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This is a largely easy to read and access text that covers all the introductory ground of social marketing for someone in public health who needs to know what the subject is about and what it has to offer. The authors comprise the team who founded and worked for the National Social Marketing Centre, set up by the DH in 2005 to respond to the increasing need for a centre of expertise within the department and close to government. They have edited the book and also contributed much of the material themselves, with other chapters provided by recognized experts such as Gerard Hastings and Martine Stead. The book provides a welcome UK contribution and is a blessed relief from the hitherto US-dominated texts. This allows the authors to discuss social marketing in ways that appeal to public health professionals, most notably how the discipline fits within other behaviour change approaches in health, ethical issues, partnerships, sociological influences and many other items.

The text is deliberately introductory/accessible and does not allow itself to be sidetracked by, for example, lengthy debates on defining social marketing or involved discussions of theories (a book in itself). Instead, there are 22 quite short chapters, reducing the scope for in-depth debate admittedly, but allowing for broad scope. This allows interesting short pieces on, for example, policy (Chapter 5) and measuring effectiveness (Chapter 6), the latter pointing out that RCTs—so loved by clinical experts—are far from ideal in unpicking the effectiveness of disciplines like social marketing. Amen to that. Cash strapped trusts might also be attracted by ‘social marketing on a shoestring budget’, Chapter 16.

All in all, this is a welcome contribution from an expert team who has been leading players in the recent UK development of social marketing and who know their stuff.


This text aims to stimulate understanding, promote education and research, and facilitate practical action geared towards reducing the effect of social injustice on health and well-being. Students, lecturers, researchers, health professionals and policy-makers, therefore, may all find it a helpful resource.

The book comprises four parts. In part one, social injustice is defined and its impact upon public health delineated. This is then related to 10 specific population groups (part two) and 10 areas of health and well-being (part three). Part four outlines practical steps to tackle social injustice. Chapters in each section follow a similar structure, which helps the reader navigate this weighty volume.

While much of part one, two and three will be familiar to many readers, the inclusion of groups such as lesbian, gay, bisexual/transsexual and the prison population, help highlight their marginalization both in public health discourse and policy. The diversity of groups and health issues addressed also helps to emphasize the all-pervasive impact of social injustice on health and the intersecting nature of different social determinants of health. This wide-ranging approach, however, means that breadth rather than depth of coverage is prioritized. Further, the discussion is limited by the US focus of many contributions. This is particularly evident in part four, which is otherwise the most stimulating and compelling section as it offers different channels through which tackling social injustice may be approached.

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