Two projects with eight USDN members take the guesswork out of influencing people’s behavior for sustainable outcomes.

As communities work toward sustainability goals, program planners are faced with the challenge of motivating individuals in their communities and organizations to adopt or modify specific behaviors. Sustainability professionals have to be creative about tackling huge behavior change challenges, even if they don’t always have the portfolio of tools they need.

Two USDN member pilot programs used a community-based social marketing (CBSM) model as an overarching framework for developing campaigns to foster sustainable behavior. Both of these projects started with USDN members learning the CBSM methodology, and then co-designing behavior change programs. Then, cities implemented individualized programs, and concluded with a cross-city analysis of program design and results.

1. The first project focused on motivating residents to use cold water when washing clothes. Participating members included Asheville, Berkeley, Tucson, and San Francisco.
2. The second project focused on influencing municipal employees to shut down their computers and monitors at the end of each workday. Participating members included Columbia, Frederick County, Santa Clara County, and Baltimore.

After these projects were completed in 2012 and 2013, two USDN regional networks disseminated the lessons outlined in the CBSM project grant reports, and the methodologies are now being implemented in 15 additional communities.

Community-Based Social Marketing Process

Community-based social marketing has recently emerged as an alternative to traditional education campaigns (McKenzie-Mohr, 2011; Schultz & Tabanico, 2007). CBSM packages basic principles of psychology with applied research methods in a way that provides a usable framework for practitioners working to promote behavior change across a variety of settings. The approach begins with the careful selection of a specific target behavior, and then uses a four-step process to foster sustainable behavior change. These four steps are:

1. Identifying the barriers to a targeted behavior;
2. Using behavior change tools to overcome the barriers;
3. Piloting the selected tools using empirical research methodology and a control group; and
4. Evaluating the project once it has been widely implemented.

Because the programs developed under this approach are piloted on a small scale, they can be refined as needed until there is documented evidence that shows effectiveness and best practices before broad implementation.
Cold Water Wash Project Results

Results of the pilot project were quite similar across the three municipalities that collected outcome data.

- In Asheville NC: cold-water washing increased significantly as a result of the community-based social marketing strategy; 85% of the treatment group reported using all or mostly cold-water washes, compared to 52% of the control group.

- In Berkeley CA: results were not statistically significant but moved in the predicted direction; 76% of the treatment group reported using all or mostly cold-water washes, compared to 59% of the control group.

- In Tucson AZ: cold-water washing increased significantly; 79% of the treatment group reported using all or mostly cold-water washes, compared to 60% of the control group.

Computer Power Down Project Results

Results of this pilot project varied somewhat across the three municipalities. However, overall findings suggest that the program was effective at increasing computer and monitor shutdown rates.

- In Columbia MO: computer and monitor shutdown rates increased significantly as a result of the strategy; computer shutdown went from 62% to 81%, and monitor shutdown went from 35% to 58%.

- In Frederick County MD: computer shutdown rates were already over 90%, so there was no increase in computer shutdown behavior. Monitor shutdown rates increased significantly, however, from 38% to 63%.

- In Santa Clara County CA: computer shutdown increased significantly for all employees in the pilot program, both control and treatment groups. Monitor shutdown increased significantly due to the marketing strategies, from 3% to 38%.