



Submission for the Inquiry into Personal Health Promotion Interventions Using Telephone and Web-based Technologies

Health and Ambulance Services Committee

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Witness Availability:

All authors are available to appear as witnesses as part of this inquiry.

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Ross is a Senior Lecturer in Marketing at Macquarie University in Sydney. He previously worked at and remains a member of the Centre for Health Initiatives at the University of Wollongong, and also worked at the Institute for Social Marketing at The Open University (ISM-Open) and prior to that the ISM at the University of Stirling. Ross is also President of the Australian Association of Social Marketing (AASM). His expertise lies in social marketing, consumer cultures, and critical marketing teaching and research. He has been a principal or named investigator on projects attracting over \$6.5m in research funds in Australia, UK, Europe and India. He has extensive experience managing and conducting research using mixed methodologies including longitudinal quantitative surveys, systematic reviews and meta-analyses, focus groups, depth interviews, observation research, ethnography, content analysis, and experimental studies. His current research interests include, social marketing theory and practice, strategic and systems level social marketing, consumer cultures, critical social marketing, energy efficiency sustainability, marketing ethics, and critical marketing. Ross is also a specialist on the topic of alcohol marketing, and more recently gambling consumption. He has acted an expert advisor to the Scottish Government, the European Commission, Cancer Institute, and a range of other NGOs on various social marketing topics. He has published 60 academic journals, book chapters and conference papers including in outlets such as *European Journal of Marketing*, *Journal of Business Research*, *Marketing Theory*, *Journal of Macromarketing*, and *Journal of Social Marketing*; and has delivered numerous client reports and invited speaking engagements. His book co-authored with Jeff French entitled *Strategic Social Marketing* was released in April 2015.



Telephone and Web-based Technology Interventions

I am writing in my capacity as the President of the Australian Association of Social Marketing (AASM), as a leading international scholar in the field of social marketing.

Telephone and web-based technologies such as SMS, smartphone apps, gamification, online/mobile games, online quizzes and tools can be used in personal health interventions using two approaches: health promotion or social marketing.

There appears to be a great deal of confusion in government circles about the terms 'social marketing' and 'health promotion' and often they are used interchangeably. However, there are important differences. Health promotion refers to communication of expert defined information and education messages to influence health behaviours. However, research has consistently shown that health promotion alone is often ineffective – for example people already know that smoking is harmful to their health but some people still smoke. This tells us that providing information and educating people alone does not work.

Social marketing is the use of marketing principles to facilitate social good. It is not simply use of promotions or social advertising to achieve social goals. Rather, social marketing is a strategic and multi-faceted approach to social interventions and programmes based on core principles of:

- Citizen orientation – designing and delivering services, interventions and programmes around the needs, wants, lives and values of priority groups using a bottom up rather than top down expert driven approach.
- Being research and insight driven – Social marketing programmes are informed by research with priority citizen groups, and stakeholders to gain insight on appropriate intervention approaches that will engage and empower them, and result in positive social outcomes.
- Informed by judicious use of theory – Using behavioural, psychological, social, cultural, and systems theory as appropriate to inform development, implementation, and evaluation of programmes.
- Creating value – Social marketing programmes should focus on value co-creation with and for citizens, stakeholders and society utilising basic human principles of mutuality, exchange and reciprocity.
- Segmentation and positioning – Use segmentation and positioning strategy to ensure that interventions are appropriate for different priority groups – avoiding one size fits all approaches.
- Using a broad social marketing mix – Involves making use of a wide range of tools to deliver programmes from communications and promotion, to service delivery, advocacy, policy changes, and influencing social norms.
- Competition – Good social marketing programmes consider the influence and responses to competing forces to the desired behaviour and social outcomes. For example interventions tackling youth smoking would consider the benefits perceived by smokers of smoking and seek

to address this for example by identifying benefits from not smoking (saving money, feeling fitter and more active, less exclusion in social situations).

- Critical and reflexive thinking – Social marketing encourages critical and reflexive thinking about how social interventions and programmes are developed and delivered, and seeks to facilitate multi-stakeholder perspectives, acknowledge biases, and achieve consensus building.
- Systems thinking – Social marketing identifies the important of systems thinking, acknowledging the complexity of contemporary social issues that require strategic, multi-faceted and holistic approaches to achieve social change.

(See French and Gordon, 2015)

Research suggests that social marketing offers a more effective approach to health interventions than health promotion (see Stead et al. 2007). Therefore, as President of the AASM I wish to submit the following key points to the inquiry:

1. Telephone and web based interventions for personal health that aim to change behaviour should be done within social marketing approach not health promotion.
2. These interventions will not work in isolation as targeting individuals only works when there are supporting services, infrastructure, policies, social culture, social norms and systems.
3. Multi-faceted, systems approaches to improve public health that use social marketing principles are required.

Yours sincerely

Dr Ross Gordon

A handwritten signature in black ink, appearing to be 'Dr Ross Gordon', written in a cursive style.