

This transcript is of an interview with Carol A. Bryant conducted by John van Willigen, on February 14, 2005, in Lexington, Kentucky. It is for the Society for Applied Anthropology Oral History Project done in partnership with the Louie B. Nunn Center for Oral History, University of Kentucky. Prof. Bryant is Distinguished Professor of Community and Family Health at the University of South Florida and is nationally recognized as an authority in the use of social marketing in public health. A short bio-statement can be found at:

<http://health.usf.edu/publichealth/cfh/cbryant/index.htm>

[Begin Tape 1, Side 1]

VAN WILLIGEN: It's the . . . fourteenth of February, isn't it.

BRYANT: Mm-mm.

VAN WILLIGEN: Two -thousand and five and this is an interview for the Society for Applied Anthropology Oral History project and I'm John van Willigen. I'm interviewing Carol Anne Bryant. So . . . Carol, I'll ask you some questions about how you got in anthropology and things like that then I want to talk about . . . what, what I think is . . . maybe your first big health . . . or social marketing project 'Best Start.' And then, and, and then . . . talk about [speaks away from micro, door closing] . . . talk about where you . . . the relationship between anthropology and the work that you do . . .

BRYANT: Okay.

VAN WILLIGEN: . . . basically.

BRYANT: Sure.

VAN WILLIGEN: So . . . Carol when did, when did you start your training in anthropology? I, I recall that you said something about you were, you were an undergraduate at the University of Kentucky and . . . that, that's sort of where it started.

BRYANT: Right, I came here to study archaeology, originally. It was sort of a classic thing, a book for Christmas on Pompeii, and then qu . . . during high, junior high, my mother took me – she was very involved in a brand new museum of, I guess, Science and Natural History in Miami. She used to run the planetarium as a volunteer and she had me on Saturdays I took an archaeology class and went out into the Everglades and dug up Tequesta Indian ruins and so from that, from sixth grade on I was very interested in archaeology, came here because of the program, got an early acceptance and came in, and Henry Dobyns was my advisor.

VAN WILLIGEN: What was Dobyns like?

BRYANT: Well, he seemed very powerful. I think he was also chair at the time and intimidating . . .

VAN WILLIGEN: Yes.

BRYANT: . . . and my first or second meeting with him, he so . . . somehow came up that I had pledged a sorority, and he said, I really don't think you're material for anthropology, because to work in the field you need a PhD and you're not going to ever get a PhD. And I said, you're right, so I quit, and I looked around and . . .

VAN WILLIGEN: So this is while you were an undergraduate.

BRYANT: Yeah, mm-mm, my freshman year. And I think I took Louise Robbins' physical anthropology course.

VAN WILLIGEN: Huh-huh, after the . . . ev . . . the . . . event.

BRYANT: Or, or that same semester . . .

VAN WILLIGEN: I see.

BRYANT: I was enrolled in that . . .

VAN WILLIGEN: I see.

BRYANT: . . . and loved it! And thought I might even want to be a primatologist, I loved it so much. But after the d . . . but Dobyns convinced me I wa . . . I wasn't, it was, I was wasting my time, and I should do something practical and so, I figured well, what are my sorority sisters doing, education. So I switched to education, and I took my second semester, I took a lot of education courses and I went, I don't care what I become but I will die if I have to take these courses [chuckle].

VAN WILLIGEN: It was . . .

BRYANT: It is so boring.

VAN WILLIGEN: Oh I see.

BRYANT: I ca . . . I don't know what I am going to do later but I love anthropology and I like geology and other things, so I switched back my major and started taking anthro courses and geology which I did love, and that seemed even to harder to purs . . . pursue somehow. In my sophomore year I went on an archaeology dig with, I can't remember her name now, and she treated us, oh my God! She treated us so poorly, and that plus . . .

VAN WILLIGEN: This is a faculty member . . .

BRYANT: Yeah.

VAN WILLIGEN: . . . in the department and was an archaeologist?

BRYANT: Right, I can't rem . . . we went on a dig at Salt Lick, and, oh my goodness, she treated us like we were laborers, we were paid \$1.50 an hour. Almost everybody on the crew quit and I thought, if my dad couldn't support me, and, I wouldn't be able to quit, and so I am going to make myself do this and finish it up, just rather than run home to Daddy, like all the other people I'm with. And so the few of us that lasted, we finished it out and then I went to Mexico from, I went home for a few days, went to Mexico to go to school that summer.

VAN WILLIGEN: Where did you go to school in Mexico?

BRYANT: The University of the Americas. I saw you know, the poverty and became much more liberal and then flew from Mexico City to Rockland, Maine where I was a waitress, and that's when I shifted from a Republican interested in archaeology to a progressive interested in changing the world, and we were treated really poorly there too, and again many people quit, and I organized a strike.

VAN WILLIGEN: Huh-huh, of the waitresses.

BRYANT: Of the waitresses to get a time clock put in. I called the labor board and found that we were supposed to have been paid seventy-five cents an hour plus our tips. We were only getting tips, and asked for it and the management refused, so we organized a strike, they called us communists, threw us out of the property, and just before we could figure out how to scrape our money together and get out there, the patrons found out and brought us back in, and I'll never forget when they put that clock in. So, I came back . . .

VAN WILLIGEN: What was the name of the restaurant?

BRYANT: It was the Samoset Hotel, it has since burned down but it was a very fancy resort that had mostly wealthy professionals from New York and Boston, and most of

them were older and they paid us a dollar a day tip, and even then that wa'n't enough to do anything with.

VAN WILLIGEN: Right.

BRYANT: And they'd been doing that since the 1930s, they didn't realized that times w . . . you know, that maybe they could up it, but anyway. So I came back and now I was a pain in the neck to my sorority sisters because I was a hippie and we couldn't talk politics.

VAN WILLIGEN: Did you dress differently?

BRYANT: Yes I did! I came back with a short skirt, two guitars, hippy beads and, and a bad attitude [chuckle].

VAN WILLIGEN: I see.

BRYANT: And I refused to wear the proper attire to eat in the Kappa dining room and I had to eat in the kitchen with . . .

VAN WILLIGEN: Kappa, Kappa Gamma.

BRYANT: Yeah, I had to eat in the kitchen with the help, and so I decided, I was sitting on the front steps of Lafferty Hall, talking to Ron Rosenstiel.

VAN WILLIGEN: Yes.

BRYANT: And said, I'm gone to have to switch to social work because you know, archaeology is just not relevant for today's world and we've got to really make a difference, and he said look down the hall, see Society for Applied Anthropology? Just switch to applied and he explained what that was to me and I went, well that's what I'll do, that's terrific.

VAN WILLIGEN: Huh-huh, I see.

BRYANT: So, then I switched my advisor to Art Gallaher and started taking applied courses and loved it, and, despite being a Kappa and not having a great grades from high school, I graduated Phi Beta Kappa and thought well, maybe I'll go on to graduate school. I never thought I was smart enough to ever do that but now I was fascinated with what I was learning, and decided to go on and I talked to Art and he said, well you're interested in medical anthropology and in education, you know, maybe you ought to stay here. So I did.

VAN WILLIGEN: Huh-huh, I see. And then so you're . . . you've had a long rel . . . long relationship with Art Gallaher.

BRYANT: Right.

VAN WILLIGEN: I mean you've known – still know him, I mean, still.

BRYANT: Right.

VAN WILLIGEN: He's one of the people that has been interviewed for this and I'm actually trying to interv . . . arrange for someone to interview Dobyns.

BRYANT: Oh great!

VAN WILLIGEN: And so . . .

BRYANT: Ask him what he thinks about sorority girls [laughter]

VAN WILLIGEN: Huh-huh, okay. And so . . . can you recall your first meeting with Art?

BRYANT: No, I can't. I, I recall s . . . I have clear memories of some meetings with him, but not my very first one. I remember he was at the time, head of some center or something that was located over in the quadrangle where ultimately I had my office as a graduate student, on Rose and over there . . .

VAN WILLIGEN: I think it's . . .

BRYANT: . . . forget it's social change or . . .

VAN WILLIGEN: . . . probably the Center for Developmental Change.

BRYANT: That was it! And then he became chair and then went on to be a dean, all while I was studying under him.

VAN WILLIGEN: I see.

BRYANT: And he s . . . he was the chair of my dissertation I, the hardest decision was whether to stay here or leave for my PhD because I had two degrees from here and a person in education had talked to me about going to Harvard to some work up there. And that seemed, you know, kind of exciting to have a Harvard. .

VAN WILLIGEN: Sure.

BRYANT: . . . graduate assistantship. I don't, but I, I looked at what I really wanted to do and again there weren't, back, this was nineteen . . . like seventy . . . four maybe. And given my interest there weren't many places for me to go.

VAN WILLIGEN: Huh-huh, where did y . . . when did your, when did you defend your . . . dissertation? It must have been in seventy-four.

BRYANT: No-no I went, see I graduated from college in seventy, I got my masters degree in seventy-four, I worked in Miami for a year or . . .

VAN WILLIGEN: Oh yes.

BRYANT: . . . two after that . . .

VAN WILLIGEN: Yes.

BRYANT: Than came back and I got my disser . . . I got my PhD in seventy-eight, I think.

VAN WILLIGEN: I see.

BRYANT: I'm pretty sure.

VAN WILLIGEN: Okay.

BRYANT: And then I got the nutrition degree in eighty-five, also from Kentucky, so.

VAN WILLIGEN: I see.

BRYANT: I'm really guilty of the one-place problem.

VAN WILLIGEN: Right. And so . . . what did you do your dissertation on?

BRYANT: On infant feeding . . . in social networks, and the reason was that when I came, when I started studying for my qualifying exams, I looked, I had been in s . . . in – I was – I had been very interested in substance abuse and psycho . . . psychological issues and things like that in the medical arena.

VAN WILLIGEN: Right.

BRYANT: And my work experience suggested that I really didn't like working with psychologists a whole lot. I, I felt like w . . . anthropologist bring to the mix is pretty much what they bring, it just wasn't different enough. And when I was reading for the qualifying exams I ran into Alland's work or Alland? in bio . . . medical issues and went wow!

VAN WILLIGEN: Oh, Alexander.

BRYANT: That's it!

VAN WILLIGEN: Yeah, Alexander Alland.

BRYANT: Right, and I thought, boy, if I knew more about the life sciences, which I love, then I c . . . I be a stronger anthropologist, specially in the medical field, and I didn't want to, I didn't think I could get in med school but I also didn't want to go.

VAN WILLIGEN: Yes.

BRYANT: I don't like sick people and . . .

VAN WILLIGEN: Yeah, yeah.

BRYANT: . . . all that. So I thought, well, nutrition is really interesting, so I'll look at .

. .

VAN WILLIGEN: So the n . . .

BRYANT: . . . infant feeding.

VAN WILLIGEN: Your nu . . . your nut . . . nutrition interest occ . . . developed f . . .  
prior to the dissertation I . . .

BRYANT: Right.

VAN WILLIGEN: I mean I, as . . . you know, it's relevant that I was a member . . .

BRYANT: Yeah.

VAN WILLIGEN: . . . of your committee.

BRYANT: Right.

VAN WILLIGEN: But . . .

BRYANT: Because you'd moved here right about then.

VAN WILLIGEN: Yeah. And so, you know, it might be, it might be useful at the, at  
the time that you were framing your . . . dissertation problem, what were the kind of  
influences that . . .

BRYANT: Well, I, e . . . I have to admit it because I, I see this in the students that I,  
whose work I direct now and I try to suggest they don't do this, but this is what I  
actually did. I'm trying to figure out how to get done.

VAN WILLIGEN: Yes, okay.

BRYANT: You know, I've been here a long time and . . .

VAN WILLIGEN: Sure.

BRYANT: . . . I want to get done.

VAN WILLIGEN: Sure.

BRYANT: And I'm thinking, I know I wanted to get me . . . help me build expertise in  
the bio, in the life sciences in some ways, so nutrition's the door, and I thought well,  
infant feeding seems a lot simpler and more behavioral, so I can get into it quicker than  
something real clinical. So, hence infant feeding decisions.

VAN WILLIGEN: I see.

BRYANT: I'm, I, you know, as a woman without any kids it wasn't like I came into this  
because I had some passion for the topic, it was just, that looks like an area I can master  
in a reasonable period of time without taking biochemistry and all this stuff . . .

VAN WILLIGEN: Right.

BRYANT: . . . that I don't know. And then I needed a theory.

VAN WILLIGEN: Right.

BRYANT: So I had studies of social networks and liked that and Al Wolfe's work had  
been impressive to me and . . .

VAN WILLIGEN: So you had, you were aware of . . . Al Wolfe's work before.

BRYANT: Yeah, mm-mm, right. So it was a lot of fun to then go to USF and work  
with him.

VAN WILLIGEN: Sure.

BRYANT: Yeah. But that was the theory I felt somewhat familiar with so I thought well, those two could go together pretty well. I could look at the role that different network members play . . .

VAN WILLIGEN: Right.

BRYANT: . . . on decisions about infant feeding. And so then I looked at what are all the different major decisions a woman has to make, and breast feeding was one of them.

VAN WILLIGEN: Right.

BRYANT: Whether or not to introduce solids was another and so on. So I kept it behavioral, I didn't get into any of the clinical aspects, particularly in the, in the dissertation.

VAN WILLIGEN: It's one of the . . . it's a . . . a nature of this it's the best way of referring to it but it's sort of a top down . . .

BRYANT: Yes.

VAN WILLIGEN: . . . you know, you kind of picked this topic f . . . as it related to a s . . . a strategy besides whatever appeal that it had.

BRYANT: Right, yeah.

VAN WILLIGEN: Yeah.

BRYANT: So it seemed I could master it, it played to a theory that I knew, I could put the two together . . .

VAN WILLIGEN: Yeah.

BRYANT: . . . and get done in a reasonable period of time.

VAN WILLIGEN: And then . . . you know, 'cause your, your work has been so applied although rooted now in an academic setting, there, there was a, from the very beginning of ignoring the archaeology, I guess. From the very beginning there was kind of an applied social value . . .

BRYANT: Right.

VAN WILLIGEN: . . . component of it, and . . . the, this, and I, I recall that as a graduate student you did a . . . a practicum.

BRYANT: [whispers] Oh no, I had forgotten about that. We had to do a practicum, didn't we.

VAN WILLIGEN: You did a practicum in Miami . . . with Hazel Weidman.

BRYANT: Weidman, right. I'd forgotten all about that, with, on the culture broker.

VAN WILLIGEN: Yes.

BRYANT: Yeah.

VAN WILLIGEN: So . . . how, do you recall how that got set up?

BRYANT: Sure. Well that was one of the jobs I had. I – the first job that I took after my masters degree was to, supposedly to work with heroin addicts and I had l . . . worked for year out at Narco here in Lexington getting ready for that. When I arrived that job turned out not to, to be with heroin addicts and instead with a lot of very crazy people who worked in the office and I decided, after about nine months of getting nowhere that I had to get out of there, for my sanity, literally.

VAN WILLIGEN: Huh-huh, you're talking about the, about Narco now.

BRYANT: No, I'm talking about the job in Miami. So I, I went to Narco, I s . . . I had . . .

VAN WILLIGEN: Oh-oh I see, I see.

BRYANT: . . . studied heroin addicts, I was incarcerated in Narco for a week and did a real interesting analysis of, of their different cons using . . .

VAN WILLIGEN: Right.

BRYANT: . . . cognitive anthropology and so on. But when I got to Miami the job didn't work out. So I quit and Hazel hired me. She w . . . had, she worked down the hall and I interviewed her and talked . . .

VAN WILLIGEN: So you . . .

BRYANT: . . . about some things.

VAN WILLIGEN: . . . you happened to, you happened to know her there.

BRYANT: Yes, I met her there.

VAN WILLIGEN: But was she a, an acquaintance of Art Gallaher's?

BRYANT: Yes, and when I ap . . . when I ap . . . she had a job open and when I applied for it, he wrote a letter – he called her and she said I hire you right away.

VAN WILLIGEN: Oh I see.

BRYANT: So w . . . that's when I realized what networks mean in academia.

VAN WILLIGEN: Right.

BRYANT: I don't even know that he had to write a letter but she said oh! Well Art said, you're, I should hire you so I'm going to.

VAN WILLIGEN: Okay.

BRYANT: And it was for a temporary basis, partly because I was going to go back to get my doctorate after awhile, but I wa . . . I purposely wanted some experience before I went back 'cause I felt like, specially going back to the same institution with many of the same people.

VAN WILLIGEN: Right.

BRYANT: I really need something under my belt. So I was glad to have a second chance, because that first job hadn't taught me much except things that had to do with you know, my own personality, and kinds of people not to work with. But the job with Hazel was as the culture broker between the [University of Miami] Psychiatric Institute and the Puerto Rican community, and she wanted temporary whi . . . while we looked for someone who was Puerto Rican.

VAN WILLIGEN: Yes.

BRYANT: And that was a fabulous job. I loved doing that. I learned a lot from her, really enjoyed the work.

VAN WILLIGEN: Yeah, I, is a, I'm . . . tru . . . for s . . . for some reason, it's . . . well, I'm having trouble getting someone lined up to interview Hazel Weidman.

BRYANT: Oh!

VAN WILLIGEN: . . . which I'd like to do but she is . . . lives elsewhere. I mean she doesn't live in Miami anymore, so.

BRYANT: Oh, okay.

VAN WILLIGEN: And, but I, so . . . e . . . what, what was, what was Hazel Weidman like? I mean . . .

BRYANT: Oh! Dynamite, I mean she was hard working.

VAN WILLIGEN: Right.

BRYANT: Making lots of waves in the Psychiatric Institute, fighting with the chair a lot.

VAN WILLIGEN: Right.

BRYANT: All for good causes and doing great work, and, I mean she supervised a huge project there were all those different communities she had to master and a culture broker over each one and each one brought her plenty of problems so I really respected what she did. She published a lot from it, at least in technical reports, and . . . so it was a pleasure to work for her. I probably would have stayed longer but I got a call from Art, and he said, don't you think it's time you come back [chuckle] and so, I said, well, maybe so. I've learned a lot and we have found somebody who could replace me.

BRYANT: Also who . . .

VAN WILLIGEN: So who . . .

BRYANT: Oh you know who else came down there while I was there, the Schensuls, Jay and Steve Schensul came down. I think they replaced Hazel, or somebody, what was their position there?

VAN WILLIGEN: I d . . . I can't say definitively but there was, I, I kind of s . . . [phone rings once] Steve . . . it's now back on.

BRYANT: [whispers] Okay. So anyway, Art calls and I come – I came back here to finish up.

VAN WILLIGEN: Huh-huh. And so at that point you'd, you, you hadn't, you r . . . you hadn't done a dissertation or anything, so.

BRYANT: No, no I even had to do more course work and take my qualifying exams.

VAN WILLIGEN: I see. And then this, you kind of followed the strategy . . . you went on to get this masters degree in clinical nutrition?

BRYANT: Yeah, huh, I . . .

VAN WILLIGEN: I may be jumping ahead a little bit . . .

BRYANT: Right.

VAN WILLIGEN: . . . quickly on this but I, I'm trying to get some idea of this strat . . . this early strategy that you're following.

BRYANT: Wo . . . it all, it almost was . . . I, you know, I never, I never sat down and said here is where I want to end up and have it course out. I was more following a passion for ideas . . .

VAN WILLIGEN: Right.

BRYANT: . . . and things I liked doing.

VAN WILLIGEN: Right.

BRYANT: I don't even remember, I – I certainly never planned early on to go into an academic position. It wasn't until much later I went, that's a great place to end up, to retire. And so I did at one point later make a plan to work in, in applied settings outside of the academy until I was about fifty, and then go back and teach, and I, part of it was I felt I really can't teach 'til I've done it, and I want to get a lot of experience and then I want to, want to teach.

VAN WILLIGEN: Mm-mm, I see.

BRYANT: I had taught the intro to cultural anthropology one summer in there and loved teaching, absolutely loved teaching but felt, you know, it's, I just don't have any experience to share, I'm just reading the book and giving . . .

VAN WILLIGEN: Right.

BRYANT: . . . examples and maybe making it fun for them and interact, and interactive, but to do this well, I need some experience. So I had planned to stay outside of an academic setting until I was about fifty. And then when I worked in Miami and loved it,



I went well that's probably where I belong anyway. So I came, when I was writing my dissertation, I was very interested in nutrition. I did take some courses both before I went to Miami to do the dissertation in seventy-seven – seventy-six and seventy-seven.

VAN WILLIGEN: Yes.

BRYANT: And then I kept taking them because I loved it, I just loved it, and thought gosh, I wish I had discovered this first, I probably would have done a degree first in nutrition and a little cultural sprinklings on top. I just, whoa! This is great! And I decided I just could not take . . . live on a graduate assistantship anymore. Art had been loyal to me, he'd let me come back and gave me the – his assistantship, but I felt, I just need to get a job. So I looked around I thought what could I do? And there was an opening as a health educator at the health department, and I had – this is a, this is a gift .

. .

VAN WILLIGEN: So about . . .

BRYANT: . . . no strategy. Just fall into it.

VAN WILLIGEN: About, about when wa . . . was that?

BRYANT: That was in nineteen seventy . . . sev . . . seventy-seven or seventy-eight.

And I think I had already turned in drafts and it was pretty much getting close to the end.

VAN WILLIGEN: Oh I see, I see.

BRYANT: But I wasn't totally finished, and I thought I have got, I'm not going to take it next semester, I'm going to find a job. And I looked around, I couldn't find much and I saw a job as a health educator and I thought what do they do, behavior change! So, and this is what's really ironic, I went, I thought, okay, I know some about behavior change, but how else do you get people to change their health behavior? So I went to the marketing department of all places.

VAN WILLIGEN: This is like y . . . d . . .

BRYANT: 1977.

VAN WILLIGEN: . . . more or less accidental.

BRYANT: Yes! Exactly! I just thought who changes people's health behavior, well, that's a h . . . a c . . . a commercial enterprise so I went to the college of business library and I remember sitting in there and getting, reading lots of books on how you use marketing to change behavior, and Xeroxing some and I, when we wrote 'The Cultural Feast,' I even pulled that folder out and there's a lot of great stuff in there. But anyway, I prepared for my interview and had a mix of what I could bring as an anthropologist and behavior change and some ideas from marketing and interviewed with . . . the head of health education at the health department and I got the job. So I never even knew public health was there as a career, I just needed a job. Well I loved it, I loved working with nutritionists, they're wonderful people, I loved working with the health educators, I learned a lot, I was applying, plus I found my skills were effective and valued. So I quickly got promoted to director of health ed when she left, which was very controversial because everybody called me an archaeologist and didn't know what I did and the health educators went to the board of health and the mayor and tried to have me not selected on a permanent basis, because they wanted a CHES [Editor: This refers to certification as a Certified Health Education Specialist.] certified formal health educator in that position.

VAN WILLIGEN: What's CHES.

BRYANT: I don't know, it's a certification licensing for health education.

VAN WILLIGEN: I see, I see.

BRYANT: And they had somebody in mind and they were furious that I got the job. But I loved it, I loved public health. The organizational culture is o . . . one of great comfort for me, I've, the values of making a difference, of kindness, of being considerate of team work, the excitement of designing programs, all of that just like, whoa! I have found myself! Well, they also had a program that would pay for a course a semester and I, the whole, in fact the whole time I was here for all twelve years, I took a course every semester at UK. First for pay that b . . . you know, for tuition pay, and then just to audit. But I figured why don't I go ahead and get a degree in nutrition, what the heck. So I did! It took me until 1985 to get it but [chuckle] but I did.

VAN WILLIGEN: I see, and so, who were some of those people you worked with at the health department.

BRYANT: Barbara Markesbery.

VAN WILLIGEN: Oh I see.

BRYANT: Oh what a wonderful woman. Anita Courtney who . . .

VAN WILLIGEN: Yes.

BRYANT: You know, is one of my very dearest friends, what a pleasure to know her, and has taught me more about behavior change and working with communities and coalitions than any course I ever took, or taught. Right now I am working with Marilyn Peterson and Diane Koons. Diane Koons is a marketing person and Marilyn is a nurse, but there're very few people I worked with over there that I didn't have a great deal of respect and affection for . . . which is you know, as you know is why I came back to do a sabbatical here.

VAN WILLIGEN: Right, and then . . . this . . . what were some of the projects that you worked, worked on, while you were at the health department?

BRYANT: One of the first was called 'The Vial of Life'

VAN WILLIGEN: [chuckle] Vial, 'The Vial of Life?'

BRYANT: Of Life. And this was [chuckle] what is that county commissioner's name? Ann Lovar. Ann with the blond hair?

VAN WILLIGEN: Ross.

BRYANT: Ma . . . I don't know, maybe, maybe, that sounds right. She and Irene Winnaker, Irene Winnaker of Winnaker shoes, big shoe store in Lexington long ago. Anyway, they were in some club, some women's club and called the health department to ask for help in figure out how to design this 'Vial of Life.' And what it was, was a little tube e . . . that you put information in and you'd stick it in your refrigerator door and you'd put a sign on the outside of the refrigerator saying 'The Vial of Life' is in here, and if you passed out or you had an emergency, the paramedics would see that sign and go in there and in there would be all the information, you're diabetic, you are on these drugs, or whatever else, and then you could take the vial of life with you to the doctor when you went and there was all the information your doctor would need. So somehow I got assigned to them and worked on that project and we did a study on elderly pharmacological use and that yielded another project and so I remem . . . that was one of my first interesting ones.

VAN WILLIGEN: Huh-huh, I see.

BRYANT: But I di . . . oh my God we did so many fun projects, the creativity over there was great. We m . . . wrote puppet shows for kids on fiber foods, and we made a recipe for these high fiber cookies and wrote a, a play on that, and I mean, oh we, so many projects, we had so much fun.

VAN WILLIGEN: Huh now, how, from this mix of projects, this interest in breast feeding, you were kind of returned to it, I supposed you could say, because . . .

BRYANT: Yeah.

VAN WILLIGEN: Because you were, had this interest in it before, but of course I, of all of your work, the one that I'm most familiar with, the project that I'm most familiar with is 'Best Start.'

BRYANT: Right.

VAN WILLIGEN: And, how w . . . how does that link up to all these . . . this training and background that you had, and these, your involvement with the Lexington . . .

BRYANT: Well . . .

VAN WILLIGEN: . . . health department.

BRYANT: Pretty early in my career there, probably within a year or so, starting, working in, at the health department here, I got a call from [whispers] oh, what's that woman, [regular voice] an anthropologist who wrote a book about doulas [Editor: Greek word meaning "women who help women."].

VAN WILLIGEN: Dana Raphael.

BRYANT: That's it! Dana Raphael. And she had gotten my name somewhere – I guess she'd read, you know, I published my dissertation results and it . . . included al – interesting piece in showing that you needed social support to be able to breastfeed. It, not only influence the decision but it influence your ability to act on your intention. And she read that and that's what sh . . . that was consistent with her theory so she called me and asked me to be part of this international large scale grant, granted project that she had. And that got me into the national arena; I met a lot people in breastfeeding. And Ross Laboratories and Judy Gussler who is an anthropologist, who worked there, and others, and as a result of getting to know them and continuing to read in this . . . field, I got the idea to try a pure – first a pure counseling program which we called Community Advisors for Breastfeeding Mothers.

VAN WILLIGEN: Huh-huh, and this was a, this is a Lexington . . .

BRYANT: Ton . . .

VAN WILLIGEN: . . . Health Department Program.

BRYANT: Right, exactly. I thought . . .

VAN WILLIGEN: It was theoretically informed by this network viewpoint.

BRYANT: Exactly.

VAN WILLIGEN: And was consistent with, with Dana Raphael's . . .

BRYANT: Yes!

VAN WILLIGEN: . . . view of breast feeding . . .

BRYANT: So I thought if they're . . .

VAN WILLIGEN: . . . work.

BRYANT: They're lacking social networks. How do we manipulate that? Well we find a few people in a, this is largely in an African-American community here.

VAN WILLIGEN: Right.

BRYANT: We find a few women who have breastfed and we fund them and help them be network support or doulas for others. And that was a success, and took off. And then got me in touch with other gurus in the field, including somebody at Maternal Child Health Bureau in, at the Department of Health and Human Services. So I got kind of plugged in to the national scene that way and access to funding for Lexington, and . . .

VAN WILLIGEN: Huh-huh. This would have been in the mid eighties.

BRYANT: Right. And then, of all things, Jim [Lindenberger] and I went to Ecuador on an unrelated project the fluoride mouth rinse program where he and I designed a . . . taped slide show on how to start a fluoride swish and spit program, which was very effective here in Fayette County, and decreasing cavities, a big problem in Ecuador. So we'd translated the and trained, sort of transposed the whole system into one that would fit in Ecuador community, bought them all the equipment, got all the fluoride, and went down there and spent a month down there training volunteers and using the slide show to train them and do all this stuff, and while we were there, we rented a truck and drove around and we heard all these ads on the radio about breastfeeding promotion and some other medical things. And when we left the country, we went to the Ministry of Health to say goodbye, I had introduced myself when I came in, went to say goodbye and got asked a . . . and asked a lot of questions about these ads I heard, and I was introduced to Marcia Griffiths, the head of the Manoff Group which is a big social marketing firm.

VAN WILLIGEN: Oh!

BRYANT: So that's how I discovered social marketing.

VAN WILLIGEN: So it was . . . to kind of recapitulate, you had kind of had the insight about commercial marketing and it's relationship with health . . . in the public sector prior to this . . .

BRYANT: Right.

VAN WILLIGEN: . . . more or less independently, it was just part of your . . .

BRYANT: Just . . .

VAN WILLIGEN: . . . trying to extend your anthropology a little bit.

BRYANT: Mm-mm, it was just a fluke. I had not followed up on it, I hadn't really thought systematically about it.

VAN WILLIGEN: Right.

BRYANT: And then found out somebody had been a lot brighter than I and had done that very thing, gone with it and . . .

VAN WILLIGEN: And, and, and so, it, it, this woman from the Manoff. M-a-n-o-f-f Group that did you, you actually met her.

BRYANT: Yes!

VAN WILLIGEN: In Ecuador.

BRYANT: And flew back, we were on the same plane and talked the whole way home about . . .

VAN WILLIGEN: I see.

BRYANT: . . . how that works and her work – she was a nutritionist with an anthropology minor or anthropology undergraduate with a nutrition masters, I can't remember but she had . . .

VAN WILLIGEN: So, so . . .

BRYANT: . . . the same combination.

VAN WILLIGEN: . . . she immediately identified with the situation that you were in.

BRYANT: Right, I mean it was like we were, we'd had similar career tracks, we were the same age, she was working an international setting in public health.

VAN WILLIGEN: Right.

BRYANT: And so we just yak-yak-yakked the whole way, so I hired her, came back, by then I was deputy commissioner for nutrition and health ed and had some you know, had control of my budget, had discretionary funds so I hired her and said let's, let's use social marketing to promote breastfeeding. If it can work in Ecuador, surely it can work in Kentucky. So the first step was to try to get funds. I wrote forty-one letters of intent and got forty-one no – are you kidding? Marketing? Or, are you kidding breastfeeding? But nobody wanted to fund it. It was just . . . so finally I said, we're just going to do this anyway, it's a good idea, and I've got this position open, I'm gone to take those funds and I'm going to do the research myself, I'll pay all of my out-of . . . pocket costs with that discretionary funds, and I'll, I got my little Maverick and drove around to six states and did the research, the focus groups and the in depth interviews and key informant interviews and hired Marcia to help me translate that formative research and also to help look over my shoulder – I did it, then translated into a marketing plan.

VAN WILLIGEN: Huh-huh, was this called 'Best Start'?

BRYANT: No, at that point it was just a br . . . social marketing and a breastfeeding idea.

VAN WILLIGEN: Huh-huh, yeah.

BRYANT: And that's when I hired Doraine.

VAN WILLIGEN: Oh-oh, I see.

BRYANT: Bailey.

VAN WILLIGEN: Yes.

BRYANT: And so she was working on her masters thesis and she came and worked part time at the health department and ultimately did a thesis on it and now is a full time employee there.

VAN WILLIGEN: Yes.

BRYANT: And also now very well known around the country in breastfeeding. [Clears throat] And that was the last year I was here. So, just as we finished developing a marketing plan, Jim and I moved to Tampa, and I w – oh! I shared the results of our research and our marketing plan at a national conference and four states in the southeast said we'll give you money to help create the materials to go with this plan, and at the sa – oh! And that the first thing on our plan, which was critical in this story, was policy change. You know a lot of people think marketing is all messages and material, but the number one thing we wanted to do was get money siphoned into WIC to train the staff in WIC and to change the rules and regulations about how they promoted breastfeeding from perm . . . from giving out formula and all that to a heavier emphasis.

VAN WILLIGEN: I see!

BRYANT: And a colleague in Tennessee, Minda Lazarov did all the hard, hard lobbying work in Washington but we were successful. So, I go off to d – I leave my job here, go off to Tampa and get the news that the bill is in conference between the senate and the house and they just need data to show that the factors that keep women from breastfeeding can be changed and that women are interested in it. So I write something up, fax it to Washington, it passes, and people all over are furious in WIC because they don't want to be told by congress they have to do this, but 8 million dollars is set aside

for this and all have ten rules they have to follow and one of them is to have appropriate materials, so this creates this huge demand for appropriate materials and at the same time four states give me about a hundred-forty-thousand dollars to create those materials. But now I am in academic setting, so this was a lousy timing. If I had been here, it would have been great, if I had been at the health department. So . . .

VAN WILLIGEN: So . . .

BRYANT: . . . that became 'Best Start,' we hired an ad agency; they came up with a name.

VAN WILLIGEN: I see.

BRYANT: . . . for the campaign called 'Best Start For All the Right Reasons.'

VAN WILLIGEN: Yeah, and so the name of the, the project and . . . things that followed came from . . .

BRYANT: Right.

VAN WILLIGEN: . . . this . . . kept tag, tag on . . .

BRYANT: Right.

VAN WILLIGEN: . . . catch phrase.

BRYANT: Mm-mm.

VAN WILLIGEN: Who did you send this document to? Do y . . . the one that . . . showed them, showed the, in the conference committee?

BRYANT: To Stephanie Har . . . Stephen Harvey who is the person at the center for budget planning and priorities, the budget priorities and [whispers] c-p-p, anyway [normal voice] it's a, it's a huge advocacy group. I'll get you the name later, C . . .

VAN WILLIGEN: I see.

BRYANT: Center for . . .

VAN WILLIGEN: It's an N . . .

BRYANT: Center prior . . .

VAN WILLIGEN: It's an NGO.

BRYANT: Yeah.

VAN WILLIGEN: The Senate of the NGO.

BRYANT: Policy Priorities in Budget, or so . . .

VAN WILLIGEN: And, and they, the an – this NGO was trying to influence t . . .

BRYANT: Where we . . .

VAN WILLIGEN: . . . the outcome.

BRYANT: She had – see, her role was, she is sort of like a grandmother of WIC and her role was to advocate for it and she stood in our way at first saying do you realize 8 million dollars will buy a lot of food for poor people? So we had to convince her that that 8 million would be well spent. Once we did that, she, her whole deal was legislative advocacy, she became our ally there and she knew all the staffers on the hill and helped us a great deal, so she is the one who called me and said this thing is going to die in conference because they don't believe the money can be spent well. You've convinced me but what can I do to convince them?

VAN WILLIGEN: I see.

BRYANT: And so she got it to the right committee and conference and then they, they included it, it's now up to 21 or 29 million, I forget, but it's a permanent part of the WIC re-authorization.

VAN WILLIGEN: So have you seen the, the new budget issued by . . .

BRYANT: Yes, this makes me sick.

VAN WILLIGEN: Huh-huh.

BRYANT: Yeah.

VAN WILLIGEN: So that dollar figure is reduced somehow.

BRYANT: You know, I didn't look at that one, there's so many other things on the chopping block near and dear to my heart, I didn't even look at the breastfeeding part of it.

VAN WILLIGEN: I see.

BRYANT: But I did see WIC is not going to grow, I don't think. I don't if he se . . . nobody much wants to cut WIC right now, it's a mom and apple pie kind of thing but I don't know, I haven't, I didn't look at the WIC budget.

VAN WILLIGEN: I see.

BRYANT: I was looking at the VERB and the other things I'm working on now. But anyway, then, then, as that took off and became 'Best Start,' and the sales grew, we started, the university said, you can't do this as a professor, this is not in our mission, it's not teaching, it's not research, and so we started a nonprofit. First we hired a businessman to sell them, then we, he did some unethical things so we formed a nonprofit and hired somebody to run it, she ran it into the ground, so then Jim quit his job and he's been running it every since. And yes, the nonprofit took the name of the campaign.

VAN WILLIGEN: Huh-huh. And the, I, I forget what these are called, but it's a s . . . a s . . . in the tax code it's, I forg . . .

BRYANT: 501c3.

VAN WILLIGEN: Yeah that's it.

BRYANT: Right.

VAN WILLIGEN: It's a five-0-one-c-3.

BRYANT: C3, mm-mm. So and of course now, breastfeeding material sales, the name of the campaign h . . . we've redone the research and redesigned the campaign and now it's called 'Loving Support Makes Breastfeeding Work,' because the data shows that we were successful in shifting o . . . appreciation and desire for breastfeeding's benefits and got a big bump in breastfeeding rates. But we were stuck and wouldn't, we had like a ceiling affect, because the costs were so high, so to lower the cost, we changed the focus of the campaign and interestingly enough, social, lack of social support is a huge issue, major factor, so, hence the 'Loving Support Makes Breastfeeding Work.' . . . Ne . . . yeah, makes breastfeeding work is the new emphasis and it's a part of what 'Best Start' social marketing company does but they now do a lot of work for food stamps and dietary guidelines and other things.

VAN WILLIGEN: So, how has . . . social marketing changed since, I mean you, you encountered it and it has gone through a, there are new threads, you might say and, in the framework of social marketing, it seems.

BRYANT: Oh yeah.

VAN WILLIGEN: And I was wondering if you could comment on change – I mean because you've been . . .

BRYANT: Sure.

VAN WILLIGEN: . . . involved in it for, you know.

BRYANT: Sixteen, seventeen years.

VAN WILLIGEN: Yeah.

BRYANT: When I first discovered it, it was confused with health communications, and after meeting Marcia, the first conference I went to where it was featured, was the health communications conference, and the big players in the field were the Manoff Group, the American . . . the Academy for Educational Development, and a few other smaller groups, and they were mostly funded by U-S-A-I-D to do large scale mass media campaigns.

VAN WILLIGEN: So, so the Manoff, the Manoff Group was like pure and simple a social marketing . . .

BRYANT: Yes.

VAN WILLIGEN: . . . organization, I mean the, the Manoff is a, was one of the key writers, as I recall.

BRYANT: Right.

VAN WILLIGEN: And they, A-E-D was a more diverse . . .

BRYANT: Right.

VAN WILLIGEN: . . . organization, they because I, I know people that have done projects for them, A-E-D, and . . . those are the big players.

BRYANT: Right, and the reason A-E-D got into it, they, because they do a lot of things with universities and K through twelve and all.

VAN WILLIGEN: Right.

BRYANT: But they got the, what was it called, it was a big health mass media campaign to stop, to decrease infant-child mortality internationally and they had like ten countries, and they did very professional work and I relied heavily, when I first got to U-S-F, on their technical reports and writings and thinking for how we taught social marketing, and right after I got to U-S-F we started a conference which this summer will be in its fifteenth year. The Social Marketing and Public Health Conference, which is the only one in the country that looks at public health and social marketing. So in answer to your question, I'm sort of tracking how we changed that conference, so the first year we had all those same players, oh, Porter Novelli was the other big hitter, and they, they did probably the first . . .

VAN WILLIGEN: That's the name of a consulting firm?

BRYANT: It's, it's a, it's a very large public relations firm, Bill Novelli, who is now head of AARP was the . . .

VAN WILLIGEN: Oh I see.

BRYANT: . . . co-founder and Porter was Jack Porter who – they both had worked – they used PR for, to help promote the Peace Corps program, and then they started Porter Novelli which does social and non-social public relations, Washington, New York, other places.

VAN WILLIGEN: I'm going to turn this over.

BRYANT: Sure, okay.

[End Tape 1, Side 1]

[Begin Tape 1, Side 2]

VAN WILLIGEN: I, it's working at this point.



BRYANT: Okay. So in, it's seventeen years ago, the big players were focusing a lot on large-scale mass media campaigns.

VAN WILLIGEN: Yes.

BRYANT: Even though the people in the field who came from a marketing background knew that there is a big difference between mass media and marketing were starting to complain even then. Most of the applications internationally in the United States were heavy on the communications part. So at our first conference we featured AED, Porter Novelli, who had a great line up of terrific speakers and great things to show, including the, they were the ones who did the initial blood pressure, high blood pressure campaign in the United States. And, then at the end of that Alan Andreasen who has written a lot and who is a marketer, an academic marketer, basically said everything you've learned here is misleading because this is not mass, health com, it's not mass media, it's really a marketing mind set. And I was furious, I mean, it'd been very stressful for me to put this conference on and meet all these people who I kind of looked up to and [chuckle] I was so nervous I remember the first day, I had on a, a plaid dress and I sweated so much I had to change it at lunch and I put on a purple dress and Marcia Manoff came up and said I've been looking for you everywhere I thought you had on a plaid dress [laughter].

VAN WILLIGEN: [Laughter]

BRYANT: Anyway, it was so stressful, we lost twelve thousand dollars doing it, and then Alan Andreasen stands up and just pans us, I mean I was furious, but he was right. So we went back to the drawing board and I studied more the marketing mind set, and m . . . our mission has been, in the last four . . . since then, in the last fourteen years, to try to teach public health professionals how marketing, not mass media, can help them do a better job, and try to overcome a very widespread impression that it's just fancy TV ads and, and well crafted messages that change people's behavior.

VAN WILLIGEN: Yeah.

BRYANT: S . . . and we've done that, so the, the two biggest changes that I've seen in fifteen years are, one a new appreciation of what the marketing mindset is, including an imp . . . now in the last two years, a, an understanding that some of it doesn't work as well in public health and needs to be changed, you know, okay, first we're a, a gaga that marketing is so powerful, let's try to follow it as closely as we can, and now we are at the phase where we're saying, well you know, maybe we don't call it product price, that's confusing, it's really the barriers and the costs, so that people pay and the sacrifices, it's not a price, and maybe we don't call it product because we don't have a tangible product in most cases, it's really the behavioral and the benefits you get from it, so maybe we should call it benefits and costs and place and that sort of thing, so we're even thinking of changing some of the set, sacred concepts in the field. The other big change though has been public health and anthropology's reaction to it. When I first got interested in it, I remember people in anthropology who I know thinking, you know, what are you doing? And, and challenging me and saying this just seems so, so dangerous and, as if it would be damaging to disenfranchised populations and how, you know, how can you sell out of anthropology, you know, what's, what's happened to your values system, sort of. Because of their feeling that marketing was so manipulative. And I think anthropol . . . many anthropologists have now come around to see it differently. They may still have some . . .

VAN WILLIGEN: Sure.

BRYANT: . . . misgivings about it and then other an . . . anthropologists I know have challenged, are you focusing on just the individual behavior and are you blaming the victim? Again not understanding that good social marketing goes upstream as well as downstream. You kn . . . are you familiar with that metaphor?

VAN WILLIGEN: Mm-mm.

BRYANT: Yes, so there's been a lot of misunderstanding and criticism from anthropology.

VAN WILLIGEN: Can you think of specific anthropologists that . . .

BRYANT: Huh, well, even Kathleen DeWalt, d . . . you know, a dear friend has said, from her work internationally where she saw a lot of the mass media campaigns, she felt it was missing the boat by focusing too much on education and individual behavior change and not enough on systems change.

VAN WILLIGEN: Right.

BRYANT: And there is a thread of truth in that, specially in the applications that many people have been exposed to, but social marketing has both changed recognizing that criticism, and also has always inherently had the ability to be a lot better and do more, and there have been all along some more successful applications.

VAN WILLIGEN: And the, the change that you just referred to as one of the important changes in social marketing over the last 16 years or so.

BRYANT: Right. We've been trying to work real hard to make that happen through our conference and through our writings.

VAN WILLIGEN: And can you, what, what do you call that, that new viewpoint? Does it have a name?

BRYANT: Upstream Marketing . . . might be.

VAN WILLIGEN: Upstream Marketing?

BRYANT: Huh-huh.

VAN WILLIGEN: And so Upstream Marketing focuses on what?

BRYANT: Structural change.

VAN WILLIGEN: I see.

BRYANT: Changing policy, changing the environment. It's really not new tha . . . we, we've given it a name and focus on it a lot to try to counter this mis-ins . . . you know, misunderstanding but marketing of course has always been upstream and downstream and thought about things differently, and the marketers in social marketing have always been taking people in public health to task for that. The other th . . . source of resistance when I first got in it was within public health, the same way, as sort of, oh I guess anthropologists have been much more worried about how dare you be the change, the change director, the change advocate, you know, all the ethical reservations about that.

VAN WILLIGEN: Mm-mm, right.

BRYANT: But having studied under Art Gallaher, I very early on, even in graduate school, maybe even at senior undergraduate year, learned his, how he conceptualizes different roles, and I never was afraid of imagining being in the, in the role of the change agent. I didn't feel like my job had to be, to do the study and make two recommendations and let them pick or whatever. I always felt like hey, I want to make a difference.

VAN WILLIGEN: He often talked about advocacy.

BRYANT: Yeah.

VAN WILLIGEN: In that, as I recall.

BRYANT: Right. So and I w . . . I was willing to go all the way to the, the most extreme form and say I would be an agent of change, I'd be one who, and as a you know, an administrator at the health department, that's the business we were in, is how to design programs to get people to change their behavior or . . .

VAN WILLIGEN: Right.

BRYANT: . . . to get food to the right people, that sort of thing.

VAN WILLIGEN: Right, right.

BRYANT: So I wasn't worried about it but anthropologists seem and the courses that I, you know, I do a guest lecture over in anthropology at USF and I typically get . . . questions and hostile reactions based on, you know, who, who do you think you are to be able to say what change should come about for a, a group of people. And I . . . I don't feel as much resistance from anthropology offices – audiences as I did early on.

VAN WILLIGEN: Right. So the ma . . . g . . . g . . . but you stance has changed somewhat.

BRYANT: Yes.

VAN WILLIGEN: In subtle ways.

BRYANT: Well, yeah but that will get us to what I am doing now, in a minute.

VAN WILLIGEN: Okay.

BRYANT: Combining which I have always wanted to do is combine more the community organizing with this mode, but anyway, so yeah, I think there're two things happening, one is better understanding of what an . . . marketing can and should do and how it can do it.

VAN WILLIGEN: Right.

BRYANT: And then more clear cut applications where it's upstream instead of downstream. And then I think people are, in public health and anthropology, are getting more used to it and used to the name, and aren't as worried about it. In public health, it's now so popular it's almost scary because people, because of its popularity, all kinds of people are saying they are social marketers and taking jobs of social marketers and doing a really lousy job. And lots of people are saying I want to know how to do it and come to our conference one time and then think I'm going back and do it, and they're really not prepared. And we tell them up front, you know, two days at this conference aren't, won't make you a social marketer, it's just going to tell you is this approach appropriate for you and help you find people to hire, to teach you how to do it or do it for you. But anyway, so yeah I've, I've seen it changed. I think our conference has been critical in disseminating the model and in countering this misunderstanding.

VAN WILLIGEN: Mm-mm and where is the conference is always in . . .

BRYANT: Clearwater Beach.

VAN WILLIGEN: Huh-huh, I see at that . . .

BRYANT: Most years it's been at the Sheraton Sand Key in the middle of June, pretty much settled into that group. We had seventy people at our first conference where we lost \$12,000.00 and probably forty of those people were speakers and we now have about 350.

VAN WILLIGEN: I see.

BRYANT: Yeah, so it's . . . and we've added a field school with four or five courses offered a year, one in one week formats for the people come to the conference and go

hey, this is something that would work, let me send some of my staff, or let me come back and we now have a certificate you can get in social marketing, if you have a masters degree in either public health or related field, or if you're pursuing one.

VAN WILLIGEN: That's a USF certificate.

BRYANT: Eighteen graduate credit hour certificate.

VAN WILLIGEN: I see, huh. And so, this new synthesis in social marketing, what do you, what, how do you communicate that, I mean how, what do you, what do you call it?

BRYANT: Well, if what you're referring to is what we're doing now as the Florida Prevention Research Center, and this goes back, we're in our seventh year. For a long time it's not that I don't set goals, you know, I mean much of my career has been just a lucky opportunity . . .

VAN WILLIGEN: Right.

BRYANT: . . . in following my passion for something in the short term on whatever, but I have set a couple of goals and Art taught me to do this. He said, when I was in graduate school he said you know, there'll be money all over the place and I look at the people in anthropology who follow the money, it's HIV, then it's this and it's that, and they never end up making the kind of contribution that they could make if they have a set of goals of what they want and really focus on, and ignore the sirens how, no matter how lucrative, and really try to keep focused, and mine has been to learn how to bring about behavior change, and that was the goal I sat with them long ago, not a topic particularly, but how you really bring about behavior change and social change, and hence the shopping around from marketing to social psych and now I teach and do a lot with different theories from other disciplines, but I've always been very committed to a community bottom up approach, and so my goals since I've been in public health is how do you take disenfranchised communities and meld that with these different theoretical approaches, so the work at the health department here reflected that, that peer counselor program was all quickly empowering these young women from the African-American community to be the peer counselors, fund them and let them go and that was the success. When I got into marketing, I was very impressed, particularly with the behavioral change. I'd never done a program where I saw such an immediate movement of the needle from you know, three percent breastfeeding to fifty percent breastfeeding. I mean we never had that kind of success with the other approaches we took at the health department. And the peer counseling program, which had preceded it, the needle went from you know, four percent breastfeeding to five percent breastfeeding, they're really happy one percent more but it was a handful of people. So this I've, that's why I've stayed in social marketing this whole time, but I've always been uncomfortable with how a top down it has been.

VAN WILLIGEN: Yeah.

BRYANT: Even though you listen to the voices of the people who you're working with and you are, you use that to be respectful and, and it, it is such a respect . . . it is so much more respectful of their values than any other approach in health ed. It still is done by people you bring in to do it for the community.

VAN WILLIGEN: Right.

BRYANT: So the logical step for me was to wed this with a community participatory approach and luckily a c . . . a request for proposals went out that wanted community based ways to prevent chronic diseases, and so, in writing that grant I was forced to go

back, almost like a qualifying exam experience where I read-and-read-and-read and looked at all these different models and put it together and then I called it community based prevention marketing and the stimulus to do it, all on a crunch, was to get this grant and it's a CDC big ticket item to be one of their centers of excellence. And we didn't really think we had, we would win, we didn't think we had a chance because so many schools of public health compete for it, but we thought it'll force us to get our ideas down and then what we'll do is behind the scenes get our Florida delegation to lobby because there was a long history of state senators getting these gems funded in their states. We thought, heck it's competitive now, if we don't at least try, how can go and get it through the backdoor.

VAN WILLIGEN: Right.

BRYANT: That would be unfair. So we killed ourselves putting this application together and that's when I finally took this, what had been on my annual report for two years, or three years, was to write this thing up and get it done. I finally did it, and it got funded. So we had five years pretty good funding to try out this new model, and we, we'd start the, the model starts with the best of community organizing, go in and mob . . . mobilize the community, find the leaders, at, you know, then do an assessment of its assets and build on its strength and look for its needs. And then the community representatives get to take your research and decide what they want to focus on, what problem they want to tackle. And then you teach them to think like marketers and then you do the marketing steps. And what we were hypothesizing is that it would be more powerful than marketing because the community drove the process and it would be, it would have the side, the latent functions of empowering and transferring all these really powerful marketing skills to the community. It'd be more powerful than community organizing and development, because once you got to the stage where they d . . . identified their problems, set their goals, you would have this powerful marketing framework which would be more effective than just having them use the competing apex patch or whatever other models were out there in public health. They would then have a research based way to listen to the people not at the table and you'd overcome all of the problems of how do you get the very busin . . . busy community member who can never come, ..'s voice there. And they would think strategically they would learn to segment audiences and do all these things that I think marketing does better than most other ways to go about bringing about social change. So that was our hypothesis and we've now, we are in our fourth demonstration project of that. We got refunded in a competitive re-application and now have five more years of funding to do that.

VAN WILLIGEN: And so how many, wha . . . what year are you in on . . .

BRYANT: Seven.

VAN WILLIGEN: You're in the seventh year?

BRYANT: And our fourth project.

VAN WILLIGEN: I see.

BRYANT: So we have four projects running, one that's seven years old, one that's **five** years old, and one that's in its second year and one that's brand new.

VAN WILLIGEN: Mm-mm, I see.

BRYANT: And the newest iterations of this are the first two, the first one was the sort of pure form can-you-use-this-method-to-design-an-intervention from scratch. The second one started that way but has . . . really evolved into can you take existing

evidence-based models of change and used this community group to tailor that to its community and then the last iteration is can you take . . . this model and use it to build an intervention to support a national media campaign.

VAN WILLIGEN: Mm-mm. So there is a kind of a layering. I mean it got the . . . the projects became; they had a bigger agenda as they progressed through time.

BRYANT: Well, w . . . actually what happened is the first model was so time consuming and expensive. We went; it's not going to fit public health realities. It's effective, and boy isn't it dandy, look at all the things we got out of it. But it took too long. So to speed things up, rather than in you know, do all the marketing research from scratch and then invent the plan, and then invent the intervention and then evaluate it, and then disseminate it to other communities, could we, once we know what things should look like from our profile and all that, are there other interventions out there that we could pilot-test at the same time we're doing our formative research so we can move more quickly to intervention. And we found that has saved us a year or two in time and a lot of money. So community coalitions are a lot more satisfied because they get action quicker, they don't have to wait, and wait, and wait for the research and they don't spend as many tax payer dollars. The other thing is that, this is just a pet peeve of mine, is I see all these national campaigns use marketing successfully, but every local health department thinks well we are so unique here in Lexington, we're so different in Kentucky, we've got to go and do it ourselves, and they take teeny tiny budgets and do develop, you know, low quality materials when there sits a twenty million dollar VERB [Editor: VERB is a CDC national campaign to increase physical activity of adolescents] campaign with national advertising why not use the little teeny tiny budget Lexington has and build an intervention to s . . . build off of its brand equity and . . .

VAN WILLIGEN: I see.

BRYANT: . . . and so that's we did here this last year in Lexington. They built a fabulous intervention to provide action outlets for kids to be physically active and did not try, they, they built off of the VERB brand which is the national campaign to promote physical activity that's aimed at that same audience, "tweens" nine to thirteen years of age. And so they got so much more bank for their buck. And now CDC loves what Lexington did, they sent a team here to look at it and they're giving me \$130,000.00 to try to help Lexington and Sarasota and Lincoln, Nebraska do this, to continue to do this.

VAN WILLIGEN: The tri-cities [chuckle]

BRYANT: The tri-cities [chuckle] right, yes, Lincoln, Nebraska. But anyway, this seems like a really good way to help a local community tailor it to whatever they think their unique needs are, which are usually minimal, and build off this brand equity and all the money being put into national coffers.

VAN WILLIGEN: So, if I hear you correctly this . . . idea of community based prevention marketing . . .

BRYANT: Right.

VAN WILLIGEN: . . . that that . . . concept emerged in the context of the proposal that was developed to fund the . . . it, it's u . . . the prevention center.

BRYANT: The Florida Prevention Research Center.

VAN WILLIGEN: Yeah.

BRYANT: That's what we call our . . .

VAN WILLIGEN: Yeah.

BRYANT: . . . outfit.

VAN WILLIGEN: And that, that has, that, that organization has a state-wide mandate or a national mandate?

BRYANT: It, it's a national man . . . it's, we're one of twenty-three centers of excellence. We don't have a, a border necessarily.

VAN WILLIGEN: I see.

BRYANT: We call ourself Florida Prevention Research Center, but there's not, but I'm, we're working here in Kentucky and we're now starting to provide technical assistance to South Carolina, Alaska, and California, and other places, so I'd say a national mandate.

VAN WILLIGEN: I see. And . . . then do other people, do other, at the level that's you're, that you personally are working at, that is . . . kind of thinking about the concepts and, and implementing at the same time, are other people making use of this idea?

BRYANT: Yes. Our original article that described the model . . .

VAN WILLIGEN: Right.

BRYANT: . . . has generated some requests for technical assistance. When we got the grant, I was in the middle of a training session with s . . . teams, chronic disease directors and some of their staff, and we got the news and people made an announcement, and the people from California went, Oh! This is great, because we're really interested in marketing but we are so committed to a community-based approach, if we could meld these two we'd feel so much more comfortable and I said me too, this is going to be a hoot for me because always want to sort of getting over the guilt of the top down approach and California is going gang busters with it. They're really using it, a . . . at the state level, at a, in a variety of local applications and Kelly McCormack Brown who I work with has been out there training them, and they, and we're in touch with them a lot, and then South Carolina has used it. I've trained one of their coalitions and, and in Alaska. So, so yeah, we're getting . . .

VAN WILLIGEN: And where, where was . . .

BRYANT: . . . response.

VAN WILLIGEN: . . . the arti . . . wha . . . tell me more about the article.

BRYANT: It's in the American Journal of Health Behavior. We had a special issue.

VAN WILLIGEN: Oh, I see.

BRYANT: That we did on social marketing and it's in there. We have under review right now an article describing our lessons learned in our first project, and, and I've talked some about it at conferences. But most of the training has been in just social marketing and then communities use it.

VAN WILLIGEN: Are you going to write a book about this?

BRYANT: Probably not, but I am going to write another manuscript about our lessons learned in the second community and we, what we're trying to do is make a tool kit, a, a CD Rom and training manual and supporting materials that would help public health professionals use this model. Even though I am in an academic setting and certainly have plenty of pressure to do books and . . .

VAN WILLIGEN: Right.

BRYANT: . . . articles, I still, my desire to be applied and I still find myself disseminating what we learn as much in, through conferences and . . .

VAN WILLIGEN: I see.

BRYANT: . . . these training manuals, we've written the training manual for the obesity coordinators in the twelve or twenty states now, who are using, are supposed to use marketing in what they do, and so a lot of what I work on is that sort of stuff. But I still get a lot of pressure and cajoling them to, to do more of the . . .

VAN WILLIGEN: It has gone . . .

BRYANT: . . . traditional stuff.

VAN WILLIGEN: It, yeah, of course it, it is a way of disseminating to user groups too.

BRYANT: Right, right.

VAN WILLIGEN: You know, it's a . . .

BRYANT: But I would say my career, my biggest impact has been through the conference and all the public speaking at conferences where I've been able to disseminate the model through trainings more than anything I've written. I mean I have written chapters on this that may get to some people who use them but I, I really think that the spark out there has been one on one, you know, helping public health professionals through a one-week course of three days or two-day training, figure out how they can apply this.

VAN WILLIGEN: And so . . . you're right, you're actually right in the midst of, of, I mean, this is now well established and you're still in the midst of it, in the . . .

BRYANT: Right.

VAN WILLIGEN: . . . the way, the way it's in . . .

BRYANT: Yeah. My . . . last year I was invited to write the chapter in the Annual Reviews of Public Health, a chapter on social marketing. And it was nice in a way that it came during the sabbatical because after my work here in Lexington with this project, applying community-based prevention marketing to obesity prevention, I had a few months left and used it to, again go back to the literature and stop and think about the last seventeen years of what we've learned and where the field needs to go. And so my thinking about that's embedded in that chapter and that chapter may be one of the things I've written that does fall under writings, the traditional kind of academic writings, that might have more impact than my training has but . . .

VAN WILLIGEN: Right, right.

BRYANT: And it was fun to think about you know, what do I believe about this, and where do I think the field needs to go.

VAN WILLIGEN: Huh-huh. And so that's been published.

BRYANT: Yes, it's, I mean it's at early release form right now and the, the book will come out this year, you know, how you buy those volumes or whatever come out this year.

VAN WILLIGEN: Right, right.

BRYANT: And I, the co-author, Sonya Grier is a young m . . . marketing PhD who studied under Phillip Kotler.

VAN WILLIGEN: Yeah.

BRYANT: The person who coined the term and . . .

VAN WILLIGEN: Right.

BRYANT: . . . wonderful man, and why she had a more . . .

VAN WILLIGEN: It's Kotler, right?

BRYANT: . . . Kotler, yeah.



VAN WILLIGEN: Kotler and Manoff.

BRYANT: Right. She had more of a minor role in the thinking. She's got a car . . . a terrific career ahead of her, and I have been trying desperately to recruit her to USF, but I am not sure where she is going to go.

VAN WILLIGEN: I see.

BRYANT: But anyway, she will speak at our conference this year, a delightful young woman.

VAN WILLIGEN: And . . . to . . . how often and to what extent do you think of yourself as an anthropologist while you're doing this? Is that a, is that a, something that enters your mind, or is it . . .

BRYANT: Huh, sure from time to time. I teach the core course in social behavioral sciences applied to health, so I'm reminded at least every other year while I am teaching that.

VAN WILLIGEN: Right.

BRYANT: And go back to the anthropology literature and psychology and you know, all of that, of what anthropology brings to public health and my work in it. I think about it when I teach every other year the formative research methods in social marketing because there is a heavy dose of qualitative research . . .

VAN WILLIGEN: I see.

BRYANT: . . . and they are in participant observation and again, that's very helpful.

VAN WILLIGEN: Is Kut, Kotler and Manoff both were strong advocates of anthropology as part of the total package, weren't they?

BRYANT: Manoff in particular.

VAN WILLIGEN: I see.

BRYANT: You know, he hired and gave his firm to, or sold his firm, to an anthropologist, Marcia Griffiths and was very aware of the role it played. In fact, most of his work in social marketing was with her. She's really respon . . . the woman behind the man kind of, and I'm sorry she hasn't been more active in our conference and in the, in the community of social marketers. She is really; Manoff has really just done its niche of nutritional international work and not contributed to the stream of thinking and social marketing so I don't even know what she's doing . . .

VAN WILLIGEN: I see.

BRYANT: . . . I'm not sure . . . where she is except that they're still very u . . . well respected firm.

VAN WILLIGEN: Yes.

BRYANT: But back to my thinking as an anthropologist, and of course I work with an anthropologist who likes to remind me that I'm one from time to time and for awhile I worked with two, Neil Henderson.

VAN WILLIGEN: Right.

BRYANT: And then we wrote that book, we wrote the textbook that goes with the course 'The Social and Behavioral Foundations of Public Health.' So that you know, so yeah I think about it a fair amount. I probably . . . where I don't feel I'm, I have a real strong tie to the field is I don't go to the conferences much anymore. I go to SFAA probably every three or f . . . third or fourth year. I haven't gone to triple A meeting in ten years, I bet. I don't subscribe to a lot of the journals except 'Human Organization.' And that one I find I don't read cover-to-cover. I pick some of the things that are useful

but I find the field drifting, frankly, away from things that I'm real interested in. And I, I find myself much more excited by the growing ideas in social marketing in some of the new public health thinking in community organizing coming out of the public health arenas probably more exciting for me right now than the thinking coming out of anthropology.

VAN WILLIGEN: Yes.

BRYANT: To the extent that I'm familiar with it.

VAN WILLIGEN: Right.

BRYANT: It, especially while anthropology got of s . . . into that post modern thing. I just went, this is not where I, this is not useful for me.

VAN WILLIGEN: Right.

BRYANT: And started subscribing to other journals and reading other books and . . .

VAN WILLIGEN: But if, I, I've recently written about what I . . . regard as this emergence of these new inter-disciplines. I mean they're, would involve lots of different people of different disciplinary backgrounds contributing to the same set of issues, and thought they are able to speak to each other and they are not necessarily identified as anthropologists in that context.

BRYANT: Yeah I feel the training I had here, at the University of Kentucky, is very dominant in how I approach things, including even my open mindedness to the marketing model.

VAN WILLIGEN: Right.

BRYANT: So that sense I'm clearly and anthropologist before I'm a nutritionist, before I'm even a public health professional. But when I look at the current disciplines and I look at the books I just bought, you know, I had a whole bunch of money I had to spend from a grant, and not one of those books was from anthropology. I just find the ideas coming from other disciplines a lot more exciting and helpful for me, unfortunately. It, with it, maybe with exception of m . . . some methods issues.

VAN WILLIGEN: Yes.

BRYANT: I still like seeing what Bernard's book [H. Russell Bernard], the newest edition brings and some of that but . . .

VAN WILLIGEN: Right. And that, it, it was the methods that became such an important part of it and of course the, it, in a way of the, the methods have been, have moved themselves.

BRYANT: Yeah.

VAN WILLIGEN: And so now, as I comment to students, it's quite possible to pick up an ethnographic methods textbook and have no anthropology be . . .

BRYANT: Anthropology, right.

VAN WILLIGEN: . . . be involved with it.

BRYANT: Wh . . . and the concept of culture, other fields have taken that concept and done many more exciting things with it than we have. But yeah, a lot of the participant observation and . . .

VAN WILLIGEN: Right.

BRYANT: . . . other qualitative methods, a lot of the books I buy from Sage are not by anthropologists.

VAN WILLIGEN: Right. So . . . Carol, I think . . . it would be best if we . . . c . . . conclude this.

BRYANT: Well thanks.

VAN WILLIGEN: So . . .

BRYANT: This was fun.

VAN WILLIGEN: Huh-huh. And . . .

BRYANT: I'm starting to think about retirement now.

VAN WILLIGEN: Right.

BRYANT: So you said you were interested in community based prevention marketing, and, as I look ahead I'm probably going to work another ten years full time, and I've been thinking, what do I want to do with that ten years?

VAN WILLIGEN: Right.

BRYANT: And it probably is to follow this community-based prevention marketing to, to just see how far I can evaluate it and extend it and get the kinks out of it and that. It's not that it's, not other aren't going to think of ways to combine these sorts of things, but it, it feels like one of my contributions that I'd really like to s . . . to see far enough into its future to see if it really makes a difference or not.

VAN WILLIGEN: It, it was actually one of, probably the reason why I asked about a book, because it, it, you know, it, it . . . there is this, I, I understand what you're saying about disseminations, but it's also good to co . . . can create a, a statement, an authoritative statement about what, what it actually is, because with the other . . . things that you're doing, it, it'll tend to, you know, change your time or become kinda cut up into pieces and there'll be . . . it won't have that kind of dynamic that a single statement on it may have.

BRYANT: You're probably right. When I say, said no, when you asked if I'd write, it's probably because I hadn't, not because I wouldn't, it's just I probably won't [chuckle] there's just so many other things to do d . . . it, that, that I get excited about and of, on, and they get funded that take me away from things like writing a book. But it probably is something I should try to do. Yet . . .

VAN WILLIGEN: After all, and, and I'm not sure about what Kot . . . I guess Kotler that they, there was a book written, wasn't there.

BRYANT: Yeah.

VAN WILLIGEN: And the, and the book kind of m . . . remains a cited and kind of a classic, basically.

BRYANT: Right. Well, Nancy Lee is a marketer and she called Phillip Kotler and said your book stinks, I think, without saying it quite that way, let's re-do it. And she has redone it, re-designed it, and it is now the textbook we use. So it's got a second life and it's, it's really a g . . . a model for kind of how you do something.

VAN WILLIGEN: Yeah but the plan is that . . .

BRYANT: basically

VAN WILLIGEN: . . . that, that man, that, but, but the influence of that statement related to that . . .

BRYANT: Oh.

VAN WILLIGEN: . . . to, to having some written, written summary of it

BRYANT: Right. Well in training modules get outdated and worn out probably easier than books, so.

VAN WILLIGEN: Right.

BRYANT: Certainly we do need to get more of this into the literature, whether it's a book or is manuscripts and in different health education, you know, packaged differently for different disciplines and different journals might be equally powerful, I'm not sure.

VAN WILLIGEN: Right.

BRYANT: But one of the things the prevention research center is supposed to do is disseminate, so we . . . disseminate we will do, it's just I'm not sure what's the best format for giving my proclivities, what, whether a book will really be forthcoming but, but I certainly do want to spend the next ten years nurturing this model and maybe changing it, in everything from the name to how it looks, but I'd like to leave my career with is back to that goal that I set with Art Gallaher in the seventies and that is from all the things I've looked at, you know, what is one of the most cost effective ways in public health, to chan . . . to solve public health problems and to change behavior.

VAN WILLIGEN: Right.

BRYANT: And it's not just individual behavior that would be the immediate target. How do you change the structure and the environment so that it's easier for people to change, and what marketing's taught me is education is often not the answer. People don't put into practice what they know, but can you make it easier for people to change, can you make it more fun to do what y . . . it's good to do. Can you make it more popular to do what is good to do, and marketers know if you can make it fun easy and popular, that you're going to go a long way towards bringing about those healthy behaviors or the u . . . you know, and have an impact on health outcomes.

VAN WILLIGEN: Right.

BRYANT: So, I'd really like to see this thing work, this community-based prevention marketing in some form, and the best I could hope for is that you would see the communities we worked in, are using these skills in other projects.

VAN WILLIGEN: Mmmm, I see.

BRYANT: . . . and are doing their work better as a result of transferring that capacity to them, they're feeling empowered to s . . . be more strategic and not spending as much time and money to try to tackle the problems.

VAN WILLIGEN: Mm-mm. Well, that's always a good indicator, it seems to me, is that when the users . . . transfer it into some other context.

BRYANT: Right.

VAN WILLIGEN: Some novel context with some changes and that's always a . . . it seems to me a, a good thing.

BRYANT: Right.

VAN WILLIGEN: Well it's, it's very . . . you know, I find it very interesting and . . . the . . . [chuckle] I think I'll s . . . s . . . [inaudible] stop it.

[End of Interview]