

Interview with François Lagarde November 2011

The first, François. You are Canada's leading social marketer. How is this field managed and applied in your Country?

So, social marketing has been used in Canada since the early 70's. In fact, social marketing was created in 1971, I think, not I think, I'm sure by Kotler and Zaltman in an article. Canada in the 70's launched national social marketing initiatives especially Health Canada, the national, the federal government department of health, an organization for which I worked at the time in the 80's actually, I was younger in the 70's but 'Participaction' which was a national health promotion, fitness promotion agency. So it started early so Canada is an early adopter of social marketing. In the 80's and 90's it continued to be mostly used at the national level but increasingly also in the environmental field so not only public health but also environment and I would say during the last ten to fifteen years a growing number of people are referring to social marketing not only at the national level but also and mostly at the local level and people in Canada such as Doug McKenzie-Mohr created the community based social marketing. Health Canada with Jim Minz and other great social Canadian marketer did a lot to educate and train people so now across the country there are a number of universities giving social marketing courses. It's been used in public health and environment but also in other fields like the elections, housing and a number of other issues but it's still growing and we still need to learn and grow.

The second question. You are in Italy to teach social marketing to our health professionals in Emilia-Romagna: do you find differences in the application of social marketing in Europe, and more specifically in Italy?

The short answer is no. I think by definition social marketing adapts to audiences and contexts so the process of doing audience analysis and the process of taking into account the context is very similar. Obviously the manifestation and I would add to that that the apprehension towards social marketing are very much the same. Many people don't like the idea of referring to marketing as a strategy for social change so I have the same apprehension everywhere I go in the world. There is also a around segmentation and pretty often people don't like segmentation here and elsewhere because they think it's exclusion when it's really taking into account the uniqueness of segments and there is always and everywhere a tension between focusing on behaviors or focusing on the community so I see that everywhere and it's very similar. What I think becomes interesting is for me teaching in Italy is to appreciate through you and the participants of my course, the unique dynamics of the community level, the 'Campanile' mentality as well as the role of the various partners in civil society. That is rather unique and every country has a civil society or at least democratic countries have a civil society but how it plays and the respective role of the public sector, the non profit sector, the private sector, the philanthropic sector, there the dynamics are unique and different.

Third question. Advocacy, Social marketing, Health Communication: what are the most relevant differences?

Ok, well. Social marketing is about, as a goal, normally would pursue behavioral change or societal change objectives and ultimately social marketing is about understanding the dynamics and the factors that would lead to behavior adoption or adoption of a policy and we also in social marketing believe that it's not just through communication that we can achieve that and that in fact, the reason why people would adopt a behavior or not adopt a behavior would have to do with environmental factors and context and so a social marketer, social marketing design strategy that includes communication but also deals with product, price, place, type of strategy so creating the condition not talking but doing things to make the behavior more attractive and easy for people. Health communication is the promotional aspect of a social marketing strategy and it helps be very effective at designing communication and exchanging information with audiences to highlight the benefits of the behavior but also sometimes to communicate to stakeholders what they can do to create the conditions which, so communication is the exchange, production and exchange of information and other things to convince and persuade and inform audiences about what's desired. Advocacy is a form of health communication, in order to convince a decision maker or an institution to adopt a policy or change practises that contribute to the health goal or the social marketing goal. So it's a little bit like Russian dolls, advocacy within health communication, health communication within social marketing and they all play a role and ideally we want to do advocacy as part of a social marketing campaign, we obviously we will use communication but we will go beyond just advocating and communicating.

Last question for you. What are the ethical implications of using social marketing in health promotion?

Ethical considerations. First of all, a lot of people think marketing is just about manipulation and manipulation is bad and of course it's bad and if marketing equates manipulation, it's not a good idea. Marketing is not about manipulation. In fact, it's when it's well done it's actually taking into account the audience and the citizens' prospective and impose on us to make the adjustment necessary to meet their needs and wants. So from an ethical point of view one could argue that in fact marketing is more ethical than experts imposing on people what they think is desirable.

In practise, then I often summarize ethical consideration around three key ideas. Ends being pursued, means used to achieve the ends and the actual consequences of our interventions.

So the ends being pursued could be good or bad. Normally they are good on paper from a public health point of view but maybe the realty of why we do something is questionable. The means being used to achieve our ends could be good or bad or questionable and we often face the ethical dilemma of the ends would justify the means even if the means are questionable. Well, from an ethical point of view, we need to think twice. An example of that is what you decide not to say in a social marketing strategy because you think it would be counter-productive. Are you exaggerating benefits in order to get people's attention. Are you underplaying disadvantages so that people would value more. So those are the types of ethical dilemmas and the last would be the consequences and in ethical dilemmas around consequences, what would be the unintended consequence of your intervention.

A doctor often says first do no harm. Well, it's true in social marketing, and the last thing you want is to introduce an intervention that would lead to negative results and hence it's so important in social marketing to constantly do evaluation not only to monitor success but to monitor unintended consequences and make proper corrections when needed and that would be an ethical behavior.

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