Phase 1: Problem Description

This module describes phase 1 of the social marketing planning process, the problem description. On average, it takes people 35-40 minutes to complete this module. The time you need will depend on your pace and how much you explore the resources and supplemental materials.

- Learning Objectives
- Introduction
- Why is the Problem Description Important?
- Scenario 7
- Plan Components for the Problem Description
- Problem/Health Issue
  - Define the Problem
  - Find Existing Information
  - Scenario 8
  - Identify Contributing Factors
  - Scenario 9
  - Collect and Organize Data
- II. Target Audience
  - Determine Criteria for Selection
  - Identify Potential Broad Target Audiences
  - Scenario 10
  - Identify Audience Influencers
- III. Behavior
  - Identify Broad Behavior
  - Audience or Behavior: Which Comes First?
  - Scenario 11
  - Benefits and Barriers
- IV. Strategy for Change
  - Using Behavioral Theories and Models
  - Strategies Used in Other Interventions
- End Products
- Identify Information Gaps
- Ready to Move On?
- Scenario 12
- Summary

Social Marketing for Nutrition and Physical Activity Web Course: Phase 1: Problem Description
www.cdc.gov/ncodphp/dnpa/socialmarketing/training
Learning Objectives
After completing this module, you will be able to
- Explain what a problem description is and why it is important.
- List potential sources for existing data to inform a problem description.
- Identify contributing factors to the problem.
- Explain how to select broad target audiences.
- Identify possible behaviors that need to be changed.
- Propose possible strategies for change and support these options using current behavioral theories and data.
- List the components of and draft a problem description.
- Identify information gaps.
Introduction
This module shows the steps of gathering data about a problem and the population it affects. Completing a basic and broad analysis of the problem will provide the information for a draft problem description.

For this training, obesity is the broad health problem to be addressed. Obesity is a complex issue, so developing an effective intervention requires a thorough understanding of the problem on several levels.

You may already know something about the problem, but the process of gathering and analyzing current information will provide documentation and direction for subsequent phases. Once you have a problem description, you will be able to identify information gaps that provide the basis for formative research, which is covered in phase 2.

One way to think of the process is start broadly and then narrow or refine your plan over time. You will go through several rounds of decision-making, each round asking you to be more specific in your choice of target audience, behaviors, and intervention strategies. All of these decisions should be based on data gathered in the problem description and formative research phases.

For example, the initial broad health problem is obesity. This leads to the first decision to narrow the focus to fruits and vegetables. This is then further refined to a more specific behavior, such as substitute a fruit or vegetable for a high-calorie snack. Finally, this is narrowed to a specific objective, such as: Increase by at least 10% the number of the target population substituting fruits or vegetables for higher calorie foods as snacks over a period of 26 weeks.
Why is the Problem Description Important?
This phase creates the foundation on which to build your social marketing plan. Changes and revisions are often made during the planning process. The problem description provides a framework for you to work with throughout those revisions.

Don't skip this phase! It will help you
- Identify the knowledge and information you already have about a problem.
- Organize this information into useful categories.
- Identify information gaps which will be used to set priorities for formative research.
- Save time by establishing a framework to document and support decisions.
- Save resources by gathering and analyzing existing data before additional costly data collection.
- Foster communication with stakeholders and create opportunities to encourage support, articulate goals, and manage expectations for the intervention.

"Effective social marketing interventions begin with a clear understanding of the health or safety issue of concern."

*Obesity Prevention Coordinators' Social Marketing Guidebook*, p. 12
Scenario 7

Rosa: "We are developing this intervention as a pilot project in the community of Wellington, mostly because that's where our offices are located, and it will be easier for me to oversee a project in my own community. In addition, we have some established partnerships with organizations in Wellington who I hope can help us plan. The most important of those partnerships is with the Wellington Community Coalition. I'm meeting with them next week. This is a coalition of people who are the real movers and shakers in Wellington, and I know they're very concerned about our obesity problem, especially in children, and they want to see some action.

Once I tell them what we've got in mind, I know they'll want to be a part of it, and they'll want to hit the ground running. I have a feeling they'll want to get busy with some activities right away.

I know the problem description phase is really important, but I'm afraid they won't be willing to take the time to do it. They could be a great partner for this intervention. What should I do?"

How would you respond to Rosa? Check all that apply.

1. With the data you already have, it makes sense that you should go ahead and get started planning some activities for the intervention.
2. Even though it will take longer, going through the problem description will help you organize existing information and get everyone on the same page. This way, you can present the best case for the decisions you make about your intervention.
3. It sounds like your Wellington Community Coalition is comprised of important stakeholders. If they want to start planning activities, you should listen to them and move forward.
4. Try giving the coalition members tasks they can take on right away to help with drafting the problem description.

Feedback:
1. This would be **poor advice**. You need to define and describe the problem you want to work on before you start planning activities. The problem description will help you all get on the same page about what you're trying to do. Plus, you may be missing some relevant information.
2. This would be **good advice**. Documenting information already known will provide a defense for decisions made in designing an intervention. And you may also be able to do less formative research than would be required if you immediately started doing interviews or focus groups without a plan.
3. This would be **poor advice**. You should cultivate a cooperative and mutually beneficial relationship with your partners, but in this situation, you should share with them that good planning will make the most of their time in the long run.
4. This would be **good advice**. Having the coalition members participate in the problem description process can help them feel as though they are producing something and can help them feel even more invested in the process down the road.
Plan Components for the Problem Description

Start the problem description by thinking about the four plan components:

<table>
<thead>
<tr>
<th>Plan Component</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Problem/health issue</td>
</tr>
<tr>
<td>II. Target audience</td>
</tr>
<tr>
<td>III. Behavior</td>
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<tr>
<td>IV. Strategies for change</td>
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</tbody>
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You will think about each of the plan components broadly in the problem description phase and then make decisions that narrow their scope during the next phases. A link to the planning questions document will appear periodically to remind you of appropriate questions to ask. You should be able to begin answering some of these questions in phase 1. Those you cannot answer may become information gaps that you choose to fill in phase 2, formative research.

Resources

- [Sample problem description from Georgia](PDF-396k)
  See this for an example of what one state used for their problem description. Each problem description will be different, so use a format and include content that is appropriate for your situation.
- [Planning Questions](PDF-88k)

Big Picture Alert

The four plan components are presented in order here, but when you actually create a problem description, you will likely be working with elements from all of the plan components at the same time.

Limited Resources?

If you and your staff don't have time to work on a detailed problem description, see if you can get a local undergraduate or graduate student to take charge of this phase. They usually have easy access to literature and a defined project such as a problem description can be helpful to their education.
Plan Components for the Problem Description

I: Problem/Health Issue

The first plan component is the problem or health issue. In the problem description phase, complete the following activities to identify the problem and learn more about it:

- Define the problem or health issue.
- Find existing information about the problem.
- Identify contributing factors.

Define the Problem

How you define the problem in this stage will affect the rest of your program. Think this through carefully and see if you are making any assumptions about what the problem is that will send you in the wrong direction. You may also want to think about what types of approaches are needed to reduce or eliminate the problem. For example, a problem could be framed in any number of ways (i.e., an access problem, a policy problem, an educational problem, a behavioral problem). Think through how you frame the problem because it will likely have implications on your ideas for solving the problem. For example, you may assume that a group of people is overweight only because of their behaviors without paying attention to the influence of the environment in which they live.

Tip

Decide whether you want to define the problem as the existence or lack of a particular outcome (i.e., obesity) or the current state of people's behavior (i.e., not eating enough fruits and vegetables). Defining the problem in relation to an outcome leaves the door open for more behaviors to play a role, while defining the problem in terms of a behavior will lock you into a certain behavior early on in the process. Either is appropriate, as long as you are making a conscious choice.

Resources

Some sources of state and national epidemiological data:

- BRFSS
- YRBSS
- PedNSS and PNSS
- PRAMS
- NHANES

In addition, you can look up state-specific information from:

- State-based Programs
  CDC, Division of Nutrition, Physical Activity and Obesity

Online resource for meta-analyses:

- HealthCommKEY
  Emory Center for Public Health Communication
Inventory of Qualitative Research
This database, from the Division of Nutrition, Physical Activity, and Obesity houses information on qualitative research conducted on nutrition and physical activity topics. The database is searchable by topic area and target audience.

Find Existing Information

Literature searches and other existing data sources can provide a wealth of quantitative and qualitative data about the problem. Also, it is important to know specifics about the problem in your local area when developing a problem description.

Some examples of data sources include
- Epidemiological data (prevalence of obesity and contributing factors).
- Behavioral and theoretical literature.
- Health care systems.
- Community-based organizations.
- Local foundations.
- Formative research reports and other gray literature (from government agencies, non-profit organizations, universities).
- Policy or legislative databases.
- Community needs assessment.
- Community assets map.
- Private sector lifestyle data (if accessible).

Look for data on various ages, genders, races/ethnicities, and for different geographic locations. Also, you may want to identify ideal goals, such as Healthy People objectives, to understand what people should be doing. Ideally, you will find data on your local population, but sometimes that isn't easy. Data on populations similar to your local population can be helpful as well. If you already know some potential audiences you want to work with, you may want to focus on data that you can gather about them. If not, look for data on a wide range of people.

Other potential resources that may be helpful include the following
- Subject matter experts (obesity, nutrition, or physical activity)
- Audience or community experts (people who may have some knowledge about a potential audience, about the community, or about a specific location)
- Partners
- Data collected by your organization or your partners and stakeholders
- Epidemiologists in your state or local health department, or academic center
- City planners
Scenario 8

Rosa: "I held my ground with the coalition on the problem description. I'm glad too, because once I explained the reasons for describing the problem (and how it will keep us on track), they were on board. But, I know we need to keep this project moving to keep them happy. I talked with Dan and he suggested that we form a planning committee to make sure we get input from everyone who is involved. I made some inquiries and got started. We have a nutrition expert and a physical activity expert on my team already, so they were logical choices.

I also requested some time from one of the epidemiologists within our branch. She has agreed to help us out with data collection for the problem description.

And, you'll be proud of me. I'm going to bring in an evaluation expert from the very beginning, not as a tack-on gesture at the end. Her name is Tiffany. I've met her before—she's young and really motivated, and from what I hear, she's excited to be a part of the committee.

Finally, because we need input from the Wellington Community Coalition, their director, Bob Lee, has agreed to join the planning committee. I'm a little bit worried about him. He's a good friend of Dr. Richards, and I'm afraid he'll have some of the same objections."

"For our first meeting, the epidemiologist brought us the latest data from the YRBS and the BRFSS for our state. The numbers definitely support our work on obesity, but as I was looking at the list of information sources in the course, I realized that there are lots of possible sources I'd never even considered. We especially need some information that is specific to our community.

There are lots of options to consider! What do you think we should do?"

What would you suggest to Rosa? Check all that apply.

1. Ask Bob to find out what data sources the rest of the coalition members can access.
2. You probably can't find local data during the problem description; wait until the next phase of the project.
3. Talk to community experts in Wellington, especially those that work in nutrition, physical activity, or obesity fields.

Feedback:

1. This would be **good advice**. Wellington Coalition members likely have expertise or connections to people who work in the issues you're researching. And, by asking Bob to help you, you can show that you recognize his expertise and experience.
2. This would be **poor advice**. The problem description phase is a good time to gather national and local data, which reduces the amount of formative research you'll need to conduct, making your efforts more targeted and effective.
3. This would be **good advice**. Community experts in nutrition, physical activity, obesity, and other related fields may have access to community-specific information that you're looking for.
Plan Components for the Problem Description
I: Problem/Health Issue (cont.)

Identify Contributing Factors
When developing the problem description, it is important to understand the factors that contribute to the health problem or issue. For example, knowing that the issue is obesity, you might consider trying to answer the following planning questions

- What factors contribute to the problem of obesity?
- What causes or contributes to those factors?

To answer these questions, look at theoretical and empirical literature. Your answers should be based on theory or evidence, not your own opinions.

A social marketing intervention probably won't be able to address all contributing factors. Concentrate on factors that you can change.

Identifying the contributing factors for a problem can be the beginning of a logic model for your program. You'll likely only be able to create the skeleton of a model here, but it could help you organize research and your thoughts about how behavior change connects to health outcomes. Later, you can input the parts of the model that show how your program plans to affect behavior.

Resources
- Planning Questions (PDF - 88k)

Tip
Make sure that you include the environmental and policy factors that contribute to the health problem and don't just focus on individual behaviors.

Collect and Organize Data
After looking at the epidemiological data, other existing data sources, and the contributing factors, collect and organize all of the information you found about plan component I, the problem/health issue. Some additional planning questions you may be trying to answer are

- What evidence demonstrates that there is a health problem?
- What is the burden of the health problem in your community?
- How did this become a health problem?
Scenario 9

Rosa: "My team is really busy exploring data sources and gathering information. There's a lot more local information available than I realized. Last year the Wellington Health Care Association measured health markers, including BMI, of children in four different grade levels. The Heartland College Nutrition Department recently did a study examining the relationship between parents and children on food choices and dietary habits. We've already started assessing the relevance of these studies. And, the Wellington chapter of the TV-Turnoff Network has information on the families who have participated in TV-Turnoff week for the past two years.

Based on the local data we've been able to find and the literature review we've been doing, I took a stab at identifying some of the contributing factors. I think it was helpful to get my ideas down on paper."
Plan Components for the Problem Description

II. Target Audience

The second plan component is the target audience. You will need to understand which groups of people need to change their behavior to positively impact the problem. Developing this understanding begins the process of selecting a target audience.

In the problem description phase, complete the following activities to identify the target audience and learn more about them:

- Determine the criteria for selection.
- Identify potential broad target audiences (who should change behavior).
- Identify potential secondary audiences (those who influence the primary target audience).

Example

Criteria like those listed here can also be used to choose partners to work with. In Maine, the state needed to choose one of their Healthy Maine Partnerships to run a pilot intervention. Their criteria for choosing one of the partnerships were:

1. Interest.
2. Staff availability.
3. Existing relationships.
4. Current efforts to address overweight/obesity and nutrition/physical activity.

Determine Criteria for Selection

Before you start deliberating about which audiences you might like to work with, it can be helpful to think about some criteria for selection. Knowing what characteristics you need or desire in an audience can help you narrow down your choices.

For example, you may decide that your ideal audience would be:

- Affected by the problem (or have the ability to change the environment of those affected by the problem).
- Likely and willing to change their behavior.
- Easily accessible by you or your partners.
- One that your stakeholders are interested in reaching.
- One that fits in with your organization’s priorities.
- Have behaviors that are easy to change.
- One that has available existing research you can use.
- One that is not currently being targeted with other programs.

Determine Criteria for Selection

However, no single audience is likely to have all of these characteristics. You must prioritize which ones are most important to you and your team. Is it more important to work with a high-risk audience, or is it more important that you aim for early success by starting with a "low hanging fruit"
approach? What happens if your stakeholders want to work with an audience who is at high risk, but it will require extensive resources to help them change their behavior? Work with your planning team to prioritize criteria. Which are most important? Which are ones that would be nice but aren't crucial? Once you know this, then you can start thinking about different audience groups.

**Tip**
The planning questions document provides questions that you can answer which will help you choose a target audience.

**Resources**
- [Planning Questions](PDF-88k)

**Identify Potential Broad Target Audiences**
The criteria you develop should be used by your planning team when you start to identify broad target audiences. A broad target audience could be described by an age range, by race or ethnicity, by geographic location, or by any number of demographic or other characteristics.

You should be able to find information on some of these characteristics using literature reviews, or possibly through conversations with colleagues or key informants. Whatever information you can't find can be an information gap for phase 2, formative research.

**Example**
Some examples of broad target audiences
- Mothers with young children.
- Somewhat active adults.
- Employees of daycare centers.
- Health care providers.
- Adults living in a particular neighborhood.
- Women who want to lose weight.

It can be tempting to choose the population most at-risk for the health problem (and priorities demand this at times), but keep in mind that your intervention might have more success if it targets a different group.

First, you may want to address an audience who is already on the road toward behavior change, the "low hanging fruit," to demonstrate some success. Then you can use what you learn with audiences who have further to go.

One advantage of this approach is that changing the behavior of the more challenging audiences should be easier when you've already started creating norms around the behavior.
There isn't always an easy answer for which audience to choose. At some point, you may need to pick a couple of possibilities and provide a good rationale for your choices. The groups you prioritize will become your potential broad target audiences.

You may already know (or have been told) the audience you should target. If so, consider establishing criteria to verify that choice is a good selection. Also, you may need to target a more narrow audience than what you were told. For example, if eliminating health disparities is part of your organization's mission, you may need to work with a minority group. However, an ethnic or racial group isn't a specific enough audience. You'll need to segment them or narrow down to a more homogeneous group them, but that step will come later.

At this point, your information about these groups is probably still general, but the preliminary decisions you make now focus to your literature searches and other secondary data collection as you move forward.

**Identify Audience Influencers**

As you review the literature and talk to subject matter experts about the health problem, also consider potential secondary audiences, or influencers. These audiences are the people who can support or hinder behavior change in your target audience. Once you identify and refine your target audience, you can begin exploring the secondary audiences in more detail.
Scenario 10
Rosa: "Hi! I need your help now with researching our possible audiences. Dr. Richards wants the department to show that we are addressing the epidemic of childhood obesity. Several of our stakeholders want us to target children. We have great partnerships with many organizations who work with children and their parents, so I think that access will be pretty easy. So, it seems as though we are most likely going to do something that targets children.

Based on what I'm learning though, I think it might be a wise decision to identify some criteria for an audience and then make sure we explore all of our options for potential audiences to make sure we don't miss something.

I'm having a hard time getting my planning team to look at other audience possibilities—especially Bob Lee. Like most of the Wellington coalition members, he wants to see action right away and is used to what Dan calls 'expert-driven' planning. He thinks we always know what's best and should be able to make decisions based on what we already know. I can hear him right now…"

Bob: "The Coalition really needs to get started with this, and I want to keep us on track. I really want to see this through! Why do we need to get sidetracked with more meetings? We should be able to make this decision easily. With our conflicting schedules, we won't be able to reconvene for at least a month, now's our chance to make a decision and get going!"

Rosa: "See what I mean? I want to take advantage of his expertise, I'm glad he wants to keep us moving, and I know he's passionate about helping people, but he's just not familiar with this type of planning. How can I persuade him that we need to make sure we're making the right decision about an audience before we 'get going'?"

How would you advise Rosa? Check all that apply.

1. Tell Bob that you will probably waste more time later if you make a quick decision now and then don't have a good reason for it.
2. It doesn't sound like you need to look at other audiences. It sounds like you have a strong consensus already to choose children.
3. Remind the team that this is an important first cut and you've got to provide a strong rationale for why you choose a particular audience which is one of the reasons you didn't get funded earlier.

Feedback:
1. This would be **good advice**. Making decisions without a good rationale sets you up for questions later in the process. If you can’t answer them, you may have to start all over.
2. This would be **poor advice**. Even though you may have a consensus, it is important to make sure you haven’t left out an important audience.
3. This would be **good advice**. You may need to justify your decision at a later time so it is good to establish a strong rationale for your choices now.
Plan Components for the Problem Description

III. Behavior

The third plan component is the behavior. Choosing a broad behavior begins the process of selecting specific behavioral objectives which will be written during a later phase. In the problem description phase, complete the following activities to identify the behavior and learn more about it:

- Gather information to help decide which behavior to promote.
- Identify which potential behaviors are appropriate to address for each broad audience.
- Identify potential benefits and barriers that the audience faces for changing their behavior.

**Identify Broad Behavior**

The process of identifying a behavior to change begins with looking at the general behaviors that may help prevent obesity.

See the CDC's Division of Nutrition, Physical Activity, and Obesity's *Technical Assistance Manual* for up-to-date information on promising target areas that help to prevent obesity. Each of these target areas represents a broad behavior that you can work on changing.

If you are doing "upstream" social marketing (i.e., trying to change the environment or policies), the target audience and behaviors you are trying to influence may be slightly different. The end goal may be change in these target areas, but you will probably be asking someone to draft legislation, vote a certain way or make a policy change.

The next step is to determine which behavior might provide a basis for an intervention. Would the broad target audience you selected be receptive to adopting one or more of these behaviors?

After conducting formative research (in phase 2), you will more narrowly define your behavioral goal.

**Resources**

- [Technical Assistance Manual](https://www.cdc.gov/nutritionphysicalactivityandobesity/technical manuals/)
  CDC; Division of Nutrition, Physical Activity and Obesity

**Audience or Behavior: Which One Comes First?**

**Big Picture Alert**

In this training, making a decision about the audience is presented first, followed by making a decision about the behavior. But, if it works better for you to make a decision about a behavior first, then do that. The two decisions are going to be closely linked together, no matter what. Once you begin developing your own social marketing intervention, you will probably go back and forth, thinking about audiences and behaviors at the same time to gradually refine your decisions.
Scenario 11

Rosa: "I convinced Bob to let the planning committee at least do some thinking about other possible audiences, but promised him we’d make a decision quickly and stick with it.

We started by talking through some criteria for a target audience and had some conversations with some members of the Wellington Community Coalition. We learned that several of them are quite passionate about impacting mothers of infants by encouraging and supporting breastfeeding. We found a small amount of data for Heartland that shows rates of both initiation and duration of exclusive breastfeeding are quite low in comparison to national data.

We’ve narrowed our focus on behaviors to breastfeeding for mothers of infants and reducing TV/screen time or increasing fruit and vegetable consumption for children.

Dan helped me put together a table so we can compare the three options we have based on some our own criteria for choosing an audience/behavior. Take a look at this table and tell me what you think. Based on our answers, which audience/behavior do you think we should choose?"

Open Audience-Behavior Comparison Chart (PDF-48k) to examine what Rosa and her team have written about each audience/behavior pair.

Select the audience/behavior pair you think would be best for Rosa and her team to target.

1. Option 1: Pregnant Women and Infants/Breastfeeding.
3. Option 3: Children/TV Screen Time

Feedback:
Taking into account all of the factors in the comparison chart, Rosa and her team could best be able to justify expending resources for option 3. The behavior of reducing TV/screen time and the broad audience of children have good partner and stakeholder support to move forward with planning the intervention. The audience fits in with the organization’s goals, recommendations exist for the behavior, and local and national-level data are available to use.
Plan Components for the Problem Description
III. Behavior (cont)

**Benefits and Barriers**
As you continue to look at existing behaviors that can be changed (or new behaviors that can be adopted), consider the potential benefits the audience may receive and what barriers they may face. Be sure to consider the audience’s perspective. What benefits and barriers do they perceive? Which benefits and barriers are most important to them?

Look at the literature and talk to subject matter or audience experts to start answering the following planning questions
- What is the current behavior of your target audience?
- What is the most achievable behavior change for the target audience to make?
- What will the audience like about the new behavior? What are the consequences of change?
- What might keep the audience from adopting the new behavior?
- Are there environmental factors that play a role? What are they?
- Are there policies or standards (for example, government laws or corporate policies) that either help or hinder the behavior change?

Answers to these questions can also feed into your decisions about a target audience. Some barriers may need policy and environmental approaches to overcome, while others may need individual behavior change approaches.

**Tip**
At this point, answers to these questions are only educated guesses and should be validated with the target audience during phase 2, formative research. Stakeholders can bring insight to help answer these questions, but their insight shouldn’t substitute for hearing directly from the audience.

**Resources**
- [Planning Questions](#) (PDF-88k)
- [Inventory of Qualitative Research](#)
The Division of Nutrition, Physical Activity, and Obesity's database houses information on qualitative research conducted on nutrition and physical activity topics, and is searchable by topic area and target audience.
Plan Components for the Problem Description
IV. Strategy for Change

The fourth plan component is the strategy for change. An intervention strategy explains how and why you expect behavior change to happen. During the problem description phase, you will study theories, behavioral models, and existing programs to identify potential intervention strategies. Complete the following activities to learn more about strategies for change

- Identify factors or concepts from behavioral theories and models that may help explain behavior change in your audience.
- Identify information about other programs, both successful and unsuccessful.

Resources

  Pages 9-25 describe nine theories and models often used in social marketing campaigns.
- Book: Health Behavior and Health Education: Theory, Research, and Practice
- Theory at a Glance: A Guide for Health Promotion Practice
  National Cancer Institute

Using Behavioral Theories and Models

Behavioral theories and models provide insight into why people behave the way they do. These theories and models help describe the factors that can lead to change and what you could consider measuring. They can point you to promising leads on how you might help individuals change their behavior, which, in turn, will help you develop intervention strategies once you get to phase 3.

When reviewing theories and models, you should try to identify the factors that are relevant for your particular audience(s), in their specific situations. This information can help suggest ways to motivate your audience to change existing behaviors or to adopt new ones.

In social marketing the following theories and models are commonly used

- Social-ecological model.
- Stages of change model.
- Social cognitive theory.
- Theory of reasoned action.
- Health belief model.
- Diffusion of innovations theory.

Strategies Used in Other Interventions

Another aspect of identifying potential strategies during the problem description phase is to look for other interventions that tried to accomplish similar goals. Take note of the audiences used in other interventions and determine how similar they are to your target audience.

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1 Resources that are not hyperlinked can be found at:
http://www.cdc.gov/nccdphp/dnps/socialmarketing/training/resources.htm
Consider the following planning questions

- What strategies were used in interventions that have similar goals?
- Which strategies are promising?
- Which strategies have not worked in the past?
- Are there strategies that have been fully evaluated or draw on a base of evidence?

Peer-reviewed articles can be especially helpful in looking for existing interventions. Other sources include people who work to change behaviors that you’re interested in, or people who work with similar audiences. These people can be a wealth of practical information, so take advantage of any advice they can pass along to you.

**Resources**

- [Overview of Nutrition, Physical Activity, and Obesity Intervention Strategies](#)
  UNC-CH Center of Excellence
- [Planning Questions](#) (PDF-88k)
End Products
At the end of phase 1, you should be able to do two things:
1. Draft a problem description.
2. Identify information gaps.

Draft Problem Description
All of the information gathered so far will be used to draft the problem description. There is no set format for a problem description. It is nice to have a detailed document where everything is written down, so that you can refer back to it if you need to justify any of your decisions. However, it is more important that you think through each of these elements as you begin your planning process.

The problem description is a working document for your benefit, and will be regularly revised as you move forward. You may abandon some options, add new information, or revise the content based on new knowledge you gain. So, it isn't necessary to spend time making it look nice unless you need to share it with your partners or with your funding agency.

Checklist for problem description:
- Statement of the problem.
- A list or description of the factors that contribute to the problem.
- List of broad potential target audiences, secondary audiences, and behavior changes (with rationale for each).
- Summary of any existing data about the problem, audience, and behavior.
- Models of behavior change that may apply.
- Best practices or lessons learned from other programs that may be similar.
- (optional) List of your strategy team members and summary of how decisions will be made.
- (optional) SWOT (strengths, weaknesses, opportunities, and threats) analysis.

Once you begin writing a draft problem description, it may be helpful to take a step back and assess your progress by answering the following questions:
1. What are your options for a target audience? For a behavior change? For an intervention strategy?
2. Are any of these options more appealing than others? How so?
3. Have you made any decisions? If so, can you supply a strong rationale for those decisions?

Tip
You will want to note the secondary data and specific sources that support your decisions. If an issue arises that requires some discussion later, you will be able to review supporting data and your rationale for the decisions you make.

Identify Information Gaps
Equally important as identifying what you do know in the problem description is to identify what you don't know. It is a good idea to be familiar with all of the phases of social marketing before you
begin, as well as what type of decisions are going to be made in each phase. That way, you'll be familiar with what types of information you will need in future phases. As you work through the beginning steps of phase 2, formative research, you will identify additional gaps and analyze them to see which you can fill.

Ready to Move On?
At this point in the social marketing planning process, there will be many unanswered questions. Secondary data will provide some answers, but that data may also be prompting you to ask more questions. In phase 2, formative research, you'll learn how to follow up on the additional questions that you find in creating the problem description.

The planning questions document can help in your determination of whether or not you need additional data before proceeding. If you see applicable questions that can be easily answered with secondary data, you might want to spend more time in the problem description phase answering those questions before moving on to phase 2. However, that document is just a guide. There may be questions in it that don't apply to your particular project, or you may need to add questions.

Resources
- Planning Questions (PDF - 88k)
Scenario 12

Rosa: "Well... Dr. Richards is happy because we're targeting children. Of course, Bob was able to say 'I told you so,' because we ended up where we had started, but I think he realized that our discussions helped to create a strong rationale for our choices of both audience and behavior.

Our whole planning committee is in agreement, which came in handy when we fielded a call from one member of the coalition who was upset that we didn't choose to focus on breastfeeding. We really needed to use that rationale to explain why we chose what we did. And, having that can only position us well when we reapply for funding.

Reducing TV screen time is turning out to be a challenging behavior choice, though. We have some general information in the literature about children's and families' attitudes towards TV time, but don't have many specifics from our community. We are also still not sure yet what specific behavior (within the broad category of TV/screen time reduction) we want our audience to change. But, I think we've thoroughly looked at available literature and current research on this topic. Take a look at our problem description draft, (PDF-61k) if you'd like.

Have we done everything we can to continue to the next phase?"

How would you answer Rosa?

1. Yes, move on to phase 2, formative research.
2. No, you are still missing information that you should collect before moving to phase 2, formative research.

Feedback:

1. This would be good advice. Rosa and her team have identified some gaps to be filled with formative research, so the next appropriate step is to move into that phase.
2. This would be poor advice. Rosa and her team have looked thoroughly at available literature, so they'll need to fill the information gaps they've identified with formative research they collect on their own.
Summary

You should now be able to

- Gather data and review available information about a specific health problem.
- Determine who is affected by the problem and what groups could be a target audience for the intervention.
- Identify what range of behaviors need to be changed to address the health problem.
- Make preliminary decisions about a behavior to address.
- Determine potential strategies for change.
- Explain how to identify information available through existing data, and determine what is relevant to selecting a target audience and to selecting a behavior to change.
- Identify stakeholders and obtain information from them on existing programs or activities.