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A Process Evaluation of the HappyHealthy Social Marketing Campaign

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Social marketing campaigns are effective in promoting health behavior changes in individuals and communities. Mississippi State University Extension Service’s (MSU Extension) Office of Nutrition Education launched a statewide social marketing campaign branded HappyHealthy to target nutrition and healthy lifestyle-related behaviors of Supplemental Nutrition Assistance Program-eligible individuals and families. In this study, a process evaluation was conducted with MSU Extension staff to assess perceptions of the campaign’s relative advantage, compatibility, complexity, trialability, and observability. In the early stages of the campaign, external evaluators conducted in-depth interviews with MSU Extension staff members (n = 17). After the campaign had been active for several months, the same external evaluators developed a web-based survey instrument for administration with MSU Extension staff (n = 54). Interview and survey responses were interpreted in accordance with Roger’s diffusion of innovation theory. Staff responses indicated it is important that campaign messages and materials align with and enhance staff members’ job responsibilities and that campaign messages are consistent with other education being delivered. Allowing staff to get familiar with some campaign materials before they are responsible for using them may also be advantageous for successful adoption and implementation.

Keywords: diffusion of innovation theory, healthy behaviors, process evaluation, SNAP-Ed, social marketing campaign, staff perceptions

Introduction

Extension has a long history of providing nutrition and healthy lifestyle education. In many states, the Supplemental Nutrition Assistance Program Education (SNAP-Ed) is implemented through Extension and is part of Extension’s approach to providing nutrition education to low-resource individuals and families. SNAP-Ed has typically provided nutrition education through individual and group-based classes, but social marketing as a means of influencing population-based behavior change is currently being encouraged (United States Department of Agriculture [USDA], 2021). For example, as a broad-based approach to nutrition education, social marketing
can be used with SNAP-eligible target audiences to deliver positive messages about and images of healthy eating (Centers for Disease Control and Prevention, 2013).

The strategy of social marketing includes the use of comprehensive, multifaceted approaches that aim to produce voluntary behavior change in intended audiences by

- targeting a specific audience;
- identifying the needs of that audience;
- selecting target behaviors to address.

Altering messages and delivery channels through audience feedback and evaluation data are also important when implementing a social marketing campaign (USDA, 2021). Social marketing is a promising strategy to be increasingly utilized in Extension programming to encourage healthy behavior (Skelly, 2005; Warner et al., 2016). Yet, Extension staff may need or benefit from professional development related to social marketing. Professional development could increase staff skill levels and enhance their readiness to successfully implement social marketing (McKenzie-Mohr, 2011; Warner et al., 2016). Identifying barriers to the use of social marketing among Extension staff is necessary for the development of strategies to facilitate the adoption of social marketing among staff (McKenzie-Mohr, 2011). Once strategies to facilitate the adoption of social marketing among Extension staff are developed, the implementation and evaluation of those strategies are critical to ensuring that staff use social marketing to reach their target audience (McKenzie-Mohr, 2011).

In 2018, Mississippi State University Extension Service’s (MSU Extension) Office of Nutrition Education (ONE) launched a statewide social marketing campaign for SNAP-eligible individuals and families. The campaign was branded HappyHealthy and is the most widespread social marketing campaign undertaken by MSU Extension. The campaign has four target behaviors: increasing physical activity, shopping for healthy foods on a budget, preparing meals at home, and having pride in food and family. MSU Extension delivers messages related to these behaviors through five delivery channels: mass media, web and social media, printed materials, teaching and presentation resources, and nutrition education reinforcement items (NERI).

MSU Extension staff support implementation of the campaign through the distribution of printed materials, through social media efforts (e.g., Facebook, Twitter), and by dissemination of promotional media (e.g., NERI, such as recipe cards). MSU Extension agents, specialists, and other personnel, in general, have been asked to support the campaign. Most specifically, ONE staff are considered innovation champions to boost HappyHealthy within the communities they serve. Rogers (2003, p. 414) defines an innovation champion as “a charismatic individual who throws his or her weight behind an innovation, thus overcoming indifference or resistance that the new idea may provoke in an organization.” By fulfilling the role of innovation champions, Extension professionals can contribute to HappyHealthy by initiating, guiding, and implementing the innovation process (Rogers, 2003).
Theoretical Framework

At the organizational level, HappyHealthy is an innovative way for MSU Extension staff to promote healthy food and lifestyle choices. The degree to which MSU Extension staff champion the organizational innovation and disseminate HappyHealthy messages and materials with low-resource audiences can impact the campaign’s successful implementation. When conceptualizing HappyHealthy as organizational innovation, Rogers’ diffusion of innovation theory could help researchers and practitioners understand how individuals in the organization are “putting an innovation to use” (Rogers, 2003, p. 417).

Diffusion of innovation theory describes the process through which an innovation is communicated through various channels over time to audience members and how that innovation spreads throughout an audience or from one audience to another (National Cancer Institute [NCI], 2005). Further, diffusion of innovation entails a multilevel process of change that incorporates various strategies in diverse settings (NCI, 2005). When looking at this theory at the organizational level, diffusion of innovation might include employee role changes, regulation changes, or the addition of new programs (NCI, 2005).

Rogers stated that “innovation goes on all the time in organizations,” but employees’ adoption of an innovation is not guaranteed (Rogers, 2003, p. 405). Instead, adoption could be affected by an employee’s perception of the innovation’s attributes. Perceived relative advantage, compatibility, complexity, trialability, and observability could determine the adoption of innovation (Rogers, 2003). In other words, an employee’s adoption of an innovation can depend on whether they see the innovation as superior to what it is replacing, an appropriate fit for the target audience, easy to implement, able to be tried before adopting, and able to produce measurable results (NCI, 2005). These perceptions of innovation can affect the rate of adoption by employees (Rogers, 2003). Relative advantage, compatibility, trialability, and observability are positively related to an innovation’s adoption rate, whereas complexity is negatively related to its rate of adoption (Rogers, 2003). For a description of the attributes described by Rogers (2003) and applied to the HappyHealthy social marketing campaign, see Table 1.

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relative advantage</td>
<td>The degree to which Extension staff perceive the campaign as better than what it replaces</td>
</tr>
<tr>
<td>Compatibility</td>
<td>The degree to which Extension staff perceive the campaign as matching existing values, previous experiences, and needs</td>
</tr>
<tr>
<td>Complexity</td>
<td>The degree to which Extension staff perceive the campaign as difficult to disseminate</td>
</tr>
<tr>
<td>Trialability</td>
<td>The degree to which Extension staff may partially integrate the campaign into their work before fully integrating it</td>
</tr>
<tr>
<td>Observability</td>
<td>The degree to which Extension staff see results from integrating the campaign into their work</td>
</tr>
</tbody>
</table>
HappyHealthy Timeline and Guiding Process Evaluation Question

Figure 1 illustrates the timing of staff training on campaign implementation, campaign launch, and process evaluation. Before the campaign launch in February 2018, ONE staff attended a day-long, face-to-face training on campaign implementation.

Figure 1. Timeline of the Launch, Training, and Process Evaluation of HappyHealthy

In 2018, external evaluators conducted a process evaluation of the HappyHealthy social marketing campaign. A primary purpose of the evaluation was to identify factors that contributed to the success of the campaign and those factors that may impede the campaign’s success (Walker et al., 2018). For this manuscript, we use Rogers’ diffusion of innovation theory to frame the following evaluation question: What were the perceived attributes of HappyHealthy among ONE staff? To answer this process evaluation question, we accessed data collected by the external evaluator. Data were in the form of interview transcripts and survey responses.

Methods

External evaluators conducted in-depth interviews with a subset of MSU Extension’s ONE staff members (n = 17) as part of process evaluation efforts. Interviews with nutrition educators (n = 12), Extension agents (n = 2), and regional registered dietitians (n = 3) provided information from three organizational perspectives because each role had a different point of view of the campaign and varying roles in the dissemination of the campaign. Walker et al. (2018) designed the interview guide to last approximately 30 minutes and consisted of mostly open-ended questions. Interview questions were related to five broad areas, including campaign awareness, campaign implementation, campaign exposure, partnerships, and recommendations. For example, one interview question related to campaign implementation was, “Are the HappyHealthy campaign messages and materials consistent with the SNAP-Ed concepts taught in your area? If yes, how do the campaign messages and materials support SNAP-Ed concepts? If no, what changes would be necessary to make the campaign messages and materials more...
consistent with SNAP-Ed concepts?” As reported by Walker et al. (2018), a trained external evaluator conducted and digitally recorded interviews to capture all comments accurately. The external evaluator transcribed the recordings, and Downey coded the transcripts by using a thematic analysis approach. Thematic analysis is an iterative reading and re-reading of data to identify the study’s themes. In this evaluation study, the project team took a deductive approach, where the initial coding scheme was determined a priori from Roger’s categories of perceived attributes. Dr. Downey read and re-read the transcripts and tagged text with the code of relative advantage, compatibility, complexity, trialability, or observability.

As a continuous process evaluation effort, Walker et al. (2018) developed a web-based survey for administration with MSU Extension’s ONE staff. This survey was implemented after the campaign had been active for several months. The evaluation survey developed by Walker et al. (2018) included closed-ended questions primarily and took approximately 20 minutes for respondents to complete. Survey questions were also related to five broad areas, and most areas were the same as those explored through interviews, including campaign awareness, campaign implementation, perceptions of campaign materials and messages, partnerships, and recommendations. For example, a survey question related to campaign implementation was, “How confident are you in your ability to promote HappyHealthy in your area?” The response options ranged from completely confident to completely unconfident. A total of 54 surveys were completed by nutrition educators (n = 35), Extension agents (n = 14), and regional registered dietitians (n = 4). One respondent did not report their role in ONE (Walker et al., 2018). Downey used Roger’s perceived attributes of innovation to interpret the findings. In the following section, we summarize key results from both data collection approaches in tandem. In some cases, both data collection approaches did not yield results for each of Rogers’ perceived attributes.

The interview guide and survey are available upon request to the corresponding author.

**Results**

**Relative advantage.** As related to relative advantage, interviewees perceived that HappyHealthy provided a unified social media presence for ONE, something that had not previously been available. Additionally, interviewees thought the campaign offered a “positive” and “catchy” way to recruit future program participants and to continue to engage with past program participants. In the words of one key informant, “I think everyone is buying into it, everybody [is] getting excited…following the plan, doing the recipes, just keeping on those positive messages.” After several months of implementation, the vast majority of survey respondents had used the campaign to reach SNAP-Ed audiences with health messages. All nutrition educators and regional registered dietitians reported promoting HappyHealthy. To a lesser extent, Extension agents (57%) reported involvement in promoting the campaign.

**Compatibility.** Regarding compatibility, informants perceived their promotion of HappyHealthy to be compatible with their more traditional job responsibilities. Similarly, campaign materials
and messages were consistent with nutrition content delivered through SNAP-Ed nutrition programs. All interview participants believed that the goals of the campaign were the same as those in their nutrition education classes and other activities. When asked if campaign messages and materials were consistent with nutrition concepts taught, one participant stated, “Yes, because one of the main goals with the MyPlate is make your plates fruits and vegetables. Well, that’s one of the main goals of HappyHealthy. So, I think they align perfectly with each other.” Similarly, survey respondents agreed (60%) or strongly agreed (29%) that HappyHealthy helped reinforce the lessons taught in nutrition education classes, and a total of 83% agreed or strongly agreed that the campaign contributed to adult participation in nutrition education (see Figure 2).

**Figure 2. Respondents’ Level of Agreement with Statements About HappyHealthy (n = 48)**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;Social marketing helps increase adult participation in nutrition education in my area.&quot;</td>
<td>17%</td>
<td>60%</td>
<td>23%</td>
<td>60%</td>
</tr>
<tr>
<td>&quot;HappyHealthy helps to reinforce the lessons I teach in nutrition education classes.&quot;</td>
<td>4%</td>
<td>6%</td>
<td>29%</td>
<td>60%</td>
</tr>
</tbody>
</table>

**Complexity.** Concerning complexity, most key informants were aware of their responsibilities related to the campaign. They felt that the training they had received on the campaign implementation was “very well done,” as expressed by one interviewee, and built excitement among staff about the work. Some key informants recommended additional training on campaign implementation and increased accessibility to HappyHealthy materials. Several months into the campaign, most surveyed agents (64%) only felt “somewhat confident” promoting the campaign (see Figure 3). In comparison, most nutrition educators (57%) and the majority of regional registered dietitians (75%) were “completely confident” in their ability to promote the campaign. None of the regional registered dietitians felt somewhat unconfident in their ability to promote the campaign. Only 3% and 18% of nutrition educators and Extension agents, respectively, felt somewhat unconfident in their ability to promote the campaign.
Trialability. Comments and findings related to trialability were consistent across interviews and the survey. Informants indicated that they were distributing print campaign materials – including recipe and social media cards – more frequently than sharing campaign messages on social media. This could suggest that staff were experimenting with some aspects of the campaign before adopting other elements, and therefore, might relate to trialability. Similarly, 86% of survey respondents distributed recipe cards, while just over half the participants (51%) distributed social media cards. Figure 4 shows additional HappyHealthy printed materials and NERI used by survey respondents to promote the campaign.
Interestingly, 84% of survey respondents reported they had liked and/or followed the campaign on social media. In comparison, only 54% had shared *HappyHealthy* messages through social media, and 16% had used #*HappyHealthy* on social media. Again, this could illustrate that staff are experimenting with some campaign elements before others.

**Observability.** The concept of *observability* was not evident in the data collected. This could be because the campaign, once launched, became part of ONE staff members’ job responsibilities.

**Implications, Recommendations, and Conclusions**

Using Roger’s model, this process evaluation exposed several areas of improvement that could enhance the adoption of the campaign. These areas of improvement related to complexity, trialability, and observability (as evidenced by lack of findings) of the campaign.

In response to findings, ONE personnel have developed an online store for staff to order campaign materials to limit the complexity of ordering *HappyHealthy* materials for dissemination. ONE staff have completed more extensive training on the campaign, and the training content has intentionally focused on how the promotion of the campaign aligns with the responsibilities of MSU Extension staff. Such efforts are supported by previous research that highlights the need for training Extension staff in the strategy of social marketing for successful adoption and implementation (Warner et al., 2016). Training in social marketing can help to encourage its use among Extension staff members, especially among those who have not used the strategy previously (Warner et al., 2016). In addition to training, providing organizational support and incentives for adopting social marketing may motivate Extension employees to adopt social marketing as an innovation (Warner et al., 2016).

Further, the potential for efficiency and being impactful are two motivating factors that should be emphasized among Extension employees when utilizing the social marketing strategy (Rogers, 2003; Warner et al., 2016). To communicate the current and potential impact of the campaign, ONE staff were updated regularly on campaign reach, new and improved campaign elements, and process evaluation findings. Also, more formal procedures were available to guide ONE staff with the implementation of campaign elements, specifically on how to use elements efficiently and consistently.

Based on these findings and our efforts to use those findings to improve implementation, we provide recommendations (see Figure 5) to other Extension professionals who are developing a social marketing campaign. The guidance related to “observability” is based on the literature (Rogers, 2003) because we did not observe this attribute’s perception in data. We offer these recommendations because a greater acceptance of social marketing innovation by employees can increase its successful implementation and diffusion with the target audience. Identifying barriers and benefits to social marketing utilization specific to organizations is also key to developing the best strategies to help staff members adopt social marketing as an Extension organizational
innovation. Implementation and evaluation of procedures used to promote social marketing among organization staff members are equally important for improving the effectiveness of social marketing adoption among organization members.

**Figure 5. Recommendations for Successful Implementation of a Social Marketing Campaign in Extension**

<table>
<thead>
<tr>
<th>Relative Advantage</th>
<th>• Work to ensure that a social marketing campaign increases the effectiveness and/or efficiency of Extension staff current efforts. Communicate these benefits to Extension staff.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compatibility</td>
<td>• Develop campaign messages that align or compliment the educational content being delivered and educational methods being used by Extension staff. Communicate the compatibility to staff.</td>
</tr>
<tr>
<td>Complexity</td>
<td>• Provide initial training and follow-up training on the campaign and campaign elements.</td>
</tr>
<tr>
<td>Trialability</td>
<td>• Strategically and systematically phase in campaign elements so that staff are not inconsistently experimenting with elements.</td>
</tr>
<tr>
<td>Observability</td>
<td>• Identify Extension staff who are known to be early adopters, and designate them to champion staff engagement with and diffusion of the social marketing campaign.</td>
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</table>

**Limitations**

Readers should consider the limitations of this study when interpreting the results. First, not all ONE staff participated in the interview process. While we believe the interview participants are similar to the entire staff, we may have failed to capture the perspectives of those not included. Second, the sample size across data collection techniques differs and could result in bias.

**References**


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*Ms. Kristy Terp*, at the time of manuscript development, was a graduate student at Mississippi State University and a research assistant in the Office of Nutrition Education. Ms. Terp is currently a medical student at Florida International University.

*Dr. Sylvia Byrd* is the Project Director of the Office of Nutrition Education at Mississippi State University. She provides administrative leadership for the Expanded Food and Nutrition Education Program and Supplemental Nutrition Assistance Program Education.

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