

Distribution Agreement

In presenting this thesis or dissertation as a partial fulfillment of the requirements for an advanced degree from Emory University, I hereby grant to Emory University and its agents the non-exclusive license to archive, make accessible, and display my thesis or dissertation in whole or in part in all forms of media, now or hereafter known, including display on the world wide web. I understand that I may select some access restrictions as part of the online submission of this thesis or dissertation. I retain all ownership rights to the copyright of the thesis or dissertation. I also retain the right to use in future works (such as articles or books) all or part of this thesis or dissertation.

Signature:

Atsuyoshi Ishizumi

Date

Using Social Marketing to Address Gender-Based Violence in the Workplace:
Qualitative Evaluation of CARE's *#ThisIsNotWorking* Campaign

By

Atsuyoshi Ishizumi
MPH

Behavioral Sciences and Health Education

Elizabeth Walker, PhD
Committee Chair

Melissa Taylor, MA
Committee Member

Colleen McBride, PhD
Department Chair

Using Social Marketing to Address Gender-Based Violence in the Workplace:
Qualitative Evaluation of CARE's *#ThisIsNotWorking* Campaign

By

Atsuyoshi Ishizumi

Master of Science in Social Anthropology
University of Oxford
2013

Thesis Committee Chair: Elizabeth Walker, PhD

An abstract of
A thesis submitted to the Faculty of the
Rollins School of Public Health of Emory University
in partial fulfillment of the requirements for the degree of
Master of Public Health
in Behavioral Sciences and Health Education
2019

Abstract

Using Social Marketing to Address Gender-Based Violence in the Workplace: Qualitative Evaluation of CARE's *#ThisIsNotWorking* Campaign

By Atsuyoshi Ishizumi

Background: Gender-based violence (GBV) in the workplace is a major public health issue that affects many female workers around the world. In an effort to address this problem, humanitarian aid organization CARE launched a social marketing campaign called *#ThisIsNotWorking*. The campaign's main goal is to mobilize support for a legal framework that would prevent work-related GBV globally. The purpose of this study is to provide an evaluation of the campaign's international promotion, so as to improve the current communication materials.

Methods: Australia, UK, and Mexico were selected as the focus of the evaluation. Semi-structured interviews were conducted with key informants from the three countries, who were recruited based on their expertise in social marketing and/or gender equality advocacy. A thematic approach was used to analyze the data. Construal-Level Theory was used as a framework to inform data collection and analysis.

Results: A total six key informants were interviewed. The analysis identified two categories of themes: challenges the campaign could potentially face and strategies for addressing these challenges. The challenges were related to the target audience's attitudes toward the campaign or workplace GBV, shaped by the sociocultural settings of the target countries. Specifically, there were four challenges: GBV at work being a low priority issue, high levels of perceived social distance to the campaign materials, public cynicism about social advocacy, and multidimensionality of the target audience. The strategies were mainly about adapting the current promotion and messaging directions. They included developing messaging that highlights similarities, making the campaign's mission feel achievable, building partnerships for promotion, and segmenting the target audience.

Conclusions: This qualitative evaluation revealed that *#ThisIsNotWorking* could face several challenges in mobilizing support on a global scale. Moving forward, CARE should consider adopting all recommended strategies or prioritize them based on availability of resources or needs of the target countries. Future research should focus on validating the results of the current evaluation with members of the target audience.

Using Social Marketing to Address Gender-Based Violence in the Workplace:
Qualitative Evaluation of CARE's *#ThisIsNotWorking* Campaign

By

Atsuyoshi Ishizumi

Master of Science in Social Anthropology
University of Oxford
2013

Thesis Committee Chair: Elizabeth Walker, PhD

A thesis submitted to the Faculty of the
Rollins School of Public Health of Emory University
in partial fulfillment of the requirements for the degree of
Master of Public Health
in Behavioral Sciences and Health Education
2019

Table of Contents

<i>CHAPTER 1: INTRODUCTION AND BACKGROUND</i>	7
The #ThisIsNotWorking Campaign.....	7
Overview	7
Target Audience	8
Marketing Mix.....	9
Current Status	11
Research Questions	12
<i>CHAPTER 2: LITERATURE REVIEW</i>	14
Gender-based Violence in the Workplace	14
Gender and Workforce in the UK, Mexico and Australia	15
Workplace Gender-based Violence in the UK, Mexico and Australia.....	16
Gender-based Violence and Social Marketing	20
Multinational Social Marketing Campaigns	21
Theoretical Framework	22
<i>CHAPTER 3: METHODOLOGY</i>	26
Study Sample and Recruitment.....	26
Data Collection	28
Data Analysis	29
<i>CHAPTER 4: RESULTS</i>	31
Participant Characteristics	31
Themes	31
Potential Challenge: GBV at Work as a Low Priority Social Cause	31
Potential Challenge: High Levels of Perceived Social Distance.....	33
Potential Challenge: Public Cynicism about Sociopolitical Change and Advocacy	34
Potential Challenge: Multidimensional Nature of Working Professionals	36
Strategy: Developing Messaging that Highlights Similarities	37
Strategy: Making the Mission Feel Achievable	38
Strategy: Building Partnerships to Promote the Campaign.....	40
Strategy: Segmenting the Target Audience.....	41
Summary of Themes	42
<i>CHAPTER 5: DISCUSSION</i>	46
Summary and Discussion of Key Results.....	46
Strengths and Limitations	48
Implications and Recommendations	50
Conclusion	52
<i>REFERENCES</i>	53

CHAPTER 1: INTRODUCTION AND BACKGROUND

The *#ThisIsNotWorking* campaign was launched by humanitarian agency CARE in an effort to address gender-based violence (GBV) in the workplace. Many female workers around the world, especially those in the Global South where legal protection tends to be unavailable, continue to be affected by GBV. The social marketing campaign thus aims to mobilize public support for a legal framework that would ultimately lead to prevention of workplace GBV globally. This study is an evaluation of the campaign, which, at the time of writing, has successfully completed its initial phase. The overarching objective of the study is to understand how the campaign can be further improved, especially in light of the fact that it will continue to operate in various sociocultural settings. More specifically, the study focuses on gaining insights into adaptation of the campaign in three of CARE's target markets – Mexico, Australia, and UK.

The #ThisIsNotWorking Campaign

Overview

On International Women's Day, March 8th 2018, humanitarian aid organization CARE launched a global advocacy campaign called *#ThisIsNotWorking* in an effort to create workplaces free from GBV (CARE Action, 2018). The campaign was developed in partnership with Porter Novelli, a multinational public relations firm known for applying behavior change communications to fields such as global health and disease awareness (Porter Novelli, n.d.). It is an ongoing campaign at the time of writing, with efforts expected to extend over the coming two to three years (Porter Novelli, 2017).

A hashtag, which is created when adding a “#” to the beginning of an unbroken word or phrase, is widely used in social media campaigns to give a conversation longevity and context (Window, 2016). As a hashtag campaign designed to serve as an umbrella over

issues related to workplace GBV, *#ThisIsNotWorking* aims to develop an international social activation for driving awareness and support. It encourages supporters across the globe to turn their attention to issues happening in the Global South, such as cases of workplace abuse in less developed parts of Latin America, Asia, and Africa (Porter Novelli, 2017). As detailed below, the short-term objective of the campaign has been to mobilize supporters to sign petitions that urge the International Labour Organization (ILO) to adopt a universal standard on workplace GBV (CARE, 2018a). The long-term goals of the campaign include ensuring that countries enforce ILO standards of GBV, building a community of active supporters, forming social movement partnerships with other non-governmental organizations, and changing the dialogue on GBV to create a connection to issues in the Global South (Porter Novelli, 2017).

Target Audience

In order to enhance program effectiveness, social marketers often differentiate populations into subgroups of people who share needs, behavior, lifestyles, or values that make them likely to respond to interventions in a similar manner (Grier & Bryant, 2004). Such subgroups are referred to as target audiences. The *#ThisIsNotWorking* campaign's target audience has broadly been defined as the Global North, meaning people who reside in developed countries, with particular emphasis on markets with Porter Novelli offices (Porter Novelli, 2017). More specifically, there is a focus on working professionals concerned about gender equality. Although these working professionals are likely to tune into related issues, they are not necessarily aware of CARE's work in this area because it mostly occurs outside the Global North. The campaign targets both women and men. Additionally, they are likely to be social media users because the campaign's promotional strategy is based on the use of social media platforms (Porter Novelli, 2017).

Marketing Mix

A core framework used in the design of many social marketing programs is the marketing mix, commonly known as the four Ps: product, price, place, and promotion (Grier & Bryant, 2004). To provide a detailed description of different components of *#ThisIsNotWorking*, the four Ps of the campaign are outlined below.

Product refers to any benefit that the target audience will gain when they perform the desired behavior promoted by a social marketing program (Grier & Bryant, 2004). Thus far, the behavior *#ThisIsNotWorking* has been promoting is signing the online petition, a pledge that calls on political leaders of participating countries to support a new draft ILO convention. The convention would establish a legally binding framework for addressing workplace GBV around the world, urging member nations to legally prohibit all forms of GBV, strengthen enforcement and monitoring mechanisms, and ensure investigation of cases of GBV through labor inspectorates or other competent bodies (International Labour Office, 2018). The benefits a supporter would get after signing the petition are mostly intangible, rather than something that is functionally useful or physically beneficial. The online platform for signing the petition is designed in such a way that the target audience would find the behavior to be an emotionally rewarding experience. For example, phrases such as “join the movement” are used to describe the act of signing the petition (CARE, 2018a), fostering one’s sense of belonging to the larger social group of supporters. After signing the petition, supporters also receive a message that thanks them for “taking a stand to create worldwide legal protections for women in the workplace” (CARE, 2018c), which could heighten their sense of agency over the issue of GBV.

Price is the sacrifice exchanged for a benefit, including intangible costs such as embarrassment, loss of time, and psychological hassle (Grier & Bryant, 2004). In this

campaign, the price of the promoted behavior is minimal. It is easy and quick for people to sign the petition online, with the only required information being their names, email addresses, and zip code. The campaign's microsite, an independent webpage accessible from CARE's main website that is specifically designed to promote campaign materials, is also optimized for mobile users. It makes it convenient for people to sign the petition on various devices.

Place describes the location and distribution of outlets where the target audience are expected to perform the desired behavior. It can also refer to organizations and people that serve as intermediaries for facilitating the adoption of a behavior (Grier & Bryant, 2004). The campaign does not deploy physical locations because the petition is only accessible online. However, it is important to note that CARE has utilized its global network to encourage people from different countries to adopt the behavior. In this sense, CARE's different country offices have functioned as intermediaries, separately providing outlets catered to each country's target audience. For example, CARE UK has its own microsite where supporters can sign the petition. Likewise, CARE Australia has set up a microsite that is similar in design to the global *#ThisIsNotWorking* site, but speaks specifically to Australians. Participation from CARE's different country offices is therefore crucial to the campaign's placement strategy.

Promotion refers to persuasive communications used to induce behavior change. It usually is comprised of multiple activities and elements, such as development of effective messaging and designation of appropriate communication channels. The final products of such promotional strategies are often the most visible components of a campaign, including printed materials, events, displays, face-to-face selling, or public relations (Grier & Bryant,

2004). In terms of *#ThisIsNotWorking*, there are at least three promotional strategies worth noting. First, integrated social media promotion is central to the campaign. CARE has been actively generating content on various social media platforms, including Facebook, Twitter, and Instagram. CARE offices around the world produce such content tailored to audiences in each country, all using the hashtag in support of the campaign. Second, the use of survivors' personal stories guides the campaign's core messaging strategy. The main microsite features short videos capturing personal experiences of women who have experienced workplace GBV in different parts of the world. They share detailed accounts of how their lives have been affected by workplace abuse. These individual narratives are presented together in the context of social mobilization against GBV so as to encourage viewers to join the international movement; one of the captions on the microsite reads "watch, read and learn from women who are bravely breaking the silence to share their experiences with the hope of ending the cycle of abuse" (CARE, 2018a). The third promotional strategy employed by the campaign is market-specific localization of its call-to-action. For example, while the American iteration of the campaign targets political leaders, CARE UK's petition urges British clothing and fashion companies to support new international standards on workplace gender equality (CARE International UK, 2018a). The campaign's primary call-to-action – signing petitions that endorse a new ILO convention – is consistent across countries, but it is nuanced by the local context of each participating country.

Current Status

As of November 2018, the *#ThisIsNotWorking* campaign has garnered more than 125,000 signatures globally (CARE, 2018b). In the UK, more than 15,000 signatures have been collected (CARE International UK, 2018b). The petition organized by CARE

Australia has been signed by more than 4,000 people (CARE Australia, 2018). Mexico does not seem to have a country specific count, but it is possible that people from the region have contributed signatures. The signed petitions were successfully presented to various government officials ahead of the International Labor Conference, which took place in June 2018. At the conference, a decision was made among ILO's member states to establish the first-ever international treaty aimed at ending workplace GBV. Before the next annual conference, the ILO will have further consultations in order to finalize the text of the treaty (CARE, 2018b). Although the campaign has already achieved its main short-term goal, CARE intends to keep using the hashtag and maintain program activities. The campaign is now undergoing a transition and its long-term objectives are being reviewed by CARE and Porter Novelli stakeholders.

Research Questions

The present research seeks to provide an evaluation of the *#ThisIsNotWorking* campaign's global adaptation. Given the campaign's long-term goals outlined above, it is critical to build on the momentum it has created and continue expanding its global reach. In particular, since the ILO agreement would not be adopted as an official convention until the next conference held in June 2019 (International Labour Organization, 2018), it is important to keep the international audience engaged and focused on the issue. This study's goal is to identify strategies for cross-border promotion of the campaign, so as to optimize the existing marketing materials and inform future directions. Specifically, this research aims to answer the following questions:

1. What are key informants' views on sociocultural factors in the three target countries (i.e. Mexico, Australia, UK) that need to be considered for a global advocacy campaign addressing workplace gender-based violence?

2. How do key informants view the campaign's current strategies and communication materials for multinational promotion, especially as they pertain to the three target countries?

CHAPTER 2: LITERATURE REVIEW

Gender-based Violence in the Workplace

GBV is a term for harmful acts committed against one's will, specifically referring to actions perpetrated based on the power inequalities that exist between men and women (IASC, 2015; European Institute for Gender Equality, 2018). GBV is therefore commonly used interchangeably with the term 'violence against women' (European Institute for Gender Equality, 2018), as women are often affected disproportionately by such unequal power relationships. There are multiple forms of GBV, ranging from intimate-partner violence to female genital mutilation (Garcia-Moreno et al, 2015). Similarly, there are multiple interpretations of GBV because ideas about what constitutes GBV may vary within and across cultures (World Bank, 2014). Regardless of variations across cultures, GBV is a universal public health problem that continues to affect 35% of women worldwide (WHO, 2013). GBV can lead to negative health outcomes such as sexually transmitted diseases, induced abortion, premature birth, depressive disorders, injuries, and suicide (WHO, 2013). It also has negative economic effects, including expenditures on health service provision and decreased productivity of affected women (World Bank, 2014).

One place in which GBV can occur is the victim's place of work. GVB in the workplace can include physical assault, abusive verbal conduct, and sexual harassment (McCann, 2005). It is perpetrated by co-workers, supervisors, customers, or clients (Workplaces Respond, 2017). Survivors of domestic GBV can also be targeted in their places of work, when perpetrators call or appear at the workplace (Workplaces Respond, 2017). In addition to negative health outcomes experienced by the victim, workplace GBV can lead to economic ramifications for the workplace itself, such as lowered productivity

created by hostile working conditions and higher worker turnover (Fair Wear Foundation, 2013).

Risk factors for GBV in the workplace are wide ranging. Women suffering from poverty are more likely to be victims of GBV in the workplace, as they can easily be forced into occupations that carry a higher risk of such violence and lack resources to escape from hostile working environments (Krug, Dahlberg, Mercy, Zwi & Lozano, 2002). Likewise, immigrant workers who do not speak the local language may be more likely to experience GBV (Mayhew & Chappell, 2007). Female workers in industries that have traditionally excluded women are at greater risk for workplace sexual assault and harassment, including the garment, fishery and military industries (Sadler, Booth, Cook & Doebbeling, 2003; Tripathi, Tiwari & Kamath, 2016; Naved, Rahman, Willan, Jewkes & Gibbs, 2018). Other female workers, such as healthcare professionals and sex workers, are exposed to an increased risk of GBV because they work in close proximity with individuals who may be more prone to commit violent acts (Yang, Stone, Petrini & Morris; Semple et al, 2015). There are also organizational factors that can potentially instigate employers to commit GBV. For example, research suggests that work environments that have a greater number of male employees than female employees are more likely to be affected by sexual harassment. A results-driven organizational culture that dismisses employees' needs can lead to sexual harassment as well (Baillien, Neyens, & De Witte, 2008).

Gender and Workforce in the UK, Mexico and Australia

To gain an in-depth perspective on workplace GBV in the three target countries, it is necessary to take into account the context of the workforce in each country. In terms of economic opportunities available to women, UK and Australia appear to have a more inclusive workforce compared to that of Mexico. In Australia, national statistics from

2016-17 show that the labor force participation rate was 66% for working age women and 78% for men (Australian Bureau of Statistics, 2018). The UK had a comparable female employment rate in 2017, with 70.8% of women and 79.7% of men aged 16 and over being in the workforce (House of Commons Library, 2018). Employed women in both countries are financially disadvantaged; working females earn 92% and 83% of the median male wage, in Australia and UK respectively (Australian Bureau of Statistics, 2018; House of Commons Library, 2018). Gender disparities in Mexico are greater, as evidenced by the female employment rate of 47% compared to 82% for men. This number is also far below the OECD average for women's participation rate in the labor force, which is at 67% (OECD, 2017). Further, approximately two-thirds of employed women in Mexico have informal jobs that offer low pay and inadequate social protection (OECD, 2017).

Workplace Gender-based Violence in the UK, Mexico and Australia

GBV at work is commonly recognized as a society-wide issue in all three countries. The following statistics cannot necessarily be compared because they come from different sources, but prevalence of work-related GBV in the UK, Mexico, and Australia are 40%, 47%, and 25%, respectively (Australian Human Rights Commission, 2017; ComRes, 2017; International Labor Rights Fund, 2003). Industries for which there is documented evidence of GBV also appear to be similar across the three countries; healthcare, public service and sex industry are among the sectors that are usually subjects of research (Flynn, 2015; Katsulis, Durfee, Lopez, & Robillard, 2015; Lepping, Lanka, Turner, Stanaway, & Krishna, 2013; Llewellyn, Karageorge, Nash, Li, & Neuen, 2018; Ministry of Defence, 2015; Sanders & Campbell, 2007; Santiago, Monreal, Rojas Carmona, & Domínguez, 2018). Furthermore, normalization of GBV in the workplace is a common problem. For example, a study involving in-depth interviews with Mexican female workers revealed that many of

them were surprised to learn some behaviors they had always encountered at work would be considered sexual harassment (International Labor Rights Fund, 2003). Likewise, in the UK and Australia, it has been reported that female workers are not always able to recognize GBV, as such behaviors are so commonplace (House of Commons Women and Equalities Committee, 2018; Madison & Minichiello, 2004).

In addition to the problem of normalization, translating legal protection into practice has proven to be difficult. While there are laws in all three countries that prohibit sexual harassment at work (WORLD Policy Analysis Center, 2017), they are not always enforced due to a multitude of factors, such as absence of protocols implemented by employers and under-reporting by victims (House of Commons Women and Equalities Committee, 2018; Library of Congress, 2017; The Guardian, 2017). For example, though the UK's Equality Act is intended to provide protection against sexual harassment, it fails to adequately incentivize employers to take preventative measures because non-compliance does not result in legal sanctions (House of Commons Women and Equalities Committee, 2018). While estimates of under-reporting may vary by country, research suggests only 25% of women experiencing workplace sexual harassment talk to others about their experiences and only 5% file a formal complaint (Kristen, Banuelos, & Urban, 2015).

Although certain issues, such as normalization and under-reporting, are widespread, it is important to recognize GBV in the workplace is context-specific and thus presents unique challenges in each country. When looking at workplace GBV in Mexico, it is imperative that the issue is discussed in a context of rampant gender inequality that affects women's lives at large. For example, violent female deaths motivated by gender, known as

femicide, continue to be a problem in Mexico; the national femicide rate grew by 138% from 2012 to 2014 (OECD, 2017; UN Women, 2016). Mexico also has the highest adolescent fertility rate among OECD member countries, at 73.6 births per 1000 females aged 15-19 compared to the OECD average of approximately 15 births. Disparities persist in education too, as there are gender gaps in school performance and significant gender segregation in certain post-secondary study fields, including science and engineering (OECD, 2017). These gender inequalities, which can negatively affect women's employability and socio-economic mobility, could be distal risk factors for GBV at work because poverty can force them into high risk jobs (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). Therefore, a main challenge in Mexico is to improve the overall social and economic wellbeing of women by addressing gender disparities that currently exist in various domains, including the workforce.

In the UK, where the *#MeToo* movement probably has had the most significant impact among the three countries (BBC, 2018; Wootson, 2017), the main issue appears to be sexual harassment. Since *#MeToo*, which is regarded as one of the most successful digital feminist activism (Mendes, Ringrose, & Keller, 2018), the public discourse has focused on companies' accountability for protecting employees from sexual misconduct and abuse. For example, a recent report published by the parliament discusses unethical use of non-disclosure agreements (NDAs) by employers to silence victims of GBV, which has become commonplace in the UK. According to the report, victims of sexual harassment who have previously signed confidentiality provisions in their employment contracts may be too intimidated to speak up about their experiences. For fear of bad publicity, employers also use NDAs in settlement agreements so as to prevent victims from speaking openly

about cases or reporting them (House of Commons Women and Equalities Committee, 2018). Other aspects of the corporate world that can engender sexual inequality are also being reevaluated, such as gender imbalance in leadership and lack of sexual harassment training at work (Prescott & McDonald, 2018).

In terms of workplace GBV in Australia, the main public concern also seems to be sexual harassment. In 2018, the Australian government launched a 12-month national inquiry into sexual harassment in the workplace. The research did not only involve assessment of different drivers of sexual harassment, but also evaluated the effectiveness of the existing laws in order to create better guidance on prevention (Borys, 2018). In addition to the reported prevalence of harassment increasing from 21% in 2012 to 33% in 2018, one finding from the research that has been highlighted is the drastically higher rates of harassment observed in certain industries. For example, 81% of employees in information, media and telecommunications reported experiencing sexual harassment at work (P. Wood, 2018). The research also shed light on an important socio-cultural context in which workplace GBV occurs; the prevalence of workplace sexual harassment was found to be higher among Aboriginal and Torres Strait Islanders, the indigenous population of Australia (P. Wood, 2018). Another study has found that Aboriginal and Torres Strait Islander women are three times as likely to experience sexual violence in the past year, compared to other Australian women (State Government of Victoria, 2017).

While it is beyond the scope of this research to provide a detailed account of workplace GBV in each country, it is crucial to understand that sexual violence and harassment are often socioculturally derived. Accordingly, any successful international

campaign would need to take into account the particular circumstances of the target countries.

Gender-based Violence and Social Marketing

Social marketing applies commercial marketing techniques to the analysis, planning, execution, and evaluation of programs that aim to influence the voluntary behavior of target audiences in order to improve their personal welfare (Andreasen, 1995). Many social marketing campaigns are designed to directly affect individual recipients and their behaviors by invoking cognitive or emotional responses, in areas such as tobacco use and physical activity (Vallone et al., 2017; M. A. Wakefield, Loken, & Hornik, 2010; Wong et al., 2004).

GBV has also been a target of social marketing intervention. Some campaigns have employed educational kits, support groups, and helplines to aid victims of domestic violence, including women affected by sexual abuse (Cismaru & Lavack, 2010). Other programs have focused on changing violent behaviors of male perpetrators or preventing males from behaving violently against women (Manikam & Russell-Bennett, 2016; Robert, Paterson, & Francas, 1999). For example, Australian campaign “Freedom from Fear” encouraged potentially violent men to change their behaviors by calling a helpline that provided telephone counseling (Robert et al., 1999). Another approach is to undermine social norms that encourage GBV instead of targeting specific groups of people. For example, a 5-year campaign implemented in the US has effectively addressed misperceptions of peer attitudes and beliefs in order to engage men in GBV prevention (Mennicke, Kennedy, Gromer, & Klem-O’Connor, 2018).

Though such social marketing interventions addressing GBV in general have been discussed in the literature, research on programs focusing specifically on workplace GBV

appears to be scarce. There have been a few social marketing programs explicitly dealing with GBV at work, such as South Africa's *Soul City* campaign, which addressed sexual harassment in the workplace through a television drama series (Donovan & Vlasis, 2005). A recent US-based example is the *#ThatsHarassment* campaign produced by the Ad Council. Short video clips depicting various cases of workplace sexual harassment were nationally distributed on television and digital platforms. The campaign's goals were to empower victims, encourage bystanders to act, and provide employers with educational materials (The Ad Council, 2018). While background information about such campaigns are available, there seems to be a paucity of academic literature documenting their development or impact.

Multinational Social Marketing Campaigns

Another under-explored area of inquiry is multinational adaptation of social marketing programs. Although not drawn from examples that pertain to GBV, the few existing studies on international social marketing programs suggest several guidelines should be followed to ensure campaign materials are appropriately tailored to local audiences. First, when planning a campaign that transcends borders, it must be predicated on the idea that there are common behavioral or attitudinal barriers in every target country that require modification (Hattori, Richter, & Greene, 2010). Second, campaigns that haven't been successful in their primary market should be chosen for adaptation. The objectives and key messages of the original campaign should be retained so as to avoid the adapted version having less impact (Cotter et al., 2010). Third, it is ideal to form partnerships with local stakeholders so that their input can be reflected in the localization process (Sugden, Phongsavan, Gloede, Filia, & Tongamana, 2017). Fourth, in terms of execution, graphic imagery that can easily be understood is preferred over complex medical concepts or

personal testimonials (Wakefield et al., 2013). For example, showing images of internal body parts in order to communicate harms of smoking would have universally higher engagement than advertisements relying on testimonials shared by specific individuals, as the latter would be subject to the viewer's cultural context (Wakefield et al., 2013).

It is essential to assess whether these best practice models are applicable to adaptation of a global campaign that addresses GBV in the workplace, especially because the insights listed above are based on anti-tobacco and condom use campaigns. The present study therefore aims to fill the gap in the literature by providing a case study of a social marketing intervention specifically designed to tackle GBV in the workplace, while also adding to the growing body of research that explores multinational implementation of campaigns.

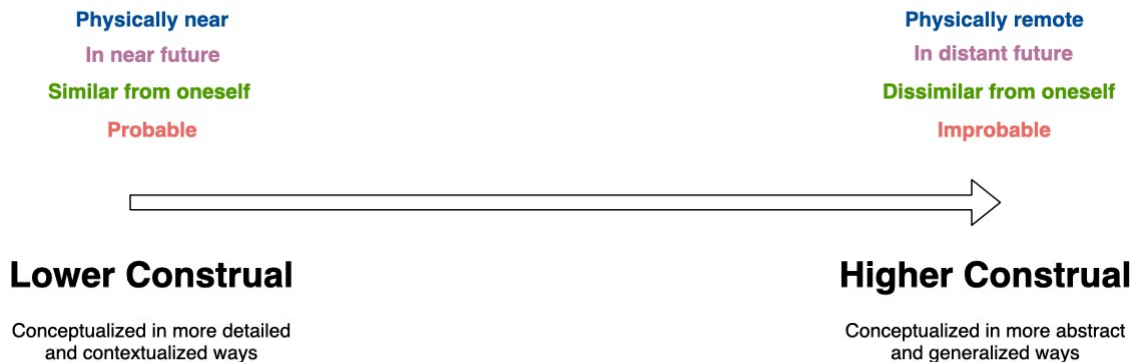
Theoretical Framework

To evaluate the *#ThisIsNotWorking* campaign, this study adopts Construal-Level Theory (CLT) as its main framework. CLT is a psychological theory that explicates the mental process by which people are able to transcend the here and now, such as thinking about the future, remote locations, or another person's perspective (Trope & Liberman, 2010). Transcending direct experience of the self in such ways, the theory contends, entails traversing different psychological distances. Psychological distance is a subjective experience of determining whether something is close or far away from the self. Psychological distance can be expressed using four different dimensions: spatial distance, temporal distance, social distance, and probability. Spatial distance refers to the amount of physical space that exists between an individual and the object s/he is conceptualizing, meaning how physically far away or close the object is. Temporal distance is usually used to describe events that happen in the near or distant future. Social distance is about

perceived similarity between the self and the object being conceptualized. For example, an event happening to people less like oneself is likely to be more psychologically distant. Lastly, probability is also a relevant dimension of psychological distance, as an improbable event that is removed from one's direct experience would seem more distant (Trope, Liberman, & Wakslak, 2007). As people's psychological distance to an object increases, they begin to rely on higher levels of construal, meaning they represent the object in more abstract and general ways (Trope & Liberman, 2010). The theoretical constructs are visualized in the figure below (Figure 1).

CLT has been used as a framework to evaluate the impact of risk and health communications (Kim & Kim, 2018; Spence, Poortinga, & Pidgeon, 2011; van Lent, Sungur, Kunneman, van de Velde, & Das, 2017). For example, it has been suggested that communication materials promoting concern about climate change should make climate change psychologically closer to the audience. By being exposed to content relevant to their locality, social group and lifetime, the audience becomes more concerned about the issue (Spence, Poortinga, & Pidgeon, 2011). In a similar manner, messages that reduce current smokers' perceived temporal distance to a smoking-related health risk lead to greater intentions to quit using tobacco (Kim & Kim, 2018). These studies demonstrate the significance of psychological distance as a factor that influences how a given message is received.

Figure 1: Visualization of Construal-Level Theory



In the present study, CLT is used as a framework for structuring the evaluation of the campaign. Specifically, two of the four dimensions of psychological distance are employed to explore potential directions in which the campaign content can be optimized. First, in terms of spatial distance, GBV in the workplace can be portrayed as an event that is either spatially near or distant. Communication materials that illustrate workplace GBV taking place in one's own country, for example, may elicit different responses than content showing GBV in a foreign setting. Considering the fact that the campaign currently features personal stories of GBV survivors from different regions of the world (CARE, 2018a), it is essential to understand the relationship between geographic proximity and perceived psychological distance to the issue. Second, social distance is another dimension relevant to the campaign's global adaptation. The social dimension of psychological distance is determined by perceived similarities between the self and the other (C. Jones, Hine, & Marks, 2017). In the context of the *#ThisIsNotWorking* campaign, social distance is especially an important concept to explore because workplace GBV is a broad issue that affects a diverse group of people who come from different socioeconomic backgrounds and industries. It is necessary to consider, for example, how a woman working in an

administrative office setting will relate to the story of a GBV victim who performs manual labor in a factory.

CHAPTER 3: METHODOLOGY

To answer the research questions, a series of semi-structured in-depth interviews was conducted with key informants. Qualitative methods were deemed appropriate because this was an exploratory study with a relatively broad research scope. The research questions also required a deep understanding of participants' perspectives on the current status of the campaign, which was another reason a qualitative design was chosen. The study was reviewed and approved by Emory University's Institutional Review Board prior to the start of data collection.

Study Sample and Recruitment

The study population consisted of key informants who were fulltime employees at organizations working in the areas of social marketing or advocacy, including both CARE and Porter Novelli. The two organizations were selected based on feasibility of recruitment and their expertise in the main research topics. The researchers initially attempted to recruit all key informants from CARE and Porter Novelli, but were later required to modify the recruitment strategy to include other organizations due to unforeseen difficulties in securing a sufficient number of participants. The criteria for choosing organizations remained the same, however, as additional participants were also recruited from professional organizations active in the field of social marketing.

The UK, Australia, and Mexico were chosen as the evaluation's target markets for two reasons; they represented geographical diversity and all three had CARE and Porter Novelli local offices. At least one key informant from each country was interviewed: three from Australia, two from UK, and one from Mexico, making the total sample size six. Eligible participants were able to communicate in English, knowledgeable about social marketing and/or gender equality advocacy, and currently employed by a professional

organization specializing in the topic areas. No exclusion criteria were set regarding their prior involvement with *#ThisIsNotWorking*, as it was determined past exposure to the campaign would lead to deeper insights.

A combination of purposive and snowball sampling techniques was employed to recruit participants. The first group of participants was recruited through thesis committee member Professor Taylor's professional network. She first contacted employees in each target market who may satisfy the eligibility criteria. Their level of knowledge was determined by Professor Taylor based on their prior involvement in a client project related to one of the two main discussion topics, namely social marketing and gender equality advocacy. As mentioned, candidates who had directly worked on *#ThisIsNotWorking* were also considered. Once a potential candidate was identified, their contact information (i.e. name and email address) were obtained by Professor Taylor and shared with the principal investigator (PI). The PI then sent an introductory email, providing a brief study description and confirming their participation. Interview date and time were also discussed over email. To identify more participants, the PI asked at the end of each interview if the key informant had any acquaintances who may be well-versed on the research topics and willing to take part in the study. A total of five participants were recruited through this process. The PI, who used to work in the commercial marketing industry, also utilized his professional network to recruit an additional participant. After identifying an individual in his network who satisfied the eligibility requirements, the same procedures outlined above were followed to schedule an interview. None of the participants were offered compensation for being in this study.

Data Collection

The PI administered all six interviews remotely using phone or Skype. To ensure protection against privacy breach, Skype for Business was used where possible, which was designated the preferred communication method by Emory University's Institutional Review Board. The length of the interviews varied due to participants' availability, from 12 to 50 minutes. During all interviews, the PI called in from a private room. Before the start of each interview, an explanation about confidential treatment of data was provided to the participant. Participants were also informed they can withdraw from the interview at any time or refuse to answer any of the questions. Verbal informed consent and permission to audio record the interview were obtained as well. A password-protected recording device was used for all interviews. The audio recordings were temporarily backed-up to another secure mobile device but were permanently deleted at the completion of project. All data were collected between November 2018 and January 2019.

Relevant campaign materials were sent to participants in advance so that they could provide feedback during their interviews. The campaign materials that had been localized were selected and shared where possible in order to elicit in-depth comments from the participants. With participants from Australia, two materials were shared: a Facebook post that contained statics about GBV in the workplace and localized campaign microsite, both of which were published by CARE Australia. Participants from the UK were also asked to look at similar materials: a one-minute Facebook video advertising the campaign and localized campaign microsite, both produced by CARE UK. With the participant from Mexico, as there was not any localized content at the time of this research, the campaign's global homepage was shared.

An interview guide was developed to be used consistently across all interviews. The thesis committee reviewed the first draft of the interview guide, after which it was revised by the PI. Following the first interview, two questions were added to cover pertinent topics that were missing from the initial draft. The revised interview guide consisted of 22 open-ended questions, broken down into five categories. The first section included questions about the participant's background information (i.e. "How would you describe your role at your organization?"). The second section covered socio-cultural contexts surrounding workplace GBV in the participant's country (i.e. "Can you talk about what you think are the most pressing concerns related to workplace GBV in your country?"). The third section had questions about application of social marketing in the target country (i.e. "How would you describe the target population's usage of social media?"). The fourth section focused specifically on evaluation of the current campaign content, such as the microsite and other localized promotional materials (i.e. "Thinking about the target audience in your country, what are your thoughts about the messaging strategy used in this material?"). Lastly, the fifth section comprised of closing questions (i.e. "Do you have any other recommendations for the campaign in general?"). In addition, the PI occasionally employed conversational probes to elicit further information from the participants.

Data Analysis

A thematic approach was used to inform the qualitative analysis (Bazeley, 2013). All interviews were first transcribed verbatim by the PI. After de-identifying the generated transcripts, they were entered into qualitative data software MAXQDA 2018 (VERBI Software, 2017). The PI read through each transcript and wrote memos, which included preliminary observations and potential thematic patterns. Next, a codebook was developed

through an iterative process. From the memos, a group of inductive codes was derived; deductive codes created prior to exploratory reading of the transcripts were also added to the codebook. The deductive codes originated from the interview questions and pre-selected CLT constructs (e.g. psychological distance). The initial codebook was first applied to a few transcripts. The code definitions and inclusion/exclusion criteria were then revised afterwards. This process was repeated multiple times and the codebook was revised until necessary. After the PI coded all transcripts independently, another researcher trained in qualitative analysis coded a transcript using the finalized codebook in order to assess inter-coder agreement. Discrepancies between the coders were discussed and resolved.

The codes that appeared to be highly relevant to the research questions were summarized for the next phase of analysis. To begin this process, a table containing all segments of the selected codes were first created, with the rows representing the codes and the columns representing the cases (i.e. participants). The table was carefully reviewed by the PI, during which he looked for patterns that were common across participant responses for a given code. Based on cross-case similarities and differences noted in the summary table, thematic understanding of the data was developed. To further contextualize the themes, once the initial set of themes was developed, the PI revisited the table to identify the different dimensions of each theme, including differences across the three target countries. This process involved grouping the code summaries by country, based on the assumption that the cases represent their respective countries. To enhance validity of the analysis, the PI met with a committee member and discussed preliminary themes before they were finalized.

CHAPTER 4: RESULTS

Participant Characteristics

A total of six key informants participated in interviews. Three of them were senior level employees at Porter Novelli, one from each of the three target countries. An employee involved in public engagement and fundraising at CARE Australia was also interviewed. The other two participants were experts in the field of social marketing – the CEO of a brand communications agency based in Australia and an employee at a social campaigning consultancy in the UK. All six participants had previous professional experience in social cause campaigning, including gender equality advocacy. The participants from CARE Australia and Porter Novelli Mexico had been aware of *#ThisIsNotWorking* prior to this research, as they worked on the initial launch of the campaign in their respective regions.

Themes

Eight themes were identified based on the analysis. Four of the eight themes describe potential challenges for a global advocacy campaign, which were shaped by sociocultural factors present in the target countries. The other four themes discuss strategic considerations for improving the *#ThisIsNotWorking* campaign.

Potential Challenge: GBV at Work as a Low Priority Social Cause

When discussing the general public's perception of GBV in the workplace, participants frequently provided comments suggesting it is not a top-of-mind issue for most people. Although gender equality in general has been a common topic of public discourse, GBV at work is often not prioritized, regardless of whether it is framed as a domestic or international issue. This lack of awareness and urgency can be attributed to different factors.

First, there is a multitude of non-gender sociopolitical issues that are more widely discussed among the general public and in the mass media. For example, participants from the UK described workplace GBV as “niche” or “low on agenda”, pointing out that topics

such as immigration and national healthcare would be considered more important by the public. In Australia, large-scale problems, like global warming, have garnered more attention than GBV because it is believed that the latter “only affects half the population” (Australia, brand communications agency).

Second, though there are some public discussions on gender equality in the workforce, GBV does not appear to be the main point of interest. The level of public awareness is higher when it concerns more pervasive and visible problems, such as gender pay gap and lack of female representation in business leadership. A comment from one of the participants from the UK exemplified such lack of public awareness about GBV at work, as she said she was not aware of any previous gender equality campaigns that focused on the issue. She explained;

“There is a lot of talk in the UK at the moment about gender equality from a paid perspective in the workplace... So that’s been more of the focus rather than matters like violence in the workplace... I think modern slavery as well gets some coverage. I’m not sure exactly how big of an issue [GBV at work] is here, if I’m honest” (UK, Porter Novelli)

Third, participants noted that GBV at work, including sexual harassment, tends to be overlooked due to cultural interpretations that downplay abusive treatment of women. In the UK, sexual harassment is often interpreted as banter or joke, suggesting the level of understanding about what constitutes GBV may not be high. The participant from Mexico observed that there is a similar cultural tendency in her country, as she said “there is a lot of justification. [Perpetrators would say] it was not abuse... it’s her fault because she came to work with a short dress” (Mexico, Porter Novelli). Here, the seriousness of gender abuse is diminished by blaming women for provoking male perpetrators.

Potential Challenge: High Levels of Perceived Social Distance

In their feedback for *#ThisIsNotWorking*, the majority of the participants alluded to the high levels of psychological distance the target audience may feel when seeing the campaign materials. More specifically, perceived differences between the audience's personal experiences and what is depicted in the campaign are substantial, in turn increasing the social dimension of psychological distance defined by CLT (Trope et al., 2007). The experiences of the female workers depicted in the campaign differ from that of the target audience in a few different ways.

The testimonials featured on the campaign microsite include stories of GBV that are immediately recognizable, such as physical abuse and offensive verbal comments. However, they do not necessarily represent daily experiences of working professionals in developed countries. According to the participants, while such obvious forms of GBV still exist in certain industries, many working professionals in the target countries would be more familiar with subtler forms of gender inequality. One participant described,

“Until you're in the workforce, you don't understand the subtle nature of sexual discrimination or gender inequality or being looked over... They don't see it as blatantly as [the campaign materials] portray... some of the subtle elements, particularly in a white-collar profession, of sexual put down... [for example] not being able to get a promotion because you're a woman” (Australia, brand communications agency).

Another participant referred to the concept of sexual currency to characterize this subtle form of workplace sexual harassment: “You are monitoring your currency that women use to negotiate or men use to make women feel that they are smaller or that they don't count. So I think the [idea of] sexual currency is very strong in Mexico, the way people use that in their favor” (Mexico, Porter Novelli). As these comments suggest, for many working professionals in developed countries, it could be difficult to relate on a personal level to

the campaign content because it does not reflect their understanding of what constitutes workplace gender inequality.

The psychological distance felt by the target audience is further increased by the perceived differences in the legal environment. Participants mentioned that one of the reasons female workers in the UK and Australia lack a sense of urgency about workplace GBV is the legal framework that is already in place to protect their basic rights. By contrast, the campaign stresses the fact that there are currently no laws to protect female workers in many developing countries. One of the campaign's objectives is to bring public attention to this inequality, but by doing so, it may also have an unintended effect – when the disparity is highlighted, the problem becomes psychologically distant and the audience begins to conceptualize it in more abstract ways. One participant described this process.

“When you're trying to get women in the UK to care about women in other countries... they'll often say, oh well there's nothing we can do about it. That's just their custom. That's their culture. They often remove the responsibility from themselves to help because they genuinely don't think there's anything you can do to convince another country's government to change their laws. And that's often where we see the most helplessness or people turning away” (UK, social campaigning consultancy).

As a result of abstract conceptualization, the audience may begin to blame intangible factors such as “culture” or “government”, consequently interpreting the issue as overwhelmingly complex or nearly unsolvable.

Potential Challenge: Public Cynicism about Sociopolitical Change and Advocacy

A theme that was consistently mentioned by the participants was the decline of trust in sociopolitical change and advocacy. Skepticism about social causes in general appears to be growing among the general public, resulting in indifference about social marketing campaigns like *#ThisIsNotWorking*. The participants referred to at least two key aspects of

this public cynicism about social advocacy – overexposure to online petitions and distrust in institutions that are supposed to lead social change.

First, the overabundance of online petitions is a factor that has contributed to the public's cynical attitude. One participant observed that with the rise of social media, people have been exposed to many allegedly meaningless petitions that have little to no social impact, in turn losing trust in the power of petitions to trigger a significant change. Another participant made a similar observation, stating that “we're seeing a little bit of wear out now with things like ‘sign this pledge’ because people are so bombarded with requests. They get on a mailing list for one charity and suddenly they're on a mailing list for a million.” (UK, social campaigning consultancy). As seen in this quote, participants used words such as “fatigue” or “wear out” to describe this attitude caused by overexposure to petitions, which suggests that the public cynicism is often accompanied by a lessening in people's enthusiasm for social advocacy.

Second, the public's pessimistic attitude toward social advocacy seems to be connected with their lack of trust in the government and other organizations' ability to influence change. One participant noted that many Australians have recently been passive about advocating for a social cause due to their distrust of politicians. She commented that the Australian public tend not to hold politicians in high regard, which is why they are “not politically motivated and get out there and demonstrate all the time” (Australia, brand communications agency). In a similar manner, in the UK, some have been reluctant to donate money to non-profit organizations because they feel their donations are not being used properly to create tangible social impact.

Potential Challenge: Multidimensional Nature of Working Professionals

The interviewees suggested that working professionals in developed countries, the primary target audience of the campaign, are not a homogenous population but rather a group of people whose values and behaviors vary. Although there are some common characteristics associated with this population, such as their busy lifestyle, there are also differences that could have important implications for a social advocacy campaign.

The divide between progressive and conservative working professionals is one factor that can create such differences. For example, in Australia and UK, the two groups may share similar sociodemographic characteristics, such as high levels of education and income, but can sometimes have opposing political views. On the one hand, the more progressive working professionals in Australia are likely to sympathize with concerns regarding unethical work environments in developing countries. On the other hand, those who are more conservative may be less interested in global issues and show more support for organizations working on domestic issues. Likewise, according to a participant from the UK, there is a social divide between people who are open to globalization and others who are more inward looking. The latter are typically opposed to the government spending resources on global issues, which implies it would be difficult to engage them in international social advocacy.

The use of social media can also vary among working professionals. In Mexico, the market penetration of social media is not as high among certain segments of the target population. For example, a participant stated that

“[Social media is] not at all a massive way to get to people. Some of these segments of the population are more sensitive to, for example radio or TV... the soap operas here are super popular. And they are starting to bring social issues into soap operas” (Mexico, Porter Novelli).

Similarly, a UK-based participant noted that younger working professionals who are in their 20s are likely to be using social media more heavily compared to those who are in their 30s or 40s, as the older generation was not brought up with social media.

Strategy: Developing Messaging that Highlights Similarities

One of the strategies proposed by the participants was to develop messaging centered on the similarities between the audience and people affected by workplace GBV. By building a bridge between these two groups, workplace GBV can become an issue people feel emotionally connected to on a personal level. One participant explained how this strategy would create more emotionally engaging content; “I would think to highlight people who are like your audience as being the people who are vulnerable to workplace harassment. And use that as the lead-in to get them to consider the people who are even more vulnerable to workplace harassment” (Australia, Porter Novelli). As this explanation suggests, once the audience understands that female workers portrayed in the campaign are similar to them, then workplace GBV becomes a problem they can identify with. Other participants outlined specific techniques that can be used to create messaging that builds on similarities.

One way to execute this strategy is using testimonials that feature people who come from the same cultural community as the audience. CARE has already applied this technique to a certain extent, as pointed out by a Mexican participant who expressed a positive opinion about the testimonials on the microsite. She described why she believed the testimonials would be effective;

“What was really good for me is that those [featured in the testimonials] were Latin American women... when you see those videos, it’s like ‘oh, this is my neighbor’ or you know ‘it could be me’. I think it’s important to put people from the country you’re going to launch a campaign. To put

visuals and testimonials of people from that country, talking that same language so people can really relate to that” (Mexico, Porter Novelli).

Here, the empathy bridge between the audience and the survivors depicted in the videos is created via factors such as ethnicity and language. However, the audience can also develop an emotional connection without sharing the same cultural background.

Factors that tie people together can also come from universal human experiences, regardless of one’s cultural background. According to the participant who described this communication technique, examples of commonalities in human behavior and relationships include having a younger sister or being a soccer fan. Such universal commonalities can be used as starting points for building empathy. The participant clarified how the technique can be applied to the case of GBV in the workplace.

“Women in the UK can totally all relate to the idea of a boss that you just think is such a creep, like a hideous boss that you dread having to talk to because you slightly fear them. There's an imbalance of power and it's like how can you conjure up the memory in a woman in the UK of a boss she's had who's been a problem... trying to use these kind of very specific details in a story like the fear of the footsteps coming up behind you when you were trying to do your work” (UK, social campaigning consultancy).

This explanation shows how communication materials can zoom in on specific moments that define universal human experiences. Further, it appears that the key to successfully implementing this technique is identifying details or moments that are emotion-provoking, as emotional responses are what unify people’s experiences.

Strategy: Making the Mission Feel Achievable

Participants reiterated that the campaign should present its goal – addressing the global issue of GBV at work – in a way that does not make the audience feel overwhelmed. For example, one of the videos used by the campaign lists different regions of the world that are being affected by workplace GBV, including “Africa”, “Latin America”, and

“Asia”. By describing the focus of the campaign in such a way, the audience may feel discouraged at the magnitude of the problem and think that it is not something that can be resolved. The participants proposed a few different messaging techniques for making the mission of the campaign feel more achievable.

The first technique is to control the scale of the problem the campaign is addressing. According to the participants, this can be done by using geographic locality as a parameter for defining the scope of the issue and selectively communicating information specific to the audience. It can be as simple as featuring statistics that pertain to the region where the audience lives, instead of highlighting the global prevalence of GBV. For example, when asked to give feedback on a campaign video created by CARE Australia, a participant said;

“If there was an Australian figure in [the video], that would be quite confronting. I’m pretty sure that’s a CARE Australia [video], but it’s extremely generic... it’s started generically on a global basis and we just fitted it down to some sort of local action, whereas more powerful communication arises locally. It gives people motivation that they can fix it, and in that way, you get the aggregation of fixes that creates a global difference” (Australia, Porter Novelli).

Though the audience is still being asked to deal with a global issue, by discussing it in a local context that is closer to them, the task would feel more manageable.

Another approach to making the goal of the campaign appear more attainable is to clearly communicate a tangible solution, including information about how the goal can be achieved. Although ending gender violence in the workplace is a distinct goal communicated in the campaign materials, participants felt it was not always made clear that the goal is achieved by getting the ILO to draft a new convention. This confusion implies that ending workplace GBV can feel vague as an objective when it is not supplemented by an illustration of how exactly that final goal is attained. As a result, since

it is difficult to imagine how one is making a contribution by signing the pledge, the campaign can present itself as an endless endeavor and disengage the audience.

Strategy: Building Partnerships to Promote the Campaign

Multiple participants agreed that CARE should identify external partners and consider getting them involved in campaign promotion moving forward. For example, the participants felt it would be beneficial to work with highly engaged supporters who want to do more than just sign the pledge. There are a few unique advantages to building a partnership with engaged supporters.

First, by working closely with supporters who are deeply committed to the campaign's cause, it would be possible to initiate peer-to-peer communication. Such communication could be more convincing than organization-led communication because advocates who represent the target audience's values can disseminate messages that are more relatable. As described by one participant, this can be achieved by providing a platform for the campaign's most engaged followers to be a part of local promotion efforts;

“Say if you're trying to reach the people of Manchester in the UK to engage them on gender equality. What's going to work there needs to be in a sort of local tone of voice with understanding of what's going to motivate and inspire the people there... If you can get some supporters to represent you there, they can help create more bespoke materials that really appeal and have relevance specifically to those sort of subgroups” (UK, social campaigning consultancy).

The examples of promotional activities that can be organized by advocates included offline events and podcast episodes. Allowing advocates to play a leading role in coordinating such activities can potentially lead to messages that resonate more with the target audience, compared with top-down promotion implemented solely by CARE.

Another benefit of the partnership-based approach is that it can generate long-term relationships with supporters, potentially leading to a more sustained impact. When people

are only asked to complete a one-off task like signing a petition, their relationship with the campaign may be short-lived. A more long-term engagement can be achieved when supporters are treated as partners and asked to embrace a cause to make it their own. A participant brought up the example of a domestic violence program that has adopted such a model. He claimed the program was successful because it:

“...caused people to stand up and say ‘I believe this’ and ‘I’m part of a movement to make sure those things don’t happen’. So there’s probably a difference between [other programs] and having a distinct belief to stand up for and a cause to continue to represent in your daily professional life as well as personal life” (Australia, Porter Novelli).

As illustrated by this example, supporters would be highly engaged if they become partners and would likely continue advocating the cause even beyond the initial contact with the campaign.

Strategy: Segmenting the Target Audience

Based on comments given by the participants, a strategy *#ThisIsNotWorking* could potentially employ in its next phase is to redefine the target audience. By focusing on more precisely defined sub-groups, it would be possible to communicate messages that are easily accessible and relatable. One way in which the target audience could be narrowed down is to think about specific characteristics of different sub-groups within the target audience, as working professionals do not always constitute a homogenous group. A participant who advocated audience segmentation suggested target sub-groups could be determined by specifying their age, political orientation, social issues of interest, events they regularly attend, and media content they consume. In other words, when the attitudes and behaviors of an audience segment are specified, a more targeted communication approach is possible, such as messaging tailored to their political orientation or promotion via channels they frequently use.

Another way in which the target audience can be segmented is to focus on various stakeholders who may influence GBV in the workplace. For example, one of the participants recommended targeting working professionals who are in leadership positions;

“Working professionals is a very broad audience... So I would suggest that you take a little bit smaller... a part of the campaign should target men that are in leadership and decision making roles to give them tools to prevent and detect when something’s happening in their own environment” (Mexico, Porter Novelli).

Her comment demonstrates how the campaign’s messaging can be refined by thinking about the roles different segments of the target audience play in prevention of workplace GBV.

Summary of Themes

The eight themes described above are the main topics that most, if not all, of the participants touched on in their interviews. In this analysis, the themes were arranged into two separate categories, namely potential challenges and strategies. However, the participants usually did not introduce them as such; rather, they often discussed challenges and concomitant strategic solutions together in the same context. As summarized in the matrix below (Table 1), the two groups of themes therefore align, with at least one recommended strategic solution for each challenge.

To address the potential challenge of workplace GBV being perceived as a low priority social cause, the campaign’s messaging can highlight similarities between workplace GBV in the Global South and gender inequality experienced by female workers in developed economies. By doing so, the female workers’ experiences portrayed in the campaign become more familiar to viewers, making workplace GBV an issue the audience can feel emotionally connected to and personally care about.

Levels of perceived social distance can be decreased by adopting two different strategies. First, to avoid abstract interpretation of workplace GBV as an unsolvable issue, communication materials can emphasize a tangible objective of the campaign without overwhelming viewers with the global scale of the problem. This way, supporters would be able to feel that they are making a meaningful contribution to a goal that is actually attainable. Second, messaging based on similarities can be employed to reconcile different experiences that ‘subtle’ and ‘physical’ forms of workplace GBV entail. Specific moments that are common to both forms of gender inequality can be highlighted in messaging so as to unify experiences of female workers in developed and developing countries.

In order to engage the public who tend to be cynical about social advocacy, CARE could work with highly enthusiastic supporters of the campaign who are also influencers among the target population. They can become advocates of the campaign and be directly involved in promotional activities, which is a strategy that could be effective for a few different reasons. By orienting promotional activities around advocates, the campaign’s cause would be represented by passionate individuals rather than one organization. For people who have lost trust in sociopolitical change led by institutions, having passionate individuals represent the campaign’s cause may feel more ‘authentic’ and relatable. Further, advocate-based marketing may be a point of difference that separates the campaign from other online petitions, to which the public is becoming increasingly overexposed.

Considering the multidimensional nature of working professionals, two strategies could provide viable solutions. It would first be important to segment the target audience, creating sub-groups of working professionals based on their beliefs, behaviors, and relationships with GBV in the workplace. Resources can be efficiently allocated to specific

segments of the target population, if it is determined that certain segments may be more responsive to the campaign. Alternatively, if audience segmentation reveals that all subgroups can effectively be reached, then CARE can accordingly develop a targeting strategy for each segment. The second strategy that could be used to address the multidimensionality of the target audience is to jointly promote the campaign with external partners who can attract various types of working professionals. For example, by partnering with advocates who have been locally active in gender equality advocacy, the campaign could credibly allude to domestic issues related to workplace GBV. As a result, the campaign's appeal to 'conservative' working professionals, who may be less interested in global issues, could be enhanced.

Table 1: Relationships between challenges and strategies for *#ThisIsNotWorking*

Challenge	Strategy	Potential Application of Strategy to the campaign	Potential Impact of Strategy
GBV at work as a low priority social cause	Developing messaging that highlights similarities	Present workplace GBV as a problem that is similar in nature to gender issues the audience is familiar with	Workplace GBV can become a social cause the audience cares about on a personal level
High levels of perceived social distance	Making the mission feel achievable	Control the scale of the problem being addressed to avoid abstract interpretation, which can make the campaign's goal feel unattainable	It may lead to greater support for the campaign because people would feel they are making a meaningful contribution to a tangible goal
	Developing messaging that highlights similarities	Highlight moments common to both 'subtle' and 'physical' forms of workplace GBV in messaging	The audience would be able to empathize with workers in developing countries even if they do not share the same experiences
Public cynicism about sociopolitical change and advocacy	Building partnerships to promote the campaign	Allow enthusiastic advocates to promote the campaign on behalf of/with CARE	The campaign could feel more 'authentic' and different from other online petitions
Multidimensional nature of working professionals	Segmenting the target audience	Segment the target audience into sub-groups of working professionals based on their beliefs, behaviors, and relationship with GBV at work	It can enable efficient allocation of resources to focus on specific sub-groups and/or lead to development of targeted promotional plans to effectively reach all sub-groups
	Building partnerships to promote the campaign	Work with advocates who can credibly discuss domestic issues related to GBV at work	The campaign can appeal to 'conservative' working professionals who tend to be more interested in domestic issues than global issues

CHAPTER 5: DISCUSSION

The findings from this study provide insights into international adaptation of *#ThisIsNotWorking*, a social marketing campaign addressing GBV in the workplace. The campaign has successfully mobilized support around the world and is looking to further improve its effectiveness in the next phase. Accordingly, this study sought to identify sociocultural factors that could potentially impact the campaign's localization in three of its target countries, namely Australia, Mexico, and UK. Data were collected from key informant interviews with social marketing experts from each of the target countries, who were also familiar with gender equality advocacy. The analysis of the qualitative data revealed a total of eight themes pertaining to adaptation of the campaign.

Summary and Discussion of Key Results

Of the eight themes that were identified in the analysis, four of them describe sociocultural factors that could pose a challenge when adapting the campaign in the target countries. First, key informants suggested that workplace GBV is perceived to be a low priority cause compared to other social issues. Gender-related issues in the workplace that the general public consider to be pervasive tend to be more widely discussed, which makes it difficult for the campaign to present GBV at work as a serious problem that warrants public attention. Second, from the perspective of working professionals in developed economies, workplace GBV depicted in the current campaign materials could feel like an abstract problem that is far removed from their everyday experiences. High levels of psychological distance could exist between what is portrayed in the campaign and the subtler nature of gender inequality experienced by female workers in developed countries. Third, key informants referred to the growing cynicism about social advocacy among the general public. This negative attitude stems from overexposure to online petitions and lack

of trust in leading institutions to bring about positive change. Fourth, though the campaign has thus far broadly targeted working professionals as its audience, they may not be a homogenous group of individuals. According to the key informants, it would be more appropriate to think of them as a diverse group of people who display widely differing values and behaviors.

The other four themes delineate strategies that the campaign could adopt in order to optimize its impact in the target countries. The first strategy proposed by the key informants is to develop messaging that focuses on the similarities between the target audience and female workers affected by GBV in the workplace. When communication materials successfully highlight factors that are common to both groups, such as ethnicity or universal human experiences, they become more emotionally engaging. The second strategy is communicating the overarching goal of the campaign in a tone that feels attainable. For example, in order to avoid overwhelming the audience with the gravity of the global issue, information about how exactly CARE intends to address GBV at work can be more clearly communicated. The third strategy is to involve partners in the development and promotion of the campaign. Collaboration with devoted supporters could be beneficial for building long-term support and delivering more convincing messages. Fourth, key informants recommended redefining the campaign's target audience by segmenting them into smaller sub-groups. Segmentation can be done on the basis of audience's political beliefs, media use, or relationship to GBV in the workplace.

Some of the qualitative themes identified in this evaluation are consistent with findings from previous research examining health communication interventions. For example, a group of researchers evaluating an anti-tobacco social media campaign reported

that repeatedly asking people to participate in online activism can lead to less response due to what they called “campaign fatigue” (Hefler, Freeman, & Chapman, 2013). This concept mirrors the challenge of public skepticism toward social advocacy, which partially stemmed from overexposure to online petitions. According to another evaluation that looked at a cross-border HIV prevention campaign, a facilitator of behavior change was the campaign materials’ power to make viewers self-reflect on their lives and circumstances (Jana, Letsela, Scheepers, & Weiner, 2015). The finding conforms to a theme highlighted in the current study, namely the importance of unifying the viewer’s personal experiences with what is conveyed through messaging. Moreover, the aforementioned guidelines for multinational adaptation of social marketing programs included collaboration with local stakeholders (Sugden et al., 2017), a recommendation that is in line with the strategy of forming partnerships with advocates.

Strengths and Limitations

To our knowledge, this is the first study that specifically focused on an international marketing intervention addressing GBV in the workplace. The findings from this study have therefore added value to the existing body of literature about multinational adaptation of campaigns (Cotter et al., 2010; Hattori et al., 2010; Sugden et al., 2017; M. Wakefield et al., 2013) and marketing interventions focusing on GBV in general (Cismaru & Lavack, 2010; Manikam & Russell-Bennett, 2016; Mennicke et al., 2018; Robert et al., 1999). The insights provided by the present study could also be uniquely useful in that they derive from an evaluation of *#ThisIsNotWorking*, which is considered an upstream social marketing campaign. Upstream campaigns move beyond individually focused strategies to address socio-ecological determinants of health. Traditionally, social marketing campaigns have predominantly been downstream, meaning promotion of behavior change at the

individual level (M. Wood, 2016). However, social marketers have recently been advocating an integration of both approaches (Gordon, 2013; S. C. Jones & Hoek, 2011). Considering the shift in the field of social marketing, this research could serve as a case study of an upstream campaign that aims to create changes at the sociopolitical level.

The study had limitations that are worth noting. First, data saturation may not have been reached because of the relatively low number of interviews conducted. Due to logistical challenges in recruitment, such as key informants' busy work schedule, the initial goal of administering four interviews per target country was not met. For this reason, it is possible that not all insights relevant to the research questions were explored. Second, due to the same logistical difficulties, a couple of the interviews had to be made shorter at the request of the participants. In these shortened interviews, not all questions in the interview guide were covered. As a means to compensate for the above limitations, the identified themes were externally audited by thesis committee member Professor Taylor, who is an expert in social marketing and had been involved in the campaign's development, to ensure they were valid and credible. Third, though some of the themes discussed how the target audience may perceive or respond to the campaign's communication materials, only key informants were interviewed for this study. All key informants had expertise in social marketing and/or gender advocacy, but it is possible that their opinions do not always reflect how the target audience may react to the campaign in reality. Fourth, as is the case with qualitative research broadly, the results of this study should not necessarily be generalized to other health communication interventions. Although some of the themes discussed in the results may be applicable to other multinational advocacy campaigns,

factors unique to each campaign should be considered before applying them, such as the nature of the issue being addressed or sociocultural settings of the target markets.

Implications and Recommendations

For the *#ThisIsNotWorking* campaign to be effective in Mexico, Australia, and UK, it would be important to consider the potential challenges that stem from the sociocultural setting of each country. In addressing these challenges, the campaign should consider adopting the strategies recommended by the key informants. It should be noted that the four challenges are potentially all inter-related and could co-occur. For example, it is possible that GBV in the workplace is not prioritized as a social cause because it is often interpreted as a psychologically distant issue that feels too abstract. Or, the lack of trust in non-profit organizations is perhaps not equally shared between conservative and globally-minded working professionals because the former tend to be more disengaged from international social advocacy. While an in-depth exploration of these links was not within the scope of this study, it is a critical point that should be taken into account moving forward with the campaign; since the four challenges are likely to be inter-related, all of them should be addressed simultaneously to achieve maximum impact. This also means that the campaign should apply all of the recommended strategies in order to appropriately deal with every challenge.

Although the above would be the most ideal course of action, it may not be realistic to implement every strategy depending on resources available. In this case, it would be efficient to prioritize strategies that align with the plans that CARE is considering for the upcoming iteration of the campaign. According to a key informant at CARE, they have identified a new segment to target, namely leaders of corporations. A point CARE will be stressing in the campaign moving forward is to get “leadership at all levels to look at the

issue [of workplace GBV] and to acknowledge that this isn't appropriate and that there is a legal framework around that" (Australia, CARE). Audience segmentation, one of the four strategies recommended by the participants, therefore directly seems to support the direction CARE already plans to take. Alternatively, another way to prioritize strategies is to think about what additional positive effects each strategy may have. For example, as explained earlier, establishing partnerships with advocates may be particularly useful for addressing public cynicism, but it could also help CARE build a larger community of active supporters. Given the fact that the formation of such a community is one of the campaign's long-term goals, the strategy can have positive impact in multiple ways.

To implement the prioritization process at the country level, it will be helpful to quantitatively measure the magnitude of the challenges in each target country. This analysis was successful in unraveling broad areas that are likely to pose an issue in all three countries, but we were unable to assess the extent to which each challenge is present in each country. If we know what the most salient challenge is in a given country, it would be possible to prioritize strategies based on that information. Data collection instruments used in past studies can be applied to conduct such quantitative assessment; for example, there are instruments that measure levels of psychological distance on a Likert scale (Wang, Hurlstone, Leviston, Walker, & Lawrence, 2019).

Further research can be implemented to validate the results of the present study with members of the target audience. There are a few different directions for such research. First, it will be helpful to check the validity of the challenges identified in the present evaluation. For example, to confirm whether the scale of workplace GBV depicted in the campaign feels overwhelming from the target audience's point of view, focus groups can

be conducted with working professionals in the target countries. Second, CARE and Porter Novelli could develop new campaign materials that reflect strategic recommendations made by the key informants and conduct a pilot test. Testing materials can include visual or textual content that are used for campaign promotion, such as video or webpage. Focus group discussions can be administered to examine how members of the target audience respond to these materials. Additionally, to build on the results of the current study, future studies can explore how the potential challenges and strategies identified for *#ThisIsNotWorking* may apply to other international campaigns that have similar objectives or design.

Conclusion

This evaluation revealed that *#ThisIsNotWorking*, a social marketing campaign advocating for GBV-free workplaces, could potentially face several challenges in mobilizing support on a global scale. These challenges were shaped by sociocultural factors common to the campaign's target countries, including Mexico, UK, and Australia. The evaluation also identified specific strategies for improving the campaign's current promotion and messaging, which could be helpful in addressing the potential challenges. Moving forward, CARE should consider adopting all strategies or prioritize them based on availability of resources or needs of the target countries. Future research should focus on validating the results of the current evaluation with members of the target audience.

REFERENCES

- Andreasen, A. R. (1995). *Marketing Social Change*. San Francisco: Jossey-Bass.
- Australian Bureau of Statistics. (2018). Gender Indicators, Australia, Sep 2017. Retrieved November 28, 2018, from [http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/bySubject/4125.0~Sep 2017~Main Features~Economic Security~4](http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/bySubject/4125.0~Sep%202017~Main%20Features~Economic%20Security~4)
- Australian Human Rights Commission. (2017). Violence against women in Australia. Retrieved from <https://www.humanrights.gov.au/submissions/violence-against-women-australia-2017#Heading219>
- Baillien, E., Neyens, I., & De Witte, H. (2008). *Organizational, team related and job related risk factors for bullying, violence and sexual harassment in the workplace: A qualitative study*. *International Journal of Organisational Behavior* (Vol. 13).
- Bazeley, P. (2013). *Qualitative Data Analysis: Practical Strategies*. London: SAGE Publications Ltd.
- BBC. (2018). MPs face tougher sanctions for sexual harassment and bullying.
- Borys, S. (2018). Australia to launch national inquiry into workplace sexual harassment. Retrieved November 30, 2018, from <https://www.abc.net.au/news/2018-06-20/ahrc-to-launch-inquiry-into-sexual-harassment/9887268>
- CARE. (2018a). #ThisIsNotWorking. Retrieved November 14, 2018, from <https://thisisnotworking.care.org>
- CARE. (2018b). CARE Applauds Global Labor Agreement Aimed at Ending Violence and Harassment at Work. Retrieved November 14, 2018, from <https://www.care.org/newsroom/press/press-releases/care-applauds-global-labor-agreement-aimed-ending-violence-and>

- CARE. (2018c). Thanks for taking action! Retrieved November 14, 2018, from https://my.care.org/site/Donation2?df_id=22746&mfc_pref=T&22746.donation=form1
- CARE Action. (2018). Listen: CARE Launches #ThisIsNotWorking on International Women's Day. Retrieved October 28, 2018, from <https://www.careaction.org/blog/listen-care-launches-thisisnotworking-international-womens-day>
- CARE Australia. (2018). #ThisIsNotWorking. Retrieved November 14, 2018, from <https://caretoact.org.au>
- CARE International UK. (2018a). Let's Cut Out Violence in the Garment Industry. Retrieved November 14, 2018, from <https://act.careinternational.org.uk/node/232>
- CARE International UK. (2018b). This Campaign is Now Closed. Retrieved November 14, 2018, from https://act.careinternational.org.uk/campaign-now-closed?utm_campaign=140518&utm_source=CIFBPI
- Cismaru, M., & Lavack, A. M. (2010). "Don't Suffer in Silence" — Applying the Integrated Model for Social Marketers to Campaigns Targeting Victims of Domestic Violence. *Social Marketing Quarterly*, 16(1), 97–129. <https://doi.org/10.1080/15245000903528373>
- ComRes. (2017). *BBC – SEXUAL HARASSMENT IN THE WORKPLACE* (Vol. 44). Retrieved from http://www.comresglobal.com/wp-content/uploads/2017/12/BBC-sexual-harassment_FINAL_v3.pdf
- Cotter, T., Perez, D., Dunlop, S., Hung, W. T., Dessaix, A., & Bishop, J. F. (2010). The case for recycling and adapting anti-tobacco mass media campaigns. *Tobacco*

- Control*, 19(6), 514 LP-517. Retrieved from
<http://tobaccocontrol.bmj.com/content/19/6/514.abstract>
- Donovan, R. J., & Vlasis, R. (2005). *VicHealth Review of Communication Components of Social Marketing/Public Education Campaigns Focusing on Violence Against Women*. Victorian Health Promotion Foundation. Retrieved from
<https://www.vichealth.vic.gov.au/media-and-resources/publications/review-of-public-education-campaigns-focusing-on-violence-against-women>
- Flynn, J. M. (2015). Not so innocent bystanders. *The Medical Journal of Australia*, 203(4). <https://doi.org/10.1093/europace/eup154>
- Gordon, R. (2013). Unlocking the potential of upstream social marketing. *European Journal of Marketing*, 47(9), 1525–1547. <https://doi.org/10.1108/EJM-09-2011-0523>
- Grier, S., & Bryant, C. A. (2004). Social Marketing in Public Health. *Annual Review of Public Health*, 26(1), 319–339.
<https://doi.org/10.1146/annurev.publhealth.26.021304.144610>
- Hattori, M. K., Richter, K., & Greene, J. (2010). Trust, Caution, and Condom Use with Regular Partners: An Evaluation of the Trusted Partner Campaign Targeting Youth in Four Countries. *Social Marketing Quarterly*, 16(2), 18–48.
<https://doi.org/10.1080/15245001003746774>
- Hefler, M., Freeman, B., & Chapman, S. (2013). Tobacco control advocacy in the age of social media: using Facebook, Twitter and Change. *Tobacco Control*, 22(3), 210 LP-214. <https://doi.org/10.1136/tobaccocontrol-2012-050721>
- House of Commons Library. (2018). Women and the Economy.

House of Commons Women and Equalities Committee. (2018). *Sexual harassment in the workplace: Fifth Report of Session 2017–19*. Retrieved from

<https://publications.parliament.uk/pa/cm201719/cmselect/cmwomeq/725/725.pdf>

International Labor Rights Fund. (2003). *A Report on Sexual Harassment in the Workplace in Mexico*, (May). Retrieved from

<https://digitalcommons.ilr.cornell.edu/cgi/viewcontent.cgi?article=1485&context=globaldocs>

International Labour Office. (2018). *Ending violence and harassment in the world of work*. Geneva.

International Labour Organization. (2018). ILO tripartism “a most potent antidote” to negative political trends and discourse. Retrieved November 25, 2018, from

http://www.ilo.org/ilc/ILCSessions/107/media-centre/news/WCMS_631873/lang--en/index.htm

Jana, M., Letsela, L., Scheepers, E., & Weiner, R. (2015). Understanding the Role of the OneLove Campaign in Facilitating Drivers of Social and Behavioral Change in Southern Africa: A Qualitative Evaluation. *Journal of Health Communication*, 20(3), 252–258. <https://doi.org/10.1080/10810730.2014.925014>

Jones, C., Hine, D. W., & Marks, A. D. G. (2017). The Future is Now: Reducing Psychological Distance to Increase Public Engagement with Climate Change. *Risk Analysis*, 37(2), 331–341. <https://doi.org/10.1111/risa.12601>

Jones, S. C., & Hoek, J. (2011). Regulation, public health and social marketing: a behaviour change trinity. *Journal of Social Marketing*, 1(1), 32–44.

<https://doi.org/10.1108/20426761111104419>

- Katsulis, Y., Durfee, A., Lopez, V., & Robillard, A. (2015). Predictors of Workplace Violence Among Female Sex Workers in Tijuana, Mexico. *Violence Against Women, 21*(5), 571–597. <https://doi.org/10.1177/1077801214545283>
- Kim, K., & Kim, H.-S. (2018). Time Matters: Framing Antismoking Messages Using Current Smokers' Preexisting Perceptions of Temporal Distance to Smoking-Related Health Risks. *Health Communication, 33*(3), 338–348. <https://doi.org/10.1080/10410236.2016.1266579>
- Kristen, E., Banuelos, B., & Urban, D. (2015). Workplace Violence and Harassment of Low-Wage Workers. *Berkely Journal of Employment and Labor Law, 36*(1). <https://doi.org/https://doi.org/10.15779/Z38MS1C>
- Krug, E. G., Dahlberg, L. L., Mercy, J. A., Zwi, A. B., & Lozano, R. (2002). *World report on violence and health*.
- Lepping, P., Lanka, S. V. N., Turner, J., Stanaway, S. E., & Krishna, M. (2013). Percentage prevalence of patient and visitor violence against staff in high-risk UK medical wards. *Clinical Medicine, Journal of the Royal College of Physicians of London, 13*(6), 543–546. <https://doi.org/10.7861/clinmedicine.13-6-543>
- Library of Congress. (2017). Mexico: Lawmaker Proposes Criminalizing Sexual Harassment at Federal Level. Retrieved September 28, 2018, from <http://www.loc.gov/law/foreign-news/article/mexico-lawmaker-proposes-criminalizing-sexual-harassment-at-federal-level/>
- Llewellyn, A., Karageorge, A., Nash, L., Li, W., & Neuen, D. (2018). Bullying and sexual harassment of junior doctors in New South Wales, Australia: rate and reporting outcomes. *Australian Health Review*. Retrieved from

<https://doi.org/10.1071/AH17224>

Madison, J., & Minichiello, V. (2004). Recognizing and Labeling Sex-based and Sexual Harassment in the Health Care Workplace. *Journal of Nursing Scholarship*, 32(4), 405–410. <https://doi.org/10.1111/j.1547-5069.2000.00405.x>

Manikam, S., & Russell-Bennett, R. (2016). The social marketing theory-based (SMT) approach for designing interventions. *Journal of Social Marketing*, 6(1), 18–40. <https://doi.org/10.1108/JSOCM-10-2014-0078>

Mendes, K., Ringrose, J., & Keller, J. (2018). #MeToo and the promise and pitfalls of challenging rape culture through digital feminist activism. *European Journal of Women's Studies*, 25(2), 236–246. <https://doi.org/10.1177/1350506818765318>

Mennicke, A., Kennedy, S. C., Gromer, J., & Klem-O'Connor, M. (2018). Evaluation of a Social Norms Sexual Violence Prevention Marketing Campaign Targeted Toward College Men: Attitudes, Beliefs, and Behaviors Over 5 Years. *Journal of Interpersonal Violence*, 0886260518780411. <https://doi.org/10.1177/0886260518780411>

Ministry of Defence. (2015). *Sexual Harassment Report*. Retrieved from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/446224/ADR005000-Sexual_Harassment_Report.pdf

OECD. (2017). *Building an Inclusive Mexico: Policies and Good Governance for Gender Equality*. Paris: OECD Publishing. <https://doi.org/https://doi.org/10.1787/9789264265493-en>

Porter Novelli. (n.d.). Our Heritage. Retrieved October 28, 2018, from <https://www.porternovelli.com/about/>

- Porter Novelli. (2017). Care GBV Campaign: Ending Gender Based Violence in the Workplace.
- Prescott, K., & McDonald, C. (2018). How can businesses tackle sexual harassment? Retrieved November 30, 2018, from <https://www.bbc.com/news/business-43866590>
- Robert, J. D., Paterson, D., & Francas, M. (1999). Targeting Male Perpetrators of Intimate Partner Violence: Western Australia's "Freedom from Fear" Campaign. *Social Marketing Quarterly*, 5(3), 127–144.
<https://doi.org/10.1080/15245004.1999.9961076>
- Sanders, T., & Campbell, R. (2007). Designing out vulnerability, building in respect: Violence, safety and sex work policy. *British Journal of Sociology*, 58(1), 1–19.
<https://doi.org/10.1111/j.1468-4446.2007.00136.x>
- Santiago, R. V., Monreal, L. A., Rojas Carmona, A., & Domínguez, M. S. (2018). "If we're here, it's only because we have no money." discrimination and violence in Mexican maternity wards. *BMC Pregnancy and Childbirth*, 18(1), 1–10.
<https://doi.org/10.1186/s12884-018-1897-8>
- Spence, A., Poortinga, W., & Pidgeon, N. (2011). The Psychological Distance of Climate Change. *Risk Analysis*, 32(6), 957–972. <https://doi.org/10.1111/j.1539-6924.2011.01695.x>
- State Government of Victoria. (2017). Family violence and Aboriginal and Torres Strait Islander women. Retrieved November 30, 2018, from <https://www.betterhealth.vic.gov.au/health/healthyliving/Family-violence-and-aboriginal-and-torres-strait-islander-women>
- Sugden, C., Phongsavan, P., Gloede, S., Filiati, S., & Tongamana, V. O. (2017).

Developing antitobacco mass media campaign messages in a low-resource setting: Experience from the Kingdom of Tonga. *Tobacco Control*, 26(3), 344–348.

<https://doi.org/10.1136/tobaccocontrol-2015-052755>

The Ad Council. (2018). Ad Council Partners with Actor and Producer David Schwimmer and Writer and Director Sigal Avin to Launch ‘#ThatsHarassment’ Campaign. Retrieved from <https://www.multivu.com/players/English/8254251-ad-council-thats-sexual-harassment-psa-david-schwimmer-sigal-avin/>

The Guardian. (2017). “Perverse outcomes”: How Australia is failing sexual harassment victims. Retrieved from <https://www.theguardian.com/world/2017/oct/18/kate-jenkins-on-how-australia-is-failing-sexual-harassment-victims>

Trope, Y., & Liberman, N. (2010). Construal-Level Theory of Psychological Distance. *Psychological Review*, 117(2), 440–463. <https://doi.org/10.1037/a0018963>

Trope, Y., Liberman, N., & Wakslak, C. (2007). Construal Levels and Psychological Distance: Effects on Representation, Prediction, Evaluation, and Behavior. *Journal of Consumer Psychology*, 17(2), 83–95. [https://doi.org/https://doi.org/10.1016/S1057-7408\(07\)70013-X](https://doi.org/https://doi.org/10.1016/S1057-7408(07)70013-X)

UN Women. (2016). *Violencia Femicida en Mexico: Aproximaciones y Tendencias, 1985-2014*. Mexico City.

Vallone, D., Greenberg, M., Xiao, H., Bennett, M., Cantrell, J., Rath, J., & Hair, E. (2017). The Effect of Branding to Promote Healthy Behavior: Reducing Tobacco Use among Youth and Young Adults. *International Journal of Environmental Research and Public Health*, 14(12), 1517. <https://doi.org/10.3390/ijerph14121517>

van Lent, L. G. G., Sungur, H., Kunneman, F. A., van de Velde, B., & Das, E. (2017).

- Too Far to Care? Measuring Public Attention and Fear for Ebola Using Twitter. *Journal of Medical Internet Research*, 19(6), e193.
<https://doi.org/10.2196/jmir.7219>
- Wakefield, M. A., Loken, B., & Hornik, R. C. (2010). Use of mass media campaigns to change health behaviour. *Lancet*, 376(9748), 1261–1271.
[https://doi.org/10.1016/S0140-6736\(10\)60809-4](https://doi.org/10.1016/S0140-6736(10)60809-4)
- Wakefield, M., Bayly, M., Durkin, S., Cotter, T., Mullin, S., & Warne, C. (2013). Smokers' responses to television advertisements about the serious harms of tobacco use: pre-testing results from 10 low- to middle-income countries. *Tobacco Control*, 22(1), 24 LP-31. Retrieved from
<http://tobaccocontrol.bmj.com/content/22/1/24.abstract>
- Wang, S., Hurlstone, M. J., Leviston, Z., Walker, I., & Lawrence, C. (2019). Climate Change From a Distance: An Analysis of Construal Level and Psychological Distance From Climate Change. *Frontiers in Psychology*. Retrieved from
<https://www.frontiersin.org/article/10.3389/fpsyg.2019.00230>
- Window, M. (2016). How to create and use hashtags. Retrieved January 16, 2019, from
<https://business.twitter.com/en/blog/how-to-create-and-use-hashtags.html>
- Wong, F., Huhman, M., Asbury, L., Bretthauer-Mueller, R., McCarthy, S., Londe, P., & Heitzler, C. (2004). VERB™ — A Social Marketing Campaign to Increase Physical Activity Among Youth. *Preventing Chronic Disease*, 1(3), A10. Retrieved from
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1253475/>
- Wood, M. (2016). Social Marketing for Social Change. *Social Marketing Quarterly*, 22(2), 107–118. <https://doi.org/10.1177/1524500416633429>

- Wood, P. (2018). Sexual harassment at work is on the rise in Australia, the Human Rights Commission says. Retrieved November 30, 2018, from <https://www.abc.net.au/news/2018-09-12/human-rights-commission-report-reveals-sexual-harassment-at-work/10231480>
- Wootson, C. (2017, October 29). A British minister admits he made his secretary buy sex toys as #MeToo hits Parliament. *The Washington Post*.
- WORLD Policy Analysis Center. (2017). *Preventing Gender-Based Workplace Discrimination and Sexual Harassment : New Data on 193 Countries*. Retrieved from [https://www.worldpolicycenter.org/sites/default/files/WORLD Discrimination at Work Report.pdf](https://www.worldpolicycenter.org/sites/default/files/WORLD%20Discrimination%20at%20Work%20Report.pdf)