



**The Effect of Social Marketing on Public Behavior in Preventing COVID 19: The
Case of Ministry of Health in Ethiopia**

By

Bruck Worku Mekonnen

**A Thesis Submitted to Addis Ababa University, School of Commerce in
Partial Fulfillment of the Requirements for the Degree of Master of Arts
Degree in Marketing Management**

Advisor: Mulugeta Gebre Medhin (PhD)

June 2021

Addis Ababa, Ethiopia

CERTIFICATION

I, the undersigned certify that I have read and hereby recommend for acceptance by the Addis Ababa University, School of Commerce a dissertation entitled: **“The Effect of Social Marketing on Public Behavior: a case study of Preventive Measures Against COVID 19”** in partial fulfillment of the requirements for the Degree of Masters in Marketing Management.

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Mulugeta Gebre Medhin (PhD)
(Advisor)

.....

Date

DECLARATION

I, Bruck Worku Mekonnen, thus declare that this thesis entitled **“The Effect of Social Marketing on Public Behavior: a case study of Preventive Measures Against COVID 19”** is my original work. I further affirm that this paper has never been submitted to some other college for any degree, certificate, or cooperation. At last, I proclaim that all source materials utilized in this exploration have been appropriately perceived and recognized.

Signature

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Date

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ACKNOWLEDGEMENTS

I express gratitude toward God for all the energy he has offered me to complete this research work, for my father who has been the best role model in my life. Second, it's an amazing privilege to have a remarkable research advisor (Dr. Mulugeta Gebre Medhin) for all his open help, direction, and guidance, he gave me his unreserved support while seeking this exploration work. My genuine appreciation additionally goes to all respondents that have taken their precious time in providing pertinent information by filling the questionnaire.

The Researcher

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Abstract

“The main purpose of this study was to examine the effect of social marketing used by the Ministry of Health on public behavior in preventing COVID 19.” Towards this end a quantitative research approach and an explanatory research design were employed. Views of total number of responses from 377 respondents drawn from Bole Sub City in Addis were reflected in this study. Questionnaires with closed-ended and five-point Likert scale items were used as an instrument to collect data for the research. The data collected were summarized in SPSS Version 20.0. The effect of three messages of the Ministry of Health namely wear of mask, sanitization and hand wash and social distancing on behavioral change of the respondents were analyzed. The demographic characteristics of respondents has shown that the balanced representation in term of age, gender, marital status and educational qualification were considered. The result has shown that the overall mean for the three aspects of social marketing wearing of face mask, sanitization and washing hand and social distancing, were 4.08, 3.14, 3.00, respectively which were all above the cut-off point developed by Alfarra (2009) except social distancing which indicates the effort of the Ministry created average awareness in combating COVID 19. The hypotheses were tested using statistical analysis of Pearson’s correlation coefficient and multiple linear regressions. Social marketing activities related to the use of face mask explain a weak but significant change in behavior on actually using face mask on the sample ($r=0.401$ at a significant level of 99%), and ($r=0.39$ at a significant level of 99%) on overall behavioral change. Social marketing activities related to proper hand wash and sanitization explain a weak but significant change in behavior on actually practicing proper hand wash and sanitization ($r=0.242$ at a significant level of 99%), and ($r=0.22$ at a significant level of 99%) on overall behavioral change, and again when we come to social marketing activities related to social distancing there is a weak but significant behavioral change on actually practicing social distancing ($r=0.235$ at significant level of 0.0) and ($r=0.310$ at a significant level 0.01) on over all behavioral change. The overall effect of social marketing practices as shown by R square is that 20.7% of the behavioral change on COVID 19 can be attributed due to social marketing practices of the Ministry. The Beta coefficient reports have shown than message on use of face mask and social distancing have minimal significant contribution on behavioral change while message on social distancing has no significant contribution on behavioral change of the respondents. The study concluded that social marketing efforts have significant contribution on combating COVID and further suggests that wide scale research on social marketing should be conducted in Ethiopia considering varying social issues exhibited in the society.

Keywords: Social Marketing, COVID 19 and Ministry of Health

Chapter One: Introduction

1.1 Background of the study

Social marketing is the “adaptation of commercial marketing technologies to programs designed to influence the voluntary behavior of target audiences to improve their personal welfare and that of the society of which they are apart” (Andreasen, 1994:1). Social marketing targets on the application of different marketing principles on a given social issue to alter target customers behavior.

Social marketing has been in the marketing literature since the 1970s but the concept is still on development. In the past decade variations of social marketing have been applied to promote traffic safety, tobacco control, drug prevention, childhood immunizations, improved nutrition and diet, and environmental behavior, as well as to reduce infant mortality. The success of social marketing to minimize and eradicate these social issues has been enormous. Social marketing practices are being intensely applied to the recent pandemic crises as well. Different social marketing campaigns are continuously running on the issue worldwide to raise awareness and change the target publics behavior in order to apply preventive methods.

To say that covid-19 is the century biggest challenge would be an understatement, covid-19 has affected the life of every individual. The pandemic has led to a dramatic loss of human life all over the world. It has posed a challenge in every aspect of human life, from the way we carry on our daily life's, to the overall economic and well fair of nations. Its worldwide direct impact can be quantitatively listed as: 175 million confirmed cases, 3,899,647 deaths (WHO 2021) as of June 5 2021. The IMF (2021) report has shown that 10 million people at risk of falling into extreme poverty, the number of undernourished people currently estimated at nearly 690 million could increase by up to 132 million due to the pandemic, it's been the cause from 600 million unemployment, the world's economy has hit the sharpest steppe curve since the great depression with 5.2 percent contraction in global GDP, as almost all economic activates were nearly at stand still.

The social and mental impacts are countless to mention: depression, anxiety, stress leaves has mounted the highest recorded in the history. Almost every social affairs has been affected in one

way or other due to the pandemic. 1.5 billion Students were forced to stop their normal way of attending schools (NBC report 2020). This has also caused anxiety for students with special needs as daily routines are suspended or changed and all therapy or social skills groups also halted. Others, who have incorporated their school routines into coping mechanisms for their mental health, have had an increase in depression and difficulty in adjusting back into normal routines. Additional concern has been shown towards children being placed in social isolation due to the pandemic, as rates of child abuse, neglect, and exploitation increased after the outbreak. Surprising numbers of child abuse and rape has also been reported in our country.

The pandemic also has impacted religion in various ways, including the cancellation of the worship services of various faiths, the closure of Sunday Schools, as well as the cancellation of pilgrimages surrounding observances and festivals leaving ,the moral well being of the society in question .

As the world straggles to search for the cure and vaccine of this virus and solve the issue once and for all the role of social marketing is extremely important to minimize the impact of the virus. Kotler and Lee (2008) define social marketing as “process that applies marketing principles and techniques to create, communicate, and deliver value in order to influence target audience behaviors that benefit society (public health, safety, the environment and communities) as well as the target audience.

In our nation the eradication and minimization of corona virus has been the major goal over the past 10months, different alterations and measures are taken to face the challenge, 18.7 billion Ethiopian birr (\$505 million) is allocated on the health sector from this budget 1.7 billion is to raise awareness (NAIROBI Reuters 2020).

The Ethiopian Health Minister has stated three major preventive methods against covid-19 which are social distancing, wearing mask and washing/sanitizing your hands. Accordingly different social marketing campaigns are in practice to bring the target audience into applying this preventive methods (bring behavioral change). This research has identified the effect of social marketing practices and measured the success of the practices in Bole sub city.

The success of this campaign and the progress to compact this challenge relays not only on initiating behavioral change but also maintaining this behavioral change. Accordingly, this research has also examined to what degree behavioral change has occurred and which social marketing activates has contributed to the overall behavioral change

1.2 Statement of the problem

Covid-19 has posed a great challenge worldwide and our country Ethiopia is no exception. The virus has been a cause for over 4,235(jun 5,2021) deaths in the country so far, and other devastating challenges as well. The Health Minister along with the federal and regional government is extensively working on the issue. Different supports and legislatives has been implemented to cope with the challenge but the best possible way to minimize the impact and eradicate the virus once and for all is to come up with a behavioral change among the society to implement the privative methods . This behavioral change is possible with social marketing; the "bottom line" of social marketing is behavior change (Andreasen, 1994:3)". The goal of any social marketing campaign is the alteration of a particular behavior for the positive benefit of a targeted group of individuals. Through social marketing different social issues has been minimized worldwide, "HIV awareness" by The Guardian Health Association Inc that was carried out to educate the populace on the damning effect of HIV to the individual has brought about 67% impact on target audience in Europe. The Centers for Disease Control and Prevention's VERB campaign, which promoted activity among teens 9–13, reported a 74% national awareness of the campaign after one year (W A Smith 2006).

Dozens of family planning programs throughout the world have also increased contraceptive use in resistant rural populations of complex and multicultural background. These summarized impacts are the outcome of successful social marketing campaign. In our country the application of social marketing is still on infant stage different campaigns on different issues like traffic control, maternal death, nutrition and many more has been and are still on practice in our nation but this campaigns fell to succeed and most of all their impact and effect on actually changing the behavior of the society fell to be measured thus the success of the campaign is left for mere assumption. This research paper will minimize this gap and can structure a system for measuring the effect of social marketing campaigns on changing the behavior of the society for, social

marketing on covid-19 and upcoming social marketing practices on other social issues. As the concept is still on development and the best implementation of social marketing practices is under study there is some amount of theoretical and empirical gap as well, there is confusion on what the intentions of social marketing are, there also exist a common dilemma of taking social marketing as societal marketing which are completely different concepts, this paper can be used to minimize this existing theoretical gap. It is also very hard to find records in our country on progress of different social marketing campaign through the findings of this research can also contribute to minimize the empirical gaps.

Social marketing also has a great deal to offer here by influencing the behavior, not just of the individual citizen, but also of policy makers and influential interest groups. (Lynn MacFadyen, Martine Stead and Gerard Hastings 1999)” we can also say that very little attention is given to the importance and significance of social marketing to face social issues in the country by the government and different organizations. We can see that this paper has a significant contribution to further emphasize on the concept and importance of social marketing to be taken in consideration by different policy makers and influential bodies. .

1.3 Research question

The main research question of the study *What is the effect of social marketing used by Ministry of Health on public behavior in preventing COVID 19?*

Sub Research Questions

1. What is the effect of the message related to facial mask communicated by Ministry of Health on public behavior in preventing COVID 19?
2. What is the effect of the message related to sanitization and hand wash communicated by Ministry of Health on public behavior in preventing COVID 19?
3. What is the effect of the message related to social distancing on public behavior in preventing COVID 19?

1.4. OBJECTIVES

General Objective

The general objective of this study was to examine the effect of social marketing used by Ministry of Health on public behavior in taking the necessary preventive measures against COVID 19.

. Specific objectives

1. To examine the effect of the message related to facial mask communicated by Ministry of Health on public behavior in preventing COVID 19.
2. To determine the effect of the message related to sanitization and hand wash communicated by Ministry of Health on public behavior in preventing COVID 19.
3. To analyze the effect of the message related to social distancing on public behavior in preventing COVID 19.

1.5 SIGNIFICANCE OF THE STUDY

Social marketing is a complex concept which is yet on development thus limited researches and information is found on the topic, especially on the effect of social marketing on different variables and different social issues. So this research was aimed at minimizing this research gap and give contribution on the body of knowledge. This research can be is one of the first on the issue(covid-19) thus paving and structuring the framework for farther extensive research on the issue(covid-19). post pandemic researches can also use this paper as a reference to compare and contrast their findings. Farther as it can be observed there is a hug misunderstanding and very little implementation of the concept in our country. This study will amplify and clarify the importance of social marketing so it can be implemented to tackle other social issues. The research outcome will also have a great significance for Ethiopian Ministry Of Health to exactly measure the effect and relationship of social marketing activities they are performing on changing public behavior and their overall progress, and this can be used as feed to intensify or alter their social marketing campaign they are running.

1.6. SCOPE OF THE STUDY

The study was focused on the effect of social marketing on changing public behaviour; the study was bonded to study and analyse the effect of social marketing on application of the preventive methods by individuals (wearing mask, social distancing, washing/sanitizing hands) in employees of public and organized private large organizations like commercial banks located in Bole Sub City.

The study has not considered front line workers and infected individuals who are directly facing the issues. The study targeted and to get sample respondent from bole sub cities of Addis Ababa who must carry out preventive measures on their daily routine. The study used combination of data collection techniques/instruments to gather both primary and secondary data, which is quantitative in nature.

1.7 LIMITATION OF THE STUDY

Most of the respondents were not willing to participate in the survey, due to perceived risk of getting infected by the virus, the social marketing campaigns that are being conducted aim at bringing different behavioral changes in order to cope with the pandemic but this study is only focused on the three major behavioral changes (wearing mask, social distancing, washing/sanitizing hands). The time constraint also limited the study from fully collecting and analyzing the data, from large number of sample.

1.8 Definition of key terms

Social Marketing; is the use of commercial marketing principles and techniques to improve the welfare of the society

COVID 19; COVID-19 is a disease caused by a new strain of corona virus. 'CO' stands for corona, 'VI' for virus, and 'D' for disease.

Marketing; is the activity, set of institutions, and processes for creating, communicating, delivering, and exchanging offerings that have value for customers, clients, partners, and society at large.

Face Mask is a covering that you wear over your face, for example to prevent yourself from breathing bad air or from spreading virus

Social distancing the practice of maintaining a safe or appropriate physical distance from other people, or the measures taken to reduce close physical contact, especially to slow the spread of a contagious illness or disease

1.8 Organization of the Study

The thesis was organized into five chapters. Chapter one presents the introduction and background of the study, statement of the problem, research objectives, significance of the study, and the limitation of the study. Chapter two presents an extensive literature review of the major study variables which are social marketing concepts, social marketing performances and related literatures, and this is summarized into conceptual framework showing the relationships between the variables under study. Chapter three gives details on the research methodology, design, research procedures, operationalization of the variables, the analytical models used to test the hypotheses and ethical considerations. Chapter four presents the results of data analysis and discussions. Chapter five presents the summary, conclusions and policy recommendations of the study.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

This chapter presents the literature reviewed in areas related to the objectives of the study. It focuses on the theoretical and empirical literature review by defining social marketing and its effect on public behavior. This section also looked at the conceptual framework, theories, summary and research gap that exists on the topic.

2.1. Theoretical Literature Review

This part of the study provided in-depth insight on the nature of social marketing and the impact on public behavior. Opinions from different authors were utilized to provide a better theoretical understanding of the concept of social marketing and the effect it has on public behavior.

Social Marketing Concept

Today social marketing concept has become a highly important field for companies, which is proved by the works and planning exercised by many companies throughout the world in this field and it is specified that this is realized with the influence of the rooted change in social priorities. Recent studies which focus on social marketing applications in businesses have shown that consumers rather prefer the brands which participate in social marketing activities in their purchases.

Social marketing is one of the for most contemporary fields in the marketing evolution, It is an indication of how customers and businesses, the market and humanity as a whole has grown and shows how much priorities have changed in the past few years, as this study will indicate customers pay higher prices, go longer distances and postpone their desires at times just to support a cause and or an institution that has done a community. It is no secret that the customers' power has raised with the coming of the internet; the growth in power of public lobby groups and other various factors and with this power has come a better society first type of business models even though there is a lot to be done. And this study shows the social marketing concept, and explains the definition, occurrence, development process, characteristics of social marketing and the fields of

application of social marketing and the problems in application. Furthermore, the importance of social marketing in terms of businesses and applications of social marketing in several businesses are given.

Social marketing was founded and defined in 1971 as: “ The design, implementation, and control of programs calculated to influence the acceptability of product planning, pricing, communication, distribution, and marketing research. It draws from many other fields such as psychology, sociology, anthropology and communications theory to understand how to influence human behavior. In essence, it is the adoption and adaptation of commercial marketing theory and practice for social change programs, campaigns, and causes. Furthermore, while commercial marketing aims to meet shareholders’ objectives, social marketing aims to meet society’s desire to improve its citizens’ quality of life . The American Marketing Association refreshes the perspective of social marketing into the following: ‘social marketing puts the creation, communication, delivery, and exchange of offerings of value from the customers on par with organizational activities to meet the needs of the market’ thereby stressing the significant role of the consumer/citizen and equating and enhancing it to the role of an organizational partner in this procedure of behavior change. Rothschild states that, social marketing as a social change technique, is one side of the triangular mechanism (also including education and legal reform) for the adjustment of society through the influence of people’s actions. Since social marketing seeks to influence social behavior and benefit the entire society, and not only the marketer, it is a useful tool for state agencies and organizations. Therefore it has widely been used in the health sector (anti-smoking campaigns, anti sunbathing warnings etc). Otler and Zaltman (1971) first coined the term social marketing to describe an expanded role for marketing practice in the business of idea and behavioral change. As a key figure in the ongoing development of social marketing, Kotler’s work has influenced large portions of the US social marketing community, and for that reason, his recent definition of social marketing was selected as a key platform for the development of the definition in the paper. Kotler and Lee (2008) define social marketing as “process that applies marketing principles and techniques to create, communicate, and deliver value in order to influence target audience behaviors that benefit society (public health, safety, the environment and communities) as well as the target audience”. The definition of social marketing published in Kotler and Lee (2008) is credited interpersonal correspondence between Phillip Kotler, Nancy Lee and Michael Rothschild in 2006. the second

definition selected was the British National Social Marketing Centre's (NSMC) official definition of social marketing as “the systematic application of marketing concepts and techniques to achieve specific behavioral goals relevant to a social good”(French and BlairStevens, 2006). Although the National Social Marketing Centre definition was first published in *Social Marketing Quarterly* by French and BlairStevens (2006). It is more commonly known as the NSMC (2006) definition. The NSMC definition represents a normative influence over the current practice and future development of the British social marketing sector and was therefore the selected definition. Further, although Kotler and Lee are social marketing academics and practitioners, the NSMC definition was introduced to provide a centralized framework for recognizing social marketing in practice in the United Kingdom. Targeted audience” reflects the use of the public orientation by targeting social marketing activity on specific, identifiable and reachable market segmentation within a broader community population. This sub definition incorporates the Kohli and Jaworski (1990) market orientation alongside the CIM (2005) public requirements, AMA(2008) clients/customers framework, Kotler and Lee (2008) target audience and the NSMC (2006) targeted audiences. Social marketing campaigns must have an identifiable target audience in order to meet the key criteria of providing a competitive social marketing offer based on altering, maintaining or ceasing an identified behavior amongst in an individual member of a larger population group. In general picture social marketing aims to use all the tools and strategies that have been developed in the marketing world, that were commonly aimed to make profit and growth for institutions and firms, and reutilize them for the good of the community, society and the world as a whole.

Community groups do many different things to solve the issues that interest them. A group fighting child hunger might advocate free breakfasts at school, increased funding for WIC (Women and Infant Children), and more child-oriented legislation from the state senate. And to accomplish each of these goals, the group will again probably do many different things: letter-writing campaigns, direct lobbying, and advertising in the media, to name just a few. Thousands of details and hard work by many people are usually involved in a successful initiative. Looked at from a different perspective, however, it comes down to one thing. At the root of all of the group's work is one basic principle: change people's behavior. This is true not only for a child hunger campaign, but for almost any health or community development initiative. A coalition against violence wants people to stop committing acts of violence. A teen pregnancy initiative tries to put an end to children

having children. And an organization for peace looks for the day when world peace is more than a lovely thought on holiday greeting cards.

This concept of changing people's behavior is the basis of this section, and of social marketing as a whole. We will talk about what social marketing is, and why it can be of use to an organization. Then, we'll go into more depth on marketing, and discuss what are known as the "4 Ps"--the four elements around which all types of marketing, social or profit-oriented, are centered. Finally, we'll finish with an overview of the stages someone will go through if their effort is successful.

In today's modern marketing concept, companies' use of marketing only for obtaining profit, increasing the sales, getting new customers, gaining income for the business is considered a kind of disturbance by target market. Businesses are expected to spend a part of the income they have received from the community through product sales for community oriented works. And social marketing concept is shaped in line with this expectation. Kotler and Zaltman were the first users of Social Marketing concept by their article titled "Social Marketing an Approach to Planned Social Change" which was published in Journal of Marketing in 1971. The term social marketing was used for the first time in that study. Kotler and Zaltman perceived social marketing as similar to traditional marketing and revealed that the marketer focused on target market and general community benefits -rather than profit. Based on this opinion, social marketing is expressed as "planned social change approach". Having been defined as planned social change approach by Kotler and Zaltman social marketing is usually explained as the efforts developed to increase the promotion and acceptability of social opinions(Varinli İ, Çatı K 2008). And these opinions are spread in line with adapting traditional marketing elements - product, price, place, promotion- to social marketing. It could also be said that social marketing concept was developed to answer some needs such as emphasizing non-profit material consumption and eliminating the differences of opinion among the needs of the community as a result of the change in social marketing. The component which is called product in traditional marketing usually expresses a social opinion in social marketing. It is aimed to make the target market adopt this opinion. According to Brown , social product is assessed in three dimensions which are a behavior which marketers attempt to influence (actual product), benefits recommended to a certain target market as a whole (essence

product) and nonphysical products or services recommended by social marketers (expanded product). Price, which is considered the cost created by the changing behaviors in social marketing process, on the other hand, is not qualified with a monetary value . In social marketing dimension, promotion activities are explained as the persuasion and communication strategies which will make the social product familiar, acceptable and even desirable for people. Places to reach information or education such as distribution channels, physicians' offices, shopping stores, and mass media are defined as the last element of social marketing mix [(Varinli İ, Çatı K 2008, In a study by Nathanson it was reported that social marketing is associated with changing not only opinions but also behaviors. Social marketing concept is explained as targeting public satisfaction and long term consumer welfare by a consumer oriented approach. Thus, businesses should also consider the social priorities in addition to their public satisfaction goal. Besides, in order to create a balanced social marketing perception, the balance between public (satisfaction), business (profit) and community (welfare) should be achieved. The goals of social marketing in line with social marketing related qualifications can be summarized as presenting applications which intend to create targeted behaviors in the community, change the behaviors and increase the qualifications, and providing change in beliefs. Fundamentally, social marketing, which develops in line with the opinion of adapting traditional marketing applications to social activities, still shows some differences in structure from traditional marketing type. According to Andreason the main standing out differences are that social marketers' aim to "do something good" while commercial marketers wish to "earn money" and commercial marketing applications create funds by means of investments while social marketing activities create funds thanks to taxes and donations

The four Ps of marketing

Since being first formally defined by Otler and Zaltman (1971), social marketing has relied heavily on its mainstream marketing progenitor to inform principles and practices. This is reflected in the majority of definitions of social marketing, which identify the adaptation and adoption of commercial marketing principles and techniques to engender social good (Dann, 2010). This is particularly true when considering the techniques used to engender behavior change for social good. Consideration of the marketing mix in social marketing to facilitate behaviour change has traditionally centred on using the four Ps of marketing: product, price, place and promotion (for example see: Population Services International, 1977).

The concept of the marketing mix was coined by Neil Borden in his 1953 American Marketing Association presidential address and then formalized in his article „The Concept of the Marketing Mix“ (Borden, 1964). Borden considered how his associate James Culliton (1948) described the role of a marketing manager as a mixer of ingredients who sometimes follows recipes prepared by others, sometimes prepares their own recipe as they go along, sometimes adapts a recipe using immediately available ingredients, and at other times invents ingredients that no-one else has tried. Jerome McCarthy (1960) then proposed a four Ps classification which has seen extensive use since. The elements of the marketing mix proposed by McCarthy were:

1. Product: is a tangible object or intangible service that is produced or manufactured and offered to consumers in the market.

2. Price: is the amount a consumer pays for the product or service, normally an economic cost.

3. Place: represents the location where a product or service can be purchased, and can often be referred to as the distribution channel. This can include physical stores as well as virtual outlets online.

4. Promotion: represents the communications that marketers use in the marketplace including advertising, public relations, personal selling and sales promotion. Alternative models of marketing were proposed around the same time. Frey suggested that marketing variables be split into two separate components, the first concerning the offering product, packaging, brand, price and service, and the second referring to the methods and tools used - including advertising, sales promotion, publicity, personal selling and distribution channels (Frey, 1961). However, McCarthy’s four Ps model has dominated marketing thought (Grönroos, 1994), particularly in the social marketing context (Hastings, 2007).

3: The four Ps in social marketing

The pre-dominance of the four Ps marketing mix in social marketing perhaps relates back to Kotler and Zaltman’s (1971) definition, which explicitly or indirectly mentions each component ““*the design, implementation and control of programs calculated to influence the acceptability of social ideas and involving considerations of product planning, pricing, communication, distribution and marketing research*” (p5). Early social marketing interventions such as sexual and reproductive health initiatives in the developing world, tended to follow this

model quite closely. Much of the extant social marketing literature reflects this reliance on the marketing mix model (Kotler and Lee, 2008). In 2002 Andreasen devised a set of six benchmark criteria for what constitutes a social marketing intervention. His fifth benchmark stated that social marketing should “use all four Ps of the traditional marketing mix” (Andreasen, 2002, p7). Social marketers therefore have long sought to adapt the established marketing mix model to the social marketing domain.

1 Product In social marketing represents the behavioral offer made to target adopters and often involves intangibles such as adoption of an idea or behavior. Tangible product offerings such as condoms to encourage safe sex can also be present.

2 Price In social marketing price relates to the costs that the target audience have to pay and the barriers they have to overcome to adopt the desired behaviour, and these costs can be psychological (e.g. loss of de-stressing effect from smoking), cultural, social (e.g. peer pressure to drink), temporal, practical (e.g. cancelling the school run to reduce car use), physical and financial (e.g. cost of joining a gym to get fit).

3 Place in social marketing are the channels by which behavior change is promoted and the places in which change is encouraged and supported.

4 Promotion In the social marketing context promotion is the means by which behavior change is promoted to the target audience, for example advertising, media relations, direct mail and interpersonal.

Departures from Commercial Marketing

Although social marketing uses, tools and strategies that have been developed by commercial marketing in mind by researchers, marketing intellectuals and organizations in the past century, there lies some important marketing differences between commercial marketing and social marketing. As it will be discussed furthermore in the following pages.

(i) **The Products are More Complex** The marketing product has traditionally been conceived of as something tangible a physical good which can be exchanged with the target market for a price and which can be manipulated in terms of characteristics such as packaging, name, physical attributes,

positioning and so on. As marketing has extended its scope beyond physical goods, marketers have had to grapple with formulating product strategy for less tangible entities such as services. In social marketing, the product is extended even further from the tangible to encompass ideas, and behavior change. This complexity makes social marketing products difficult to conceptualize. As consequence, social marketers have a bigger task in defining exactly what their product is and the benefits associated with its use.

(ii) Varied Demand Marketing cannot create needs but commercial marketers do manage to harness need previously unknown for new product categories such as USB drives, smart phones, the internet etc... Social marketers must not only uncover new demand, but in addition must frequently deal with negative demand when the target group is apathetic about or strongly resistant to a proposed behavior change. In a local range it is no secret that changing various behaviours have been the main goal for many no governmental organizations since the turn of the century for example, like in case of female genital mutilation, child marriage, and cases more harmful than others like the omo child cases, for instance in case of FGM the society shows negative demand because they think that this is changing their culture and that they are going against their ancestors wills, and in the cases of trying to stop arranged and or child marriage the parents often feel obligated that they need to provide a better life for their children and think that the only way to provide a better future for their children is by arranging this marriages or as has been shown in some cases mothers feel obligated to do to their daughters as has been done to them their mothers before them and on and on. And for another example in the cases of Omo child families that it is bad omen and in anger of the gods to let the babies live if they have their first teeth grow on the wrong side and in some cases have risked federal criminal charges just to prolong this traditions. In these situations, social marketers must challenge entrenched attitudes and beliefs. Demarketing approaches may help here (Lawther et al 1997, Hastings et al 1998). Rangun et al (1996) suggest a typology of the benefits associated with a behavior . The benefits may be: tangible, intangible, relevant to the individual or relevant to society. Demand is easier to generate where the benefits are both tangible and personally relevant. In those situations where the product benefits are intangible and relevant to society rather than the individual (as with CFCs in aerosols), social marketers must work much harder to generate a need for the product. This, they argue, is the hardest type of behavior change, as the benefits are difficult to personalize and quantify. For instance trying to market to the society that letting the daughters go to

school and higher education , gives them a better chance at happiness, success and betterment for their community as a whole.

(iii) Challenging Target Groups

Social marketers must often target groups who commercial marketers tend to ignore: the least accessible, hardest to reach and least likely to change their behaviour. For example, health agencies charged with improving population health status must, if they are to avoid widening health inequalities further in the general population (Whitehead 1992, Smith 1997), target their efforts at those groups with the poorest health and the most needs (Hastings et al 1998b). Far from being the most profitable market segments, these groups often constitute the least attractive ones: hardest to reach, most resistant to changing health behaviour, most lacking in the psychological, social and practical resources necessary to make the change, most unresponsive to interventions to influence their behavior and so on. This poses considerable challenges for segmentation and targeting.

(iv) Greater Consumer Involvement

Marketing traditionally divides products into high and low involvement categories, with the former comprising purchases for items such as cars or mortgages which are "expensive, bought infrequently, risky and highly self-expressive" (Kotler 1994) and the latter comprising items such as confectionery or cigarettes which are much more habitual. High involvement products typically command careful consideration by the consumer ('central processing') and demand detailed factual information from the marketer. Low involvement products are consumed much more passively, with very limited (or no) search and evaluation ('peripheral processing'), and simple advertising emphasising "visual symbols and imagery" (ibid) is called for. Both the categorisation scheme - high and low - and its marketing implications need to be extended in social marketing. Social marketing frequently deals with products with which the consumer is very highly involved (complex lifestyle changes such as changing one's behavior in a short amount of time like physical proximity and other aspects, like in the case of Covid-19). While high involvement can result in a motivated and attentive consumer, higher involvement may be associated with feelings of anxiety, guilt and denial which inhibit attempts to change. At the other extreme, social marketers might seek to stimulate change where there

is very low or no involvement - for example, persuading the society to plant trees and take care of them like been done recently by the sitting Prime minister

(v) More Varied Competition Social marketers, like their commercial counterparts, must be aware of their competition (Andreasen 1995). The most obvious source of competition in social marketing is the consumer's tendency to continue in his or her current behavioral patterns, especially when addiction is involved. Inertia is a very powerful competitor. Other sources of competition involve alternative behaviours. For example, time spent donating blood is time which the consumer could spend doing other more enjoyable, more convenient and more personally beneficial activities. Competitive organisations include other health promoters, educators or government organizations trying to use similar methods to reach their target audiences. For example, the typical doctor's surgery in the UK displays such a plethora of leaflets and posters that any one message or idea stands little chance of being noticed. Social marketers must then be innovative and careful not to overwhelm their target audience. Finally, one of the most serious forms of competition comes from commercial marketing itself where this markets unhealthy or unsocial behaviors. The most obvious examples are the tobacco and alcohol industries..

The social marketing Campaign process

Identify what behavior you want to change (for example, increase prenatal counseling among expectant mothers).

Identify your audience: Whose behavior do you want to change? It may be that you want to change the behavior of several different groups; in that case, you may want to influence them in different ways to bring them closer to the desired behavior. Such groups are often separated, or segmented, by age, gender, level of education, or race.

Identify the barriers to change: through interviews, surveys, focus groups or other methods, you'll want to find out what makes it difficult or unattractive for people to make these changes. Do pregnant women feel uncomfortable at the area clinic, or are they made to feel stupid when they talk to the doctor? Is the clinic too far away?

Reduce the barriers to change. Plan ways to make it easier, more accessible, and more attractive. Can the clinic stay open longer hours? Can physicians and nurses be better trained to discuss

problems with women? This step might even be taken a step farther. Your organization might provide incentives for making (and sustaining) changes. Mothers who come to the clinic regularly through their pregnancy might receive free baby food, for example.

Pretest your ideas on a small number of people, and then modify your plan according to your results.

Publicize both the benefits of change, and also your efforts to make change easier in a way that will draw people to take advantage of your efforts. Let people know what you're doing to help them-- the best program in the world won't be used if people don't know about it. And of course, people need to understand the benefits of the behavior change. A pregnant woman will probably want to do what's best for her child, but may not know that she needs extra iron during her pregnancy. It's up to the organization to tell her.

Behavior change

As noted above, marketers put a great deal of effort into understanding consumption behavior, and social marketers apply this understanding to social and health behavior. In each arena both the individual consumer (citizen) and key stakeholders are addressed. Over the last thirty years, since Kotler and Levy (1969) first mooted this transferability of thinking, many basic marketing ideas have been accepted in the social and health sector. Consumer orientation has introduced and embedded the idea of cyclical, action-orientated and substantially ethnographic research at the heart of health promotion, which challenges the expert-driven hegemony in the health sector (Leathar and Hastings, 1987; USDHHS, 1980). Marketing insights into advertising and how it works have also had a far-reaching impact. Specifically the notion that it does not usually bring about behavior change on its own but has to be combined with a broader marketing mix is now widely accepted in the health sector (Hastings and Haywood, 1991; Lefebvre et al., 1995); similarly, ideas about imagery and branding are gaining ground (Sly et al., 2001). Marketing perspectives have also enabled health promoters to think about the most basic issue of their discipline: are they working with their public groups to reach a mutually beneficial way forward, or simply seeking to impose their own solutions. This debate revolves around the immutability or otherwise of the social marketing product. If it is immutable, social marketers are concerned with selling or advocacy, rather than marketing (Elliott, 1995a and

1995b; Fine, 1990; Tones, 1996). This has led to the conclusion that effective behavior change must involve compromise and that social marketers should and do alter their offerings; for example, substituting harm minimization for abstinence in drugs misuse programmers or safer sex for celibacy when tackling HIV (Stead and Hastings, 1996). This transfer of thinking is an organic, iterative process. It also works in two directions: social marketing takes learning from generic marketing, and this process is also fed back to the core discipline. Most fundamentally, as Andresen argues, socially marketers' clear focus on behavior change, if transferred back into commerce, would make their generic cousins extremely valuable employees. Two examples, one theoretical and the other applied, further illustrate the potential for this mutually beneficial development.

Empirical review

EFFECTS OF SOCIAL MARKETING PROGRAMS

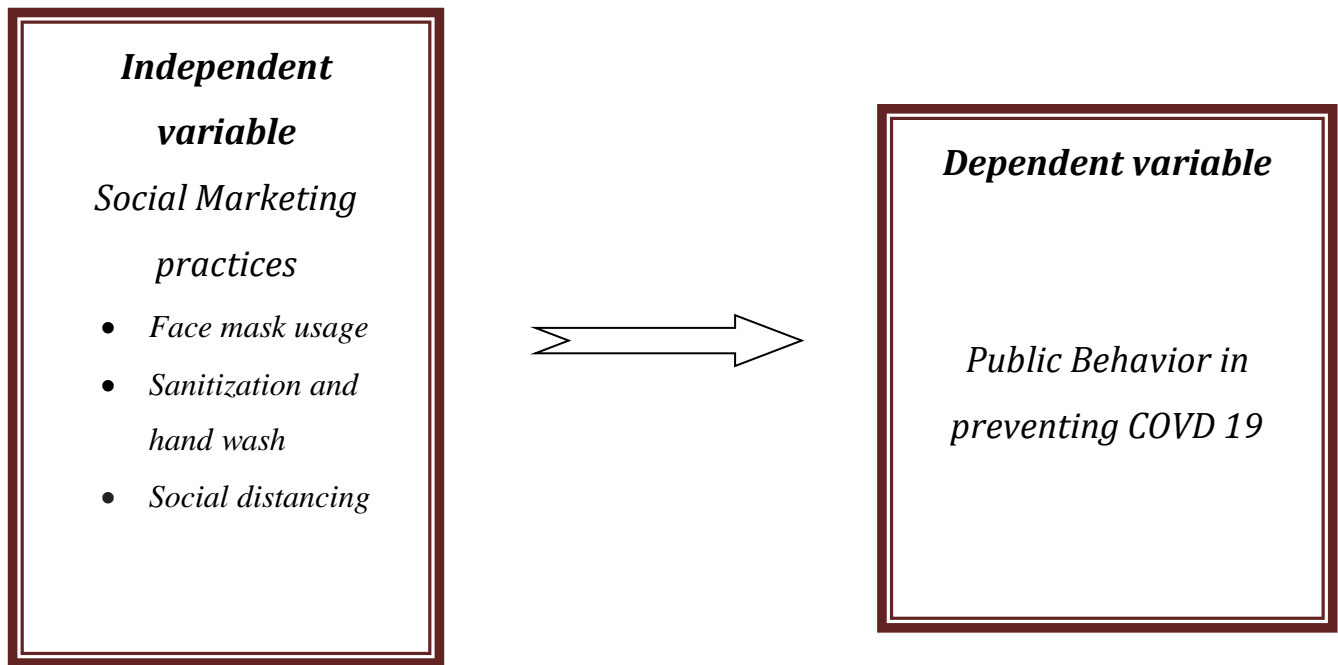
The bottom line of any social marketing practices is to change public behavior, The overall percentage of increased seat belt use in the United States was due to the widespread availability of seat belts, publicity from organizations like Mothers Against Drunk Driving (MADD), and stronger seat belt laws.¹ Click it or ticket, a program that demonstrated the importance of primary seat belt laws combined with effective publicity of enforcement, increased seat belt use in North Carolina from 63% to 80% and went on to become a national model.² Zero tolerance means zero chances, a social communication campaign, found awareness of the no tolerance law rose from 61% to 63% over six months.³ Friends don't let friends drive drunk, a social advertising campaign of the Ad Council, reported an 85% recall of the messages. In addition, 80% of those reported they took action to stop a friend from driving and 25% said they stopped a friend from driving while intoxicated. Social forming programs such as Montana's "2 out of 3" reported a slight reduction in impaired driving by university teens. Other social noreming programs showed effects in multiple university settings in reducing alcohol abuse among college age students—Florida State University reported a 15% reduction in high risk drinking among male students and 5% among females; Hobart and William Smith Colleges in New York reported a 32% reduction in student athletes drinking more than once per week.⁵ Florida's first TRUTH anti-smoking campaign, which reduced teen smoking in one year by 19%, was also followed by a well funded national campaign.⁶ The Centers for Disease Control and Prevention's VERB campaign, which promoted activity among teens 9–13, reported a 74% national awareness of the

campaign after one year.⁷ Dozens of HIV/AIDS prevention efforts ranging from the Swiss Stop AIDS Program, which increased condom use in casual partners from 50% to 80%, to programs throughout the developing world in Uganda, Jamaica, Brazil, Thailand, etc, have also shown positive results. PREMI, a program in Ecuador, increased full immunization coverage of the highest risk infants at one year of age from 5% to 28% in 18 months.⁹ Mass media and health practices, a program in Honduras, increased correct use of oral rehydration solution from 9.2% to 44.8% in five years. Exclusive breastfeeding rates were increased in Madagascar from 46% to 68%; in Ghana from 68% to 79%; and in Bolivia from 54% to 65%.

Social Marketing Applications in Businesses

Marketing activities are quite important in introducing the products of the businesses and providing solutions for consumers. Businesses have responsibility towards the community while meeting the wishes and needs of the consumers. Shareholders have to establish a balance between the community and the consumers. Particularly, the severity of competition between the brands forces businesses to assess their marketing strategies and primarily reaching the consumer. Within this scope, businesses which are engaged in activities for the benefit of the community gain a distinguishing competitive advantage. As mentioned by Ingram et al., if consumers perceive non-ethic behaviors of the business, it is inevitable to lose a loyal consumer group. For, the consumer's commitment to the brand or the business is a psychological and emotional commitment. Having ethical values, working for the benefit of the community etc. is closely associated with creating a positive image in consumer's mind. In the case of preference among similar products, consumers can purchase by making assessments on which business has more social responsibility. The result of a research which was made in England in 1996 also supports this judgment. Accordingly, if the quality and price of a product is equal, the 76% of the consumers prefer the social purpose associated brands. Likewise, 64% of the consumers have a tendency to pay 5% more, on average, to the brands associated with social purpose while this is approximately 10% on average for 20% of them. When these rates are taken into consideration, it is inevitable for the businesses to understand the importance of social responsibility and use it as a distinguishing characteristic. While defining an excellent company, Ford Motor Business stated that "it has to offer great products and work to make the world a better place", which is an important example to emphasize the importance of social marketing . Within the context of balance among

public satisfaction, business profit and community welfare which are mentioned to be necessarily considered by businesses, Hewlett Packard Company required a change in the design of packages of printing boxes. Such an application was determined to be effective in protecting the environment. This application could make a contribution to the environment equal to withdrawing 3.600 automobiles from the traffic every year. It was also stipulated that material savings could be made by providing the reduction in transfer costs and by transition to the use of recyclable material thanks to lighter and smaller packages. Another example in this regard is that the acceptance of the year 2007 as the year of Mevlana by the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the organization of Mevlana events in the USA by Koç Holding could be evaluated within the application of social marketing. Upon the implementation of this event, it could be said that the business could provide a competitive advantage to increase brand recognition. As another social project, Renault and Total started a banner contest on drawing safe roads as imagined by elementary school students through their projects called "First Steps on the Street". Through with this project, they aimed to reinforce the knowledge of the students and make them think about the traffic problem. In addition to these examples, the support provided for the education of the children with limited financial status through Argelik's project which was started together with the Ministry of National Education; the sponsorship applications of Ülker to promote social responsibility projects; Vestal's long term social responsibility projects which contribute to Turkish sports, mainly athletics can also be shown as other examples of social marketing applications which are implemented by businesses. The businesses which carry out the mentioned social responsibility projects obtain advantages such as increasing their sales and market shares, strengthening their brand positions, enriching their corporate images, ensuring their employees' motivation, reducing their operating costs and becoming more attractive in mind of the investors.



Source: adapted model

The independent variable in the above figure is Social marketing practices and the dependent variable is public behavior. Social marketing practices to compact the spread of corona virus are raising awareness and changing attitude about the use of preventive methods. These messages are conducted through platforms like: television, radio advertisements, print media ,social media platforms and telemarketing . These are the specific tools used by marketers to raise awareness, reinforce the message and reach to the target market. This research has studied how often our respondents encounter social marketing messages through these platforms and the effect it has on their behavior. public behavior as the dependent variable is influenced by social marketing through the decision making process, either the consumer will reduce carless behavior or increase the application of privative method.

The study targeted to test the following hypotheses

H1: The message related to facial mask communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19.

H2: The message related to ‘Sanitization and hand wash’ communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19.

H3: The message related to social distancing communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 CHAPTER OVERVIEW

This Chapter presents the methodology employed to conduct the study. The chapter presents the research approach and design. It further shows the sampling and data collection procedures.

3.2 RESEARCH APPROACH AND DESIGN

A research design is “a blueprint for conducting a study with maximum control over factors that may interfere with the validity of the findings” (Burns and Grove, 2003). This study used a quantitative research design using the descriptive statistics and explanatory method. Explanatory design is used to assess social marketing practices and its effect on changing target audiences behavior; a case study of the Ethiopian Health Minister preventive effort against Covid-19. Descriptive research design is used when data are collected to describe persons, organizations, settings or phenomena (Creswell, 2003). Kothari (2008) mentions that descriptive design has enough provision for protection against bias and ensure reliability. A quantitative research method was employed in the research in order to develop the study. This is appropriate to use in this study because it can be used to gain a better understanding of connections quantitative data.

3.3 POPULATION, SAMPLE SIZE AND SAMPLING TECHNIQUE

Population as defined by Mugenda (2003) is an entire group of individual or objects having common observable characteristic. The study considered dwellers in Bole sub city highly vulnerable for covid-19 as result of their day to day activities. After consulting experts, individuals who are highly vulnerable next to front line workers are individual who have to conduct their work on a daily routine close to customers, As result random employees of government and private larger enterprise institutions in bole were considered as a target population of the study.

3.4 SAMPLING DESIGN

3.4.1 Sampling technique:

The study took in a stratified sampling technique; under this random sampling was used. "Random sampling is a part of the sampling technique in which each sample has an equal probability of being chosen" Zikmund (2003). This technique is used for unbiased sampling to draw conclusion.

3.4 Sampling Frame

The sampling frame describes the list of all population units from which the sample will be selected (Cooper & Schindler, 2003). It is a physical representation of the target population and comprises all the units that are potential members of a sample (Kothari, 2008). The study used working individuals in Bole sub city. The sampling frame work would probably basis on sampling basis. There is no record of early study on accessing the behavior of this population

3.4.2 Sample size:

Due to the infinite number of population in Bole subcity, the sample size was calculated based on Cochran's method. According to Cochran (1963), a large population's sample size can be calculated by using the formula:

$$n = \frac{Z^2(pq)}{e^2}$$

Where n- is the sample size

Z –Value at specified confidence interval (1.96)

p –Probability of inclusion positive response (0.5)

q = Probability of negative response = 1-p= (0.5)

$$\begin{aligned} e \text{ –Desired level of precision } (\pm 5\%), n &= \frac{Z^2(pq)}{e^2} = \\ &= \frac{1.96^2(0.5*0.5)}{0.05^2} = 384.16 \approx \\ &= 384 \end{aligned}$$

Taking into consideration the possibility of invalid responses and non-response and by looking at what other researchers such as Israel (2013) and Kothari (2004) the finale sample size of this paper is 390.

3.5 METHODS OF DATA COLLECTION

The study used both primary as well as secondary data sources. The primary data were collected through distributing the questionnaires to different customers using closed ended questions. While secondary data were collected from related articles, books, reliable websites, publications.

3.6 METHODS OF DATA ANALYSIS

The collected data were analyzed and interpreted by using quantitative data analysis techniques. The closed ended questionnaires were analyzed quantitatively by using tables and percentages. SPSS version 20 was used to summarize the data.

3.7 Reliability and Validity of Data

Reliability refers to the extent to which data collection technique or analysis procedures will yield consistent findings (Mark et al., 2007). “It is important that all surveys are tested before the actual survey is conducted. This is done to ensure that the questionnaire is cleared to respondents and can be completed in the way the researcher wishes” (John Adams et al., 2007).

Table 3.1 reliability statistics

Reliability statistics		
Variable name	Value of alpha	Number of items
Face mask	0.76	5
Hand wash/sanitization	0.77	5
Social distancing	0.81	5
Behavioral change	0.88	5
Total reliability	0.84	

Pilot testing is an activity that helps the study in determining whether there are errors, limitations, or other weaknesses within the design and allows the researcher to make necessary adjustments and corrections before embarking on the survey. According to the table variables show moderately good consistency.

Chapter Four

Data Presentation, Analysis and Interpretation

4.1 Overview of the Chapter

This part of the study presents the presentation of data collected through question. The data were summarized and presented in meaningful manner. The first part shows the demographic characteristics of the respondents followed by descriptive presentation of the collected data. The remaining section of the Chapter shows the relationship and inferences made to the variables considered in the study.

4.2. Demographic characteristics of the respondents

Table 4.1- Item A and B shows the gender and age distribution of the sample population, respectively. Respondents who account for 44.8 were male. Female representation in this study was 55.2 this shows a fair distribution of male and female in the population with female being respondents slightly higher .

As regards age, the respondents were dominated by the age group 21-30 comprising 70.4%. However, the list group of the respondents was in the range of 41-50 years old which only covers 1.1% of the sample population. The study has also examined the educational background of the respondents. As it can be seen from Table 4-1, Item C, 200 respondents (52.6%) had first degrees which represents more than half of the sample, 62 respondents (16.4%) had a master degree. 74 respondents (19.6 %) had a diploma and 41 individuals (1.9 %) were having educational qualification below college diploma.

It was also necessary to study the marital status of the sample since privative actions are highly influenced by family states thus the study shows that 184(48.7) were single and 189(50) of the respondents were married this shows almost equal distribution of married and single respondents. In the sample 4(1.3) of the respondents were divorced.

Table 4-1: Demographic characteristics

Demographic characteristics	Frequency(n)	Percentage (%)
A. Gender		
Male	169	44.8
Female	208	55.2
Total	377	100
B. Age		
21-30	266	70.4
31-40	107	28.3
41-50	4	1.1
Total	377	99.7
C. Educational level		
Secondary	41	10.8
College Diploma	74	19.6
Bachelor's Degree	200	52.9
Postgraduate Degree	62	16.4
Total	377	99.7
Missing	1	.3
D. Year of experience		
Less than 1 year	13	6.20%
1-3 years	18	8.60%
4-6 years	33	15.70%
Above 6 years	146	69.50%
Total	210	100.00%
E. Marital Status		
Single	184	48.7
Married	189	50.0

Divorced	4	1.1
Total	377	99.7
Missing	1	.3

(Source: Survey Result, 2021)

4.2 Descriptive Analysis of social marketing practices in Ethiopia against covid-19

On the first section respondents were asked to provide their opinion on how frequent they have encountered messages and different social marketing practices by the Ethiopian health minister to combat the spread of covid-19. The five-point Likert scale was used by the researcher to acquire a direct response from the respondents and the mean score and standard deviation were presented in tables shown in the succeeding paragraphs. The course of descriptive data analysis, averages (mean) and standard deviation were calculated for each construct in the Likert Scales, from Strongly Disagree=1 to Strongly Agree=5. The weighted average categories for each result were interpreted as per the range developed by (Alfarra, 2009) as follows: 1.00-1.79 (Strongly Disagree); 1.80-2.59 (Disagree); 2.60-3.39 (Neutral); 3.40-4.19 (Agree), and 4.20-5.00 (Strongly Agree).

4.2.1 Descriptive Analysis of social marketing practices in Ethiopia against covid-19 regarding facial mask

The respondents view on the message that was deployed by the Ethiopian Ministry of Health was summarized in Table 4-2 as shown below:

Table 4-2 Message on the Use of Facial Mask

S.N		Mean	St. D
1	Use facial mask when going outside	3.85	1.26
2	Make sure your facial mask is worn properly (covering both your nose and mouth)	4.09	0.99
3	Place and dispose your facial mask in a non exposed environment	4.07	0.97
	Average mean score and standard deviation	4.008	0.82

(Source: Survey Result, 2021)

The use of facial mask is the most important to minimize the spread of covid-19. Different social marketing messages are in conduct to bring about behavioral change regarding the proper use and disposal of facial masks. How frequent and how well messages regarding the use of facial mask has reached the sample respondents was summarized as follows. Most respondents indicate that they have encountered the social marketing practice on wearing mask when going outside very frequently the overall reach of the message is above average with a mean score of (mean=3.8) but not only on the use of mask but messages regarding on the proper use of mask and the proper disposal of mask (covering both nose and mouth) indicate that it has more or less similar reach with of (mean=4.9) and (mean=4.7). Thus overall message regarding facial mask is above average with mean 4.008. The respondents view on the message that was transmitted to the public regarding hand washing and sanitizing was summarized in Table 4-3 as follows:

Table 4-3 Message and practices regarding Hand Wash and Sanitizing (N=377)

S.N		Mean	St. D
1	Do not perform hand shacks	3.36	1.02
2	Wash and sanitize your hand regularly	3.24	1.05
3	Wash and sanitize before and after touching any object	3.11	1.03
4	Wash your hands for 60 seconds using soap	2.85	1.06
	Average mean score and standard deviation	3.14	1.4

Similarly the use of sanitizers and washing hands regularly is very important to combat the spread of covid-19. How well the different social marketing campaigns have reached the sample regarding hand wash/sanitation is indicated and summarized in the table 4.3. message on not performing hand shack is frequently reached among the sample with (mean=3.36) with a normal approximately normal standard deviation. Similarly massages on washing and sanitizing hand regularly also has a similar reach (mean=3.24) and standard deviation 1.05. When it comes to messages regarding washing and sanitation before and after touching any object it is dominated by occasional (respondents=133) on the liker scale but overall mean is 3.11 which is still above average with a standard deviation of 1.03. Wash your hand for 60 seconds has less reach compared to related messages with a mean (2.85) and a standard deviation of (1.06) which is normal. Overall effort by the Ethiopian Health Ministry to reach the audience with messages related to hand wash and sanitization is above average with (mean 3.14) and normal distribution of (SD=1.4). The Ministry's message on social distancing was summarized on Table 4-4 as follows:

Table 4-4 Message on Social Distancing (N=377)

S.N		Mean	St. D
1	Practice social distancing in public gathering	2.77	1.09
2	Place yourself two meters apart from the next person on any line or gathering	2.76	1.21
3	If you show any type of symptoms make sure to stay home	3.19	1.37
	Average mean score and standard deviation	3.00	1.22

The above table indicates the overall responses of the sample on their opinion on how well and frequently they have encountered the social marketing activities regarding social distancing. ‘‘Practices social distancing in public gathering has a little above average reach with (mean=2.77). Similarly ‘‘place yourself two meters apart from the next person on line or gathering’’ has the same level of reach on the sample respondents with (mean=2.76) and with a slightly skewed distribution (1.27). Regarding on restricting yourself from going outside if show symptoms is also a necessary practices to minimize the spread. The reach regarding this message is a above average with (mean=3.19) and skewed distribution 1.37). The overall mean score regarding on the message on social distancing was found to be 3.00 with SD of 1.22 implying that average awareness created on social distancing in order to combat COVID 19. The Ministry’s role on marinating the standard and quality control was summarized in Table 4-5 as shown below.

Table 4-5 other social marketing practices (N=377)

S.N		Mean	St. D
1	Ethiopian Health Minister is making sanitizers conveniently available	3.41	1.29
2	Ethiopian Health Minister making face masks s conveniently available.	3.36	1.29
3	Quality of the face mask is tested and ensured it meets the expected standard by Ministry.	3.58	1.06
4	The quality of sanitizers are tested and ensured it meets the expected standard by Ministry.	3.53	1.12
	Average mean score and standard deviation	3.47	1.19

The above table indicates the overall responses of the sample on their opinion on how much supports were given by Ministry of Health on combating COVID 19. Regarding how far ‘Ethiopian Health Minister is making sanitizers and face masks conveniently available, a mean average of 3.41 and 3.36 were obtained. This shows that a slightly above average support was given by the Ministry to make the sanitizers and face mask conveniently available. Similarly slightly more than average result was obtained on checking the quality of face mask and sanitizers by the Ministry as shown by the average mean of 3.58 and 3.58 and 3.53 respectively. The overall mean score regarding on the supports that were provided by Ministry was found to be 3.47 with SD of 1.19 implying that average supports were provided by the Ministry of Health.

Behavioral Change due to social marketing practices

The intention of social marketing is to bring behavioral change “social marketing is the systematic application of marketing concepts and techniques to achieve specific behavioral goals relevant to a social good” (French and Blair Stevens, 2006). This section analysis the change in the public’s behavior due to the different social marketing practices.

Table 4-6 Behavioral Change on the Use of Face Mask (N=377)

S.N		Mean	St. D
1	I now use facial mask on my daily routine because of the social marketing I have encountered on different media and billboard?	4.00	0.9
2	when using face mask I make sure it covers both my nose and mouth properly because of the social marketing I have encountered	3.97	1.02
3	After using my face mask I properly place and dispose in a safe place because of the social marketing I have encountered	4.00	0.97
	Average mean score and standard deviation	3.99	0.96

From the level of agreement we can see that a high level of behavioral change has occurred on the sample due to social marketing activities regarding the use and disposal of mask. When it comes to wearing mask regularly the study indicates that respondents have shown a high level of behavioral change, with a (mean=4) on a normal distribution, respondents also agree that behavioral change has occurred when it comes to properly wearing mask with a (mean=3.97) and respondent also agree that they now properly place and dispose their mask properly due to social marketing activates regarding facial mask.

Table 4-7 Behavioral Change on Hand Washing and Sanitizations (N=377)

S.N		Mean	St. D
1	After the pandemic I have stopped practicing hand shacks because of the social marketing I have encountered on	3.57	0.95
2	I now regularly sanitize because of the messages available on social media/TV/radio/print media	3.57	1.02
3	When washing my hands I wash properly using soap for 60sec as the advertisement I have encountered on different platforms	3.41	0.85
	Average mean score and standard deviation	3.51	0.94

When we look at the assessment of change in behavior regarding hand wash and sanitization most of the respondents have confirmed that a behavioral change has occurred due to social marketing activities. Most respondents agree that they have stopped practicing hand shacks with the mean(3.57) it also indicates that they now also regularly sanitize and wash with the same mean score(3.57) and a normal distribution (SD=1.02), washing hand for 60 second was also another necessary practice to increase the effectiveness of washing thus due to the social marketing actives in practice most respondent agree that they now wash their hands for 60second regularly with a mean score 3.41 and standard deviation 0.85.

Table 4-8 Behavioral Change on Social Distancing (N=377)

S.N		Mean	St. D
1	I practice social distancing in my daily routine according to the social marketing ads I have encountered	3.41	0.98
2	I place myself two meters apart from the next person in a meeting or any type of social gathering	3.61	1.51
	Average mean score and standard deviation	3.51	1.24

When it comes to behavioral change on social distancing due to social marketing activities most respondent have confirmed that they now practice social distancing with a mean score 3.41 and standard deviation 0.98 and respondent have also agreed that they now place themselves two meters apart from the next person in line or a meeting or any gathering with mean score 3.61 and a skewed distribution of 1.51.

Table 4-9 Overall Behavioral Change on the public (N=377)

S.N		Mean	St. D
1	I practice some of the privative methods due to the social marketing massages I have encountered	3.99	3.14

2	I practice most of the privative methods due to the social marketing massages I have encountered	3.56	0.94
3	I practices all of the preventive method due to the social marketing I have encountered	3.62	1.03
4	I haven't encountered any of the social marketing practices and messages from the Ethiopian health minister so far	1.28	1.04
Average mean score and standard deviation		3.11	1.53

This table shows the combination of behavioral change that has occurred among the samples, in comparison the sample respondent have agree that they now practices all of the preventive methods and most of the privative method with a mean score(3.62) and (3.56) respectively and most of the respondents confirmed that they practice some of the privative methods with a mean score of 3.6 on a normal distribution (SD=1.03),

Table 4-10 Organizations Support for combating the Virus (N=377)

S.N		Mean	St. D
1	My organization arranges my work environment in a way that promotes my social distances from my colleagues	3.70	1.01
2	My organization arranges my work environment in a way that promotes my social distance from my customers	3.80	1.06

3	My organization provides me facial mask regularly	3.81	1.3
4	My organization provides and places sanitizers form me and my customers	3.71	1.04
5	My organization supports me in staying home if I show symptoms of covid-19	3.75	0.96
6	My organization reinforces overall covid-19 protocols by stated by the Ethiopian health minister	3.61	0.91
	Average mean score and standard deviation	3.73	1.04

Even if a behavioral change has occurred due to social marketing activities it will be insignificant is if it is not supported by the organization, thus this section provides the overall descriptive analyses regarding organizational support to practice the preventive methods of covid-19. Respondents tend to agree that they are supported by their organization in maintaining their social distance between their colleagues with a mean (3.70) on a normal distribution(SD=1.06) similarly more of the respondents also agree that their organization supports them in maintaining their distance between their customers with a mean 3.80 when it comes to how far their organization provides facial mask regularly a mean average of 3.81 with SD of 1.3 was obtained implying average effort made by the organization to make the masks available regularly. With regard to how far their organization provides and places sanitizers to the employees and customers' slight average efforts were shown as affirmed their mean responses (3.71). Regarding the supports that will be provided by their organization in staying home if the employees show symptoms of covid-19, a mean average of 3.75 with SD of 0.96 was obtained implying average supports provision. A mean average of 3.6 with SD of 0.91 was obtained on how far their organization reinforces overall covid-19 protocols by stated by the Ethiopian Health Ministry; implying average reinforcement will be made by their respective organizations.

4-3 Relationships between Social Marketing Messages and Users' Behavioral Change

The relationship between factors of social marketing on users behavioral change was tested using Pearson correlation coefficients. The correlation coefficients indicate the strength and direction of the relationship. The interpretation was made based on the following measurement scale intervals or range. 1 perfect, 0.8-0.9 very strong, 0.5-0.8 strong, 0.3-0.5 moderate, 0.1-0.3 modest, 0-0.1 weak, -1 perfect, -0.8 - -0.9 very strong, -0.5- -0.8 strong, -0.3 - -0.5 moderate, -0.1 - -0.3 modest, and 0 -0.1 weak. (McDaniel and Gates (2006). These findings are presented below. The relationship between the three of social marketing factors on users perceived behavioral changes were shown as follows.

		mask	hand wash	social distancing	ov
Mask	Pearson Correlation	1	.089	.203**	.399**
	Sig. (2-tailed)		.084	.000	.000
	N	377	377	377	377
hand wash	Pearson Correlation	.089	1	.545**	.228**
	Sig. (2-tailed)	.084		.000	.000
	N	377	377	377	377
social distancing	Pearson Correlation	.203**	.545**	1	.311**
	Sig. (2-tailed)	.000	.000		.000
	N	377	377	377	377
Behaviouralchange	Pearson Correlation	.399**	.228**	.311**	1
	Sig. (2-tailed)	.000	.000	.000	
	N	377	377	377	377

** . Correlation is significant at the 0.01 level (2-tailed).

The correlation coefficient displayed on the table 4.11 indicates that, the three independent variables (social marketing message on face mask, social distancing, hand wash and sanitization) have a positive significant influence on behavioral change regarding privative methods. Among

the three independent variables mask has the highest correlation($r=0.39$) and hand wash and sanitization indicates a weak but significant relation with overall behavioral change

4-4 The Effect of Social Marketing Practice on User's Behavioral Change

Multiple regression analysis was conducted to examine the effect of social marketing practices on users behavioral change. Message on use of facial mask, sanitization and hand wash as well as social distancing were considered as a factors that predicts users behavioral change. Accordingly multiple linear regressions were employed to predict the linear relationship between the dependent variable and the independent variables. The hypotheses were tested based on the coefficients of predictive variables. Before considering the model a test of model fit were based on key assumption of the goodness of fitness of the model.

Test of Fitness of the Model

Multi Colinearity Test

Multi collinearity test was made to check whether the assumptions for regression analysis are met or not. According to Mendard, (1995) Tolerance should be more than 0.2 and VIF (Variance Inflation Factor) should be less than 10 (Myers, 1990).

The result in **table-4-12** below shows that the collinearity between independent variables has no serious problem since the value of tolerance for all independent variables is greater than 0.2 and all VIF is less than ten ($VIF < 10$). Therefore there is no solidarity issues among the variables

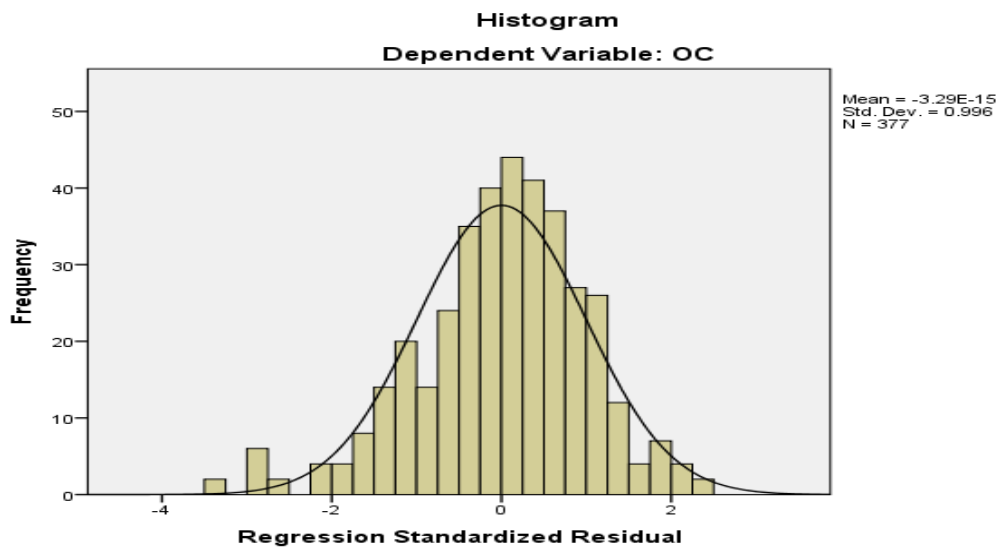
Table 4-12 Collinearity Statistics

Model		Collinearity Statistics	
		Tolerance	VIF
1	M	.958	1.044
	HW	.702	1.424
	SD	.678	1.474

a. Dependent Variable: OC

Multivariate normality

The test of multivariate normality as shown in histogram indicates the residuals are normally distributed. Hence, the data met the assumption of multivariate normality of the independent variables



Homoscedasticity

Homoscedasticity assumption shows the error of variance whether it is similar across the values of the independent variables. A plot of standardized residuals versus predicted values used to show how far they are equally distributed across all values of the independent variables. As shown in the figure below all the plots are equally distributed therefore there is no homoscedasticity problem in the data.

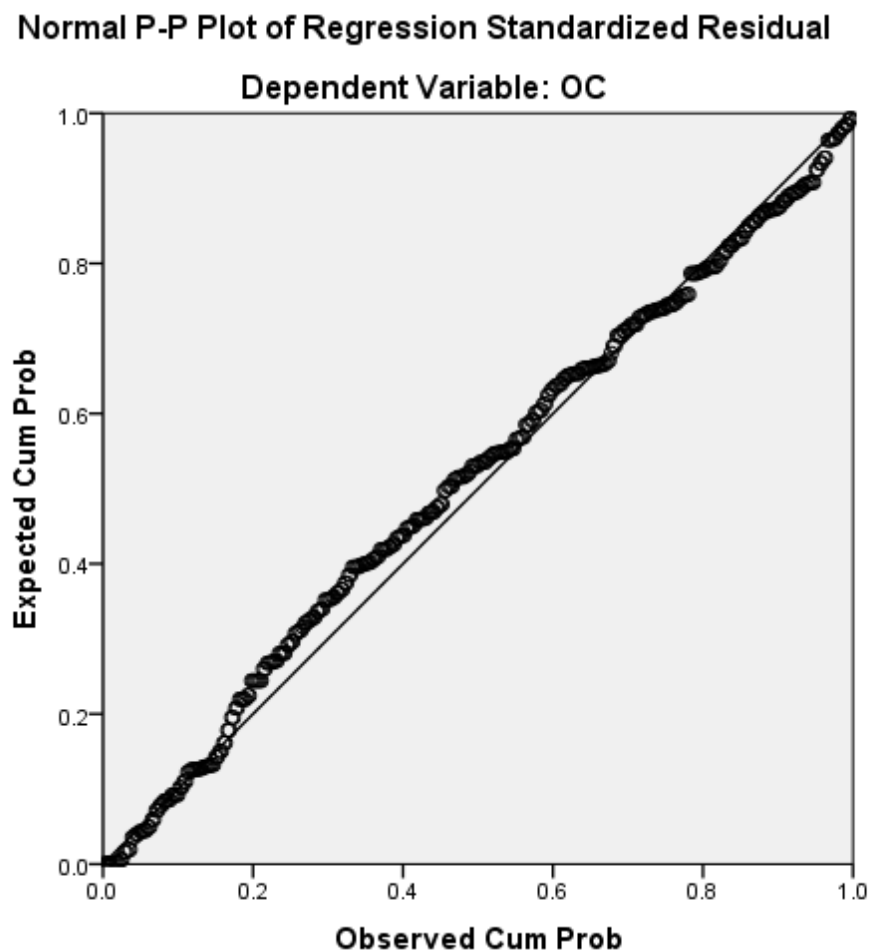


Figure 4-2 **Homoscedasticity plot**

Linear Relationship

Scatter plots were used to test the linear relationship among the variables as shown below. The scatter plots for each of the independent variable namely use of facial mask, hand wash and sanitizations and social distancing was shown in the succeeding plots as shown in Figure 4-3, 4-4 and 4-5. These helps to show the existence of linear relationship between the outcome variable and the independent variables.

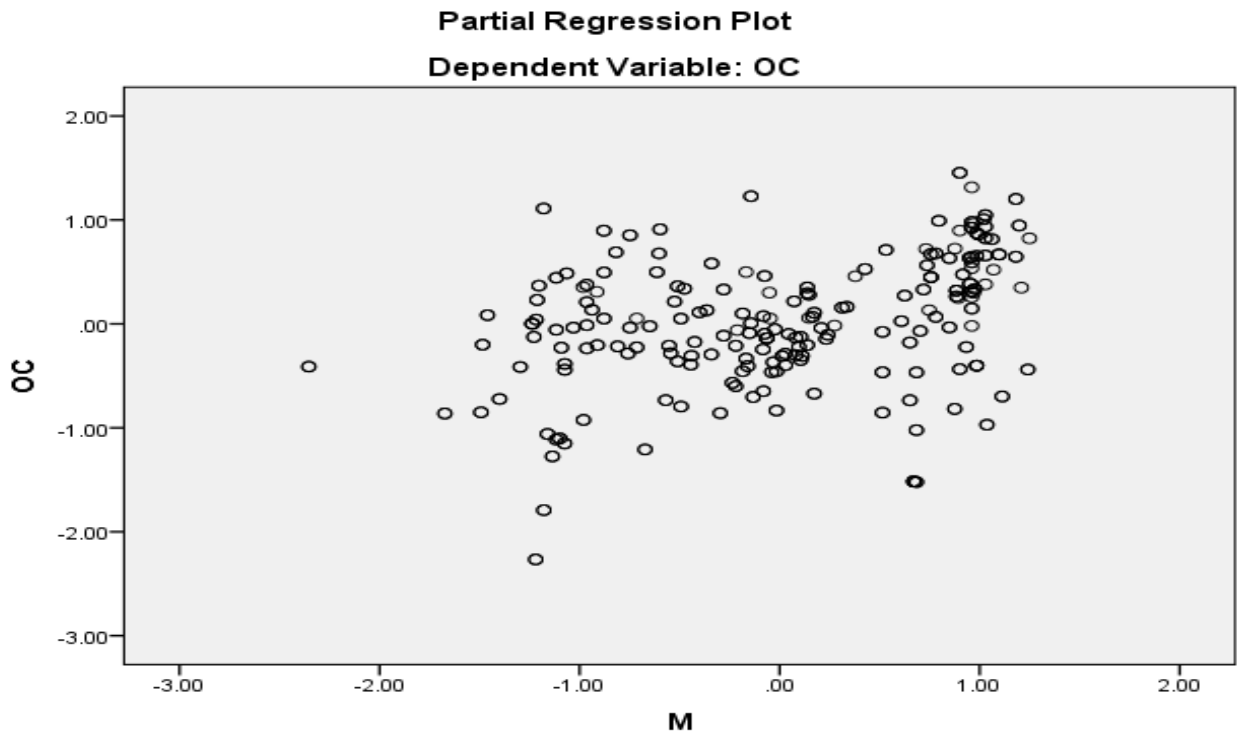


Figure 4-3 Partial plot for the use of Facial Masks

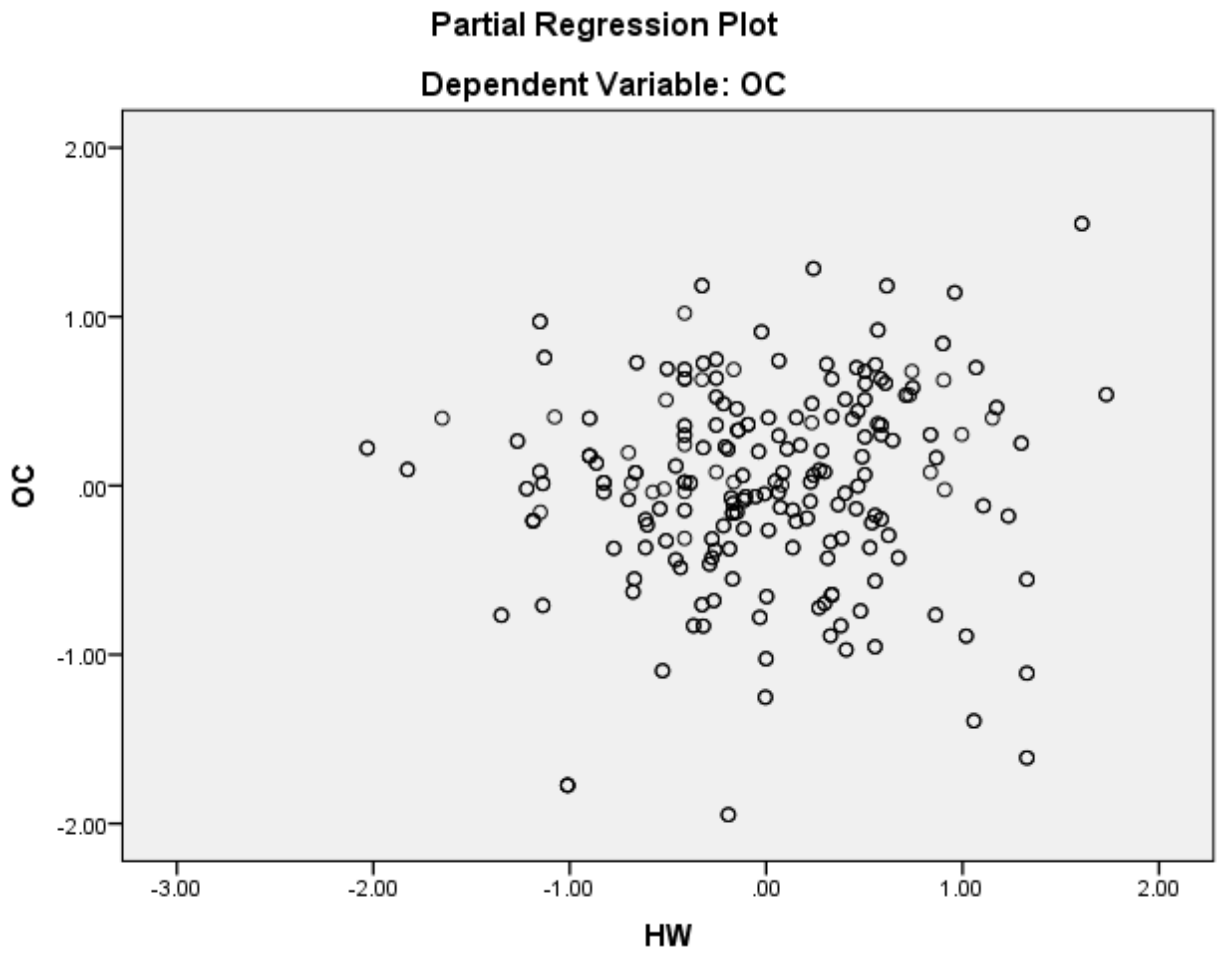


Figure 4-4 Partial plot for Hand Washing and Sanitization

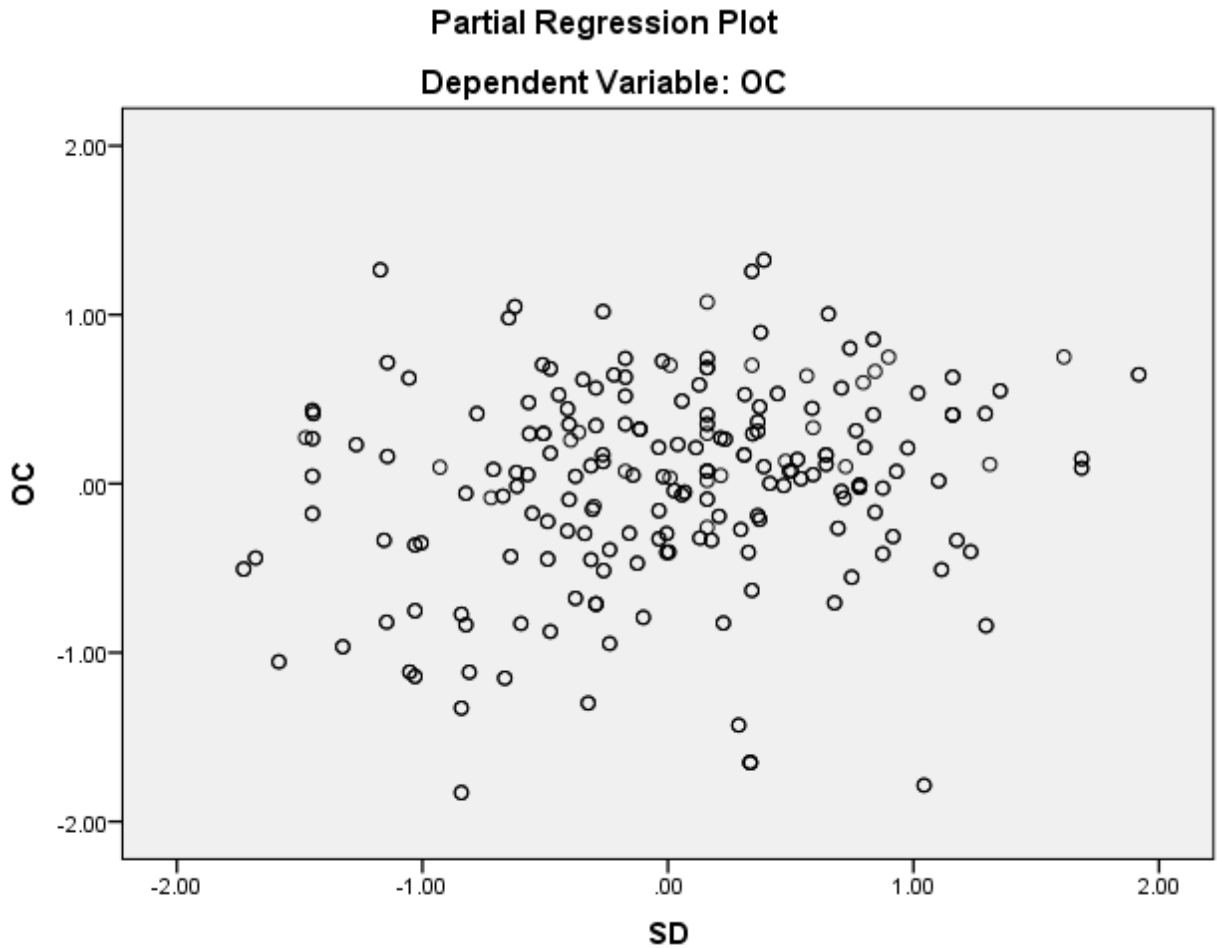


Figure 4-5 Partial Plots on Social Distancing

Based on the tests made of the goodness of the fitness model and key assumption were met. Therefore, the model below can be used to predict the outcome variable which the behavioral change of the users based on social marketing efforts.

Table 4-13 Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.462 ^a	.213	.207	.58530

a. Predictors: (Constant), SD, M, HW

b. Dependent Variable: OC

The model summary shown in Table 4-13 shows that the cumulative effect of social marketing efforts i.e. use of facial mask, sanitization and hand wash and social distancing on the user’s behavioral change. As shown in the model summary, the adjusted R square result is .207. This indicates that 20. 7% of the behavioral change on combating COVID 19 is explaining by the social marketing efforts made by the Ministry of Health. The contributions of the independent variables were shown in Table 3-14 as shown below.

Table 4-14 Coefficients of Independent Variables

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	1.954	.185		10.538	.000
1 Mask	.273	.037	.343	7.304	.000
Hand Wash	.074	.046	.088	1.607	.090
Social Distancing	.142	.041	.193	3.453	.001

a. Dependent Variable: OC

The table above shows that the Beta coefficient of each of the independent variables of the behavioral change of the respondents. The standardized coefficient of Beta value shows the sequence of the contribution of individual independent variables on behavioral change of the respondents. Except the message on hand washing and sanitization which exhibits insignificant contribution as standardized beta coefficients (.088 with sign. .109) meaning the variable does not significantly explain behavioral change of the respondents. On the other hand the use of hand mask and social distancing has weak significant explanation on behavioral change of the respondents.

Test of the Hypotheses

Beta coefficients were used to show the effect of each independent variable on the dependent variable. Therefore, interpretation was made by comparing Sig and beta estimates done for each hypothesis.

H1: The message related to facial mask communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19.

The results of multiple regressions, as shown in table 4-14 above reveals that the message on the use of facial mask has positive and significant effect on behavioral change with a β value ($\beta = .343$), at a 95% confidence level ($p < 0.05$). Therefore, the hypothesis is supported implying that the message communicated by the Ministry of Health regarding facial mask usage has brought the desirable public behavior in preventing COVID 19.

H2: The message related to 'Sanitization and hand wash' communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19.

The results of multiple regressions, as presented in table 4-14 above, shows that *The message related to 'Sanitization and hand wash' communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19.* as shown with a β value ($\beta = .088$), at a 95% confidence level ($p > 0.05 = .109$). Therefore, the null hypothesis is accepted and the alternative hypothesis that states H2: Ministry of Health message on sanitization and hand wash has significant effect on behavioral change on combating COVID 19 has been rejected.

H3: The message related to social distancing communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19

As shown in the result of multiple regressions, as presented in table 4-11 the effect of *The message related to social distancing communicated by Ministry of Health has a positive and significant effect on public behavior in preventing COVID 19* with a β value ($\beta = .193$), at a 95% confidence level ($p < 0.05$). Therefore, the hypothesis is supported implying that the message

communicated by the Ministry of Health regarding facial mask usage has brought the desirable public behavior in preventing COVID 19.

CHAPTER FIVE

SUMMARY, CONCLUSION, AND RECOMMENDATION

This chapter deals with a summary of the findings, conclusions, and recommendations. The main intention of this study was to investigate the effects social marketing on public behavior. Relevant literature was reviewed and quantitative data collected through questionnaires were presented, analyzed, discussed, and interpreted. Thus, based on the analysis, the following summary of the findings was obtained, conclusions drawn, and recommendations are forwarded.

5.1. Summary of the findings

Social marketing related facial marketing: social marketing activities regarding facial mask have reached the sample (mean=4.00) thus due to this social marketing activity behavioral change has occurred on the respondents (R=0.40) this shows a moderately significant impact on behavioral change due to social marketing

Social marketing related to hand wash and sanitization: social marketing activities regarding hand wash and sanitization have reached the sample (mean=3.14) and the research reveals due to this social marketing activity behavioral change has occurred on the respondents (R=0.24) this shows weak but significant relation

Social marketing related to social distancing : social marketing activities regarding facial mask have reached the sample (mean=2.24) thus due to this social marketing activity behavioral

change has occurred on the respondents ($R=0.40$) this shows a moderately significant impact on behavioral change due to social marketing.

- The correlation result shows that there is a positive and significant relationship between social marketing activities regarding face mask, hand wash/sanitization and social distancing and behavioral change of wearing mask, washing hands and practicing social distancing ($r=.40^{**}$, $p<0.01$, $r=.24^{**}$, $p<0.01$, and $r=.23^{**}$ $p<0.01$,) respectively. The finding further indicates that the highest relationship is found between social marketing regarding face mask and behavioral change on using face mask ($r = .27^{**}$ and $P < 0.01$).
- With reference to the regression result, the findings show social marketing related to face mask explains the variation on behavioral change $\beta=0.27$; social marketing related to hand wash/sanitization explain does not explain the variation on behavioral change $\beta=0.7$; and message related to social distancing explains behavioral change with $\beta=0.14$.

5.2 Conclusion

In light of the descriptive and inferential analysis of the effect of social marketing the following conclusions have been drawn

- The overall reach of social marketing activates regarding the use of face mask is (mean=4.0) which can be considered satisfactory reach, the research shows that the behavioural change due to this message is also significant.
- The overall mean score of reach of social marketing activities regarding the practices of hand wash/sanitization is(mean 3.14) is a above the average but when we come to behavioral change due to this activity the research shows that is considerably low ($r=0.31$)

- Over all mean score of social marketing activist regarding social distancing was (mean 2.24) which is below the average. but according to the descriptive behavioral change due to this activity was high (mean=3.51)
- When we see the success of other social marketing campaign according to the literature we can conclude that much work need to be done and very little impact is made due to social marketing “HIV awareness” by The Guardian Health Association Inc that was carried out to educate the populace on the damning effect of HIV to the individual has brought about 67% impact on target audience in Europe. The Centers for Disease Control and Prevention’s VERB campaign, which promoted activity among teens 9–13, reported a 74% national awareness of the campaign after one year (W A Smith 2006).

5-3 Recommendations

- It is advised social marketing activities regarding face mask should be more intensified
To maximize more reach and attractive techniques should also be adopted to bring about behavioral change.
- With the same regard social marketing related to hand wash/sanitization should be intensified on different platforms and more convincing messages should be directed to bring about behavioral change and minimize the neglect
- Overall, it can be understood from the regression analysis result that employee there is a weak but significant relation between social marking activities and overall behavioral change thus to maximize the success of the campaign a more aggressive and convincing messages should be activated

5.4 Further Research Directions

This study was to examine the effects of social marketing on the public's behavior regarding covid-19. Thus, this study provides suggestions for future researchers to investigate the effects of social marketing on other social issues.

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Seek Wisdom, Elevate your Intellect and Serve Humanity



Addis Ababa University

College of Business and Economics

School of Commerce

Master of Arts in Marketing Management Program

Dear Respected Respondents:

This questionnaire seeks information on the influence of social marketing on public behavior. All information that provide will be used for academic purposes only and nothing else whatsoever. Kindly do not indicate your name since your confidentiality is highly valued. Ensure you understand the questions and answer as accurately and as truthfully as you can.

Thank you in advance for taking part in this endeavor.

Kind Regards,

Bruck Worku

Mobile: +251927166152

Email: **bruck Worku** <worku.bruck@gmail.com>

Directions

- No need to write your name;
- Please make (x) mark in the box that best describes your response
- For more/ different opinion, please use blank space provided
- For the open ended items, give brief answer in the space provided.

1. What is your gender?

Female Male

2. Which age bracket do you fall under?

Less than 20 years 21-30 years 31-40 years
41-50 years 50years and above

3. What is your marital status?

Single Married Divorced Widowed

4. What is the level of education?

Primary school Secondary school College/ Institution graduate
Undergraduate level Postgraduate level Doctorate level

Section B: Social marketing tools and consumer behavior

The following are social marketing messages and practices performed by the Ethiopian health ministries to compact the impact of corona virus. Therefore, Using a Likert scale of 1-5; 1 being not at all, 2- rarely, 3- occasionally, 4-frequently, 5- very frequently, rate the frequency of how you see and encountered the messages and practices below on different platforms

	Messages and practices by the Ethiopian health minister	1	2	3	4	5
1	Use facial mask when going					

	outside.					
2	Make sure your facial mask is worn properly(covering both your nose and mouth)					
3	Place and dispose your facial mask in a non exposed environment					
4	Don't perform hand shakes					
5	Wash and sanitize your hand regularly					
6	Wash and sanitize before and after touching any object					
7	Wash your hands for 60 sec using soap					
8	Practise social distancing in public gathering					
9	Place yourself two meters apart from the next person on any line or gathering					
10	If you show any type of symptoms make sure to stay home					
11	Ethiopian health minister is making Sanitizers conveniently available					

12	Ethiopian health minister making Face masks conveniently available					
13	Quality of the face mask available is tested and meets the standard.					
14	The quality of sanitizers are tested and meet the standards					

Social marketing and its influence on the public behavior. Using a Liker scale of 1-5; 1 strongly disagree, 2- disagree, 3- neutral, 4- agree, 5- strongly agree, **rate the level of agreement on the messages below.**

		1	2	3	4	5
1	I now use facial mask on my daily routine because of the social marketing I have encountered on different media and billboard					
2	when using face mask I make sure it covers both my nose and mouth properly because of the social marketing I have encountered					
3	After using my face mask I properly place and dispose in a safe place because of the					

	social marketing I have encountered					
4	After the pandemic I have stopped practicing hand shacks because of the social marketing I have encountered on different media and billboard					
5	I now regularly sanitize because of the messages available on social media/TV/radio/print media					
6	When washing my hands I wash properly using soap for 60sec as the advertisement I have encountered on different platforms					
7	I practice social distancing in my daily routine according to the social marketing ads I have encountered					
8	I place myself two meters apart from the next person in a meeting or any type of social gathering					
9	I haven't encountered any of the social marketing practices and messages from the Ethiopian health minister so far					
10	I practice some of the privative methods due to the social marketing messages I have encountered					
11	I practice most of the privative methods due to the social marketing messages I have encountered					

12	I practices all of the preventive method due to the social marketing I have encountered.					
13	The fact that mask are conveniently available has made it easier for me to purchase and use masks					
14	If I show any symptoms of corona virus I will make sure I stay home because of the social marketing I have encountered					
	Any other (specify)					

Section D: the following questions are related to adtional support provided by organizations indicate Using a Liker scale of 1-5; 1 strongly disagree, 2- disagree, 3- neutral, 4- agree, 5- strongly agree, **rate the level of agreement** according to your organization

		1	2	3	4	5
1	My organization arranges my work environment in a way that promotes my social distances from my colleagues					
2	My organization arranges my work environment in a way that promotes my social distance from my customers					
3	My organization provides me facial mask					

	regularly					
4	My organization provides and places sanitizers form me and my customers					
5	My organization supports me in staying home if I show symptoms of covid-19					
6	My organization reinforces overall covid-19 protocols stated by the Ethiopian health minister					