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Planning for Community Crisis: A Marketing Approach

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The article is based on an examination of a nominal group procedure of two welfare agencies located on the confrontation line between Lebanon and Israel, which implemented a marketing approach in planning intervention for the population for times of community crisis. The agencies are located at a place that was attacked and suffered personal and property loss particularly by short range missiles.

In the nominal group procedure, five elements of the marketing approach (target market, service mix, place and distribution, price, and promotion) were implemented, for four phases of community crisis (warning, shock, organizing, and changing). The results show that the implementation of the marketing approach demands different marketing patterns for each phase of the community crisis. These patterns, based on previous experience of the agencies, are described and discussed.

Events and situations defined as community crisis, particularly in situations of real threat to life, require intensive efforts and unique responses by individuals, groups, and organizations usually at short notice, to cope with the new situation (Granot, 1994). Frequently, however, people respond passively or over-reactively, ways that are unsuitable and ineffective for managing the crisis (Mery, 1990). Most literature on this theme indicates that the critical elements and phases of crisis can be predicted in advance, so early planning and preparations may be helpful to improve the responses of individuals, groups and organizations at such times (Dash, 1997; Lang & Lang, 1976). The study reported here examined the potential of the marketing approach as containing key elements suitable as a planning and managing tool of welfare agencies for developing and supplying services to the population at times of community crisis.
Marketing is a process of planning and executing a set of activities aimed at facilitating and expanding exchange between the organization and its public. From this general point of view, marketing represents a synthesis of ideas and writings of many individuals. While these authors do not always agree, common elements nevertheless run through their writings. The essential elements of marketing are familiar as the four p's: product mix (or service mix); pricing; place and distribution; and promotion (mass and direct communication). The basis for planning these four elements, according to the marketing approach, is the target market and market segmentation (Dibb et al., 1996; Kotler & Roberto, 1989).

In this context, the marketing approach offers a comprehensive strategic framework to cover many aspects of community crisis, as well as the strengths and weaknesses of the agency. Studies on community crisis suggest the implementation of the marketing elements in planning intervention. For example, they call for identification and better understanding of the needs of the various segments of the target market in times of crisis; adaptation and development of the service mix—ideas, practices, and tangible products—for the target market; to understand and develop more effective vertical and horizontal distribution systems for supplying the service mix; and construction of an optimal mix of direct and indirect communication, and in so doing to better promote the service mix for the populations in need (Dash, 1997; Granot, 1994; Labardi, 1997; Lahad & Ayalon, 1995).

The Marketing Elements

The description of the critical elements in the marketing approach highlights their application to the human services.

*Target Market and Market Segmentation*

To operationalize the notion that the key to achieving organizational goals lies in determining the needs and wants of the target market (Hannagn, 1992), implementation of the marketing approach begins with segmentation. This means that the target market of an organization is divided into subgroups so that each group, or segment, responds relatively differently to the provided service.
By segmenting the target market, the organization can develop specific services tailored to the needs of different segments, thus better satisfying them (Crompton & Lamb, 1986). Many descriptors can be used to segment a heterogeneous population into relatively homogeneous segments. However, three major categories distinguish the needs of the target market more than others: geographic, demographic, and behavioral.

Market segmentation leads to three critical strategies: first, an undifferentiated strategy in which a single service is offered to the entire community, where the assumption is that most of the population will respond similarly to the service; second, a differentiated strategy in which several segments are identified and a range of services are developed, each tailored to a particular segment; and third, a concentrated strategy in which efforts are focused on only one or two segments.

Note also that the customers who benefit directly from the service are not the only target markets of an agency. Lauffer (1994) suggests the term “publics,” as the fifth “p,” to describe stakeholders—individuals, groups, and organizations on which an agency is dependent or with which it is interdependent, such as resource suppliers and volunteers.

The Product/Service Mix

A product, or service in human service organizations, is everything that the target market receives in exchange. The service mix is a composite selection of ideas, social practices, and tangibles that an organization makes available to its target market (Kotler & Roberto, 1989). Ideas may take the form of beliefs (perceptions held about factual matters), attitudes (positive or negative evaluations of people, objects, or events), or values (overall ideas of what is right or wrong). Social practices refer to single acts or the establishment of an altered pattern of behavior. Tangible objects are physical products that may accompany ideas and practices, but do not usually constitute the principal product in human service organizations.

Place and Distribution

Place and distribution divisions are aimed at the provision of information and convenient services to the target market at
a reasonable cost (Dearling et al., 1995). The key decisions an organization makes in this regard are the selection of vertical and horizontal distribution channels. A vertical channel is the route through which a service passes from manufacture to consumption. It may comprise several units that participate in and control the provision of the service, for example, states → counties → cities → neighborhoods → customers. Vertical distribution is generally described according to channel length—short, intermediate or long—depending on the number of units in the channel design.

A horizontal channel refers to a direct or an outreach provision of services. Direct provision of services is when the customer is expected to reach the organization, which, in turn assumes comprehensive responsibility for planning, organizing, and distributing. Outreach provision is when the organization reaches out and assists through personal contacts with those citizens who have difficulties, or are unaware of or unreceptive to the program (Crompton & Lamb, 1986).

An additional decision is the intensity of distribution, namely the degree of market coverage which the producer deems necessary to successfully serve the population. There are three common levels of intensity. The first is intensive distribution, when the organization is asked to represent the service with many units available to the customer. The idea is that the program should be readily accessible to the customer. The second level is selective distribution. Here the organization uses more than one unit, but the customer is expected to travel some distance. Thus, the organization tries to achieve efficiency in market coverage as well as control of the service. The third level is exclusive distribution, when only one unit has the right to provide the service in the target market area. Exclusive distribution allows maximum control and saving of resources (Sheaff, 1991). Finally, distribution also encompasses the question of scheduling—the best time, the duration, and the frequency at which the service will be provided.

**Pricing**

Price is defined as the value placed on what is exchanged between the supplier of a service and the target market (Dibb et al., 1996). The price may be paid by the direct users; however, in human services it is oftentimes paid by other stakeholders.
The process of pricing a service begins with calculating its costs. Costing a facility-based service (with the focus on location and equipment) is usually approached differently from costing peripatetic staff (with the focus on profession, grade, and staff hours) (Kelly & Bebbington, 1993). After calculating the total and unit costs, the agency must choose a method to determine the price—the measure of recovering the cost, by institutions or individuals, outside the department. There are several critical methods: (1) Break-even analysis is undertaken to determine the point at which the agency’s revenues equal its total fixed and variable costs. (Variable costs vary with outcome and disappear the moment that ceases, whereas fixed costs arise no matter how many outcomes are produced.) (2) Variable-cost analysis is a method whereby the cost to be recovered is fixed on the basis of variable costs only. (3) Marginal-cost analysis calculates the revenue sufficient to cover the addition to total cost resulting from the last unit of output. (4) The no-cost approach holds that all the costs (fixed and variable) are covered by the agency itself.

Promotion Mix

Using personal and mass communication, promotion enables the service to inform the target market about the service features, to create awareness of the service, and to establish, reinforce, or change attitudes and behaviors towards the service (Palmer, 1995). The promotion activity, or the “promotion mix,” has four components: (1) Personal selling is a form of communication based on face-to-face contact and characterized by mutual communication, immediate feedback, and use of both verbal and non-verbal communication. (2) Advertising is an activity which is directed to passing messages via the media (TV; radio, newspapers, periodicals, billboards, and direct mailing). The source of the advertising is the agency, not the media, which also bears responsibility for the message. The advertising is directed to a wide and heterogeneous audience, and usually the cost is high. (3) Public relations consists of a set of communication activities such as assemblies, press conferences, exhibitions, and lectures aimed at improving the image of the agency, the service, or the staff. Public relations activities also utilize the media, but by inserting the message of the service into ongoing productions, the
news, or other reports. In this case, the cost and the responsibility for the message are assumed by the media. (4) Sales promotion refers to direct inducements that offer extra value to encourage participation in a given service. Incentives are offered to target markets which are otherwise insufficiently motivated or indifferent to that particular service.

The Life Cycle of Community Crisis and the Rationale of the Study

In their attempts to put some order and meaning into the ambiguous complex of events, actions, feelings, and responses that characterize community crises, researchers have broken down the history of the crisis into sequential phases (American Red Cross, 1993; Dodds & Nuering, 1996; Masson, 1975; Merry, 1990; Omer & Nahaman, 1994; Reznick, 1989). The marketing approach, therefore, cannot be implemented for community crisis as one continuous sequence. The phases of the sequence must be understood and consider. Although the sequence may be represented with different emphases, usually it includes four critical phases: warning, shock, organizing, and changing.

Warning takes place before the concrete danger erupts, namely signs that something may happen. Even though the population gets feedback that danger is ahead, many people tend not to hear, not to see, and not to speak. A common response to warning is disbelief. While some correctly interpret and understand the new situation, it is very common to behave routinely. Disagreement is common within the leadership, which is usually not prepared for the new stage. Economic activity continues as usual, the situation being treated as a temporary change.

Shock (or impact stage) occurs with the eruption of the event itself. Many people may be in a state of anxiety and panic. Individuals and organizations are threatened by the new reality and call for clear directions to act. Although some people react constructively with responsiveness and coping, others withdraw, attempt to escape, and experience a loss of meaning. During this phase, the leadership and management of organizations concentrate their efforts on the disaster, but it is difficult to react efficiently when the system is operating under such uncertain conditions.
Community Crisis

Organizing begins when the "storm" of the attack is either finished or still in progress. With the perception and understanding of the danger, people invest efforts to prevent further deterioration and to get the situation under control. In their attempts to assess what has happened and "to make some sense of it," as a result of the destruction and loss people typically experience feelings of anger, blame, sorrow, grief, mourning, helplessness, and depression. Nevertheless, they try to act together supportively to find solutions. Commonly they seek both external and internal resources, such as experts and leaders, to cope with the mental and material damage.

Changing (rebuilding) takes place after the constant threat of danger and the impact of the experience have passed, even though new dangers may lurk. While certain groups, like those who have lost family members, have to cope with ongoing crisis, people generally become more optimistic, and their sense of safety and meaning is restored. In contrast to the focus in the organizing phase on preventing further deterioration and controlling over the situation, the changing phase is directed towards renewal and creation of a new life course.

Several common characteristics apparently make a difference in the phases of community crisis, such as responses of the population, relationships among members of the community, policies of the leadership, and plans to cope with the conditions. We also see, as was described in the review of the marketing approach, that each element of marketing (target market, service, place and distribution, pricing, and promotion) includes a choice among several categories in the planning process. For example, segmentation of the target market may be identified by geographic, demographic, or behavioral descriptors. Likewise, promotion may be adjusted by a different mix of selling, advertising, public relations, and sales promotion. This study attempts to explore how to manage the best fit of the elements of marketing for times of community crisis. More specifically, the study questions are:

(1) Does the planning of the intervention by welfare agencies for community crisis, in relation to the marketing approach, require one uniform generalized marketing strategy for all the crisis phases, or does it require different marketing strategies for different phases? In other words, are the categories of each marketing
element chosen by the agencies identical or different with regard to the different phases of the community crisis? (2) What is the best-fitting marketing strategy or strategies for intervention at times of community crisis? (3) What is the explanation for this fit?

Method

This study, based on controlled registration of decisions and non-participant observations of nominal groups, investigated a pilot project that implemented the marketing approach in planning intervention by two welfare agencies at times of community crisis. The pilot project was initiated by the management of the welfare administration in the north of Israel, aimed to cope with the personal and social results of attacks of short-range missile and incursions Lebanon to Israel. The criterion for the selection of four agencies for the pilot project (two that were investigated and two others) was the workers' experience with previous attacks and their prior training in crisis intervention. The area of the agencies has sustained missile attacks, some of which resulted in death and injury.

The study included three groups. Two groups consisted of all the workers in two welfare agencies of local councils at the confrontation line in the north of Israel. One of these agencies was in a rural area (18 workers) and one in an urban area (21 workers). On the border, there were nine welfare agencies in the rural area and three in the urban area. The third group included eight supervisors from the welfare administration who work at the regional district level and were assigned by the welfare administration to support the welfare agencies in community crisis intervention.

The majority of the workers (N = 47) were female (38–81%). All of them had academic training in social work education, and the majority had completed courses in crisis intervention (42–89%). Work experience was distributed over a large number of years (1–25), and the majority had experienced at least one prior professional intervention in community crisis (32–68%).

The project included a series of seven meetings, one every two weeks. The first two meetings were dedicated to presentation and discussion of the marketing strategy, emphasizing
implementation by the welfare agency, as well as the model of the four stages of community crisis. Each of the following five meetings was devoted to one of the five elements of the marketing approach (target market and segmentation, service mix, place and distribution, pricing, and promotion) in planning intervention by the welfare agency for times of community crisis. To enrich the discussions, the members of all three groups preferred to be mixed together.

According to nominal group procedure, which encourages active participation of all the members and allows the free raising of ideas (York & Adar, 1988), these five meetings included the following steps: (1) Presentation and explanation of the marketing element. After the categories of the element were discussed, they were written on a board. (2) Individual choices by the workers out of the categories (of the marketing element) according to best fit with the four phases of community crisis. The workers were also asked to write short explanations for their choices. (3) Division into groups (six groups of seven or eight members) and collection of the individual choices and explanations. All choices and explanations were written and displayed on large sheets of paper. (4) A short and focused discussion to support or oppose the choices and explanations of the workers. At the end of the discussion, which was managed by the leaders of the groups, the workers were asked to suggest categories or a mix of categories for each phase of community crisis. (5) Selection of priorities by each group out of the workers’ suggestions. The groups’ decisions were written and displayed on a large sheet of paper. (6) General conclusion, with all participants: (a) The groups’ decisions were displayed on a large sheet of paper. (b) A short and focused discussion was conducted to support or oppose the choices. (c) Decision was made by the workers to select the preferred priority. The number of votes in each marketing category for each phase of crisis was registered. The categories that got the majority of votes were marked.

To describe and analyze the data, the percentage of workers who supported the selected marketing categories for each phase of the community crisis was calculated. The percentage was based on the registration in step 6 of the nominal group procedure. The percentages reflect the results of each category
as one block of priority. The results at step 6, as mentioned, relate to the chosen blocks of priorities that were consolidated previous stages. Almost all the workers took part in the nominal group procedure, probably on account of a specific instruction by the welfare administration that they do so, and the fact that it took place during working hours.

Registration as part of content analysis is often criticized, as it is not specifically relevant to the objectives of the study. In this pilot study, however, registration was intended to supply appropriate information for the purpose of the study. In addition, in order to expand knowledge about the workers' responses, non-participant observation by three observers, who were specially trained for the task, was arranged. The observers were present throughout the project, namely, at all meetings with the participants, and they circulated among the small group discussions. The observers were asked to focus on three aspects: (1) Workers' responses supporting or opposing each category of the marketing element discussed. (2) Workers' responses supporting and opposing to the fitness of each category in planning for times of community crisis; (3) Workers' explanations for their attitudes and choices.

Results

The results refer to the categories of each of the five marketing elements as chosen by the agencies (all participants at step 6 of the nominal group procedure), with regard to the four phases of community crisis. Workers' explanations for their choices are described as well.

Target Market and Market Segmentation—Implementation in Community Crisis

In the discussions of this element in the nominal group, the workers added a descriptor, "groups in danger", as a category of segmentation (as noted above, there are three common descriptors: geographic, demographic, and behavioral). As Table 1 shows in the warning phase the descriptor "groups in danger" was found to be the first priority. The workers explained that before the attack erupts, they have to make preparations for their regular client groups such as the elderly and single parents. However,
### Table 1

**Agencies' Choices in Implementing the Target-Market Element in Planning Their Intervention (N = 43)**

<table>
<thead>
<tr>
<th>Crisis phase: Category</th>
<th>Warning</th>
<th>Shock</th>
<th>Organizing</th>
<th>Changing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Descriptors of Segmentation</td>
<td>1. Groups in danger (88.37%)</td>
<td>1. Geographic (93.02%)</td>
<td>1. Groups in danger (86.05%)</td>
<td>1. Demographic (90.70%)</td>
</tr>
<tr>
<td></td>
<td>2. Geographic (86.05%)</td>
<td>2. Groups in danger (93.02%)</td>
<td>2. Groups in danger (90.70%)</td>
<td></td>
</tr>
<tr>
<td>Strategy of Segmentation</td>
<td>Differentiated (86.05%)</td>
<td>1. Concentrated (86.04%)</td>
<td>1. Differentiated (93.02%)</td>
<td>Differentiated</td>
</tr>
<tr>
<td></td>
<td>2. Differentiated (81.39%)</td>
<td>2. Concentrated (93.02%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Publics</td>
<td>1. Clients (83.72%)</td>
<td>1. Clients (88.37%)</td>
<td>1. Clients (81.40%)</td>
<td>1. Clients (86.05%)</td>
</tr>
<tr>
<td></td>
<td>2. Specialists</td>
<td>2. Volunteers</td>
<td>2. Specialists</td>
<td>2. Sources suppliers</td>
</tr>
<tr>
<td></td>
<td>5. Executives</td>
<td>5. Resources suppliers</td>
<td>5. Political supporters</td>
<td>5. Volunteers</td>
</tr>
</tbody>
</table>
because at crisis times their responsibility is to the whole community (in contrast to routine times), they chose the differentiated strategy (rather than the concentrated one).

When the attack erupts, in the shock phase, they chose the geographic descriptor and the concentrated strategy as the first priority. Now, the workers explained, they have to provide intensive support for the people at the heart of the danger in the attacked areas. A similar rationale guided the workers in the organizing phase, when the geographic descriptor was also given first priority. However, at this phase, they again preferred the differentiation strategy, keeping the concentration strategy only as the second priority. As more time passes following the attack, the workers' responsibility incrementally returns back to the whole community. In the changing phase too they chose the differentiation strategy, but now with the demographic descriptor as the first preference. In this phase, the geographic descriptor loses its importance, and the community becomes more identified with specific functions, particularly in accordance with age groups. In all the phases, the behavioral descriptor and the undifferentiated strategy were not chosen.

Several differences were found with regard to the publics of the agencies. True, the clients received priority in all phases, but the priority of other publics changed according to the phase. The contribution of specialists was found to be more important in the warning and the organizing phases. Although the workers had previous experience, they explained that they needed unique intervention tools for times of crisis. In the shock phase too, specialists received high priority, but expectations of an overloaded need for intervention led first to the recruitment of volunteers. (The workers added that although in this phase the necessity for volunteers is higher than in all the other phases, it is usually easier to recruit all the required volunteers.) The role of resource suppliers and executives became more important in the changing phase, when rebuilding required more material resources and coordination efforts. Political supporters not found to be the primary preference at any phase, but they were more in demand when the workers were free of the direct overloaded intervention in the warning and changing phases. Here, they needed more moral and social support, as the resources
that have to be invested in their interventions may be more questionable.

*Service Mix—Implementation in Community Crisis*

Table 2 shows that in the warning phase, the agencies' first preference was ideas (e.g., expression of feelings and thoughts, easy flow of information, and legitimization of fear). The workers explained that although several practices were unnecessary, many ideas must be absorbed at this phase as preparation for subsequent phases.

In all the subsequent phases—shock, organizing, and changing, practices were found to be the first priority since consequent to workers' intervention the population is expected to take immediate action (e.g., playing, group conversation, management activities). Several workers said that tangibles (e.g., games, crisis equipment) were not the business of welfare agencies; nevertheless, the general view was to relate tangibles to ideas and practices in all the phases.

*Place and Distribution—Implementation in Community Crisis*

Table 3 shows that with regard to the vertical distribution the agencies chose a long channel for the warning and the changing phases (long channel includes all the levels—state, county, city, neighborhood, and client). In these phases, the workers emphasized the necessity involvement by the state and the regional district in policy making, including delineating goals, tasks, and functions for crisis intervention.

**Table 2**

*Agencies' Choices in Implementing the Service-Mix Element in Planning Their Intervention (N = 45)*

<table>
<thead>
<tr>
<th>Crisis phase:</th>
<th>Warning</th>
<th>Shock</th>
<th>Organizing</th>
<th>Changing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ideas</td>
<td>Practices</td>
<td>Ideas</td>
<td>Practices</td>
</tr>
<tr>
<td>Warning</td>
<td></td>
<td>1.</td>
<td>1.</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td>Tangibles</td>
<td>3.</td>
<td>Tangibles</td>
<td>3.</td>
</tr>
<tr>
<td></td>
<td>(88.89%)</td>
<td>(80.00%)</td>
<td>(66.67%)</td>
<td>(91.11%)</td>
</tr>
</tbody>
</table>
The agencies chose a short channel for the shock phase and an intermediate channel for the organizing phase (intermediate channel includes city, neighborhood, and client; short channel includes only neighborhood and client). Such choices reflect motivation to be more efficient in supplying immediate answers to the clients and the need for accessibility and availability in these phases.

These factors were also critical in motivating the agencies in other choices—of horizontal distribution, intensity of distribution and schedule—in the shock and the organizing phases. They chose outreach service (for both phases), intensive service (for the shock phase), selective service (for the organizing phase) and schedule of shifts (for the shock phase), or regular and emergency service (for the organizing phase). The workers called for making the service suitable, expedient, immediate, utilitarian, and easy for the clients, thereby empowering the neighborhood units in particular.

In the warning and the changing phases, the choices were different: direct and exclusive service (for both phases), and regular
and emergency service (for the warning phase) or regular and emergency service (for the changing phase). These choices were influenced by the goal of centralization in order to exchange knowledge, to pool efforts for collaborative planning, and to coordinate more easily with resource suppliers and executives in other units at the local government level and in relevant external systems.

**Pricing—Implementation in Community Crisis**

Table 4 shows that the agencies found the facility-based method for pricing to be suitable in all the phases. All the phases, in different measure, demanded expenditures for the central structure of the organization. The agencies added the peripatetic methods at both the shock and the organizing phases in order to calculate the distribution channels at these phases that demand mobility.

We also see that in the warning phase, variable-cost analysis was chosen as the method to determine the price. Except for several minimal expenditures, the agencies continued to base price on the regular costing, and this method helps to mark the difference between routine costs and the direct expenses for community crisis intervention. Several workers considered using the marginal-cost method, but because this necessitates calculation of

<table>
<thead>
<tr>
<th>Crisis phase:</th>
<th>Warning</th>
<th>Shock</th>
<th>Organizing</th>
<th>Changing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Facility-based</td>
<td>Facility-based</td>
<td>Facility-based</td>
<td>Facility-based</td>
</tr>
<tr>
<td>Costing</td>
<td>Facility-based peripatetic</td>
<td>Facility-based peripatetic</td>
<td>Facility-based peripatetic</td>
<td>Facility-based peripatetic</td>
</tr>
<tr>
<td>Peripatetic</td>
<td>(90.70%)</td>
<td>(76.74%)</td>
<td>(81.41%)</td>
<td>(88.37%)</td>
</tr>
<tr>
<td>Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calculate</td>
<td>Variable-cost</td>
<td>Break-even</td>
<td>Break-even</td>
<td>Break-even</td>
</tr>
<tr>
<td>Recovery of the cost</td>
<td>(69.80%)</td>
<td>(93.02%)</td>
<td>(95.35%)</td>
<td>(93.02%)</td>
</tr>
</tbody>
</table>
the addition to total cost resulting from the last unit of output, they found it too complex. In all the other crisis phases—shock, organizing, and changing, the agencies chose the break-even method. This was found to be suitable and fair in recovering the agency's expenditures. It was also found to be a useful tool in proving the agency's investment in negotiations with external institutions.

Promotion Mix—Implementation in Community Crisis

Table 5 shows that in the warning and the changing phases, advertising was chosen as the principal tool of promotion, and selling was chosen in the shock and the organizing phases. The main reason for these choices was also the linkage to the distribution approach. For a long channel and direct (and central) service in the warning and the changing phases, mass communication was found to be more important. For short or intermediate channels and reaching out in the shock and the organizing phases, direct communication was deemed more efficient.

In the shock and the organizing phases, public relations was preferred over advertising since the media are more available at such times to cover crisis issues. Finally, since the warning phase is characterized by the need to motivate the target market to act, it is the only phase where selling promotion, which includes incentives, was found to be an effective tool.

Discussion and Conclusions

In the last twenty years, the marketing approach has been examined and implemented intensively in human service

Table 5

Agencies' Choices in Implementing the Promotion Element in Planning Their Intervention (N = 44)

<table>
<thead>
<tr>
<th>Crisis Phase:</th>
<th>Warning</th>
<th>Shock</th>
<th>Organizing</th>
<th>Changing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warning</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Advertising</td>
<td>1. Advertising</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Selling</td>
<td>1. Personal selling</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Sales promotion</td>
<td>2. Public relations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Public relations</td>
<td>3. Advertising</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(86.35%)</td>
<td>(93.18%)</td>
<td>(88.64%)</td>
<td>(95.45%)</td>
<td></td>
</tr>
</tbody>
</table>
Community Crisis

organizations (Keye, 1994; Lauffer, 1984). No attention has been paid, however, to the implementation of the marketing approach in planning intervention by human service organizations for times of community crisis. The information presented in this article, based on the experience of welfare agencies in Israel, described and explained how the marketing approach can be implemented in the four common phases of community crisis—warning, shock, organizing, and changing, with adjustment for changing and specific needs of the target market. The marketing approach was shown to offer a way of making the job of the welfare agency in times of community crisis clearer and more legitimate. The marketing approach also was shown as a way to negotiate better with the relevant institutions in order to obtain the necessary resources.

The findings support the general approach on which the study was based. Planning intervention for times of community crisis, with linkage to the five elements of the marketing approach (target market and segmentation, service mix, place and distribution, pricing, and promotion), requires various adjustments for the different phases of the community crisis sequence listed above. As revealed by the experience of the workers in the welfare agencies, the differences can be explained by the varying conditions that characterize each phase of the community crisis. For example, differences in the measure of danger and feelings of people—at different phases—lead to different marketing strategies with regard to the target market, length of distribution, and method of communication.

The findings also indicate that with regard to several categories of the marketing approach, similar adjustments are required for the shock and the organizing phases, and other similar adjustments for the warning and the changing phases. This similarity may be explained by the feeling of immediate danger in the shock and the organizing phases, and the relative distance in the warning and the changing phases. However, even in these phases, as the findings show, several nuances of adjustment are needed.

As noted earlier, although the literature commonly emphasizes the different conditions at different phases of community crisis, several previous studies on planning intervention did not consider the distinct characteristics of each phase of the
community crisis sequence. The findings of this study indicate that failure to respond differentially to each phase may lead to widespread dissatisfaction and lack of fitness of the potential contribution of the welfare agencies to its environment. In some cases, the demands of the various phases may be widely different or even conflict. For example, the demand for distribution in the warning and the changing phases is exclusive, and in the shock and the organizing phases it is intensive. For planning to be effective, it is essential to think in terms of differences rather than similarities, and to make distinctions rather than standardize.

In this context, two possible mistakes may be made. The first is the attempt to gear the entire marketing strategy to the needs of one phase (such as the current phase or whatever is considered to be the important phase), at the price of ignoring the other phases. The second is the attempt to choose a marketing strategy that assumes a common denominator among all the phases. In fact, phases may have very little in common and the strategy may not suit to any of them. The cardinal reason for the interest in a distinctive approach among welfare agencies is their responsibility to provide comprehensive and effective service in all the phases of a community crisis.

Criticism for this distinctive approach may raise claims of cost. However, it may be more expensive to make the adjustments at the time of the crisis, or even impossible, not only because the agency may not find the time to plan, but because in times of crisis the system tends to lose flexibility. By planning a distinctive approach, with a pre-planned marketing mix fitted to each phase of the crisis, agencies can better facilitate proactive responses to specific expected situations of the crisis, and may even be able to influence the specific outcome of the crisis.

Further criticism may concern the possibility of generalizing the model. Therefore, it is important to note the following points: (1) It is not necessary that the crisis will always develop in the same sequence. For example, the community may skip the warning phase and go immediately into the shock phase. (2) The length of the phases may differ from crisis to crisis. Sometimes it is even difficult to know in what phase the crisis is in at a given point in time. (3) The characteristics of the phases may be somewhat different according to different crises and different communities.
Although the workers' explanations for the adjustment of the marketing approach were usually general with regard to the usual phases of community crisis, and conclusions may therefore be extended to other situations, further research with other groups may be warranted to replicate the results in: (1) other areas with expected community crisis; (2) other types of crisis, such as ecological damage, earthquake, or flood; (3) other groups of human service organizations, such as education, health, and mental health agencies; (4) joint intervention of several human service organizations.

References

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