Digital Marketing for Campaign Awareness

INTERNSHIP REPORT

Digital Marketing for Campaign Awareness

Submitted To:

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Letter of Transmittal

August 26, 2017

Humaira Naznin
Senior Lecturer
BRAC Business School
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Subject: Submission of Internship Report.

Dear Ms.
With due respect, I am submitting my Internship Report on *"Digital Marketing for Campaign Awareness"* under Save the Children International (Bangladesh Country Office)to you. It was such an amazing experience to have you as my advisor and thus working and preparing this report by following the steps.

I have tried to make this report informative by thoroughly describing my job responsibilities along with the way I had managed my job. Though I faced quite difficulties while collecting data for this campaign. However, the whole work was based on Digital Promotional activity but I have elaborated every other responsibilities. The selection of topic and later on, the informative and detailed approach of the whole experience will help you to understand about my project work. I am always there if you have any confusion.

I hope that this report will fulfill your requirements. Thank you for your consideration.

Sincerely yours,

_____

Armina Khandoker Nayna
ID: 13104128

Acknowledgement

My Heartiest gratitude goes to my Advisor Ms. Humaira Nazin (Senior Lecturer, BRAC University) for suggesting me to choose this topic and providing me with enough support to prepare this report. Iappreciate her wonderful co-operation and the sacrifice of her valuable time.

A very special thanks goes to Save the Children's Deputy Country Director Dr. Ishtiaq Mannan for his valuable responses in times of suggestions or reviewing every phase of our campaign work. I would like to thank my supervisor Ms. Tahrim Zinath Chaudhury for her wonderful encouragement and suggestions for helping me in all the phase of my internship program. The Regional Manager of Asia, Mr. Taskin Rahman gave me support by providing and suggesting different plans. Special thanks goes for him as well. Belal Uddin's helpful guidance helped me a lot to reach the media persons and journalists for this campaign. I want to convey my warm regards to Mrs. Ayesha Afrin (MBBS & MPH) who was extremely helpful and almost minimized my work load by her helpful mentality.I would love to thank some supportive and helpful individuals, family and friends to whom I have come across to complete this report as well. Last but not the least, thanks to the Almighty.

However, copyright materials (especially about Save the Children's Organization part) acknowledged at the reference list at the end of this report. Most of those information about Save the Children has been derived directly from the website. I have prepared this report within a very short time therefore it may not be that much accurate. Please consider the flaws of this report and oblige thereby.

Executive Summary

This report is a reflection of my work at Save the Children in Bangladesh for an awareness campaign named “Stop Unnecessary C-Section” forwhich I have been appointed as a Digital Marketing & Content Development intern. It reflects how an awareness campaign should run and in what ways social media promotions can function for creating public awareness.Now-a-days, most of the organizations are operating and promoting their businesses by using Digital Marketing technology. Bangladesh is also included in that list.

The contents of this internship report has 3 sections: It begins with the organizational part which contains the overall detail about Save the Children Bangladesh and their working processes. Afterwards, the Job Description part highlights what were my duties & responsibilities as an intern for “Stop Unnecessary C Section Campaign”. Finally, the main topic of my report has been discussed later on. “Digital Marketing forCampaign Awareness” has been detailed out in the last part with findings and recommendations. Though we cannot predict or state to a definite conclusion of our successful promotions for this campaign as it was totally a new concept and it is a long term campaign to get implemented properly. But the initial responses that we have got was significant.Besides, the report contains a lot of figures.

Table of Contents

Contents **Page Numbers**

Save the Children

Contents **Page Numbers**

Chapter 1

The Organization

Introduction

"Save the Children is among one of the renowned global NGO'sin developing countries which mainly aims to promotethe children's rights and tries to provide children's safety through various project activities. It started its journey in UK with the mission ofdeveloping children's life by means of education, establishingproper health care and also providing the emergency basis need in times of war & natural disaster.

As reported by Save the Children Headquarter in UK, it states this organization has almost 28 members from the national level where it's supporting 120 countries globally.

In order to gain more rights for young people Save the Children promotes policy changes, particularly by enforcing the UN Declaration of the Rights of the Child. Alliance members organize emergency-relief efforts, helping to protect children from the effects of war and violence." **("Save the Children International", n.d.).**

History

"Save the Children International was founded by Eglantyne Jebb and her sister Dorothy Buxt on 1919 in UK. The purpose of their effort was to mitigate the starvation problem from German, Austrian &Hungarian childrenduring World War 1."**("Save the Children International", n.d., para.1).**

"Save the Children has been working to assist the children in Bangladesh since 1970. The program works across five thematic sectors: Child Rights Governance and Child Protection, Health- Nutrition-HIV/AIDS, Child Poverty, Humanitarian and Education. With the support provided by our donors, SC Global Members and implementing partners,

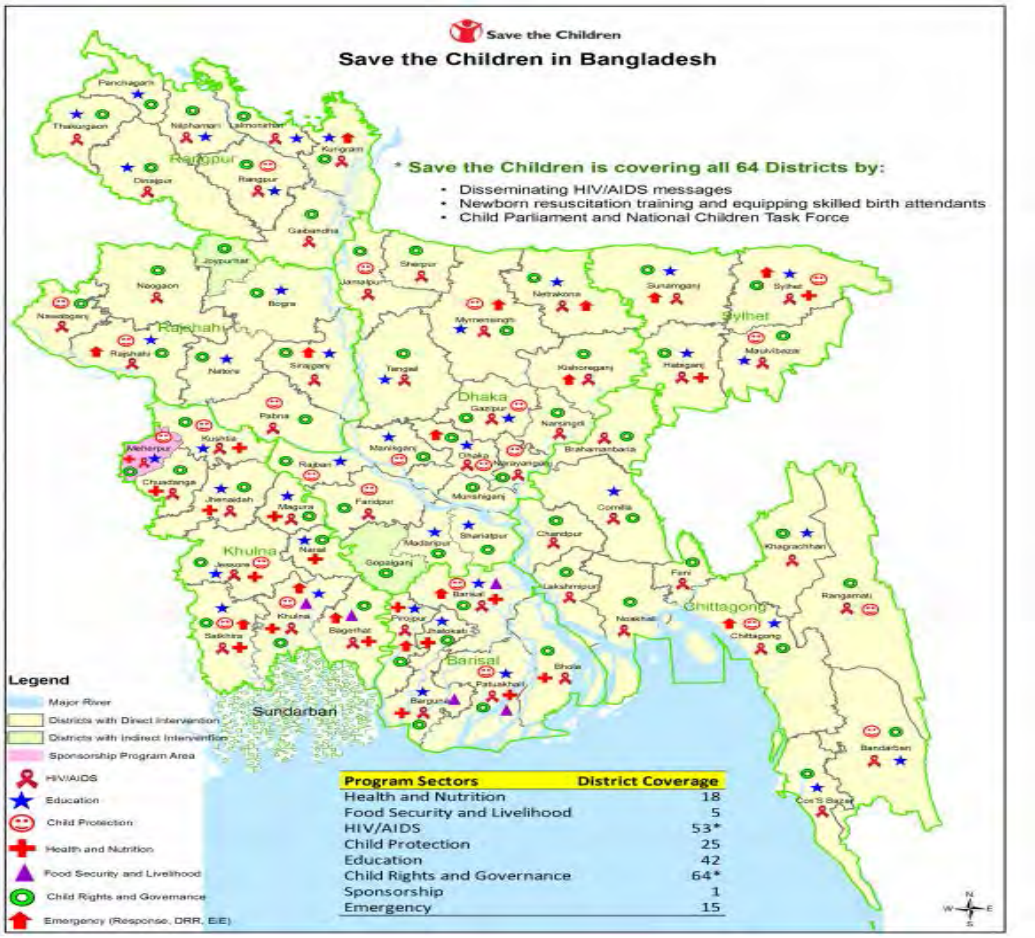
both in government and civil society organizations, we are making progress towards maximizing impact for children who are most in need of our support, including those affected by HIV/AIDS, ethnic minority groups, street and working children, refugee children, and others; vulnerable and socially excluded. As Save the Children is a dual mandate organization, we respond to disasters; and in ensuring the survival, protection and development of affected children."**("Save the Children in Bangladesh", n.d., para.1).**

"In Bangladesh, Save the Children is currently moving forward to strengthen monitoring, evaluation, accountability and learning [MEAL] aspects of its work to ensure program quality. In simple terms, it is about reinforcing our program learning in a way that brings lessons learned into the program design and management decision making, leading to continual improvements over time."**("Save the Children in Bangladesh", n.d., para.2).**

"Save the Children directly reaches more than 12 million children and adults in Bangladesh through implementation of over 90 projects in all 64 districts of Bangladesh. Our 800+ highly skilled staff and over 65 partner organizations are instrumental in ensuring delivery of high quality programs that address the needs and rights of children and their communities. Save the Children member organizations with their internal resources and those of their governments, foundations and corporations further enhance our capacity to achieve more for the children of Bangladesh."**("Save the Children in Bangladesh", n.d., para.3).**

Activities

In Bangladesh, Save the Children is always with the children and works for their every betterment through multiple and multidimensional approaches. All the activities of Save the Children can be put under a single cloud which is consists of 6 different sectors - Child Protection, Child Poverty, Health, Nutrition and HIV/AIDS, Education, Policy Rights &Governance and Humanitarian Sector.SCIBD has direct implementation and partnerships in Dhaka, Chittagong, Barisal, Khulna, Rajshahi and Sylhet division. **(Save the Children in Bangladesh, 2017)**



Projects & Programs of SCIBD:

According to the information retrieved from **Save the Children Bangladesh Country Office (2017),** there are almost 6 programs on which they are working directly around 6 divisions of Bangladesh. Those are mentioned below in detail:

- **CHILD POVERTY:**

"Save the Children in Bangladesh updated report", (2017) issued a thorough descriptionregarding Child poverty program. The child poverty work falls under 3 broad themes: child-sensitive livelihoods, child-sensitive social protection and adolescent skills for successful transitions.

The 3 distinct projects of Child Poverty on which SCIBD has worked/are working so far:

- ✓ Suchana
- ✓ Education for Youth Empowerment (EYE)
- ✓ Child Sensitive Social Protection (CSSP) in Bangladesh

- **CHILD PROTECTION:**

"Save the Children in Bangladesh updated report", (2017) has described theChild Protection program as a way to protect children from all forms of violence, abuse, and exploitation including child marriage and gender based violence. The focus of working children program is to contribute to gradual removal of children from hazardous work, and to improve working conditions when they are engaged in non-hazardous jobs. Establishing and strengthening child protection system is central to all our interventions.

The projects of Child Protection on which SCIBD has worked/are working so far:

- ✓ Chetona
- ✓ Inclusive Protection and Empowerment Project for Children with Disabilities (IPEP)
- ✓ Reducing Exploitation and Abuse of Children through strengthening National Child Protection System in Bangladesh (REACH)
- ✓ Sushikha O Susasther Mahdhomy Surokkha/ Protection through better education and better health
- ✓ Citizen Reporting Platform (CRP)
- ✓ IKEA Good Cause Campaign (GCC)

- **CHILD RIGHTS GOVERNANCE:**

"Save the Children in Bangladesh updated report", (2017)has issued the Child Rights Governance sector which works with civil society coalitions, parliamentarians, young people, and in partnerships with institutions such as the National Human Rights Commission to advocate for better legal protection, strategic policy formulation and investment for children in Bangladesh. Besides, they pursue more technical avenues for achieving child rights through our public investment in children work- analyzing the public fiscal space for children and working towards its expansion.

The projects of Child Rights Governanceon which SCIBD has worked/are working so far:

- ✓ Mainstreaming Child Rights in the Academia in Bangladesh
- ✓ Child Friendly Local Governance
- ✓ Child-led Social Accountability Project, Bangladesh
- ✓ Investment in Children Project
- ✓ KOLOROB
- ✓ Monitoring Child Rights Situation in Bangladesh
- ✓ National Children's Task Force (NCTF)

- **Education:**

"Save the Children in Bangladesh updated report", (2017)recognizes the important role of education as a main driver for making positive changes in the lives of millions of deprived children and contribute to the overall development of the country. The priority areas in education are pre-primary/Early Childhood Care and Development (ECCD) and basic education.

The projects of Education on which SCIBD has worked/are working so far:

- ✓ Shishuder Jonno

- ✓ SHIKHON
- ✓ Reading Enhancement for Advancing Development (READ)
- ✓ Shishur Khamatayan-MLE
- ✓ Holistic approach towards Promotion of Inclusive Education (HOPE)
- ✓ Education and Protection for Refugee Children (EPRC)

- **HEALTH, NUTRITION AND HIV/AIDS**

"Save the Children in Bangladesh updated report", (2017)represents Health, Nutrition and HIV/AIDS sector for saving the lives of newborns, children, youth, adolescents and mothers in Bangladesh. The sector works in close partnership with the MOH&FW and other relevant ministries, professional bodies, academia, implementing partners and donors. The sector works on maternal & newborn, child, adolescent health nutrition and HIV/AIDS related services through capacity building, advocacy, campaign, improved planning & strengthening coordination between communities and healthcare service providers.

The projects of HNHIV on which SCIBD has worked/are working so far:

- ✓ Enhanced Management of Pneumonia in Community (EMPIC)
- ✓ Clinic Appeal
- ✓ HIV/AIDS Program
- ✓ Improving Community Health Workers Program Performances through Harmonization & Community Engagement to Sustain Effective Coverage at Scale
- ✓ MAMI Management of Acute Malnutrition in Infants
- ✓ MaMoni Health Systems Strengthening
- ✓ MAMOTA Expansion of Maternal Newborn Health-Family Planning Services in Rural Bangladesh
- ✓ SAVING NEWBORN LIVES: BENDING THE CURVE
- ✓ SIDA Global Moments
- ✓ SPRING (Strengthening Partnerships, Results, and Innovations in Nutrition Globally)

- **HUMANITARIAN**

"Save the Children in Bangladesh updated report", (2017)states that, it has been preparing vulnerable communities for natural disasters since 2005 and continues working with government, communities and children to build capacity on disaster risk reduction, climate change adaptation and effective humanitarian response. To respond to a disaster effectively and more efficiently, humanitarian sector in Bangladesh has prepositioned local partners, and building their capacity on effective disaster risk management based on geographic locations.

The projects of Humanitarian on which SCIBD has worked/are working so far:

- ✓ Education for Children in Emergency
- ✓ Emergency Livelihood Project
- ✓ Humanitarian Trainee Scheme under Talent Development Project
- ✓ ICCCCA (Integrated Child Centered Climate Change Adaptation) Project
- ✓ Proyash – An Urban Risk Reduction Project

SCIBD working activities in Bangladesh

Mission and Vision:

Mission

According to**Save the Children International (2017)**,its mission is: "*To inspire breakthroughs in the way the world treats children, and to achieve immediate and lasting change in their lives.*"

Vision

According to **Save the Children International (2017)**, its vision is: "*To create a world in which every child attains the right to survival, protection, development and participation.*"

Chapter 2
Job Description

The Campaign "Stop Unnecessary C-Section":

The main objective of doing an internship is to gain practical knowledge and experience the professional job life. It can be relevant to the student's major or minor area. Students tend to gain the experiences while working in theorganization and they get to learn about knowing any specific department and also make contributions in terms of need. I have chosen "Save the Children in Bangladesh" as my Internship area due to its reputation and it is considered as one of the largest International NGOs working for children's development in regards to Education, Health, Nutrition, Protection and their rights. I was appointed as a content writer and digital marketing intern for a campaign named as "**Stop Unnecessary Cesarean Section**."

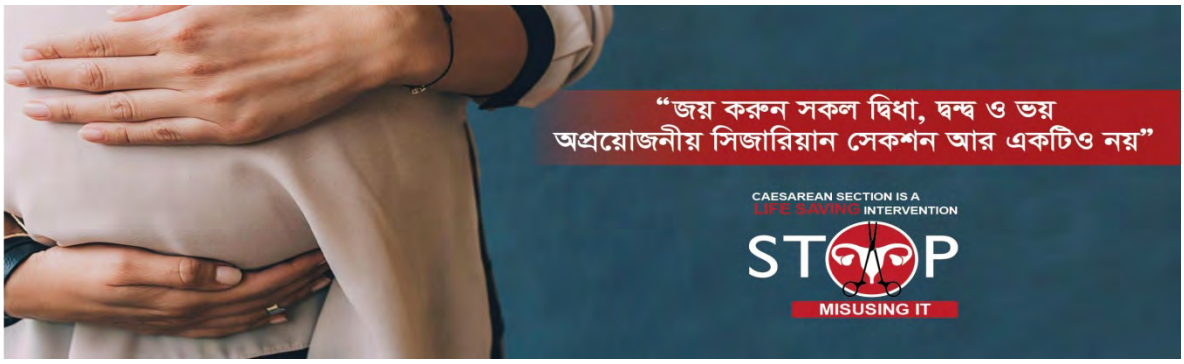
I was supervised by the Advocacy & Communications Deputy Manager. Along with her supervision, our Deputy Country Director & Asia's Regional Manager both have helped me throughout those 3 months by providing ample amount of information. I have learnt a lot inthis sector and all these were a new experience for me to understand development works for wider social development through creating awareness.

I started my internship on 16th of May, 2017 andcontinued for 3 months finished on 17th of August, 2017. The country head office is located in Gulshan-2, Dhaka. Working hour started from 8.30 am till 4:30 pm and it was a full-time internship program. The working environment of Save the Children was amazing. I was not treat like an intern, rather they treated me as a full-time employee of this specific project. As an intern, I worked for a campaign therefore I had no close associates with any particular department. Though,

sometimes I had to work for Advocacy & Communications to someextent. The whole team, their working pattern and every other experience that I have gained did help me a lot to gather the knowledge and idea on how digital mediums can help to run a campaign promotion successfully through social media and website.

Cesarean Section or C-Section is generally acceptable as a lifesaving intervention when the delivery process of pregnant mother goes wrong. According to **World Health Organization, (2015)** – "The ideal rate for caesarean delivery is 10-15%". But among 2004 to 2014, the C-section rate in Bangladesh increased from 4% to 23%.

Financial Express, (2017)has recently reported that- "around 70% of births are done through cesarean delivery annually and about 80% of all births in private hospitals in Bangladesh are now C-sections."



However, Save the Children in Bangladesh's Deputy Country Director states 3 reasons behind the increase in Cesarean deliveries in Bangladesh. Those are: lack of quality control in hospitals, a financial incentive and poor ethical standards. Along with that, change in lifestyle among wealthy women and their willingness to do the Elective Cesarean delivery is another big reason.

On that note, a campaign to create awareness was initially proposed and inaugurated by the Save the Children's Deputy Country Director & ICDDR, B Director which named as "Stop Unnecessary Cesarean Section". On July 3o^{th,} many stakeholdersincluding doctors, researchers, rights activists, representatives of donor agencies and media have come and jointly launched a campaign titled "Prevention of Unnecessary Cesarean Section".

With the goals to stop the Unnecessary Cesarean Deliveries and to promote Normal Delivery in our country, they finally take this huge initiative which is such a tremendous move towards the development. To run this project campaign for those 3 months, 2 interns were appointed to maintain the transparency in the resource contents and managing the promotional activities with every prior group discussion. One of them was from MBBS Doctor. The whole campaign project was designed in such a way so that it can create awareness among general people mainly through the promotional activities. It was basically done by using the Digital Marketing through which we reach to the people by website creation and management, social media activities and promotion, content write-ups, research & analysis and so on.

Specific Responsibilities under the Campaign:

I was assigned to work for this project with the help of my supervisor and others who were involved with this campaign. Before starting our tasks, a general board meeting was held for having the formal introduction and overview of the campaign on the very first day of my joining date. My supervisor then divided the work schedule with me into different segments.As an intern, the 3 months tasks under this campaign are described as follows:

- **Manage the Social Media Accounts:**

At first I was asked to open the Facebook, Twitter, YouTube & an official Gmail account for promoting Stop Unnecessary Cesarean Section campaign. I made the accounts on the social media sites on the first day of my internship. Anyone can search for the official pages of Stop Unnecessary C Section. Right now, the Facebook, Gmail & YouTube accounts are mostly updated as Twitter is not that much popular in our country. Anyone can write to stop.uncs@gmail.com to ask and know more about the unnecessary cesarean deliveries. Stop UnCS mostly concentrated on Facebook Promotion and therefore I had to make weekly post plans and schedule those accordingly. Before that, the working team mainly decided the publishing days and post timing in such a way so that our posts can be reached to maximum number of people. Peak traffic for online posts have figured out when the best time is to publish posts for different target groups. Our campaign posts on Facebook runs on alternative days published around 3 or 3.30 pm. On weekends, the time schedule has been selected on 2 pm.One such illustration is mentioned below:I prepared a presentation on FB Analytics and Gantt chart of our weekly Plan for presenting it in front of the Deputy Country Director. Besides, I kept updating the YouTube channel with Bangladeshi context C Section videos which were also linked up with the website as well.

- **Website Management:**

The demo version of Stop UnCSwebsite was almost developed by a digital management agency named “Control N Digital”.We had a daylong website management training session where we were instructed thoroughly about how to operate and manage resources in the admin panel. All the collected resources were uploaded accordingly by the approval. Anyone can visit the website by simply clicking on www.stopuncs.org .

- **Collect & Preserve the Resources:**

For the first 2 weeks of starting the program, my regular tasks were to collect and preserve articles, videos, research papers related to cesarean section of both international and from national perspectives.Those were finally selected after the review from my supervisor.Thus I used to collect those.

- **Write-ups of Real Life Case Studies:**

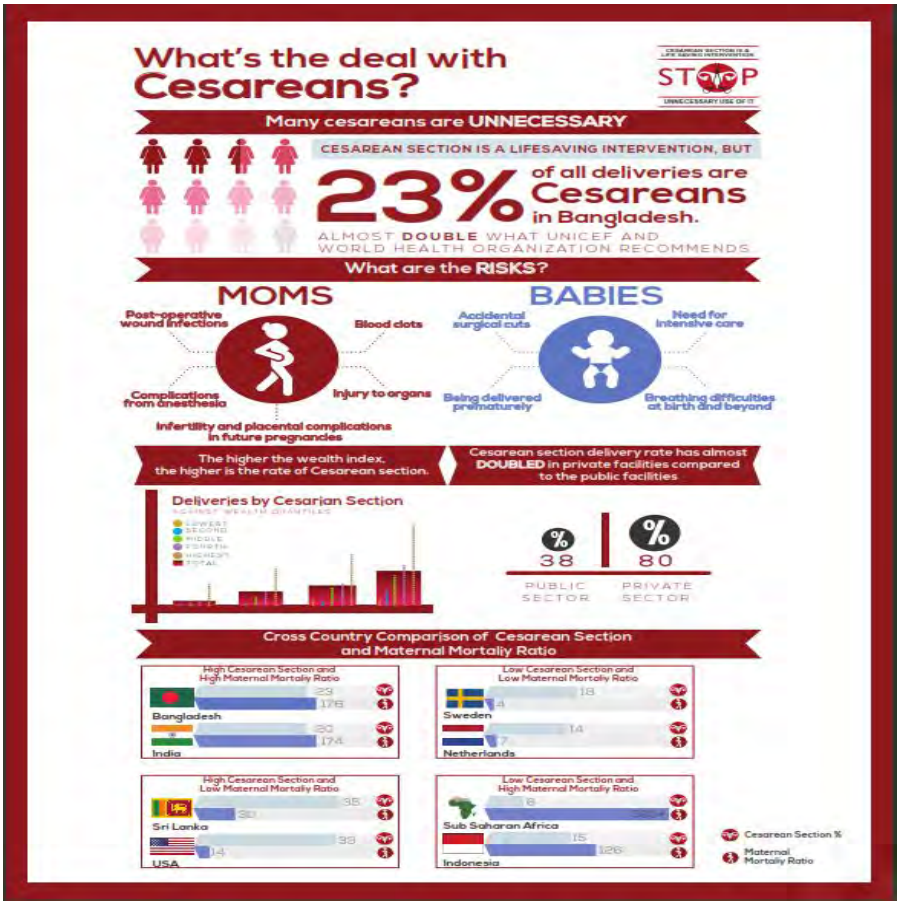
Case studies were an important resource for promoting both the positive and negative sides of Cesarean Delivery through real life stories. In the website, there are almost 17 case studies with varieties and written in both Bengali and English version. Firstly, I translated some of the video cases of Sylhet district followed by creating storyline. I did listen to those interviews and wrote accordingly with much clear information. Besides, I started to write some real life cases from the people who were willing to share their pregnancy stories. It was the policy to keep the subject's name and picture anonymous for privacy concern. Later on, I interviewed some of them face to face and others over the phone. Some stories were also derived from the internet by making some modifications. I had to concentrate more on this segment and made plenty of case studies in both the languages.

- **Preparation of the Analytics Presentation:**

The reviewing and monitoring team members of this campaign wanted a formal presentation on how the social media activities reached to people so far. On that note, we prepared a PowerPoint presentation with the data, screenshots of Facebook analytics and then presented that to the campaign coordinator.

- **Assisted to Prepare Fact Sheet:**

Before our Stakeholders consultation, we prepared a Fact sheet which mainly prepared with the overall situation of C Section. At first I created the draft by researching the global journals and published statistical reports followed by the outline and thus it went for final changes.



Fact Sheet

- **Preparation of the Charter of Demand:**

Some of the department heads and those who were working behind this campaign had suggested and raised some points for the Government and public awareness for the proper implementation and reinforcement and to stand against unnecessary C sections. By those suggestions, Iprepared the Charter of Demand list and it was provided after further reviews.

- **Preparation of the Program Schedule:**

I also prepared the program schedule for finalizing the time schedule throughout the event day and also sending those towards the participants.

- **Participants/ Stakeholders List for the Campaign Launch**:

The suggested stakeholders from national and International NGOs, Health Sector, OGSBs or Gynecologists, Celebrities, Female Centric Organizations and some of the renowned print and TV media were invited to join the campaign launch on July 30th at DGHS, Mohakhali. I personally did contact with them through phone calls, text messages and via Email in weekly basis to confirm their participation in the event. Among 146 invited guests, about 120 people confirmed their participation.

- **Documentation:**

The post event documentation part was included with preparing the Final Attendees list and kept their email addresses separately, further checking every pros and cons of our promotional tools and thus find out any necessary changes that needs to be done. Therefore, I prepared a To Do list for the website developer agency to make some necessary changes as the website has now become more reachable to the audiences.It was also very important to keep records for future need. In order to do that, I kept a separate file particularly in my computer for keeping all the resource related to our campaign pre and post work which will work as a vault.

Major ChallengesRegarding this Campaign:

After completing the internship at Save the Children International and observing all the core activities of the Stop UnCS Campaign. Undoubtedly, it was a wonderful practical experience for me. I enjoyed the friendly work environment. But as an intern for this specific project, I have observed some critical facts that can be considered as challenges. Those are:

I. The problems regarding the Campaign of Unnecessary Cesarean Section have some major observations to consider. Major shortage of Midwives are one of the biggest challenges now-a-days. They can ensure a natural childbirth as well as helps to set off the increasing rate of cesarean deliveriesby minimizing the burden faced by

busy doctors. Also, the action to promote Normal delivery, fear among newly pregnant women, lack of awareness programs and training programs are some great pitfalls.

II. As this campaign is very new among people, therefore it will take time to get established before implementing properly.

III. As my supervisor and others had other segmented scheduled tasks for completion therefore they could not pay much contribution while preparing necessary files. So there was lot more work pressure on the individual employee which increases the number of faults. Though working in this specific task required a lot more attention than it was actually given.

IV. Training program is very important to increase the employee's knowledge and capability, but the office actually did not arrange as much training as the new interns required.

Chapter 3

“Digital Marketing for Campaign Awareness”

Description of the Project

Digital Marketing is the simpler form of promoting services by means of digital technologies. Those includes; social media marketing, content marketing, website operations, campaign marketing, email marketing, promotions through phone calls &text messages and so on. It mainly uses the Internet as a primary promotional medium and thus select the mediums to run the operations properly.

Today’s research process suggests that social media is becoming a powerful tool in the health sector’s promotions. Even, most of the international and some of the national public health organizations are using a great deal of social media communications but still it’s in the early stage of development. The campaign of “**Stop Unnecessary Cesarean Section**” is no different from that. Researchers tried to reach more people in every sector so that this issue can create a buzz. This collaborated campaign has focused on documenting the pregnancy health-relatedcontents, the pros and cons of having a normal or cesarean delivery and thus promote those by means of social media, website, email, contents and so on. It is also observed that, people are now more interested to find the health related issues by searching on the internet for which health sector is now paying more attention to communicate and promote the issues first with each possible solution directly via social media platforms like- Facebook page, YouTube channel, Twitter id,Email promotions or with Instagram account.

Social media is currently replacing traditional media and it has becomea new way of collaborating content with target audiences.The impact of the digital marketing tools to promote and create people’s awareness have become much more easier and through these

mediums, people's response, engagement and reactions can easily be monitored and thus make further research. The adoptionof digital promotional activitiesby leadingpublic health organizationsreflect a widespread sense that these tools are increasingly necessary to reach demographics and to change the traditional manners.

In Canada, Social media campaign provides a great opportunity to embed publichealth onlineconversations.**("Social Media Toolkit for Public Health", 2014)**.

This sector should also concentrate more on to allow publichealthcommunicatorsto monitor and observe responses and reactionsthrough digital mediums which will help spreading day-to-day relative conversations.

Objectives:

Through thiscampaign project, I did an extensive analysis on INGO sector's digital working process; most importantly how a health related campaign can use digital mediums for awareness creation. Besides, I have learnt how to operate and measure the effectiveness of this type of activities through analyzing and monitoring everyone's approach and also to apply my theoretical knowledge into thispractical life. The internship program is required to prepare a written record of my internship activities explaining in what areas I have focused on and what topics I have chosen to complete the report at Save the Children in Bangladesh.

- ✓ The main objective of doing this project report on this topic is to describe my job responsibilities and knowledge that I have gathered from international NGO's campaign.
- ✓ Investigation about digital marketing activities and content management of "Stop Unnecessary C Section" Campaign.
- ✓ Identify and describe existing social media models in public health sectors and their campaigns.
- ✓ Determine challenges and advantages to implementing social media for health related campaign.
- ✓ Evaluation based on current statistics and responses.

- ✓ Plan the promotional post types accordingly with the team's decision and feedback.
- ✓ Manage the official website by working in the back panel for updating the website contents when needed.
- ✓ Manage the social media channels and keep those most updated with up to date resource contents.
- ✓ Research about related topics and store those for further uses.
- ✓ Find further loopholes faced for conducting the procedure.

Methodology

The campaign of Save the Children followed both the Primary and Secondary methods for collect, analyze and interpret data. This report was prepared based on the information of both this data sources:

Primary Data:

Most of the required data were directly collected from my office staffs, Stop UnCS Campaign Coordinator, my Supervisor and from other colleagues. The direct interaction, weekly meeting on the campaign progressand observing the whole process were the primary data sources and these were obtained through practical involvement with my job responsibilities.

Secondary Data:

Secondary data were also used while doing this project. These are the quickest source of collecting the necessary information regarding both my campaign and project work. In this report, the information collected from indirect source are considered as secondary data sources. Information derived from internet such as articles, journals, websites and relevant sites are considered as the secondary data sources.

Exploratory Research Method:

There are 3 types of research method. Among those methods, exploratory research has been used in this project to exploreresearch questions and further studies.This method doesn't accurately look for exact and definite solutions to the required study. The flexibility and adaptability method and having a less structured formatmakes it easier while workingin the research process. This method is best used for defining project/campaignobjectives when those are new and trouble to pinpoint the research direction, areas for concentrationetc.

IMC Model as Social Media Communication:

Integrated Marketing Communication (IMC) is a concept that ensures brand communications in various forms to integrate promotional tools. Social Media is one of the components of this Brand communication through which specific message can reach to the target audience in a way so that it can influence their behavior towards availing any product or service. Here, this initiative is in the surface level and this campaign needs to establish more to gain much awareness.

Among the 4 types of response stage, Hierarchy of effects model works best in this kind of awareness campaign promotions.

Hierarchy of Effects Model

Firstly, the significant objective of this whole campaign is to create awareness by designing an effecting message which convicts “Cesarean section is a life-saving intervention, stop unnecessary use of it” which will give the knowledge about this alarming problem through various research and analysis followed by the mass population’s feelings about this current condition. They will get the proper idea about what are the adverse effect of an unnecessary C section through the digital mediums of communication and later they will make their decision to stand for this campaign by avoiding unnecessary c sections and availing normal delivery process.

Research Questions:

Some questions were considered at first stage before approaching to the “Stop Unnecessary C Section’s” campaign launch and later the whole team went through the proper implementations of the campaign promotion ideas. The questions that were brainstormed and later reached to proper approaches are mentioned as follows:

1. What things should the campaign focusing first?
2. Can social media promotions really help the campaign?
3. Does the campaign really need a blog for social media promotions?
4. Is YouTube important for promotion?
5. What type of social media content convince people best?
6. How much time should social media activities take each week?
7. What types of content would be more eye-catching for the target audience?
8. What are some general tips for social media success?
9. How should this campaign grow its subscriber/followers list?
10. Is there any importance to send Email newslettermonthly?
11. How to increase website click-through rate?
12. What are the steps to develop a content marketing strategy?
13. How often should the admin post fresh content on the sites?
14. What type of content should share more often on social media?
15. How to make the contents engaging?

16. How tomake people interested to read the campaign's contents?
17. How to measure the success of designed content efforts and the overall digital marketing efforts?
18. What are the requirements of boosting post and how to do it?
19. How to reach to specific audiences?

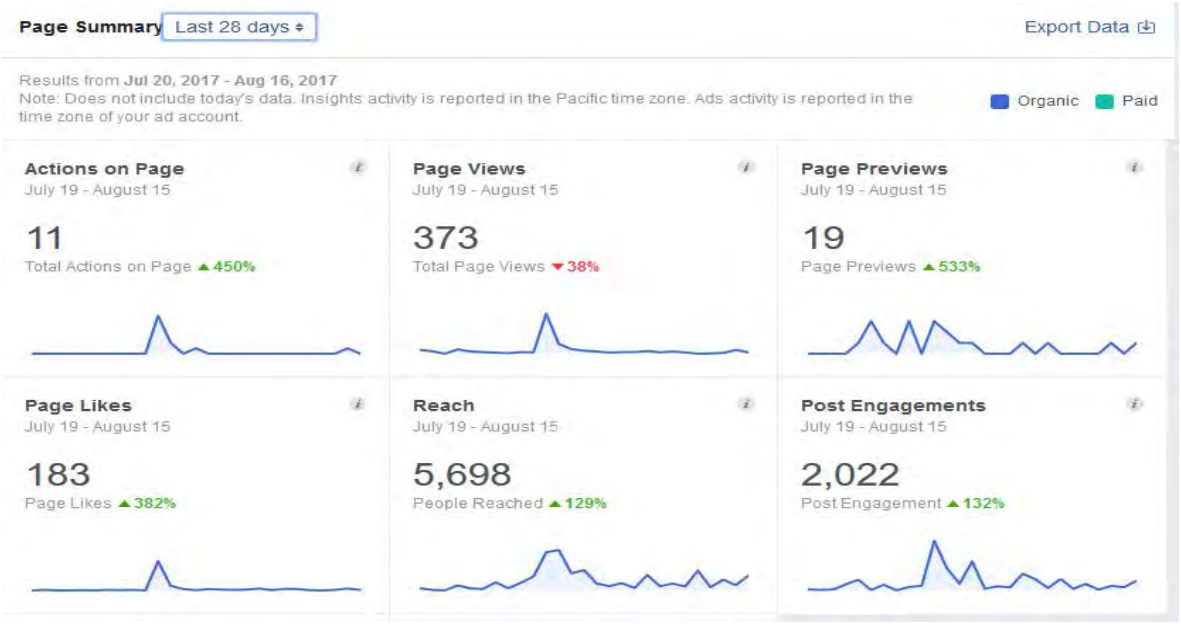
Digital Media Analytics:

Analytics are an important tool to measure the effectiveness of a digital campaign. Up until now,brands had not paid much attention to the analytics of well-designed campaigns; however, in recent times it has started to become an important factor as it allows companies to realize to what extent their campaigns are successful. From using Google analytics, Facebook analytics to using 19 popular websites such as socialbaker.com have allowed the companies to finally measure theeffectiveness of their digital campaigns.

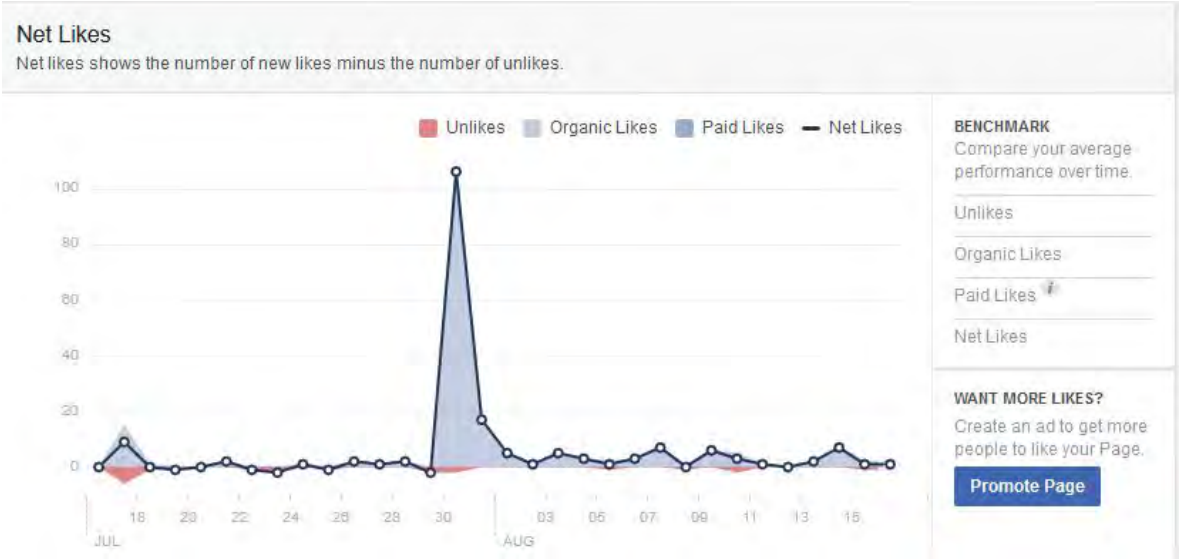
1. Facebook Analytics:

All these analytics highlighted below have been collected from our official Facebook page.

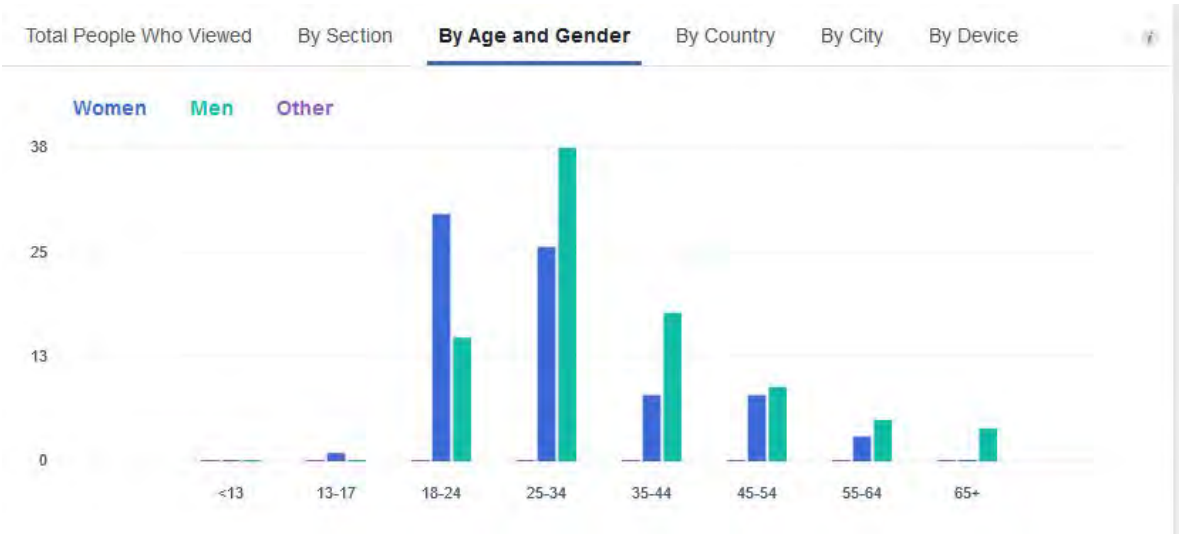
This following picture is the overall analytics from July 20th to August 16th. Pages like this always shows the last 28 days analytics. From this, we can see that almost every segment has gone in an increasing amount of percentage.



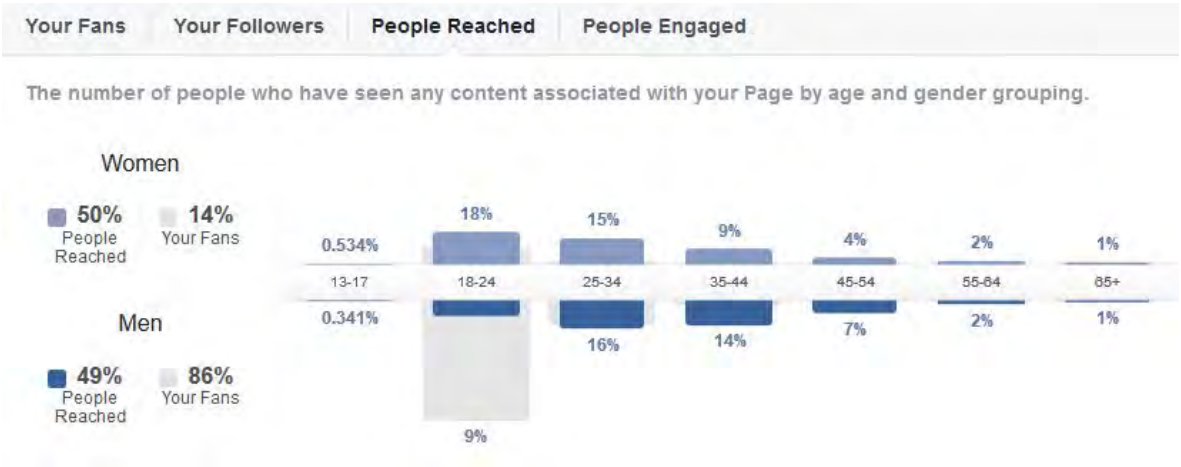
As up till now, the total likes of Stop UnCS page are around 5,000. However, we can see from the following picture that, the net amount of likes was quite high in the beginning of May and then the number of likes have increased in higher number after the official campaign launch on July 30th.



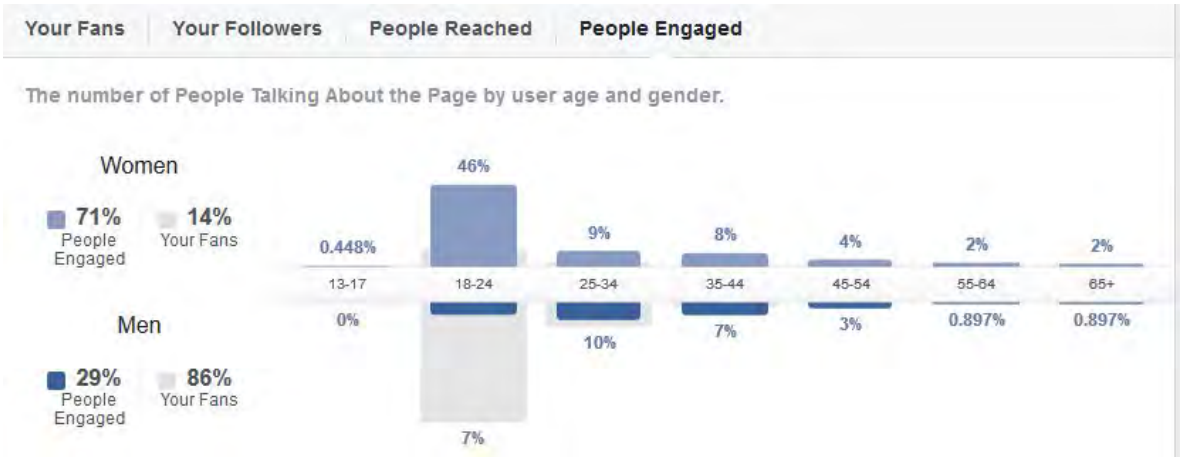
Analytics states that, women around (18-24) age group and men around (25-34) age group are mostly following our page activities.



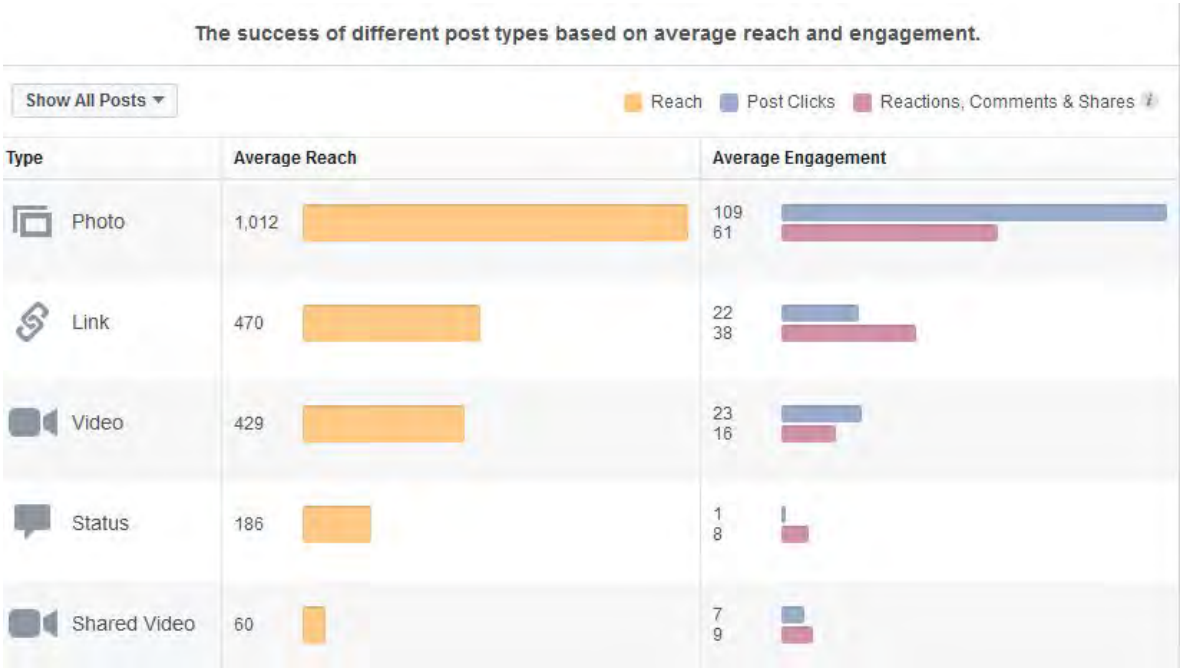
The following picture describes in what percentage our Facebook posts were Reached to people. Here, post reached to 50% of women and 49% of men. The segments are done in terms of age range. Among those age groups, post reached mostly to (18-24) range.



Besides, the following picture states in what percentage our Facebook posts got engaged by people. Here, 71% of women and 29% of men are actually engaged to our posts. The segments are done in terms of age range. Here, post engagements are mostly seen among (18-24) range. This means that, more young women are having interesting and also seems concern about their own reproductive health.

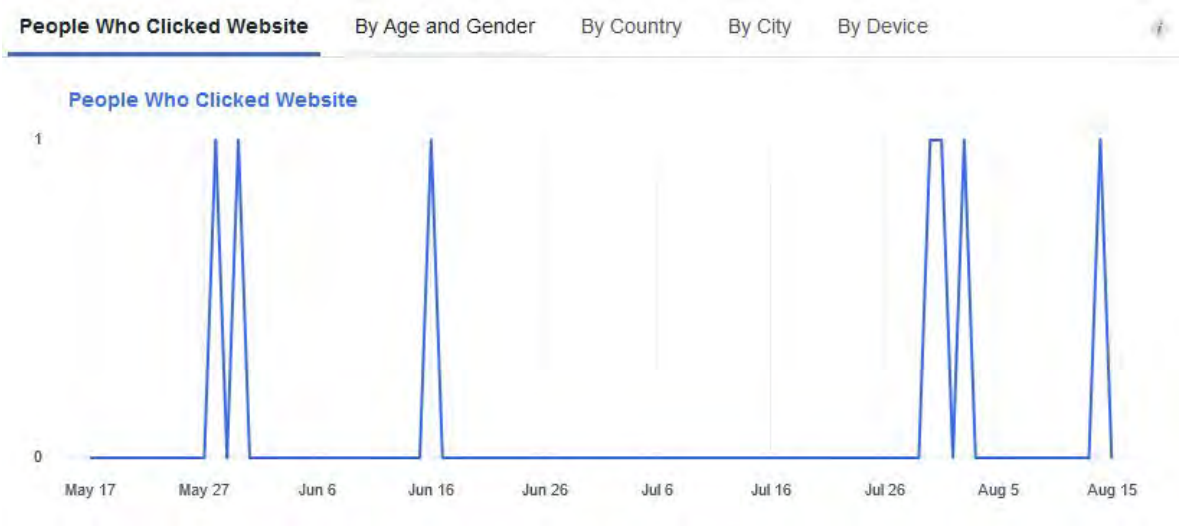


Photos are mostly reached and people get more engaged in this type of post more than other types. Followed by the links, videos, status updates and shared videos.



2. Website Analytics:

The number of people who clicked our official website link directly from the Facebook official page's "About" section is highlighted below:

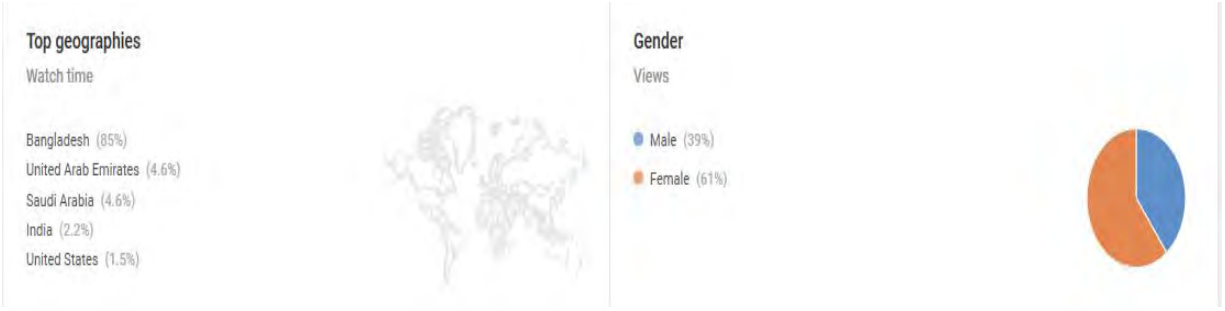


3. YouTube Channel Analytics:

The number of Female viewers are higher (61%) than that of Male viewers. Besides, we have around 7 uploaded videos in our YouTube channel and the analytics are as follows:

Top 10 Videos Browse all content

Video	Watch time (minutes)	Views	Likes	Comments
Current Scenario of C Section Delivery in B...	89 48%	117 58%	0	0
Investigation on C Section Bangladesh || In...	37 20%	6 3.0%	0	0
Cesarean Delivery in Bangladesh Part 3	20 11%	15 7.5%	1	1
Cesarean Delivery in Bangladesh Part 2	13 7.3%	12 6.0%	0	0
Cesarean Delivery in Bangladesh Part 1	11 6.1%	15 7.5%	0	0
Increasing C section Delivery in Banglades...	10 5.5%	34 17%	1	0
Rise of Cesarean section in Bangladesh || R...	3 1.9%	2 1.0%	0	0



Comparison among the 3 mediums of Communication:

Up-to this stage of promotions and engagements, Facebook page has gained the most views and responses other than the YouTube channel, Website & Twitter. The number of people do comment and inbox for queries in Facebook and a number of people is also engaged with Stop UnCS Team by providing related information through the message option. Responding and engaging people through answering questions, showing support by reacting on their comments and also dealing with negative comments are some ways through which people usually get more engaged in to social media communication rather than other sources.

Limitations

For preparing this report some difficulties have been faced. These difficulties can be considered as limitations. The limitations are as following:

- **Time Constraints:**As I have finished my internship on 17th August, 2017 therefore, I got less time to prepare this report and hence I could not elaborate many aspectsproperly in this report. During those 3 months, I was mostly busy with writing & develop contents, continuously reviewing those, took interviews and many more. After doing fulltime office, it was tough for me to do the report within those 3 months properly.
- **Unavailability of Supervisor:**My supervisor was almost unavailable out of Dhaka city for official purpose as NGO requires fieldwork. Therefore, it was difficult to collect information from her on required time.

- **Lack of Evidence:** Some of the researches were done based on hypothesis and therefore I faced difficulty in implementing social media campaigns supporting a positive impact on changes of people's behavior.
- **Confidential News & Data:**Sometimes the authority provided restriction to use some confidential organizational data. So thatis another barrier that I had been faced while preparing the report.

Findings and Observation

After observing Save the Children's working environment & Campaignprocedure, I can say that they are mostly organized and precise while analyzing and thus to review and verify every project work after every single phase. Apart from these things, there also some factors which can create problemsin the long term of doing any project related work.

- Improve the promotecampaign messages and social media activities is the first thing to keep in concern. Because through this medium, this awareness campaign is mainly trying to reach to people and communicate with them by sending the effectiveness and positivity of the campaign message. Therefore, the campaign can simultaneously focus on the public mind and knowledge about health issues and their awareness about the adverse effect of C section; alsoengaging the public in health relatedconversation is very much necessary; and lastly improve the loyalty and maintain the trustamong general people, organizations and various sectors about this campaign is another important factor to focus on.
- They constantly look for any significant changes required for the website and Facebook page. The weekly meetings that we had while working at the office were so effective for discussing these things.
- More Bangladeshi research is required to articulate the impact of social media on C Section issue for creating much awareness and ensure the healthy mother and child in every house.
- It is a long term process to go to such a position through these promotional activities digitally. Therefore, a well coordination and collaboration should be maintained with other NGOs and public health organizations at all levels through the published mediums so that

our Government will put more emphasize to make the campaign a success by joining hands together.

- Most of the print media, online news portal and TV news channels have covered many reports on this alarming rise of Cesarean deliveries in Bangladesh. However, on the campaign launch event, most of the public health organizations, female centric organizations, Gynecologists and many more reputed people have put their consent to make this movement a success by creating awareness starting from their families to all around.

Recommendations

- **Increase emphasis on Double cross checking:** The contents that we have prepared should also need double cross checking. But the respective people who are mainly involved with this project work rarely do this double cross checking. The campaign itself is for a serious and sensitive issue thereforethe accuracy should be maintained and verified by professional mother and childcare specialist.
- **Monitoring Data in Social Media Sites:** Platforms like Facebook, YouTube, Twitter requires daily monitoring and responsesby allocating sufficient time for ongoinginteractions and update where requires.
- **Design campaign activities for long term:**Materials from social media campaign can “live forever” online and the activities can be relocated again to keep the digital mediums ongoing.
- **Promote Clinical Standard & Definite Protocols for C Sections on Website and Social Media:** Most of the Stakeholders suggested to ensure Clinical standard and to maintain definite protocol for indication of C section These research should be done thoroughly and must be updated in the definite website and Facebook page.
- **Emphasize on Twitter for having Global Followers:** Though “Stop UnCS” has an official Twitter account but the reach towards people is in very lower level. Emphasize on weekly tweets can attract more global concerns.
- **Use of Software Tools:**They can also have specific software like customerrelationship management (CRM). It helps to measure the effectiveness of integrated communications.

- **Increase Training:** Training programs should be arranged frequently especially on content creation, website and data management to increase accuracy and to keep up to date about the new policies and procedure.
- **Know your Target Audiences:** Women are tend to posts more on social media everyday about various topics. By analyzing their age, online presence and what type of posts they are following should be monitored now and then.
- **Suggestions from Top Level Specialistsfor Content Creation:** The contents should design in more precise way by taking the suggestions from the top level public health specialists to stop the rising rate of unnecessary C-sections or to promote Normal delivery and its effectivity.
- **Decentralize the Campaign activities with Collaboration:**It is important to consider the motto of this campaign and thus decentralize the website and social media to other affiliated organizations who are interested to work with it. In this way, the campaign won't be confined in for specific group. To gain the global interest can also be a solution.
- **Partnership with OGSB & Telecom Industries:**A group of Gynecologist (OGSB) and partnership with telecom industry would be a great plan to run this campaign successfully. Including the authorized doctors contact number in the website will prove the authenticity of the whole program.
- **Hotline number activation and availability:** The main hotline number of Stop UnCS website is still inactive. The availability of appointed doctor should confirm as soon as possible so that people take this matter seriously and get connected to this movement by frequently asking questions by visiting the website**.**

Conclusion:

The effectiveness of Digital Marketing is Bangladesh has increased a lot than previous years. The campaign "Stop Unnecessary C -Section" is no different from that. This campaign has started its journey with the help of digital promotions including the necessary contents that specializes in promotions and creating awareness. In this report I mainly

discussed the impact of digital marketing in awareness creation by providing figures and information and also some of the recent trend of digital promotions.

To conclude, in today's civilized modern generation of awareness and innovation, the drastic changes in the way people watch contents and get connected are for the impact of Digital Marketing which has replaced the traditional promotional form. Now, it has become the new way of observing all the activities as content from a specific site that includespublished news, videos and so on.

Bibliography

1. Save the Children in Bangladesh (INGO). (2017). Retrieved fromhttps://bangladesh.savethechildren.net/

2. Save the Children USA, (INGO). (2017). Retrievedfromwww.savethechildren.net

3. *Resource Centre*, Save the Children in Bangladesh (INGO).(2017). Retrievedfromhttps://bangladesh.savethechildren.net/resource-centre

4. *Stop Unnecessary C- Section*. (2017). Retrieved from http://www.stopuncs.org/En/Home/

5. Direct interview of Campaign Heads, Supervisor and Campaign related officers of Save the Children Bangladesh.

6. FL Report. (2017, August 15). *70pc of caesarean births in Bangladesh 'unnecessary'*. The Financial Express. Retrieved from http://www.thefinancialexpress-bd.com/2017/08/15/79842/70pc-of-caesarean-births-in-Bangladesh-%27unnecessary%27/print

7. Senior Correspondent. (2017, July 30). *New campaign to stop 'unnecessary' C-section launched in Bangladesh.* bdnews24.com. Retrieved from http://bdnews24.com/health/2017/07/30/new-campaign-to-stop-unnecessary-c-section-launched-in-bangladesh

8. Arifeen.Al.Shams.(1997).*Annual Report* i*cddr,b: centre for health and population research*. USAID. Retrieved from http://pdf.usaid.gov/pdf_docs/pnace369.pdf

9. Zen. Marketing. (2016, November 18). *60 Most Commonly Asked Questions About Digital Marketing – Answered.* Retrieved fromhttp://marketingzen.com/60-common-questions-digital-marketing-answered/

10. Statistics Canada. Characteristics of Users using the Internet. (2010 Aug 13). Statistics Canada, Retrieved from:http://www40.statcan.gc.ca/l01/cst01/comm35a-eng.htm.

11. Leger Marketing Inc. Social media reality check. 2009 [cited 2010 Aug 13]. Available from: http://www.newswire.ca/socialmediarealitycheck/

12. Thackery R, Neiger B. (2009). A Multidirectional communication model: Implications for social marketing practice. Health Promotion Practice; 10: 171 5.

13. Bennet G, Glasgow R. (2009). The Delivery of Public Health Interventions via the Internet:Actualizing Their Potential. Annu. Rev. Public Health; 30:273–92.

14. Khanna M. Icyou. (2008). How social media is the new resource for online health information.Medscape J Med; 10(5): 113.

Appendix

Sample Interview for Case Study regarding C Section:

Interviewer: Armina Khandoker

Interviewee: Mrs. Kulsum Akter

Date: 23rd July, 2017

Duration: 35 minutes

I: **Greetings. Hope you are doing well. Tell me something about you and your family.**

R: *Greetings. I am Most. Kulsum Akter. Now I live in a remote village of Sylhet. Near to our village there is border of India. But I have been living here for last 2 years since I have got married. My husband's name is Nuru Mia* (smile).

I: **What does Nuru Mia do? Who else are there in your family?**

R: *He is a day laborer. Other than we two there is my daughter and my mother-in-law. My father-in-law passed away long before my marriage.*

I: **Ok. As I told before I am here to hear the story of your daughter's birth. Would you like to tell that?**

R: *Yes… What can I say? That is a long story. There was lot of problems.*

I: **Can you start from the beginning?**

R: *Yes. Six months after my marriage I felt some changes inside of my body. I felt like vomiting and not eating anything. After around 6-7 days I consulted with my mother and my mother said that I am pregnant. I asked how she can tell that. She was laughing*

and said she is almost sure. Then I informed my husband about it in the evening. He was also very happy. Next morning I told my mother-in-law. All the family members were so happy with the news. Senior female relatives advised me just to follow what they say. They also said that from then I need to have better diet, do my regular household chores and inshaAllah if Allah wants the baby will be delivered healthy.

I: **Were you staying home in the whole pregnancy period?**

R: *Yes. I was doing well. So I was staying at home. In our village all pregnant females do that.*

I: **Didn't anyone tell you for any checkup in that period?**

R: *No I didn't have any problem. Babies are delivered at home. There are dai in our village. They are very expert and do that well. The nearest hospital is far away from our village and the village doctor is a male. So I don't prefer to go there and we are poor, so doctor-medical all these need lots of money.*

I: **Ok then?**

R: *Actually I was doing well. But just at the ninth month of her pregnancy I suddenly started to feel less movement of the baby inside my womb. I became anxious, talked to my husband and mother. After talking with some neighbors my husband decided to take me to the health center. But to reach the nearest facility it needs almost 8-12 hours and that also depends on the availability of transport. So we were very anxious and started our journey. After a long tiresome journey my husband and I reached to the union center.*

I: **What happened after reaching there?**

R: *When we met the doctor to be honest she examined me in a hurry and told that there is some water inside my belly that every mother has. And as far I remember she said probably the water has been decreased. So I might need operation for delivering the baby. Again I was referred to big medical immediately. We are not that educated. What*

could we say then? We felt so helpless. But as it was our first child they did not want to take any risk. Then again we started for that medical.

I: **How long it took to reach there and what happened after reaching?**

R: *I was so sick and sad. I don't remember the exact time. But in total probably after 10-12 hours we reached there. After reaching there in a blink of eye I was taken to the operation theatre and underwent cesar. By the grace of almighty Allah I delivered my baby girl. My husband was running in and out to buy medicines and all the necessary things. But in the meantime, we were running out of all the money that my husband brought from home. Still almost all the hospital bills and some medicine bills were due. So he requested for help to some of our relatives to borrow money. Apa, we are poor. It is not easy to arrange money. It took 2 days to manage the money and after paying all the bills I was released and went back home after 5 days.*

I: **So how are you and your family doing now?**

R: *My daughter is seven months old now and doing well. We named her Shimu. I am also ok physically. But due to that unnoticed leave during my child birth, my husband lost his job. As we have financial crisis, so all our relatives feel that we won't pay their money back. They have started to ask for returning their money… (Deep expiration). We are still struggling to overcome that financial problem. But nobody understands that.*

I: **What else you want to say?**

R: *What can I say? I am not that educated. But now the senior members of the family say that my daughter could be delivered at home easily. We just wasted the money. My husband and I don't know what is right or wrong. But the good thing is my husband is satisfied that our baby is safe and healthy. He still hopes that one day he will earn better and will be able to overcome this financial problem. My husband says to me that "See Shimu's mother, life has become so difficult for me. Still we are carrying the*

burden. But I believe if the almighty wants good days will come and I will be able to return all the loans definitely". I am also living with that hope. Please pray for us.

Questionnaire regarding the use of Social Media:

1. What is your gender?

a) Male b) Female c) Others

2. What is your age?

a) 20-25 b) 30-35 c) 35-45

3. Do you work from 9-5 throughout the day?

a) Yes b) No c) Others

4. Are you active on social media?

a) Yes b) No c) I rarely use social media

5. How often do you use the internet?

a) Whenever I have leisure time b) Almost every time c) Occasionally d) Not at all

7) What type of mediums do you prefer most while you want to have detailed information?

a) Website b) Official FB Page c) Twitter d) others

8) Are you interested in awareness related campaigns and promotions?

a) Definitely b) Partially yes c) Not at all

9) How much are you responsive to giving like, share or comment on awareness campaign posts?

a) Rarely b) I often do thesec) Not Interested