Is social marketing an effective method for improving sexual health outcomes in the developed world, particularly for black minority ethnic (BME) groups, young people and men who have sex with men (MSM)?

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19th December 2017
Is social marketing an effective method for improving sexual health outcomes in the developed world, particularly for BME groups, young people or MSM?

Question

This briefing summarises the evidence on social marketing campaigns for improving sexual health, primarily in BME groups, young people or MSM, from 1st January 2010 to 14th December 2017.

Key messages

- social marketing is an approach used to develop activities aimed at changing or maintaining people’s behaviour for the benefit of individuals and society as a whole (1)

- nearly all of 16 social marketing sexually transmitted disease (STD) testing and/or prevention campaigns in US found differences in one or more key behavioural outcomes (2)

- tailoring behavioural interventions to population characteristics and including skills building were most successful in promoting condom use and reducing STIs (3)

- behavioural change interventions lead to reductions in condomless anal intercourse and decline in sexual partners in BME MSM (4)

- a culturally appropriate text messaging HIV intervention for African communities suggested that messages should avoid an exclusive focus on HIV, be personalised, come from a trusted source, allay fears and focus on support (5)

- a social marketing campaign called “Keep it Alive!” targeting BME people concluded that campaigns should differ in content, direction and channels of delivery to achieve optimum impact (6)

- “You Know Different” campaign consisting of posters and key messages, led to a 153% increase in HIV testing among African American youth and nearly 90% said the campaign had impacted on their decision to seek an HIV test (7)

- social marketing appeared to be effective in reducing teenage pregnancies and influencing sexual behaviour change (8)

- in 18 interventions to increase chlamydia screening in young adults, those incorporating social marketing principles were more likely to achieve success (9)

- “Get Yourself Tested” (GYT) campaign for ages 15-25 years found a 71% increase in STI testing post-campaign - chlamydia positivity was 6% (women) and 9% (men) (10)
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- fear-based campaigns are more persuasive for individuals already engaging in the desired behaviour, but arousing fear in individuals can cause denial and is not an effective means of facilitating sexual behaviour change (11)

- limited evidence showed that multi-media social marketing campaigns had a significant impact on HIV testing uptake among MSM in developed countries, but were not effective in increasing STI testing uptake (12); a social marketing intervention aimed at increasing testing among MSM living in England did not increase HIV testing in those exposed to it (13)

- in the UK an increase in requests for tests from MSM was strongly linked to HIV testing promotion campaigns and marketing the service on social media (14)

- a mass media campaign directed at Scottish MSM showed partial support for the role of mass media campaigns in improving sexual health outcomes (15); a systematic review of HIV prevention mass media campaigns targeting MSM found only two studies where testing rates were higher among men who had seen the campaigns (16); another systematic review found limited evidence for interventions to increase the uptake of HIV testing among MSM, and evidence of effectiveness for media campaigns was lacking (17)

- What Are You Waiting For (WRUW4) and Hottest At The Start (HATS) were two social marketing campaigns in Vancouver that appeared to promote earlier acute HIV infection (AHI) diagnosis, more frequent HIV testing in MSM and were likely cost-saving (18, 19); the ru2hot? campaign in Seattle found that although the campaign was successful in reaching MSM, it had no impact on case-finding (20)

- there was strong support for the utilisation of behaviourally based social marketing campaigns to increase condom use in MSM (21)

- “Stop the drama Downunder”, an Australian social marketing campaign increased HIV/STI knowledge and testing in MSM – successful campaign features included attention-grabbing images, a humorous approach, positive and simple tailored messaging and the use of mainstream media (22-24)

- ‘Stop the Sores’ and ‘Check Yourself’, social marketing campaigns in Los Angeles, had a very strong brand among MSM, with confirmed awareness strongly associated with syphilis testing (25, 26); ‘Dogs Are Talking’, a syphilis awareness social marketing campaign in San Francisco found that among HIV-infected MSM, exposure to the campaign was associated with increased syphilis screening (27)

- cost-effectiveness information for sexual health social marketing was very limited; analysis of HIV prevention behavioural interventions showed that cost-per-person reached varied by method, with public outreach events the least costly (US$2.29) and billboards the most costly (US$25.07) (28); cost of campaigns distributing condoms varied widely from $42 among adolescents in a large urban population to $676 among young gay men in a small city (29); free HIV self-testing promotion through Grindr was shown to be effective and affordable for identifying HIV among African American and Latino MSM (30)

- a key question to guide the development of all social marketing interventions should be “Who would we like to do what and how can we best encourage them to do it”? (31)

- social marketing is not just about communication but about providing solutions and making it easy, convenient, and rewarding to engage in the desired behaviour (7)
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**Background**

The National Social Marketing Centre (NSMC) defines social marketing as:

“an approach used to develop activities aimed at changing or maintaining people’s behaviour for the benefit of individuals and society as a whole” (1).

Many social marketing campaigns include a specific behaviour change component; for example an HIV testing social marketing campaign uses messages to convince people to get an HIV test (32). Social marketing campaigns use mixed method approaches – they may use a combination of traditional media (billboards, radio, TV), events, promotional materials, education, digital and social media tools in order to reach a particular group of people and produce a change in their behaviour.

Social marketing adopts a ‘we decide’ approach - generally the marketer decides on the correct choice and sells it to the consumer. Social marketing considers costs and benefits associated with health behaviours, seeks insight into the meaning of behaviour and the role it plays in people’s lives and generally seeks to influence an individual’s motivation to engage in a given behaviour (31).

**Sexual health campaigns in general population**

**STI reduction**

- a review identified 16 unique STD testing and/or prevention campaigns in United States (US) that were mostly developed using social marketing or behavioural theory - nearly all campaigns found differences between exposed and unexposed individuals on one or more key behavioural outcomes. (2)
- this review found that behavioural interventions were effective in promoting condom use and other safer sexual practices and reducing STIs, but were not effective in promoting abstinence; tailoring to certain characteristics of the population and including skills building exercises were primary characteristics in the successful interventions (3)

**to improve adherence to antiretroviral therapy (ART)**

- this 5-month clinic-wide social marketing campaign included a video, posters, pens, mugs, and lapel buttons with the campaign slogan “Live the Solution: Take Your Pills Every Day” - the campaign was well-received but did not increase short-term adherence to ART; adherence did increase in participants who were more engaged with the intervention (33)
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**sexual health promotion**

- this systematic review assessed effectiveness of interactive digital interventions (IDI) for sexual health promotion - tailoring showed a beneficial effect on sexual behaviour. No subgroup differences were noted and no data were available for cost-effectiveness (34)

**BME groups**

**sexual health promotion**

- the SEX PACT Campaign in Washington DC for black males aged 14-17 years used youth civic engagement, "guerrilla" marketing (e.g. sticker bombing), peer-to-peer outreach/ education and new media to promote positive attitudes and behaviours related to condom use; limited data indicate some initial successes of SEX PACT related to youth awareness and access and use of condoms in an urban-housing community (35)
- this review of effective HIV and sexual health prevention strategies for BME MSM found moderate to high efficacy of behavioural change interventions in African-American, Latino and Asian and Pacific Islander men exclusively in North American - six studies showed reductions in condomless anal intercourse, while seven studies showed a decline in the number of sexual partners (4)

**HIV/STI testing and prevention**

- a community-based campaign in Seattle focusing on educating African American and African-born communities increased respondents knowledge about concurrency (84%), changed their attitudes about it (77%), and 65% said it was likely or very likely that they would change their behaviour as a result (36)
- a community-based participatory social marketing design was successfully used to develop a culturally appropriate text messaging HIV intervention for African communities - findings suggested that messages should avoid an exclusive focus on HIV, be tailored/personalised, come from a trusted source, allay fears and focus on support and health benefits; a key challenge was converting research recommendations into brief text messages (5)
- Hombres Sanos, a social marketing campaign to promote HIV testing and condom use for Latino men who have sex with men and women, had consumer-centred, culturally sensitive, and theory-driven communication materials; the materials and events were found to be appealing and effective (37) (38)
- the Video Opportunities for Innovative Condom Education and Safer Sex (VOICES/VOCES) program for African Americans and Hispanics found significant risk reductions at 30- and 120-days post-intervention for all
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outcome measures (unprotected sex, self-reported STD infection); risk reductions were strongest for African American participants (39)

- a community-based HIV/ AIDS education and awareness social marketing campaign called "Keep it Alive!" targeted African, Caribbean and Black (ACB) people living in Ontario, Canada found that general ACB public and those living with HIV/AIDS have a dissimilar understanding of HIV and its impact, concluding that campaigns should differ in content, direction and channels of delivery to achieve optimum impact (6)

- a randomised trial using culturally sensitive mass media messages to reduce HIV-associated sexual behaviour in high-risk African American adolescents reached virtually all the adolescents in the trial and produced a range of effects including improved condom-use negotiation expectancies and increased sex refusal self-efficacy (40)

- the campaign intervention “You Know Different” consisted of posters and palmcards that carried the campaign imagery and key messages that could be passed out at social clubs – there was a 153% increase in HIV testing among the target populations (African American youth aged 18 to 24 years), nearly 90% said the campaign had an impact on their decision to seek an HIV test; calls, visits and HIV tests all increased significantly during the campaign (7).

- the ‘Tu Amigo Pepe’, a multimedia HIV testing campaign aimed at 18-30 yr old Latino MSM in Seattle included Spanish-language radio announcements, a Web site, social media outreach, mobile reminders, print materials and a toll-free hotline – the campaign had a significant and immediate impact on attitudes, beliefs, norms and self-efficacy towards HIV testing as well as on actual behavior, with HIV testing rates increasing over time (41)

Young people

reducing pregnancies

- a Cochrane review found that social marketing appeared to be an effective approach in reducing teenage pregnancies and influencing sexual behaviour change, but the evidence was limited to particular outcomes and context and therefore was inconclusive (8)

HIV/STI testing and prevention

- a review identified 18 interventions (of low quality evidence) to increase chlamydia screening in young adults - assessment against benchmark criteria found that interventions incorporating social marketing principles were more likely to achieve positive results; few evaluated treatment rates following positive results so impact of screening on treatment rates remained unknown (9)
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- ‘IknowUshould2’ a youth-driven, social media-based campaign in Philadelphia aimed at improving knowledge about and increasing testing for STIs/HIV among 13-17 year olds reached over 1,500 youth via social media - 46% of youth had never been tested, but 70 % intended to test in the next 6 months; there was also a large increase in the proportion of visits at which syphilis was conducted post-campaign launch (42)

- Get Yourself Tested (GYT) campaign with the goal of promoting STD testing among youth ages 15-25 years found a 71% increase in patients presenting for STI testing post-campaign - chlamydia positivity was 6% among women and 9% among men during campaign promotion periods, indicating that GYT did not simply motivate the worried well (10)

dondom sales

- a passive social marketing intervention in community pharmacies in Iowa for 18-30 yr old women appeared to reduce the decrease in condom sales from baseline, but it did not impact oral contraceptive sales - the intervention was comprised of seven sets of social marketing materials placed in the intervention pharmacies - examples of messages included “Crossing your Fingers Won’t Help”, “50% of Pregnancies in Iowa are Not Planned” and “Did You Know? There Are More Choices than Pills or Condoms” (43)

sexual initiation

- televised mass media campaigns to delay initiation of sexual intercourse among African American and White adolescents two US cities concluded that health communication campaigns using televised public announcements held much promise in reaching at-risk adolescent populations with targeted, timely, and relevant risk-reduction messages (44)

sexual health information

- in-school social marketing campaign promoting a sexual health text message service that connects teens directly with a health educator was associated with increased service use, but use was still relatively low – there were a number of barriers to use; teens indicated they did not have sexual health questions, did not think of the service, were unsure how to use it or had concerns over parents seeing the messages (45)
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**MSM**

The role of fear - fear arousing imagery is good at attracting attention and memorable, fear-based campaigns are more persuasive for individuals who are already engaging in the desired health-protective behaviour, but arousing fear in individuals can have many unintended consequences (such as denial), most homosexually active men are already fearful of HIV and arousing fear is not an effective means of facilitating sexual behaviour change (11).

**HIV testing and prevention**

- a Cochrane review provided limited evidence that multi-media social marketing campaigns had a significant impact on HIV testing uptake among MSM in developed countries, but the campaigns were not found to be effective in increasing STI testing uptake (12)
- a systematic review of HIV behavioural interventions for young gay and bisexual men found that there was no consistency in studies for participant age, representation of Black/African American young MSM, application of theoretical and model underpinnings, congruence of assessment measures used, follow-up assessment times and application of process evaluation (46). The authors conclude: “HIV prevention interventions should incorporate the needs of the diverse, well-educated, web-connected millennial generation and differentiate between adolescent YMSM (13 to 18 years of age) and young adulthood YMSM (19 to 24 years of age). Because Black/African American YMSM represent more than 50% of new HIV infections, future HIV prevention intervention studies should prioritize these young men”.
- a social marketing campaign directed toward high-risk MSM in Toronto and Ottawa to encourage testing for HIV and syphilis attracted 15,000 unique website visitors; there was a 20% increase in HIV testing in Toronto over the campaign compared to the previous year although the overall rate of HIV-positive tests remained relatively constant (47)
- an advertising campaign offered free rapid HIV testing and sexual health screening to MSM users actively logged onto their Facebook account - 872 (2.9%) registered MSM users clicked through to the website at an average cost of £0.55 per click. These ‘clickers’ were aged 18–24 (55%), 25–34 (27%), 35–44 (14%) and 45–54 (4%) years. The total cost of the campaign was £483 (48)
- key to the success of a UK home HIV sampling service was its integration with HIV testing promotion campaigns. 8,015 requests (81.2%) were from MSM – promotion via social media was thought to be easier for this risk group. An increase in requests for tests was strongly linked to HIV testing campaigns and marketing the service on social media; a single message on Grindr drove 3,575 visits to the online order page (14)
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- A mass media campaign directed at Scottish MSM “Make Your Position Clear” (MYPC) found that those with mid or high campaign exposure were more likely to have been tested for HIV in the previous six months but were not more likely to be tested for STIs and not more likely to indicate intention to be tested for HIV in the following six months; the evaluation showed partial support for the role of mass media campaigns in improving sexual health outcomes (15).

- A systematic review of HIV prevention mass media campaigns targeting MSM found campaign coverage was the most commonly reported outcome; two studies testing rates were higher among men who had seen the campaigns compared to men who had not. None of the studies examined cost-effectiveness, they found no evidence addressing how intervention characteristics might influence effectiveness and found only one study that was based on social marketing concepts (16).

- Two campaigns in Vancouver: What Are You Waiting For (WRUW4) (raising awareness of new test technologies) and Hottest At The Start (HATS) (directed towards gay men engaging in risky sex and focused on raising of HIV risk) used promotional strategies consisting of posters, postcards, urinal ads, and condom packs at a variety of gay venues, as well as e-mail and campaign websites – these social marketing campaigns appeared to promote earlier acute HIV infection (AHI) diagnosis, more frequent HIV testing in MSM and are likely cost-saving (18) (19).

- A social marketing campaign “Are You Iffy?” to encourage MSM in San Francisco to reassess their HIV-negative status consisted of 10,000 palm cards, 140 posters, 7 large billboards and 10 newspaper advertisements distributed at various locations - of 255 MSM, 114 (45%) reported having seen the campaign and of those, 41 (36%) indicated that they rethought their own HIV status after seeing/reading the messages; 31% of those who were “Very sure” of their HIV status at the time of the survey also reported to have reconsidered their status (49).

- A national social marketing intervention aimed at increasing testing among MSM living in England was seen by a small proportion of the target group and did not appear to increase HIV testing in those exposed to it (13).

- A systematic review looking at what interventions are effective and cost-effective in increasing the uptake of HIV testing among MSM found limited evidence overall, and evidence for the effectiveness of key intervention types particularly peer outreach and media campaigns, remained lacking (17).

- A literature review on research-based social marketing initiatives designed to decrease STIs including HIV, through an increase in condom use, strongly supported the utilisation of behaviourally based social marketing campaigns to increase condom use in MSM (21).

- ‘Stop the drama Downunder’, a social marketing campaign increased HIV/STI knowledge and testing in Australian gay men – participants identified attention-
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grabbing images, a humorous approach, positive and simple tailored messaging, and the use of mainstream media as campaign features crucial in normalising sexual health testing, driving campaign engagement, and ensuring high message exposure (22) (23) (24)

- the ru2hot? Campaign in Seattle found that although the campaign was successful in reaching some of the target population (MSM) and most men surveyed knew the symptoms associated with AHI, the campaign had no impact on case-finding (20)

syphilis prevention

- the “Syphilis is Up” public information campaign in Denver US included a website, social media, mobile applications, print advertising and client outreach - a survey of 597 MSM outreach clients indicated that awareness of the syphilis campaign increased from 28% to 42% during the campaign (50)
- ‘Stop the Sores’ and ‘Check Yourself’, social marketing campaigns in Los Angeles, exemplified key principles of social marketing, including market research, audience segmentation and branding, found that the campaigns had a very strong brand among MSM, with confirmed awareness strongly associated with syphilis testing (25) (26)
- ‘Dogs Are Talking’, a syphilis awareness social marketing campaign created in conjunction with a local social marketing firm in San Francisco found that while campaign recall was not associated with syphilis testing among the general population of MSM surveyed, among HIV-infected MSM, exposure to the campaign was associated with increased syphilis screening (27)

Cost-effectiveness

- a cost-effectiveness analysis of behavioural interventions as part of HIV prevention strategies found that cost-per-person reached varied by method, with public outreach events the least costly (US$2.29) and billboards the most costly (US$25.07); but public outreach events did not seem to influence behaviour change as cost effectively as did magazines or radio broadcasts (28)
- a review found four studies evaluating campaigns with condom distribution to prevent sexually transmitted infections and pregnancies – intervention cost varied widely from $42 among adolescents in a large urban population to $676 among young gay men in a small city (29) – the authors concluded: “Given the paucity of studies that provided a complete economic analysis of both costs and benefits and the inconsistent results from cost-benefit and cost-effectiveness studies, a clear conclusion cannot be drawn about the economic value of the interventions” p5
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- free HIV self-testing promotion through Grindr was shown to be an effective and affordable means of identifying previously undiagnosed cases of HIV among African American and Latino MSM (30) – although it is not clear if this method could be identified as ‘social marketing’

**Ongoing research**

An ongoing systematic review aims to synthesise existing evidence on social marketing and mass media interventions for HIV testing with MSM and to identify effective intervention components within social marketing and mass media interventions for HIV testing with MSM. They will review and extract data on the reporting of eight key characteristics of social marketing - behavioural goals, customer orientation, theory, insight-driven, segmentation, motivational exchange, competition and methods mix (51).

The “Get Tested. Why not?” campaign in Canada used a multifaceted marketing and communication strategy including SMS text messaging, social media websites (such as Facebook), Quick response codes and a dedicated website, in order to reduce barriers to STI/HIV testing and birth control for youth 15 to 29 yrs - findings of the three year project will be shared, as well as information on various aspects including planning, marketing with social media, evaluation, implementation, and execution of this project (52)

**How to do social marketing**

The NSMC identifies six key stages of successful social marketing projects, and provide tools and templates to support you through the process (1).

Social marketing planning requires understanding and applying the 4 P’s of marketing into program planning: product, price, place, promotion (32). A guide to social marketing strategic planning to improve program outcomes suggests that social marketing planning may be limited by over-reliance on commercial marketing tactics and an over-emphasis on individual behaviour change (53). The author states that this can be overcome: “Finding upstream sources of social problems is a first step. Practicing social marketers can improve their outcomes if they identify upstream causes of social problems and find ways to reduce their harmful effects”

The question to guide the development of all social marketing interventions should be “Who would we like to do what and how can we best encourage them to do it?” (31). The development of a social marketing intervention is divided into 4 main stages: scope, development, implementation and evaluation.
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What Works in Youth HIV has a list of the Centers for Disease Control and Prevention (CDC) HIV awareness and testing social marketing campaigns, which illustrate common features of social marketing campaigns – they usually include a website that has all campaign messaging and materials, social media activity, videos etc.

- **Get Yourself Tested (GYT) - It's Your Sex Life**
- **Act Against AIDS**
- **Doing It**
- **Let's Stop HIV Together**
- **Testing Makes Us Stronger**

A toolkit is also provided for using social marketing to reach youth for HIV testing: ‘**You Know Different Social Marketing Campaign Toolkit**’.

‘**Mobilizing Our Voices for Empowerment**’ (MOVE) is a culturally based health promotion intervention for HIV-positive Black young gay/bisexual men - four key attributes of the media and participants’ responses to media that are important to consider for this intervention were identified: comprehension, relevance, emotionality and action. From these, a framework for evaluating media has been produced, to assist researchers and practitioners in the selection and evaluation of media for similar interventions.

Social marketing is not just about advertising or mass communication, but must involve behavioural change, and include a mix of marketing, consumer orientation, segmentation, motivational exchange, competition and continuous monitoring to be successful:

“….. *social marketing is not solely about communication but about providing solutions and making it easy, convenient, and rewarding to engage in the desired behaviour*” (7) p177
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Endnote database matrix showing some of the highly relevant papers with key information

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<td>To synthesize existing evidence on social marketing and mass media interventions for HIV testing with men...</td>
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<td>Promoting HIV Testing for Gay and Bisexual Men: An Evaluation of the 2011-2012 Campaign in Toronto...</td>
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This database can be obtained on request.
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References

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