**Authors:**

Alan Tapp, Professor of Marketing, Bristol Business School

Alan.Tapp@uwe.ac.uk

Fiona Spotswood, Lecturer in Marketing, Bristol Business School

Fiona2.Spotswood@uwe.ac.uk, 07876380762

Bristol Social Marketing Centre

University of the West of England

Frenchay Campus

Coldharbour Lane

Bristol

BS16 0QY

# Title of Paper: From transparency to invisibility: the implications of different behaviour change mechanisms for social marketers

**Form of presentation:** Seminar presentation

**General subject area:** Behaviour change, mechanisms

**Method:** Conceptual paper

# FROM TRANSPARENCY TO INVISIBILITY: THE IMPLICATIONS OF DIFFERENT BEHAVIOUR CHANGE MECHANISMS FOR SOCIAL MARKETERS

**Abstract**

This paper introduces the concept of a transparency-invisibility spectrum of social marketing approaches to behaviour change. The literature has tended to emphasise cognitive exchange as a basis for the value-based social marketing offering. However the authors argue that many behaviours considered to be ‘unhealthy’ for individuals or society are not the result of cognitive processing and will unlikely be changed by engaging the target group in a cognitive dialogue about the offer. ‘Invisible’ approaches, including ‘social norming’, emotional response, choice architecture and habit-formation are likely, in some instances, to be more effective (and particularly for the most resistant groups) and achieve a better ROI for the social marketer. The continuum between ‘transparency’ and ‘invisibility’ raises a number of issues which are discussed.

**Introduction**

Cognitive exchange-based social marketing can sometimes be quite straightforward. An offer is made in return for a defined behaviour change, which is accepted or rejected by weighing up the pros and cons. The marketer has made a clear calculation that the returns justify the outlay. An example would be an offer to save money by quitting smoking using NHS services. The marketing proposition is transparent in the sense that both audience and marketer are fully aware of the exchange.

In contrast are those interventions linked to the underlying socio-cultural or environmental structures which often underpin unhealthy behaviours (Bourdieu, 1985). In these cases ‘choice architecture’ might be used to design the environment such that people are subconsciously guided to change their behaviour (Thaler & Sunstein, 2008). An example may be a change to the organ donation procedure from ‘opt in’ to ‘opt out’ to increase donor card holders. In this scenario the pre-loading of the proposition is largely invisible to the citizen, and this ‘invisibility’ introduces an element of subtlety into the *scope* of social marketing.

In between these extremes lie a variety of behaviour change ‘mechanisms’. Examples are campaigns that arouse emotions (an example may be the ‘Be a Star’ breastfeeding campaign in the UK (see <http://www.beastar.org.uk/>)) , activities that take advantage of ‘fixed action patterns’ (Cialdini 2007) and programmes that reform habits. An example is a road safety intervention (positioned in diagram 1) in which one component involves the fitting of in-vehicle data recorders (IVDRs) that signal to the target group of aggressive young male drivers (and records) if they swerve or brake too heavily. They are aware that their aim is to drive ‘skilfully’ in exchange for incentives, but the subtleties of the use of the IVDR *to break habits* will *not* be clear to the young men (Pressley, Collins, Tapp, & Ellson, unpublished). Diagram 1 illustrates the concept of a spectrum of social marketing activity, from ‘marketer-consumer transparency’ to ‘marketer-consumer invisibility’.

Diagram 1

Transparent

Marketing

Invisible

Marketing

Simple cognitive exchange

Emotion arousal

Stim-response techniques

Social mimicry

Fixed action patterns

Choice architecture

Road safety example

We introduce two pivotal concepts which have emerged from the transparency-invisibility spectrum; the potential impact of behaviour change interventions *targeting groups* *resistant to change*, and the proposition that using approaches along the whole spectrum will *improve social marketing’s ROI*.

Many behaviours considered ‘health-endangering’ are seen as positive by our target groups. Binge drinking, for example, is mostly considered fun and sociable (Spotswood & Tapp, 2010), so it becomes clear that a cognitive offer based on the benefits of sobriety will struggle to have impact. It is proposed that for these groups most resistant to change, interventions tending towards the ‘invisible’ may be most effective. An ‘invisible’ intervention to reduce binge drinking would not likely mention alcohol, rather, offering diversionary activities with immediate perceived benefits (Hughes & Bellis, 2003) or aim to increase its financial cost (in the case of alcohol, as argued by Plant and Plant 2006). This is illustrated in Diagram 2:

Diagram 2: Transparency, invisibility and resistance

Transparent

Marketing

Invisible

Marketing

Simple cognitive exchange

Emotion arousal

Stim-response techniques

Social mimicry

Fixed action patterns

Choice architecture

Better for low resistance audiences

Better for high resistance audiences

Secondly, we propose that applying ‘transparent’ approaches will increase social marketing’s ROI because of the sustainable behaviour change it can potentially create. A major limitation of cognitive exchange is the short lifespan of the new behaviour, creating a need for expensive ‘ongoing’ marketing to remind and coax once emotions, cultural norms and habits once again take over the decision making domain.

In contrast, behaviour change instigated using the relatively ‘invisible’ techniques such as social norming may require up-front investment but this pays off through ‘back-end’ retention of behaviour change over time. Social norm campaigns vary between simple education campaigns (advising that ‘90% of your fellow students do not binge drink’ (Berkowitz, 2005)); through to the use of ‘Connectors’, ‘Salesmen’ and ‘Mavens’ as conduits through which to reach the ‘tipping point’ of cultural acceptance (Gladwell, 2000). These strategies create longer term, sustainable behaviour change because they focus on habit or emotion-based behavioural loyalty which can then lead to social mimicry and reinforcement of the behaviour. In this sense this approach draws parallels with the well documented differences between relationship-marketing and transaction-marketing approaches.

Diagram 3 shows that ‘invisible’ approaches have the advantage of being rooted in automatic, habitual change, which will be more cost-effective because they produce deeply- rooted rather than considered behaviours without the need for as much post-intervention marketing investment.

**Diagram 3: Transparency, invisibility and economic effectiveness**

Transparent

Marketing

Invisible

Marketing

Simple cognitive exchange

Emotion arousal

Stim-response techniques

Social mimicry

Fixed action patterns

Choice architecture

Better for low resistance audiences

Better for high resistance audiences

Better for initiating first time difficult changes

Better for habit change over time and higher overall ROI

The final consideration that we raise is that of *ethical issues* pertaining to ‘invisible’ marketing, which could be viewed as manipulative marketing (see for example Brown 2003 for an insightfully argued book on the commercial exploitation of customers). Arguably, a ‘transparent’ offer of which the recipient is fully cognisant is more ethically defendable than a subtle (more ‘invisible’) process in which behaviour change is quietly nudged, while attention is diverted elsewhere.

The authors note the complexity of any moral debate but would wish to make two points . One is that ‘free, informed choice’ may itself not be morally defendable if applied to, for example, a young driver’s freedom to drive aggressively. In this instance, moral defence could be made of the decision to ‘invisibly’ change behaviour, albeit ensuring that ultimately what is proposed has a voluntary component at the heart of it. This is the contention of Thaler and Sunstein (2008) in their discussion about choice architecture.

Second, individuals *may themselves wish* to be led through a habitual, social or emotive route to behaviour change. The authors have conducted yet to be published) research which indicates that people desperate to achieve a healthier weight but who have a distaste for physical activity and balanced eating are keen to be ‘invisibly’ nudged towards behaviour change. Smokers desperate to quit will likewise presumably be quite happy to be assisted to change through a non-cognitive route.

To conclude, the academic history of social marketing is located in the concept of exchange as a cognitive, rational process (Schwartz, 1996). Other mechanisms of human behaviour change such as social copying, emotions and habit change have received less attention by social marketer, amounting to missed opportunities. Social marketers can utilise these behaviour change mechanisms to overcome strong resistance, and maximise returns on investments, . However, given the social rather than commercial context, ethical considerations must be strongly taken into account.

**References**

Berkowitz, A. (2005). An overview of the social norms approach. In L. Lederman, L. Stewart, F. Goodhart & L. Laitman (Eds.), *Changing the culture of college drinking: A socially situated prevention campaign* (). Cresskill, NJ: Hampton Press.

Bourdieu, P. (1984). *Distinction*. London: Routledge.

Bourdieu, P. (1985). The genesis of the concepts of *habitus* and of *field*. *Sociocriticism, 2*(2), 11-24.

Brown, S., 2003. *Free Gift Inside!* Capstone Publishing; Wiley, England.

Cialdini, R., 2007 *The Psychology of Influence*, Revised ed, Harper Collins, NY

French, J., Blair-Stevens, C., McVey, D., & Merritt, R. (2010). *Social marketing and public health. theory and practice*. Oxford: Oxford University Press.

Gladwell, M. (2000). *The tipping point: How little things can make A difference*. New York: Little, Brown and Company.

Hughes, K., & Bellis, M. A. (2003). *Safer nightlife in the north west of England: A report by the
north west safer nightlife group*. Centre for Public Health: Liverpool John Moores University.

Plant, M., and Plant, M. (2006). *Binge Britain: Alcohol and the national response*, Oxford University Press, UK.

Pressley, A., Collins, K., Tapp, A., & Ellson, T. (unpublished). Boy racers and bourdieu: Social capital theory and its implications for social marketers.

Schwartz, B. (1996). Working within the system: Adapting the social marketing approach to the implementation of state and federal health programs. *Social Marketing Quarterly,* (Winter), 64-70.

Spotswood, F., & Tapp, A. (2010). Rethinking how to tackle binge drinking: A neo-tribal analysis. *Brand New Territory: Brand Leadership, Relevancy and Practice in Dynamic Environment. 6th International Conference of the AM's Brand, Identity and Corporate Reputation Special Interest Group,* ESADE Business School, Barcelona.

Thaler, R. H., & Sunstein, C. R. (2008). *Nudge. improving decisions about health, wealth, and happiness*. Yale: Yale University Press.