



PARTICIPATION AS STRUCTURAL

A critical approach to the dynamics of power in media for social change

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Media for social change refers to strategic media projects designed to advance causes for the public good. Those projects are rooted in development communication, health communication, environmental communication, social movement theories and other approaches to public communication campaigns. This emphasis is increasingly recognized as interdisciplinary, through the work of research scholars in communications, sociology and other fields, and of professionals in project implementation and evaluation. Although there has been widespread enthusiasm for the integration of participatory approaches within these comprehensive strategies, the diversity of conceptual and operational definitions of participation suggests that consideration of its complexity has not yet been exhausted. To this end, we propose considering participation as a structural consideration within the production of media strategies.

Building on a critical approach to research on communication campaigns (Rakow, 1989), this work interrogates underlying ideological assumptions as well as the organizational and structural conditions of production. In order to articulate the dynamics of power within the production of these strategic interventions, we begin with the assumption that social problems are not given, but selected and constructed by groups, communities, and organizations (Salmon, 1989). How these problems become characterized constrains possible types of solutions. Framing world population, for example, as a bomb, implies that subsequent intervention should be immediate in order to diffuse the situation; if, rather, the problem of population is framed as one of overcrowding on a boat, then perhaps redistribution of people might be an appropriate response. Framing a problem as a "war" on poverty, or on drugs, implies that there are heroes and enemies, and that a battle must be won despite the cost.

The groups and organizations creating these strategic interventions then have power to define problems as well as appropriate solutions. The construction of issues and interventions carries with it assumptions about models of social change, whether seen as advanced through individualist action in a pluralist society or constrained by collective, normative and

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structural conditions. To offer some illustrations, focusing on individuals means encouraging seat belt use rather than creating policies to regulate car manufacturing; quitting smoking rather than restricting smoking in public spaces or reducing subsidies to tobacco farmers; as well as boiling water and washing hands rather than improving plumbing and water supply.

In a broad research project concerning a variety of communication for social change strategies, we address social marketing, entertainment-education, as well as media advocacy interventions. What unites these approaches is an intentional, organized strategy toward a specific, non-commercial goal.

Strategic communication projects share an assumption that media have the potential to influence social change, whether as a mechanism toward informing or persuading individuals, shifting normative climates or encouraging policy change. These types of projects differ, however, in terms of the types of groups they address, as well as the nature of the social change process assumed. For example, social marketing targets individual consumers to change their behavior, whereas media advocacy directs attention toward policy makers who have the potential to change structural conditions. These projects also differ in their theories of how media might influence individuals and society. Notions of participation may also be distinct across these strategies. These three approaches are analyzed in terms of types of problems addressed; the process of social change assumed; and the role of media in that process. These models of communication intervention represent ideal types described in the field, intersecting theoretical approaches with applied practice. It is recognized that these approaches are neither mutually exclusive in theoretical terms, nor completely distinct in the implementation of specific projects.

The focus of this article centers on social marketing projects, assessing the structural conditions of campaigns in relation to their projected constructions of participation, as well as identified themes and goals. The sector of analysis will address population projects.

FRAMEWORK

In the course of addressing social problems, offering communication strategies as an intervention is but one approach; enforcement and engineering offer alternative approaches as well, encouraging more coercive or technological solutions (Paisley, 1989). When articulating media as a critical component of larger intervention strategies, it is assumed that the particular technology is accessible, that the message is

visually and verbally comprehensible, and that the mediated text will have some influence through its reception. Beyond the confines of the project itself, media for social change projects assume that the particular social problems are addressed may be resolved through mediated strategies. For example, the problem of hunger might be conceived as one of resources rather than information; if so, then a media project might not be an appropriate response (Hornik, 1988). The use of media not only responds to the logic of the particular condition addressed however, but also resonates with broader ideological assumptions about social change.

The individualist preoccupation of social marketing, and to some extent entertainment education, resonates with an ideological tenet of American society, privileging the individual as the primary actor in social change. In a market framework, individuals make choices about smoking cigarettes, using condoms, and recycling bottles; conversely, in a social justice framework structures that restrict smoking to certain areas, subsidize the cost of condoms, or facilitate the collection of recycling containers are seen as critical factors conditioning social change. If a woman is assaulted while running in a park, do we attempt to convince individual women to avoid public parks at night? Or, initiate public funding to increase lighting and enforcement patrols? Or attempt to change the normative climate in which gender stereotypes assimilate persons into aggressive and victim roles? The potential solutions are constrained by descriptions of the problems.

The metaphor of the marketplace, grounding social marketing, builds from democratic and capitalist ideologies, in which individuals are assumed to have equal abilities to vote and purchase. When people do not participate in elections or do not consume marketed products, the marketplace itself is not questioned, but individuals' lack of interest or knowledge is. Alternatively, a social justice orientation attributes social problems to structural conditions that inhibit participation.

Seeing information as never politically neutral (Rakow, 1989), but as grounded within the institutional structures with the ability to construct and project particular perspectives, issues of power in the process of strategic communication for social change emerge. First, we must consider who has the right to create these communication campaigns, thus contributing to public discourse, not just in theory but also in actual practice; the right to voice is connected with issues of access to information, whether through strategic communication or other potential sources of information. In addition, we must consider who benefits from the proposed and actual changes advocated by strategic interventions, including but not limited to the sponsoring organizations, particularly with reference to potential participatory approaches.

The point of intervention is to work toward social benefit, as designated by the organizations and groups creating the project. Media for social change interventions may be seen as paternalistic (Salmon, 1989) when assuming that the sponsoring institution is better able to determine what is in the best interests of individuals or groups targeted for change. Although by engaging in intervention at all the media projects can be seen as paternalistic, there may be differences in degree, depending on the extent to which beneficiaries are constituted as lacking to not being considered at all.

Some counter this potential for paternalism with discussions of participation (Huesca, 2002). What is meant by participation differs markedly across these models. Within social marketing, participation might be marked through consumption. Entertainment education along with social marketing might invoke the use of focus groups and formative research as a form of participation toward improving the execution and utility of the campaign. Apart from seeing participation as a means toward a previously constructed goal, other models of change articulate the importance of community participation in determining the priorities and salience of issues, as well as appropriate means for addressing them. When media advocacy builds from community concerns, these projects can be seen as engaging participation that involves prioritizing problems as well as constructing solutions.

The structural conditions of production incorporate economic issues of funding. Although media advocacy projects may be directed against corporate agencies, commercial sponsorship has become a critical component of social marketing and entertainment education. The concern is that by including corporate donors in the funding of projects designed for social benefit, the subjects addressed through these media projects may avoid potentially more controversial issues. In the interests of attracting corporate sponsorship of television and radio programs, issues such as racial tolerance, environmental conservation, sexual violence as well as human rights might be more difficult to address. The types of topics engaged by these media projects, in connection with the composition of funding agencies, are of critical concern.

In terms of a framework for understanding participation, we propose re-visioning participation from a structural perspective of production process, moving away from an audience-driven approach. Instead of grounding our attention to participatory processes within communities and audiences as a response to previously constructed messages or conceived project plans, we propose recognition of structural participation in the process of production, of the project more broadly and the message more specifically. At the conceptual level, we consider structural participation to include formal, direct, and active involvement in allocative

control over the direction of the project. At the operational level, we consider involvement in funding, decision-making, advisory boards and other clear acts as evidence of economic and political engagement in the process. This attention to the formal structure of the project funding, conceptualization, and implementation allows us to connect this vision of “participation” to central issues of power, which we believe may have some influence over the nature of the messages invoked in media for social change projects. This framework may offer some grounding for empirical work in this matter.

MODELS OF SOCIAL MARKETING

Social marketing strategies have become increasingly popular to address the issues of reproductive health (RH) and HIV/ AIDS. Some of the organizations relying on social marketing in this sector include USAID, UNFPA, and Population Service International (PSI) (UNFPA, 2004). As the social marketing approach has attracted increased support among donor and participant organizations, the strategies implemented have become more diverse and complex.

Traditionally most social marketing strategies designed to create demand for and use of contraceptives in the field of development fall into two basic models, described as the NGO model and the Manufacturer's model (Agha, Do, & Armand, 2005). As a third possible type, Armand (2003) proposes the Hybrid model, combining the merits of the two former frames reflecting complicated private-public partnerships.

While each idealized model embodies distinct features, current approaches of social marketing projects are becoming more broad ranging in their structural characteristics. Each of these models is described below, considering the potential for structural participation circumscribed by the parameters of the social marketing approach.

THE NGO MODEL

The first model is characterized primarily through its implementation by a non-governmental organization (NGO). While these social marketing projects are mostly structured around the practices of the NGO implementing the project, other types of organizations may also play a somewhat limited role in the allocative decision-making and funding processes. These projects rely mostly on NGOs to market contraceptive products toward population and family planning as well as HIV/AIDS reduction goals.

To illustrate how this model works, several NGOs serve in this capacity. PSI has become a leading agency for social marketing programs such as Social Marketing for Adolescent Sexual Health (SMASH) in Botswana, Cameroon, Guinea, and South Africa; Zimbabwe's New Start VCT network in Zimbabwe; The Family Planning Options Project (FAMPOP) in Guinea; and the AVAHAN Program in India. Other social marketing projects based in this NGO model include the Academy for Educational Development's (AED) Rural Expansion of Afghanistan's Community-Based Health Care (REACH) in Afghanistan, and COMCAVI in Honduras. These NGO model programs tend to focus on population groups who cannot afford to pay commercially viable prices. While target groups are expected to contribute some expense, these NGOs can market contraceptives toward interests in maximizing the size of population without particular commercial interests in profit share increase and cost recovery. Highly subsidized or donated products are necessary to provide low priced products to the target population. Thus, these programs often "remain donor dependent" with a potentially less sustainable structure (Agha, Do, & Armand, 2005, p. 1).

To maximize the number of users of the marketed products, these NGOs try to establish distribution networks of locally available medical service outlets and providers such as pharmacies and clinics. Non-traditional outlets including clubs, bars, and hotels are also sought as part of this distribution network. Since these health services and facilities are more accessible to urban populations, those living in rural areas may be less likely to benefit. Participant service providers in the network are entitled to sell low priced products as well as occasional trainings and education for adequate prescription and sales information. Thus, the social marketing efforts along with the health education messages are branded by the specific slogans and logos of the projects.

Often donor organizations assign local communities mediating roles to mitigate culturally sensitive issues of sexual practices and family planning. Donor NGOs then utilize these groups, such as indigenous religious groups, as referral organizations to reduce potential tensions between the project and local communities. For example, PSI successfully "cultivated" the support of Islamic religious leaders through a series of seminars in which Islamic leaders are claimed to have educated their congregations (PSI, 2000a).

Strategic cooperation with other NGO donors or health projects is common through cross subcontracting and outsourcing. For example, Family Health International (FHI) assisted PSI's New Start project in Zimbabwe in project evaluation and provides technical expertise on counseling and procedures. The Population Council's Horizons project conducted operations research to determine what role community based

organizations might best play in promoting the New Start network (PSI, 2007). Similarly, the Bill and Melinda Gates Foundation funded the AVAHAN project in India, structured through several subcontractors, including IntraHealth International¹, PATH² and Population Council³ for monitoring, research and project assessment.

The NGO model may have an advantage over other models in that the implementing NGOs have relatively more control over the project management than other agencies during the contract period, which enables them to focus on reaching target groups with less commercial viability. Private companies, such as condom suppliers based in developed countries, may also benefit, through their production being subsidized from development donor agencies, who, also help to clock these potentially controversial products in more socially responsible ways (Armand, 2003). The structural participation idealized through this model privileges the role of the NGO as well as the importance of reaching communities with few economic resources for purchasing. The potential for exploitation of local community groups remains, but would be contingent upon the particular position of individuals and groups within the decision making structure of the project.

THE MANUFACTURER'S MODEL

With a more profit-driven orientation than the NGO approach, the Manufacturer's model is designed to reflect the commercial market's interest in cost recovery and products sales geared toward maximizing market share in the recipient's territory. Hence, the Manufacturer's model is proposed as potentially more 'sustainable' and 'self-sufficient' than the NGO model, given the propensity of donor agencies to implement projects with defined time periods rather than as continuously implemented interventions. The objectives of most programs within the Manufacturer's model include (Leavell and Pollard, 1997)⁴: 1) Change consumer behavior to use modern contraceptives and to purchase contraceptives and family planning services through the private sector; 2) Work with drug manufacturers to import a wider range of modern contraceptive methods to be offered at an affordable price through the private sector; and 3) Ensure a constant supply of quality contraceptives through the private sector.

The projects in this model might include, among others, the commercial (for-profit) health service development company Constella Futures⁵ Social Marketing for Change (SOMARC) programs across the world. More recently, the same institution implemented Key Social Marketing (KSM) projects in Pakistan. International Planned Parenthood Federation

(IPPF)'s for-profit arm Icon Inc. managed contraceptive social marketing programs based on this model in three former Soviet Union states in Baltic area - Estonia, Latvia and Lithuania. Academy for Educational Development (AED), as part of USAID's Private Sector Partnership program (PSP-ONE), implemented a series of social marketing programs of T-MARC (Tanzania) through commercial T-MARC Ltd and N-MARC (Nepal), local Nepal Contraceptives Retail Sales (CRS) and Nepal Family Care Center (FCC).

Mostly, the programs in this model are structured in partnership with one or more commercial manufacturers of family planning products, such as the U.S.-based Schering and Wyeth in the SOMARC program (SOMARC/The Futures Group, 1989). These corporate sponsors not only contribute commodity supplies for the projects, but also retain control over branding, pricing, and distribution of the products (Armand, 2003; Agha, Do, & Armand, 2005). Though these projects are managed by non-profit NGOs like AED and PSI, commercial social marketing companies like Constella Futures or Icon Inc. may be highly involved in their implementation. For example, some local agencies may be subcontracted, such as local family planning associations (SOMARC/Brazil), private firms (N-MARC), or donor agency affiliates (T-MARC), which are supervised by the contractor agencies. According to proponents of this model, subcontracting with local agencies may help develop market systems and skills for the supplied commodities in the recipient's society (SOMARC/The Futures Group, 1989), creating stable consumer demand and distribution channels (AED, 2006). In this regard, U.S.-based health marketing companies subcontracted with donor agencies, such as Emerging Market Group for T-MARC and EngenderHealth for N-MARC, contribute toward establishing market friendly business models for these projects.

Moreover, organizing activities to establish close business relations with local private health service firms constitutes an important part of the 'self-sufficient' and 'sustainable' model, which eventually may facilitate a stable domestic market system. What are termed "partnerships" with local commercial firms might include the integration of Biogenic Inc in KSM in Pakistan, Shelys and Beta Health care in Tanzania, which is a subsidiary of one of the largest and most successful conglomerates in East Africa, as well as the Sumaria Group and Nepal Contraceptive Retail Sales and Nepal Fertility Care Center for N-MARC. The partnerships with local pharmaceutical companies provide reportedly stable commodity supplies through their own sales outlets and marketing practices.

Specific social marketing through mass media are, then, geared toward promoting a manufacturer's portfolio through either conventional commercial distribution and communication channels (SOMARC), networks of NGOs (N-MARC, T-MARC), or networks of clinics and

doctors (KSM). Often manufacturers train pharmacists and participate in public relations activities under the name of the 'social' marketing routines (SOMARC). When brand advertising for pharmaceutical products is prohibited in some developing countries, "social marketing programs sometimes develop an "umbrella" logo that identifies the partners' brands at the point of sale and in the media" (Armand, 2003, p. 14-15).

Given the clearly defined roles commercial firms play in controlling key aspects of these projects within these models, their "participation," marked as "partnership," must be accounted for in this structural mapping of key figures and agencies. The potential participation of local community groups becomes even more circumscribed than in the NGO model, in that a Manufacturing approach would ascribe value to consumers with commercial viability rather than assess the potential social and health needs.

THE HYBRID MODEL

The Hybrid model signifies an evolution of approaches incorporating NGOs yet still favoring dominant market systems. Armand (2003) recognizes that a growing number of social marketing projects do not adhere to one of the above ideal types, but rather offer an integration of the more purely conceptualized NGO and Manufacturer models. Conceptually, the Hybrid model integrates private with public agencies along global as well as local axes on more equal terms. This model is meant to recognize a complex set of relationships among a variety of organizations and groups in the process of planning and implementing projects.

Given the complexity of most large-scale development projects, most might conceivably fall within this domain rather than the projected ideal types. For example, Armand (2003) describes the RedPlan Salud program in Peru managed by CATALYST consortium led by Pahfinder International, condom social marketing activities by Ghana Social Marketing Foundation funded by USAID, and the Green Star Network in Pakistan implemented by Social Marketing Pakistan (PSI's Pakistan affiliate) as candidates illustrating the Hybrid approach.

In this model participant local NGOs have become less likely to rely on donated commodities, but instead more likely to procure their own products with revenues from sales. For example, RedPlan Salud of midwives network for CATALYST/ Peru program provides catalytic blood for the survival of the program as well as its participant local family planning NGO, INPPARES. It is likely that while the participant NGOs

may emphasize the social goals of family planning, their specific activities might be constrained by the projected practices of other organizations interested in cost procurement and increasing market share.

This model positions local NGOs with commercial motivations in pivotal roles in project implementation. The so-called partnership between contracting agencies and these local NGOs is meant to create a private health infrastructure as well as reduce the risks involved in developing locally based market systems. For example, Social Marketing Pakistan (SMP), established by PSI, organized a reportedly successful social marketing franchise, Green Start Network (GSN), in Pakistan, consisting of private medical service providers. This network is designed to organize and facilitate already existing but poorly structured private sector health service providers in Pakistan. Sanctioned with the approval of the government, this private network may be replacing the existing public health infrastructure in Pakistan.

The decision to select a local NGO to participate in the implementation of a project may be taken for ideological reasons, in order to facilitate a particular kind of structural participation, but may also be delegated more along economic considerations, in order to reduce costs and increase market shares. In this regard, USAID decided to expand its partnership with Apropro, a social marketing NGO in Peru, which then was seen as taking responsibility for “market risks to ensure that they have fully vetted the viability of their ideas. If donated financing protects stakeholders from business risks, they have reduced incentive to ensure that their business model is viable under real market conditions” (Bacheller, Cavanaugh, Stewart & Zinnep, 2005, p. 33). The partnership with the private sector, thus, may produce a potential structural condition that reduces the financial risks as well as limits the direct responsibility of the donor agency.

While this model is typically structured through combinations of NGO and Manufacturers models, often Hybrid projects resonate more closely with the latter, in that they are designed fundamentally along the lines of commercially viable structures that focus on promoting consumption of health commodities. The Ghana Social Marketing Foundation (GSMF)'s⁶ social marketing campaigns resemble the Manufacturer's model in that their activities are centered around media campaigns that promote individual consumption of health products. However, GSMF investments in pharmaceutical chains (CAREShop) in Ghana may be seen as distinct from the Manufacturing approach in that some of the profits from sales of commercial pharmaceutical products are used to feed money back into supporting the foundation, through the explicit establishment of the Ghana Social Marketing Foundation Limited (GSMFEL). These various forms of structural arrangements are designed to promote sustainability

and viability of projects.

STRUCTURAL PARTICIPATION IN SOCIAL MARKETING

Social marketing projects designed to address population, reproductive health, and HIV/AIDs concerns employ a variety of structural approaches toward funding, conceptualizing, implementing and evaluating strategic interventions. The NGO and Manufacturing models represent more idealized types, emphasizing either the social interests of the NGO or the commercial interests of the commodity supplier, while the Hybrid approach may more appropriately recognize diverse organizational dynamics currently operating across a variety of projects. Even with this third model, however, a key consideration becomes the degree to which the commercial organizations have allocative control over decisions regarding the pricing, distribution, and marketing of valuable resources.

A structural approach to participation recognizes that a variety of agents and agencies become involved in the process of producing strategic intervention for social change. The potential integration of community members in decision-making processes needs to be seen relative to the dominance of donor agencies as well as commodity manufacturers and private firms, in order to assess a more realistic portrayal of power dynamics. This means moving away from a conceptual focus on audience-driven to production-based models of participation. Structural mapping of potential as well as actual control over key decisions in the shaping of social change projects allows us to see participation not just in terms of its idealized potential, but more so in terms of the hegemonic control asserted through formalized agencies and corporations.

1 PSI press news: <http://psi.org/news/1105a.html>

2 PATH press news: <http://path.org/news/an05901.php>

3 Population Council project profile

http://popcouncil.org/projects/HIV_IndiaMigrationHIV.html

4 SOMARC Midterm evaluation report

5 Constella Futures is an international development unit of Constella Group named after Constella acquired Futures Group in 2005.

<http://www.constellagroup.com/about/history/>

6 GSMF, registered with USAID as Private Voluntary Organization, was managed by former Futures Group, now Constella Group's international development unit. See http://www.gsmf.com.gh/abtus/about_gsmf.htm for details about the relations between the organization and international donor agencies.

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