



Who are you talking to?

Health marketing messages need to target more than just broad demographics to succeed.

Communicating health messages to the masses has always required a strong understanding of where people are at socially, economically and politically. However, as Australia's levels of education, income and social mobility continue to fragment, today's health promotion professionals are being forced to look beyond basic demographic categories and towards a more sophisticated understanding of what makes their target audience 'tick'.

There was a time in Australia's not too distant past when it was possible to identify a target audience through basic demographic categories such as gender, age, education and income. From the suburb a person lived in, through to the car they drove and the media they consumed, marketers were able to detect a certain level of consistency between the beliefs, values

and consumer habits of any given population group.

However, for today's social marketers, the situation couldn't be more different. Over the past 20 years, spiralling discrepancies in income, education and social mobility have combined with significant increases in multiculturalism to make the idea of addressing expansive population sectors such as 'men', 'teenagers' or 'the working class' seem hopelessly optimistic and naive. As many social marketers now attest, what's required is a complete re-evaluation of how health promoters envision their target markets.

Appreciating the diversity at work within traditional demographic sectors is an important part of this re-evaluation process. As Ross Honeywill, author of *Neo Power: how the new economic order is changing the way we live, work and play*, advocates, addressing Australia's diverse cultural landscape via broad demographic segments such as life-stage is a waste of time.

In an article recently published in *The Age*, he argues that across-the-board lifestyle labels such as 'Generation Y' are really only useful for one thing; and that's telling us how old someone is: "How can anyone seriously imagine that age alone determines our values, attitudes, behaviours and work choices? Take gen Y, which includes all Australians in the 14–28 age group. This group includes priests, alcoholics, politicians, police officers, musicians, unemployed, labourers, doctors, lovers, haters, lesbians, liberals, believers, heretics, scientologists, rich, poor, spenders, savers, technophiles and technophobes...yet they are all

Gen Y includes priests, alcoholics, politicians, police officers, musicians, unemployed, labourers, doctors, lovers, haters, lesbians, liberals, believers, heretics, scientologists, rich, poor, spenders, savers, technophiles and technophobes...yet they are all simplistically described as teens and 20-somethings who are techno-savvy, upwardly mobile...and time poor.

ILLUSTRATION: Guy Shield, The Slatery Media Group

simplistically described as teens and 20-somethings who are techno-savvy, upwardly mobile...and time poor".¹

According to the Roy Morgan Values Segment analysis (VALS), a broader understanding of the Australian population is required if we are to appreciate the multiple psychographic factors influencing the actions and lifestyle choices of specific target markets.² Put simply, instead of only focusing on where a particular section of the community lives and how much money they make, it's more effective to look towards a holistic understanding of why individuals behave in particular ways.

To date, commercial marketing sectors have made regular use of the VALS market analysis; however, health promotion has been slower on the uptake. In part, this comes down to health promotion's comparatively small budget, and the need to make every dollar stretch as far as possible. As Christina Pollard from Curtin University explains, "most annual nutrition promotion budgets are significantly less than the weekly spend of commercial food advertising companies".

Such financial restrictions are all too common within health promotion, and contribute to the failure to correctly identify who the target audience is, and what actually motivates them. Typically, the average health promotion professional is required to take on too many roles at once. All too often the person who is in charge of writing organisational or community-level policy is also the one who develops the action plans to promote a specific health topic. In the quest to reach as many people as possible, it's easy to fall back into generalised assumptions about the target audience being 'everyone' or 'the whole community'.

What's more, the communication skills required for writing policy are vastly different from the ones required for persuading people outside a bureaucracy to adopt change. The professional language of policy-makers holds little currency with the person on the street, and does precious little to tie in with their culturally specific values and mindsets. This sentiment is clearly echoed by Colin Benjamin, founder of the Roy Morgan VALS project, when he says, "The question that health promoters need to ask themselves is: given my limited resources, how do I make sure that the language and frame of reference reinforces the 'AIM' strategy? That is, does this initiative address the target audience's level of Awareness and Interest and does it enhance their Motivation to act?"

For Dr Fiona Newton of Monash University, addressing the lifestyles and mindsets of those most likely to be in need of assistance is an important starting point. "It's not enough to produce

clinically relevant health guidelines. The next step is to frame them in a way that can engage the minds and hearts of the target audience," she says.

One key strategy behind generating such engagement involves paying close attention not only to 'who' you are talking to, but also 'where' and in what context you are communicating with them. This approach was successfully pioneered in the early 1980s as part of Australia's initial HIV/AIDS campaigns. According to Chris Gill, a foundation member of the Victorian AIDS Council, the deliberate placement of safe sex posters and stickers in obvious locations (such as the back of public toilet doors) went a long way towards informing homosexually active men of the risks involved in having unprotected sex. During the mid 1990s in Adelaide, Gill and other health promotion professionals took this understanding one step further by having individual posters customised to match the look and feel of particular gay venues. "The evidence was that in Adelaide, people who went to one venue were a bit snooty about people who went to another venue, so rather than create a poster that was appropriate for all venues, we realised it was better to actually narrow the focus, so that the poster for the nice respectable pub had a totally different look from the one at the grungy, all-night disco down the road," said Gill.

Understanding the role that the media plays in the lives of the target market is clearly crucial. From the Internet and Pay TV, through to DVD, radio, magazines and

free-to-air television, Australians now have a greater choice in terms of what media products they consume, and where and when they choose to consume them. And with greater choice, comes a greater power to disregard media messages that don't immediately fit with their own mindsets. As findings from the Roy Morgan VALS analysis clearly note: "Today's audiences are becoming narrower in focus and more demanding of targeted information. People only hear what fits their perception of their micro-futures and tune out the hundreds of mass marketing efforts that do not address their goals in life."

For Newton, negotiating this media fragmentation is a critical part of effective health promotion at the start of the 21st century: "Thinking about the issue of media clutter, it is critical to consider how many messages the recipient is likely to see and hear in an average day," says Newton. "The goal is to develop a creative idea that will attract the attention of a target audience long enough for them to take the message on board and store it in their long-term memory. This is easier said than done."

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REFERENCES

1. Honeywill, R, 2007 'The marketing gens aren't the genuine article', *The Age*, 5 September, p. 14.
2. Roy Morgan Research 1995, *Roy Morgan Values Segments*, www.roymorgan.com/products/values-segments/values-segments.cfm

