, and values that make them likely to respond similarly to public health interventions. Social marketers are more likely to divide populations into distinct segments on the basis of current behavior, future intentions, readiness to change, product loyalty, and/or psychographics. Compared with other systematic planning processes, social marketing devotes greater attention and resources to segmentation research, the identification of one or more segments as the target audience to receive the greatest priority in program development, and development of differential marketing strategies for selected population segments [13].

4. **Marketing mix**
   
   Four Ps should be considered, including Product, Price, Place, and Promotion. Product refers to the set of benefits associated with the desired behavior or service usage. To be successful, social marketers believe that the product must provide a solution to problems that consumers consider important and must offer them a benefit they truly value. Price refers to the cost or sacrifice exchanged for the promised benefits. This cost is always considered from the con-
sumer’s point of view. As such, price usually encompasses intangible costs, such as diminished pleasure, embarrassment, loss of time, and the psychological hassle that often accompanies change, especially when modifying ingrained habits. Place refers to the distribution of goods and the location of sales and service encounters or the ideal location where consumers can obtain information about the product. Promotion includes the type of persuasive communications marketers use to convey product benefits. Promotional activities may encompass advertising, public relations, printed materials, promotional items, signage, special events and displays, face-to-face selling, and entertainment media [3].

5. Exchange

The central element of any influence strategy is creating attractive and motivational exchanges with target audiences. This factors that may impact a program, prior to designing the program. Data are gathered about forces external or internal to the social change campaign that impinges on its ability to successfully influence its target adopters. These factors include the political context, demographics, economics, physical setting, sociocultural factors, etc. [14].

6. Competition

Defined as other behaviors, campaigns and offerings that compete for the target audience’s time and attention. Promoted products always face competition for the consumer’s attention and resources in a dynamic marketplace of ideas, priorities, and choices. Therefore, marketing communication explicitly acknowledges the environment within which decisions are made and develops strategies to increase the desirability or perceived relative value of particular decisions within that context, so that the product can compete favorably with consumers’ other options [15]. Intervention considers the appeal of competing behaviors and uses strategies that seek to remove or minimize this competition [5].

APPLICATION OF SOCIAL MARKETING IN THE CONTEXT OF COVID-19

Despite education and law enforcement from the beginning of the pandemic, some people still do not follow healthy instructions to prevent the disease. Involvement in the behaviors, for this group, need to be more attractive. Social marketing can help promoting healthy behaviors of such groups [16-20].

According to social marketing, a situation analysis is needed to find a better view of the environment, such as the previous and/or current public health efforts, communication, and marketing related to COVID-19. Passing some months of the pandemic, a gap analysis will determine in which areas more emphasis need to be in place.

In the next step, target audience should be selected and segmented based on the related variables. Primary and secondary audience may be considered. In the context of COVID-19, the public as the primary audience can be segmented into different age, job, and sex groups, and people with underlying disease which make them more susceptible to COVID-19. The segmented audience then should get analyzed from different perspectives, i.e. their current knowledge, attitude, behaviors, and their real and perceived barriers and benefits.

In overview of demand side, communication goal and objectives related to COVID-19 should be described. The communication goal would be adherence to healthy behaviors/instructions related to COVID-19. The objectives will be what we want the audience know, feel, and behave.

Marketing mix strategies then should be defined including four Ps strategies:

- Tangible products are protective equipment such as face mask. Maintaining physical distance from others, washing hands, wearing face masks, avoiding touching face, covering mouth and nose when coughing or sneezing and staying home in case of feeling unwell are the other forms of the product. Product strategies should include new products ideas which are more comfortable to use, as well as positioning the product in the consumer mind.

- People have to bear monetary price to buy the protective equipment in addition to non-monetary price such as the difficulty of applying the equipment or adhering in the behaviors. Therefore, ways should be thought that decrease costs and reinforce desired behaviors as the price strategy.

- Place is everywhere the product is accessed or the behaviors are done. For the place strategy we have to think of the ways to make this place more convenient and/or intervene at a key moment.
To promote the offering of the product and identifying benefits that outweigh the barriers through multiple channels and cues to actions, key messages and communication channels should be outlined.

Based on the results of the steps above, the intervention plan should be developed. Evaluation can be planned based on the desired outcomes which was determined as the objectives.

**CONCLUSION**

Social marketing is highly effective in encouraging people to engage in proper health behaviors. Various studies reported successful campaigns that used this approach all around the world [16–20]. Segmentation of target population are of crucial importance for the effectiveness of interventions.

At the individual level, health strategies contain encouraging people to observe personal hygiene as the simplest measure as well as expressing the benefits of behavior such as staying at home or wearing a face mask and not to attend at various events, providing free Internet, etc. At the social level, for those who have to attend in closed environments (e.g., offices), incentives such as paying transportation costs, remote working, and providing them with protective equipment such as masks, alcohol, and shields are useful. Providing accurate statistics and reporting the status of medical centers, developing measures for families who have lost their jobs, banning ceremonies (that unnecessary cause crowding) can be effective.

All plans should be piloted before implementation. Besides, information sources should be organized, and media to inform the target audience should be identified. Using well-known experts and celebrities as well as using popular programs and channels such as television are useful steps in speed up conveying messages and, more importantly, increasing the effectiveness of programs.

**REFERENCES**

1. Cascella M, Rajnik M, Aleem A, Dulebohn SC, Di Napoli R. Features, Evaluation, and Treatment of Coronavirus (COVID-19). [Internet]. Treasure Island (FL): StatPearls Publishing; 2021 Jan. [cited 2020 Sep 6]. Available from: https://www.ncbi.nlm.nih.gov/books/NBK554776/.
2. Eurosurveillance Editorial Team. Note from the editors: World Health Organization declares novel coronavirus (2019-nCoV) sixth public health emergency of international concern. Eurosurveillance 2020;25(5):200131e.
3. World Health Organization. Editor Statement on the Second Meeting of the International Health Regulations. [Internet]. Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV); 2005. [cited 2021 Feb 24]. Available from: https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations; 2005.
4. World Health Organization. Coronavirus disease (COVID-19): situation report, 162. [Internet]. [cited 2021 Mar 1]. Available from: https://www.who.int/docs/default-source/coronaviruse/20200630-covid-19-sitrep-162.pdf?sfvrsn=e00a5466_2.
5. Ong SW, Tan YK, Chia PY, Lee TH, Ng OT, Wong MSY, Marimuthu K. Air, Surface Environmental, and Personal Protective Equipment Contamination by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) From a Symptomatic Patient. JAMA 2020;323(16):1610-2.
6. World Health Organization. Coronavirus disease (COVID-19) advice for the public [Internet]. [cited 2021 Mar 1]. Available from: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public.
7. Zhong BL, Luo W, Li HM, Zhang QQ, Liu XG, Li WT, Li YI. Knowledge, attitudes, and practices towards COVID-19 among Chinese residents during the rapid rise period of the COVID-19 outbreak: a quick online cross-sectional survey. Int J Biol Sci 2020;16(10):1745.
8. Chen Y, Jin YL, Zhu L, Fang ZM, Wu N, Du MX, Jiang MM, Wang J, Yao YS. The network investigation on knowledge, attitude and practice about COVID-19 of the residents in Anhui Province. Zhonghua Yu Fang Yi Xue Za Zhi 2020;54(4):367-73.
9. Li W, Liao J, Li Q, Baskota M, Wang X, Tang Y, Zhou Q, Wang X, Luo X, Ma Y, Fukuoka T, Ahn HS, Lee MS, Chen Y, Luo Z, Liu E. Public health education for parents during the outbreak of COVID-19: a rapid review. Ann Transl Med 2020;8(10):628.
10. Glanz K, Rimer BK, Viswanath K, editors. Theory, research, and practice in health behavior and health education: John Wiley & Sons; 2008.
11. Fishbein M, Cappella JN. The role of theory in developing effective health communications. J Comm 2006;56: S1-17.
12. Nicolaas M, O’Neill N, Sohrabi C, Khan M, Agha M, Agha R. Evidence Based Management Guideline for the COVID-19 Pandemic-Review article. Int J Surg 2020;
13. Andreasen AR. Marketing Research That Won’t Break the Bank: A Practical Guide to Getting the Information You Need. (2nd ed). Jossey-Bass; San Francisco. 2002.

14. Campbell N, Lackland D, Chockalingam A, Lisheng L, Schiffri EL, Harrap S. The World Hypertension League and International Society of Hypertension call on governments, nongovernmental organizations, and the food industry to work to reduce dietary sodium. *J Clin Hypertens* 2014;16(2):99-100.

15. Haider M, Platter H, Higginbotham B. Selected Issues in Global Health Communications: BoD-Books on Demand; 2018.

16. DEARING JW, Rogers EM, Meyer G, Casey MK, Rao N, Campo S, Henderson GM. Social marketing and diffusion-based strategies for communicating with unique populations: HIV prevention in San Francisco. *J Health Commun* 1996;1(4):343-64.

17. Conner RF, Takahashi L, Ortiz E, Archuleta E, Muniz J, Rodriguez J. The Solaar HIV prevention program for gay and bisexual Latino men: using social marketing to build capacity for service provision and evaluation. *AIDS Educ Prev* 2005;17(4):361-74.

18. Duboviks J, Kite M. The Effectiveness Of Social Marketing In HIV Prevention: A Literature Review. Economic Science For Rural Development. 2020;43(1): 2-6.

19. Aya Pastrana N, Lazo-Porras M, Miranda JJ, Beran D, Suggs LS. Social marketing interventions for the prevention and control of neglected tropical diseases: A systematic review. *PLoS Negl Trop Dis* 2020;14(6): e0008360.

20. Almestahiri Rd, Rundle-Thiele S, Parkinson J, Arli D. The use of the major components of social marketing: a systematic review of tobacco cessation programs. *Soc Mar Q* 2017;23(3):232-48.