

PURCHASING FOR A CAUSE:
MILLENNIALS' PERCEPTIONS OF THE CAUSE-RELATED MARKETING
CAMPAIGNS OF SUSAN G. KOMEN FOR THE CURE

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MASTER OF ARTS

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ABSTRACT

Phillips, Alicia Elizabeth, M.A., Department of Communication, College of Arts, Humanities, and Social Sciences, North Dakota State University, November 2011. Purchasing for a Cause: Millennials' Perceptions of the Cause-Related Marketing Campaigns of Susan G. Komen for the Cure. Major Professor: Dr. Amy O'Connor.

Millennials make up the largest generation to date and are highly involved in the support of social causes. Due to their philanthropic interests, Millennials have recently become the target of cause-marketing campaigns. Two studies utilizing focus groups were conducted with 70 college students in order to study the Millennial generation's perception of cause-related marketing campaigns. Study 1 focused on Millennials' general perceptions of cause-related marketing. Study 2 examined the Symbiotic Sustainability Model by focusing on Millennials' perceptions of partner number and relationships of a specific NGO (non-governmental organization), Susan G. Komen for the Cure. Focus group data from both studies indicated that Millennials were very familiar with cause-related marketing campaigns and see the marketing on a daily basis. Participants noted that donation amounts, donation methods, partner congruency, and transparency were all important factors in evaluating cause-related marketing campaigns. The participants were optimistic about cause-related marketing in theory, but were resentful of corporations and sympathetic of NGOs in the examples that they gave. Susan G. Komen for the Cure was seen negatively because they were perceived as monopolizing and dominating the cause market. Participants also believed that pink ribbon breast cancer marketing was too common and had negative effects on pink cause-related marketing campaigns.

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CHAPTER 1. INTRODUCTION

Companies and NGOs have seen the benefit of cause-related marketing (CRM) for the last three decades. According to Varadarajan and Menon (1988), CRM¹ is utilized in order to achieve two objectives. First, corporations seek to improve their corporate image by highlighting their philanthropic deeds and corporate social responsibility. This, in turn, can enhance the company's reputation, leading to increased sales and satisfied stakeholders. The second objective is to highlight the brand and/or cause of the Non-governmental organization (NGO), which can boost awareness of and donations for the NGO. While each entity's overall goal may differ in levels of monetary and social benefit, the partnership sends out a combined message to consumers with their co-branded advertisements.

CRM partnerships communicate a message that both entities are united in support for a specific cause. The messages are communicated through the marketing, advertising, and other forms of strategic communication of co-branded CRM products or events to consumers. Historically, CRM campaigns were developed by for-profit companies to show consumers their social responsibility and increase profits while donating a portion of the proceeds to a cause (Adkins, 1999). Due to higher demands by stakeholders for corporate social responsibility (Cone Inc., 2002), CRM has gone from a corporate rarity to a necessity, expected by most stakeholders (Crane, McWilliams, Matten, Moon, & Siegel, 2008). Consequently, CRM campaigns have been one of the fastest growing forms of marketing (Webb & Mohr, 1998). The growth in CRM marketing can be seen in current

¹ This study, with its focus on co-branded alliances between corporations and NGOs, is best-understood using CRM literature. CRM can be considered an aspect of corporate social responsibility (CSR), however, CSR is not limited solely to CRM. See Carroll (1991) for a full account of the different forms of CSR.

partnerships such as Susan G. Komen for the Cure and Yoplait, Product (RED) and the Gap, and LiveStrong and Nike.

In the last three decades, women have been most receptive to CRM campaigns (Ogilvy PR, 2011), but recent research has shown that men are becoming increasingly responsive to CRM campaigns (Bruell, 2010) as well. Due to the growing interest of CRM, Bruell (2010) reports that campaigns are becoming more “gender-neutral” and targeting younger consumers (p. 31). Cone, Inc. (2010) concurred that the younger adults, called the Millennial generation, are increasingly targeted. Because Millennials are both the largest generation in history and a CRM target demographic (Greenberg & Weber, 2008), their perceptions of CRM are beneficial to the fields of communication and marketing.

The perceptions, ideologies, and demographic characteristics of older generations researched in previous CRM studies differ from the Millennial generation (Brand Amplitude, LLC., 2009; Cone Inc., 2006). Therefore, previous research about perceptions of CRM may not be congruent with the Millennial generation. The current study enters the CRM conversation by asking how Millennials perceive CRM and more specifically, the CRM of Susan G. Komen for the Cure and its various sponsors. To begin, this chapter first provides an introduction to Susan G. Komen for the Cure, the Symbiotic Sustainability Model, and the Millennial generation; second, discusses CRM in relation to Susan G. Komen for the Cure and Millennials; and finally, provides a theoretical and practical rationale for studying Millennials and CRM.

Susan G. Komen for the Cure

Every October, a sea of pink covers grocery shelves, shopping malls, magazine pages, sporting events, and billboards in support of Breast Cancer Awareness Month.

According to King (2006), breast cancer has gone from a “stigmatized disease” to the most marketed cause in CRM campaigns (p. x). Leading this movement is the NGO Susan G. Komen for the Cure. Susan G. Komen for the Cure has more than 250 corporate sponsors and partners that help generate the largest source of funds in the fight against breast cancer (Susan G. Komen for the Cure, 2011a). A portion of these funds have come from CRM campaigns in which the corporate sponsors co-brand their products with the Susan G. Komen for the Cure pink ribbon logo. The large number of corporate sponsors co-branding products and the increased popularity of breast cancer awareness have made breast cancer cause marketing one of the most visible CRM campaigns today (King, 2006).

Susan G. Komen for the Cure currently partners with corporations across multiple sectors and industries. Yoplait and American Airlines are just two of the 27 “Million Dollar Council Elite” partners that are “committed to invest a financial contribution of \$1 million annually in the fight to end breast cancer” (Susan G. Komen for the Cure, 2011b, ¶1). The NGO’s army of sponsors “have found unique ways to engage their consumers, associates and civic programs in the fight against breast cancer, raising valuable funds and awareness for our cause” (Susan G. Komen for the Cure, 2011b, ¶1). October of 2010 marked the 12th year that Yoplait and Susan G. Komen for the Cure have partnered in the *Save Lids to Save Lives* campaign (Susan G. Komen for the Cure, 2010c). Every Yoplait yogurt cup produced during October was topped with a pink lid and included the following statement on the packaging:

For every pink lid you send in by December 31, 2010, Yoplait will donate 10 cents to Susan G. Komen for the Cure, up to \$1.6 million. And we guarantee a donation of at least \$500,000. This money goes to research and community outreach across

the country. We're also proud to be the National Presenting Sponsor of Susan G. Komen Race for the Cure. (Yoplait, 2010)

Over the years this partnership has successfully strengthened Yoplait's brand image and sales, as well as increased public awareness of breast cancer (Berglind & Nakata, 2005). The *Save Lids to Save Lives* campaign has contributed over \$20 million since the campaign's inception in 1998 (Yoplait, 2010). The success of this campaign, and others like it, has driven Susan G. Komen for the Cure to partner with companies across various corporate sectors. Likewise, the success of these partnerships has also enticed corporations to seek out Susan G. Komen for the Cure. Some corporate partners develop annual CRM campaigns, such as Yoplait's *Save Lids to Save Lives*, and others run year-round campaigns, such as KitchenAid's *Cook for the Cure*.

KitchenAid has been partnering with the Susan G. Komen for the Cure since 2001 by co-branding selected CRM cookware products (Susan G. Komen for the Cure, 2010d). KitchenAid vowed to donate a percentage of the proceeds for each pink cookware product sold. The success of the alliance prompted both entities to create the *Cook for the Cure* campaign, producing an entire line of pink-colored products. To date, KitchenAid and the Susan G. Komen for the Cure have raised more than \$7 million for breast cancer research and awareness (KitchenAid, 2010).

Though many of Susan G. Komen for the Cure's campaigns have been successful, not all of the partnerships garnered public support. The CRM campaign between Susan G. Komen for the Cure and KFC, titled *Buckets for the Cure*, sparked controversy amongst breast cancer advocates and consumers alike. KFC replaced their usual white and red packaging with pink on their buckets of chicken coinciding with the CRM campaign. Fifty

cents was donated to the NGO for each bucket sold (KFC, 2010). The controversial campaign raised \$4.2 million, which was the single largest donation in Susan G. Komen for the Cure history (KFC, 2010). According to Hutchinson (2010), many critics said the mismatch of health standards between the campaign's partners was a sign that "pinking" products had gone too far. Even before the controversy of KFC and Susan G. Komen for the Cure, breast cancer advocates and consumers had become skeptical of the abundance of pink products on the market.

In October of 2008, *Forbes* printed a story reporting that there were consumer concerns about the trend to co-brand pink products in breast cancer CRM campaigns. Poggi (2008) stated in the *Forbes* article that a corporation's motivation in CRM is becoming more about the popularity of pink ribbon CRM than genuine goodwill. The article also indicated concerns about *how much* and *where* the money was being donated. In an effort to quell concerns of motivation and donation transparency, Poggi (2008) suggested that consumers demand more information from CRM campaign partners.

Poggi (2008) highlighted the group Breast Cancer Action (BCA) as a leader in the pink ribbon CRM skepticism. BCA is "a national education and activist organization that challenges assumptions and inspires change to end the breast cancer epidemic" (Breast Cancer Action, 2010, ¶ 2). In the article, BCA encouraged consumers to investigate the monetary donations and terms of breast cancer CRM campaigns in order to avoid purchasing products that were exploiting the pink ribbon by "going pink purely for the sake of profits" (Poggi, 2008, ¶ 4). The concerns that *Forbes* and BCA introduced in 2008 continued during Breast Cancer Awareness Month the following year.

In October of 2009, the *Boston Globe* printed an article titled “Sick of Pink.” In the article, Frieswick (2009) reported that not everyone found the pink ribbon and breast cancer CRM positive. Frieswick (2009) reported the following about the CRM campaigns:

Some survivors feel companies are exploiting breast cancer, marketing themselves as philanthropic outfits that care about women when what they mostly care about is the pink ribbon’s enormous ability to boost profits. Some just feel overwhelmed by the constant pink reminder, especially in October, Breast Cancer Awareness Month, of a disease that has forever altered their lives (¶ 4).

Reports criticizing and questioning the partnerships of Susan G. Komen for the Cure and pink ribbon marketing have recently emerged (Stukin, 2006; Westervelt, 2011). Concerns about the legitimacy and ethical challenges of cross-sector alliances have led some consumers, industry analysts, and researchers to call for greater understanding of CRM and corporate-NGO alliances (Frieswick, 2009; Poggi, 2008; Shumate & O’Connor, 2010; O’Connor & Shumate, 2010b). The Symbiotic Sustainability Model offers a model that explains the co-constructed communication, created by each partnered corporation and NGO, about corporate-NGO alliances.

Symbiotic Sustainability Model

The Symbiotic Sustainability Model (SSM) provides a theoretical model for how NGOs and corporations create, maintain, and dissolve alliances (Shumate & O’Connor, 2010a). According to Shumate and O’Connor (2010a), NGOs and corporations make decisions about the number and type of partners they choose to align with prior to the alliance. The decision to partner with an NGO or corporation is made in order to make legitimacy claims, accumulate capital, and influence operating environments (Shumate &

O'Connor, 2010a). Cause-related marketing partners seek these outcomes in their CRM partnerships.

The SSM offers six propositions regarding “capital mobilization, NGO and corporations’ choice(s) of alliance partner(s), the number of alliance partners that organizations are likely to communicate, and the potential risks and rewards of such alliances” (Shumate & O’Connor, 2010a, p. 578). Specifically, proposition four of the SSM states, “As the number of cross-sector alliance partners increases, the communication of such alliances results in a diminishing return from stakeholders; conversely, the communication of a limited number of alliances increases perceptions of value” (Shumate & O’Connor, 2010a, p. 590). While the communication of the number of alliances is said to decrease returns, Susan G. Komen for the Cure’s partner number and communication of these new partnerships continues to grow.

Millennials

While older generations are common targets for most CRM strategies (Bruell, 2010; Ogilvy PR, 2011), NGO and corporate partners are now aiming CRM campaigns at the Millennial generation (Cone Inc., 2010). A lack of definitional consensus exists for who belongs to the Millennial generation. For example, Meister and Willyerd (2010) define Millennials as individuals born between 1977 and 1997, while Howe and Strauss (2000) consider Millennials to be born between 1982 and 2000. This study utilizes Madland and Teixeira’s (2009) Millennial generation’s defined age range, encompassing those born from 1978 to 2000. Madland and Teixeira’s (2009) justification for the Millennial generation’s parameters is explained in the following:

First, the “baby bust,” typically linked to Generation X, had recently ended in 1978, and an era of steadily rising births had begun. Second, data analysis indicates that the views of those born 1978-1981, who reached adolescence in the Clinton years, are quite similar to the views of those born later in the 1980s. (p. 4)

Due to their large range in age, researchers have begun to outline the features that make this generation a united front.

For example, within their generation Millennials hold similar beliefs about charitable giving/spending and social causes (Cone Inc., 2006). Those who belong to this generation are civic-minded and socially responsible (Cone, Inc. 2006). One of the most cherished values of the Millennials is “making a difference” in the world (Brand Amplitude, 2008). The Cone, Inc. (2006) study added, “With sophisticated social awareness, Millennials believe community extends beyond their own backyard and feel empowered and compelled to make the world a better place” (p. 4). Additionally, recent reports on Millennials illustrate that they are interested in the social benefit associated with CRM campaigns (Cone Inc., 2010; Greenberg & Weber, 2008; Pew Research Center, 2010).

Another characteristic of Millennials is their spending power. The Pew Research Institute (2010) reported that the average household income of Millennials from ages 18-28 is \$58,620. Approximately one-third of Millennials over 18 years old still live with their families (Allstate, 2010), allowing them to use the money they get from their parents in addition to their own income. Howe and Strauss (2000) added that their living situation and numerical size account for large amounts of money being spent *on* them by their parents, and also *by* them as consumers. Millennials are making more, at their age, than any other

generation before them (Brand Amplitude, LLC, 2008). Those from 18 to 24 have nearly \$40 billion in discretionary income available to them (Loechner, 2010).

The Millennial generation's economic power and beliefs about charitable giving may help explain why CRM campaigns targeting younger adults have become more prevalent in the last 10 years. Most notably, Millennials are the target of CRM campaigns and donation tactics involving sports teams (Kott, 2005; Robinson, 2005), athletic companies and professionals (McGlone & Martin, 2006), and social media and technology (Kerwin, 2010). In 2006, a Cone Inc. research study of 1,800 Millennials reported that 70% of the respondents felt they were not seeing enough CRM initiatives by the brands they consume. Nearly four years later, Cone, Inc. (2010) reported that 97% of 18 to 24-year-old Millennials agreed that they want companies to involve philanthropy in their marketing. Furthermore, 85% of the Millennials polled in the 2010 Cone, Inc. study said they would change brands for a cause, and 73% would try a new brand if it were involved in CRM.

Although Millennials are influenced by CRM, media and technology also shape their actions as consumers. Millennials have grown up alongside the internet and an evolving media environment (Rapoza, 2008). They were born into a world where communication and retail innovations, such as cell phones and the internet, are an integral part of their lives (Greenberg & Weber, 2008), and they use these innovations to make more informed decisions about what they consume (Albritton, 2011). Other generations, such as the Baby Boomers and even Gen X members, are adapting as fast as they can, but they still don't possess the comfort and integration with technology and new media like the Millennials (Zemke, Raines, & Filipczak, 2000). Yarrow & O'Donnell's (2009) book *Gen buY* highlights, "[Millennials] unique relationship with brands, their powerful influence on

marketers, their peers and their friends, their love of technology, and their speedy, visual world are reshaping retailing” (p. 41).

The Millennials’ relationship with new technology and media has helped them to become savvier and more informed of current marketing techniques than other groups (Cui, Trent, Sullivan, & Matiru, 2003; Kleber & Associates, 2009; Millennial, Inc. 2011). They were born into an age of increased advertising messages and media consumption which has made them skeptical shoppers that research quality, price, and reputation before they buy (Brand Amplitude, LLC, 2009). In terms of CRM spending, this demographic is interested in the reputations of both partners in addition to their overall contribution to the charities (Cui, Trent, Sullivan, and Matiru, 2003). The contrast between the Millennials’ interest in CRM’s philanthropic benefits and their skepticism toward marketing motivations is used in this study to understand the Millennials’ perceptions of CRM.

Rationale

Given recent reports that Millennials are a leading economic force in the CRM arena, a greater understanding of their perceptions regarding the individual partners and number of CRM partnerships may help identify how CRM alliance communication affects campaign success/failure. To begin this inquiry, this study first examines how Millennials perceive CRM in general, as well as both partners in the marketing alliance. Second, the current study focuses on how Millennials, a highly sought-after and pro-cause generation, perceive Susan G. Komen for the Cure, the largest single-issue NGO with over 250 partners. This research offers a platform for a broader discussion of the benefits/risks of communicating multiple corporate partners.

Proposition four of the Symbiotic Sustainability Model (Shumate & O'Connor, 2010a) will provide the framework in this study to examine the perception of a single partner's (Susan G. Komen for the Cure) CRM communication. Previous research using the SSM focused on the communication of both NGO and corporate partners together in the alliance (O'Connor & Shumate, 2010; Shumate & O'Connor, 2010b), but an in-depth look at perceptions of a specific partner is absent. This study contributes to the communication field by examining the SSM through primary data.

On a practical level, the study of CRM and Millennials may provide NGOs and corporations with information to tailor campaigns to meet consumer expectations. Consumers play a pivotal role in the success of a CRM campaign, and now Millennials are increasing in economic strength and influence (Loechner, 2010). By understanding CRM from the Millennials' perspective, NGOs and their corporate partners can build more effective, targeted campaigns for a younger generation.

Research on Millennials and CRM may also inform alliance partners about the advantages/disadvantages to the number of CRM partners they communicate to the public. The number of *actual* partners and the number of partners *communicated* to the public can differ. For instance, some corporations may choose not to disclose a partnership publicly. Furthermore, some partnerships may also be communicated more than others. Proposition four of the Symbiotic Sustainability Model examines the increase and decrease in an alliance's value in regard to the number of partners communicated by a corporation or NGO (Shumate & O'Connor, 2010a). By examining Millennials' perceptions of the CRM practices of the most visible breast cancer NGO, Susan G. Komen for the Cure, within the

highly publicized issue of breast cancer awareness it may be possible to gain insight about how the communication practices of CRM can inform consumers' practical choices.

Conclusion

Millennials' perceptions of CRM may provide insight for the future direction of CRM campaigns. Most CRM literature has focused mainly on consumer perceptions of the corporate partner and consumer purchase intentions regarding the CRM product, neglecting to investigate the perceptions of consumers regarding the NGO partner. Examining Millennials' perceptions of CRM and Susan G. Komen for the Cure may offer a platform for a broader discussion of the benefits/risks CRM, and of communicating multiple corporate partners.

This chapter gave an introduction to cause-related marketing, Millennials, the Symbiotic Sustainability Model, and Susan G. Komen for the Cure. A brief overview of how CRM is related to Susan G. Komen for the Cure and Millennials was also outlined. Finally, the chapter provided a theoretical and practical rationale for studying Millennials and CRM. The next chapter will review relevant literature concerning CRM, Millennials, and Susan G. Komen for the Cure. The Symbiotic Sustainability Model (Shumate & O'Connor, 2010a) will be explained in detail as the guiding model for the study. Finally, all of the concepts will be connected to introduce this study's research questions.

CHAPTER 2. REVIEW OF LITERATURE

Corporations and NGOs can have multiple CRM partners that they communicate to their shareholders at any given time. This thesis seeks to understand the Millennial generation's perceptions of CRM and, more specifically, the Millennials' perceptions of Susan G. Komen for the Cure in regards to the number of alliances the NGO communicates. The research will examine Millennials and CRM using proposition four in the Symbiotic Sustainability Model (Shumate & O'Connor, 2010a). This chapter presents a review of literature relevant to the study of Millennials' perceptions of Susan G. Komen for the Cure's CRM practices. First, previous CRM literature is discussed. Second, CRM is explained with particular attention given to research concerning CRM and Millennials. Third, an overview of Susan G. Komen for the Cure and its corporate partners is presented. Finally, the Symbiotic Sustainability Model is discussed, with emphasis on proposition four.

Cause-related Marketing (CRM)

CRM is the marketing collaboration of a corporation and a NGO by sharing promotion through a mutual product or event (Varadarajan & Menon, 1988). In practice, a company donates a percentage of their proceeds or a flat donation amount from a specific product or service to a benefit or cause. Products or services are co-branded by the corporation and NGO, forming a marriage between the two brands. A co-branded CRM product's packaging is often altered to communicate the alliance, which can be significant because of the cost associated with these alterations. An example of CRM co-branding is M&M's partnership with Susan G. Komen for the Cure (Mars, Inc., 2011). From August to November, M&M's packaging includes Susan G. Komen for the Cure's logo. M&M's also

changes the color of the candies, in specially marked packages, to pink (Mars, Inc., 2011). Co-branding in CRM is significant to both partners because of the monetary costs, as well as the sharing of their brand, which is a corporation or organization's most valuable asset (Daw, 2006).

Corporations and NGOs partner in CRM campaigns in order to gain mutual monetary benefit and social recognition (Adkins, 1999). Corporations use CRM to communicate their social responsibility and concern to their consumers by co-branding a product with an NGO. NGOs use CRM to expand social awareness and gain monetary donations for their organization. While each entity's overall goals may differ in levels of monetary benefit and social recognition, the partnership sends out a combined message to consumers and is mutually beneficial. This mutual benefit makes CRM different from corporate philanthropy because, unlike corporate philanthropy, CRM is not considered entirely altruistic (Bergland & Nakata, 2005).

The first widely publicized NGO-corporate partnership considered to be CRM was the Statue of Liberty campaign sponsored by American Express in 1983 (Smith & Higgins, 2000). American Express donated one cent each time an account holder used their card and one dollar for every new card activated to the Statue of Liberty campaign. The campaign raised over \$1 million, while card usage increased by 28% and new card activations increased by 17% (Tanen, Steckel, Simons, & Simons, 1999). The success of the American Express Statue of Liberty campaign propelled CRM campaigns into becoming one of the fastest growing forms of marketing (Webb & Mohr, 1998). Although more and more NGOs are utilizing CRM, the most popular are related to health issues (i.e. breast cancer, heart disease) (Cone, Inc. 2007).

Early CRM research focused mainly on the corporation's monetary gain and consumer purchase motivations in CRM campaigns (see Brown and Dacin, 1997; Ross, Patterson, & Stutts, 1992). A majority of this research found that the overall customer perception of the for-profit was positive due to their involvement with an NGO (see Smith & Alcorn, 1991; Webb & Mohr, 1998). In a study by Lafferty and Goldsmith (2003), results showed that corporate partners almost always benefited, monetarily or by brand recognition, from CRM. It was usually only the NGO that was subject to any monetary or reputational risk.

The NGO's ability to gain new supporters was heavily dependent on the familiarity and reputation of their corporate partner (Lafferty & Goldsmith, 2003). If the cause was well known there was a less dramatic increase in support. If they were an unfamiliar cause, many new supporters were attracted by their partnership with the for-profit company. In either case, the consumer's positive attitude toward the for-profit company seemed to increase because they saw the company as socially invested (Lafferty & Goldsmith, 2003).

CRM campaigns have been beneficial for NGOs as well, most notably because of the financial assistance and exposure to consumers that might otherwise be inaccessible. Their overall success depends on a number of variables, including consumer loyalty and patronage to the partnering corporation. For example, Broderick, Jogi, and Garry (2003) studied the Tickled Pink campaign between ASDA (a British supermarket chain) and Avon's Breast Cancer Awareness movement. They found that a consumer's continued involvement with breast cancer awareness, after being exposed to Avon's cause in the CRM campaign, was determined by their individual emotional involvement with the partnership. This emotional involvement was also connected to their relationship with and

patronage of ASDA stores and prior knowledge of the cause (Broderick, Jogi, and Garry, 2003). If they felt connected to the cause by their patronage with ASDA, they would continue to support breast cancer awareness. If they were connected to the cause, they would most often continue to shop at ASDA.

Cornwell and Coote (2005) found that emotional involvement and cause identification was important for customers who sought out certain CRM products, but most often consumers would rely on brand recognition in buying products. Although this is not helpful to an NGO's goal for behavioral change, donation awareness may often connect consumers to the cause.

The success of CRM campaigns can depend on the compatibility of the corporate and NGO partner. Gupta and Pirsch (2006) found that the fit, or congruency, between the corporation and the NGO partners was related to positive perceptions of a CRM campaign. The fit in a CRM partnership is the relationship between the corporation's target market, image, and positioning and the NGO or cause's image and public (Varadarajan & Menon, 1988). Lafferty, Goldsmith, and Hult (2004) confirmed the importance of cause-brand fit, adding that a close fit between partners can result in a more successful campaign.

Partnerships that are perceived to be unfit, such as the partnership between KFC and Susan G. Komen for the Cure, can lead to negative consumer reactions.

Millennials and CRM

There are 95 million Millennials, those born between the years of 1978 and 2000, making them the "largest age cohort in the history of the nation" (Greenberg & Weber, 2008, p. 13), bypassing the nearly 74 million members of the Baby Boomer Generation. Millennials have been described as a civic-minded and socially conscious consumer

generation that is concerned with global welfare and their impact on society (Cone, Inc., 2006). Additionally, they have an “annual discretionary spending” at a projected \$69 billion (Loechner, 2010, ¶2), out of the \$1.03 trillion total in US spending (Coster, 2010). Due to their size, civic interest, and high discretionary spending, Cone, Inc. (2006) found that CRM campaigns and cause-branding are the most effective marketing techniques in reaching Millennials. Advertising and marketing researchers, such as Cone, Inc., have recently publicized CRM as an effective tool in reaching Millennials, but there is still a lack of research regarding Millennials’ perceptions of CRM campaigns.

The research on Millennials and CRM has primarily focused on three different areas: CRM targeting Millennials through new technologies, the willingness of Millennials to donate, and donation typologies of Millennials (Brown & Dacin, 1997; Cui, Trent, Sullivan, & Matiru, 2003; Ferguson & Goldman, 2010; Gourville & Rengan, 2004; Kerwin, 2010; Kott, 2005; Robinson, 2005). A good portion of research has a particular emphasis in developing “how to” strategies for corporations (Adkins 1999). These studies, while informative, do not address Millennials’ perceptions of CRM partners, particularly the NGO, or the macro-level concern of CRM partner numbers.

Cui, Trent, Sullivan, and Matiru (2003) researched Millennials (labeled as Generation Y in the study) and their motivations for purchasing co-branded products with hypothetical CRM scenarios. The participants seemed to be more aware of the legitimacy of partnerships and their overall contribution. Their decision to purchase a product depended on their positive or negative feelings towards the CRM (Cui, Trent, Sullivan, and Matiru, 2003). Their findings outlined multiple factors that led Millennials to be more supportive of CRM campaigns. First, Millennials reacted positively to campaigns needing

immediate funds, such as disaster relief. Second, campaigns not solely based on consumer transactions were seen as superior. This meant some money was given directly by the corporation, and not dependent on consumer purchases for donations. Millennials saw this as being more altruistic and improved the reputation of the partnership. And third, sincere, long-term partnerships were also seen as better CRM campaigns (Cui, Trent, Sullivan, and Matiru, 2003).

More recent CRM research incorporates the study of new media technologies used to facilitate philanthropic giving. The use of mobile phone technology for philanthropic means drove the Pew Internet and American Life Project (2010) to survey young adults about their cell phone use. Of the approximately 2,000 surveyed, nearly 20 percent of 18 to 29-year-olds had made a charitable donation via text message within the past year. Similar successes have been reported with cause-related marketing that utilize the internet and social media to target young adults (Ferguson & Goldman, 2010; Husted & Whitehouse, 2002; Pitt, Keating, Bruwer, Murgolo-Poore, & de Bussy, 2002). These findings reflect changes in the technology utilized in philanthropic campaigns and continue to further the research of young adults as a target market for CRM.

With the popularity and changing trends in CRM, breast cancer nonprofits have emerged as the most desired CRM partners for corporations (King, 2006). Currently, many corporations are partnering with breast cancer causes such as AVON, the Breast Cancer Research Foundation, City of Hope, and the American Cancer Society. However, Susan G. Komen for the Cure takes the CRM campaigns to a higher level.

Susan G. Komen for the Cure and the Breast Cancer Movement

Susan G. Komen for the Cure was founded by Nancy Brinker in 1982 in honor of her sister, Susan G. Komen, who died of breast cancer (Susan G. Komen for the Cure, 2011a). Brinker promised Komen that she would “end breast cancer forever” with the development of a grassroots movement to help raise money for research and awareness (Susan G. Komen for the Cure, 2011a, ¶ 1-2). Before Brinker’s promise, breast cancer had long been a disease that was not openly talked about, let alone publicized by NGOs and corporations. But in the early 1980s, Betty Ford, Nancy Reagan, and Nancy Brinker began speaking publicly “about the personal impact of the disease, which increased awareness of breast cancer and made it more acceptable to talk about it openly” (Braun, 2003, p. S101).

Since the organization’s inception, Susan G. Komen for the Cure has become the largest single-issue NGO, raising nearly \$2 billion in the fight against breast cancer (Susan G. Komen for the Cure, 2011a). They have made the largest amount of money for breast cancer research and awareness to date, and Brinker recently promised to raise an additional \$1 billion dollars by 2017 to find a cure for breast cancer (Susan G. Komen for the Cure, 2011a). The success of Susan G. Komen for the Cure has been largely due to their sponsored events, such as the *Race for the Cure*, and CRM co-branding (King, 2006).

In 1983, Susan G. Komen for the Cure held their first *Race for the Cure* in Dallas, Texas (King, 2006). What started as less than 800 runners in Dallas exploded into millions of runners across more than 50 cities nationwide by 1995 (Susan G. Komen for the Cure, 2011e). The growth of the race came from a mixture of “a-thon” popularity at the time and declaration that breast cancer was the hot new charity by *New York Times Magazine*

(Belkin, 1996). Susan G. Komen for the Cure's ability to turn this momentum into larger corporate sponsors led to the NGO securing corporate partnerships in CRM.

Susan G. Komen for the Cure's numerous corporate partners are differentiated on their website by donation amount and industry exclusivity. The *Million Dollar Council* includes corporations that have donated at least \$1 million since partnering with the NGO (Susan G. Komen for the Cure, 2011b). Corporations that donate the minimum of \$1 million annually are given access to the *Million Dollar Council Elite*. The *Million Dollar Council Elite* also entitles them to the exclusivity of the Susan G. Komen for the Cure partnership within their industry (Susan G. Komen for the Cure, 2011b). American Airlines, for example, is a member of the *Million Dollar Council Elite*. Because of their *Million Dollar Council Elite* status, Susan G. Komen for the Cure will not partner with any other airline as long as American Airlines donates the minimum of \$1 million annually.

With the combination of Susan G. Komen for the Cure's popularity and exclusive corporate opportunities, the NGO has made itself a desirable partner. In 2011, a Harris Interactive poll of over 25,000 people, ages 15 and older, found Susan G. Komen for the Cure to be one of the most popular and trusted NGO brands. Furthermore, their brand value is on par or exceeds that of some of their corporate partners. This brand value has made corporations more willing to donate at least \$1 million each year to secure their position in the *Million Dollar Council Elite* (Sulik, 2011). As Susan G. Komen for the Cure has grown, its profile has eclipsed all other cancer organizations (Szabo, 2011), largely due to its ability to entice and secure well-known consumer products and partners.

Symbiotic Sustainability Model

The Symbiotic Sustainability Model (SSM; Shumate & O'Connor, 2010a) is a macro-level model that seeks to explain NGO-corporate alliances through the co-constructed communication about their partnership. The co-constructed messages are communicated by an alliance “in order to enter the public dialogue, offer legitimacy claims, and create positive relationships with publics that can influence their operating environments” (Shumate & O'Connor, 2010a, p. 584). The SSM offers six propositions regarding “capital mobilization, NGO and corporations’ choice(s) of alliance partner(s), the number of alliance partners that organizations are likely to communicate, and the potential risks and rewards of such alliances” (Shumate & O'Connor, 2010a, p. 578). The propositions are offered in the SSM to explain the relationship between corporations and NGOs.

This research focused on proposition four of the SSM by investigating Millennials’ perceptions of the number of alliances communicated by the NGO partner. According to Shumate and O'Connor (2010a), proposition four of the SSM model suggests that, “as the number of cross-sector alliance partners increases, the communication of such alliances results in a diminishing return from stakeholders; conversely, the communication of a limited number of alliances increases the perceptions of value” (p. 590). The SSM was used to observe if value of Susan G. Komen for the Cure was affected by the perception of their partner numbers in CRM.

Proposition four relies on the Cialdini’s scarcity principle (1993). The scarcity principle determines that the worth of an item is dependent on its availability. Cialdini (1993) states that, “opportunities seem more valuable to us when their availability is

limited” (p. 238). Shumate and O’Connor (2010a) reflect this in cross-sector alliances by stating, “if the number of cross-sector alliances communicated by an organization is limited, the communication of the existence and character of those alliances to stakeholders will be more persuasive” (p. 590). When partners are limited, their value is perceived as greater; when partners are in excess, their perceived value decreases.

Shumate and O’Connor (2010b) offer a partial test, using secondary data from corporate websites, of proposition four in that they investigated the number of alliances communicated by corporations. Results showed that in order to avoid diminishing returns and increase corporate value corporations communicated a limited number of NGO alliances and did not report multiple NGO alliances within the same industry (Shumate & O’Connor, 2010b). One limitation of the SSM research is that while the alliance numbers were reported, there was not an investigation of the stakeholder perceptions concerning how many alliances were communicated (Shumate & O’Connor, 2010a). This study extends earlier research by examining the perceptions of a single stakeholder group (Millennials) regarding the number of alliances communicated in Susan G. Komen for the Cure’s CRM campaigns.

According to *Businessweek* (Bloomberg, 2010), Susan G. Komen for the Cure has over 250 corporate partners. The partners span across multiple sectors and industries. Susan G. Komen for the Cure’s corporate alliances are listed on the organizations website, with individual webpages dedicated to each corporate partner (Susan G. Komen for the Cure, 2010d). Each corporate partner’s webpage typically includes an outline of the individual CRM campaign, historical information about the partnership, information about the co-branded product, the contribution totals from the partnership, and links to the corporate

partner websites. Proposition four of the SSM will be used to examine a particular stakeholder group's (Millennials) perceptions of the multiple CRM alliances communicated between a single NGO (Susan G. Komen for the Cure) and their corporate sponsors.

Research Questions

Previous CRM literature has focused mainly on consumer purchase intentions regarding the co-branded product, as well as how-to guides for corporations to capitalize on these partnerships. This thesis combines two studies. The first study examines the perceptions of CRM in general. The second study offers the first partial examination of proposition four of the SSM using primary data. In doing so, the study examined how consumers perceive a nonprofit organization that communicates multiple CRM partnerships. More specifically, the study examined how the largest generation (Millennials) perceives the largest nonprofit partner (Susan G. Komen for the Cure) in CRM campaigns.

Study 1

RQ1: How do Millennials understand CRM messages?

RQ2: How do Millennials discover CRM campaign messages?

RQ3: How do CRM messages make Millennials feel about the partnership as a whole?

RQ4: How do CRM messages make Millennials feel about each partner individually?

Study 2

RQ1: How do Millennials perceive the number of alliance partners communicated by Susan G. Komen for the Cure?

RQ2: How do Millennials differentiate among/between the alliance partnerships communicated by Susan G. Komen for the Cure?

CHAPTER 3. METHODOLOGY

This thesis is the combination of two studies. Study 1 was conducted in October 2010, as an exploratory study to learn general information about Millennials' overall perceptions of CRM. The results from Study 1 were used to refine the theoretical and methodological approaches for Study 2. Study 2 further explored Millennials' perceptions of CRM, specifically with Susan G. Komen for the Cure. Study 2 added emphases on the number of partners communicated as well as perceptions of CRM partner relationships, as suggested by the results of Study 1.

Study 1

Method Overview. Millennials reflect a large economic demographic for marketers (Loechner, 2010), which may explain why they are starting to become more frequent targets for CRM campaigns (Cone Inc., 2010). More detailed research of Millennials' perceptions of *both* partners, interpretation of CRM messages, and modes of discovery would help CRM partners better understand this demographic. It would also add insight into the perceptions of this generation in the communication and marketing fields. The importance of this research led me to the following research questions regarding the general understanding of Millennials and CRM:

RQ1: How do Millennials understand CRM messages?

RQ2: How do Millennials discover CRM campaign messages?

RQ3: How do CRM messages make Millennials feel about the partnership as a whole?

RQ4: How do CRM messages make Millennials feel about each partner individually?

In order to answer the four research questions focus groups were conducted. A closed-ended, quantitative survey was given at the beginning of each one-hour focus group in order to obtain descriptive statistics and the participants' knowledge of CRM partnerships (Appendix A). The remainder of the focus group utilized a semi-structured approach with a series of open-ended questions, as well as follow-up questions.

Research Design.

Participants. Thirty-six ($N = 36$) participants were involved in five focus groups for Study 1. Focus groups contained a range of 6-10 participants, in line with Keyton's (2006) recommendation for group size. Participants were recruited from the research pool at a mid-sized Midwest university. The research pool consisted of students enrolled in introductory public speaking courses. The students were required to participate in two research studies each semester, earning 5 points of credit for each study. Due to the time commitment for the focus groups in this study, students earned all 10 of their research points for their participation.

Participating students were within the birth years of the Millennial generation (1978-2000), as determined by Madland and Teixeira (2009), but over the age of 18 in accordance with the Midwestern university's Institutional Review Board. Eighty-nine percent of the participants ($n = 32$) were between the ages of 18 and 24. This convenience and purposeful sample was acceptable for this study because over 98% of the undergraduate students at the university were within the age range of the Millennial generation (NDSU, 2010). The sample was made up of 21 males and 15 females and 58% of participants lived off campus. The majority of participants were employed part-time (55%, $n = 20$). Participants who were employed full time comprised 17% ($n = 6$) of the

sample, while 28% (n = 10) of the participants were not employed. The majority of the participants (n = 33) indicated that their annual household income was \$35,000 or less, two (n = 2) participants made \$35,001 – 49,000, and one (n = 1) indicated an income of \$50,000 - 74,000.

Students were recruited by email and signed up for focus group times in the researcher's office (Appendix B). During focus groups, participants were asked to sign a consent form (Appendix C) and identified by their first names only. The researcher assigned pseudonyms during transcription to ensure confidentiality. Focus groups were conducted in a private classroom at the participants' university.

Procedures. Focus groups were utilized in order to take advantage of the participants' "human tendency to discuss issues and ideas in groups" (Sink, 1991, p. 197), while giving the researcher the opportunity to observe the reciprocal discourse of participants on a specific social topic (Albrecht, Johnson & Walther, 1993; Frey & Fontana, 1993). This method can provide better understanding of a population's "perceptions, feelings, attitudes, and motivations" (Edmunds, 1999, p. 3) as they create meanings and make decisions through discussion (Patton, 1990). Focus groups are also complementary to research in which decisions, understandings, and ideas are formed and sustained in groups (Albrecht, Johnson & Walther, 1993; Frey & Fontana, 1993; Knodel, 1993; Krueger & Casey, 2000; Lunt & Livingstone, 1996; Morgan, 1993, 1997). The researcher believes that the inquiry about perceptions of CRM qualifies as this area of research. This method is also useful in exploratory research about a population or phenomenon that is relatively unknown (Edmunds, 1999), which reflects the current understanding of Millennials and CRM.

The focus group protocol was semi-structured to allow the participants a greater freedom to delve into themes and topics that may be unknown to the researcher. The semi-structured style also helped generate results that were grounded in the participants' voice, rather than that of the researcher (O'Connor, Shumate, & Meister, 2008). During the focus groups, participants were asked several general questions about their perceptions of CRM campaigns (Appendix D). Initial questions explored the participants' comprehension with CRM campaigns and their feelings about the campaign marketing messages. More in-depth questions were asked to investigate their perceptions of the individual partners and CRM partnerships as a whole. Finally, participants were asked how often they encounter CRM and where they find the campaigns. Throughout the focus group, concrete examples of co-branded CRM products were used to facilitate discussion.

Concrete examples of co-branded products were included to allow participants to provide a more comprehensive analysis of the CRM partnership. Because this study aims to understand Millennial's perceptions of both partners and the partnership, products were used to give participants specific examples to reflect on. Actual products were not introduced to the focus groups until after the researcher had assessed the participants' ability to recall and explain their understanding of CRM. Some of the products included were a container of Yoplait yogurt co-branded with Susan G. Komen for the Cure, a box of Mike and Ike candy co-branded with Alex's Lemonade Stand Foundation, and an Odwalla juice bottle co-branded with *Haiti for Hope*.

The quantitative survey was implemented before the focus group in order to gauge participants' CRM knowledge prior to their exposure to concrete examples and in-depth discussion of CRM campaigns. This survey was used to collect demographic statistics as

well as the participants' level of CRM partnership recognition. This information was used to determine how aware participants were of current CRM partnerships, as well as their knowledge of NGOs' logos in CRM co-branding. This survey was not looking for relationships, but was piloted with the possibility of further development in future research.

Data Analysis. Upon the conclusion of each focus group, the researcher transcribed the session. After all of the focus groups were transcribed, the researcher performed an inductive analysis of the transcripts. All transcripts were read multiple times to become familiar with the data and *open coding* commenced. According to Strauss & Corbin (1998), *open coding* is the process of breaking down data into parts in order to uncover similarities and differences. After all transcripts were read and concepts had been identified, the researcher generated a list of concepts in themes. A *theme* for the thematic analysis is defined as a "pattern found in the information that at the minimum describes and organizes possible observations or at the maximum interprets aspects of the phenomenon (Boyatzis, 1998, p. vii). Themes are similar to *categories or focused codes* in grounded theory that are used to "pinpoint and develop the most salient categories in large batches of data" (Charmaz, 2006, p. 46). Sub-themes were also used to expand a theme when differentiating characteristics occurred, such as where when, and why (Strauss & Corbin, 1998). Once themes were determined in open-coding, *axial coding* commenced.

Axial coding is the process of finding relationships between categories (Strauss & Corbin, 1999). When repeated ideas are found within categories, the repeated categories are merged into a singular theme. By creating a single theme from repeated data, the data can be easily organized and sorted. After the initial phase of axial coding was concluded,

the researcher continued to analyze data using open and axial coding. This process continued until no new concepts were found. A total of 1904 lines were coded.

Study 2

Method Overview. Findings from Study 1, discussed in detail in Chapter 4, showed that respondents assumed that most breast cancer co-branded products in CRM campaigns were Susan G. Komen for the Cure, even if they were co-branded with other breast cancer awareness NGOs. Findings also showed that respondents felt Susan G. Komen for the Cure and breast cancer awareness issues were monopolizing CRM, which in turn was taking opportunities away from other causes. Participants stated CRM is a positive practice when both partners communicated sincerely about their efforts. Participants measured the sincerity of the corporations by their donation amounts and the nonprofits by their communication practices. Four findings emerged from Study 1 that were most influential on the design of Study 2; (1) Pink ribbon CRM was seen as excessive and overwhelming; (2) Susan G. Komen for the Cure was seen negatively due to perceptions that they were to blame for excessive pink ribbon CRM; (3) Participants avoided or ignored co-branded products; and (4) Millennial consumers assume nearly all of pink ribbon marketing is connected to Susan G. Komen for the Cure.

These major themes and data collected in Study 1 led to the research in Study 2. The unique findings concerning pink ribbon fatigue and Susan G. Komen for the Cure backlash led to a focus on the relation of partner number in CRM. To examine how Millennials perceive the number of communicated alliances by Susan G. Komen for the Cure, additional focus groups were conducted. A thematic analysis of focus groups was implemented to answer the following research questions:

RQ1: How do Millennials perceive the number of alliance partners communicated by Susan G. Komen for the Cure?

RQ2: How do Millennials differentiate among/between the alliance partnerships communicated by Susan G. Komen for the Cure?

Research Design.

Participants. Thirty-four participants (N = 34) were involved in five focus groups for Study 2. Focus groups were conducted until the gold standard of saturation was achieved (Strauss & Corbin, 1998). Focus groups were scheduled with a target of 6-10 participants per group. Participants were recruited from the introductory public speaking course at a mid-sized Midwestern university. Students were required to participate in two research studies, worth five points each, in their public speaking course. Due to the time commitment for the focus groups in this study, each student earned their entire 10-point research requirement for their participation.

This convenience and purposeful sample was acceptable for this study because over 98% of the undergraduate students at the university are within the age range of Millennials (NDSU, 2010). Similar to Study 1, students were required to be members of the Millennial generation (1978-2000), as determined by Madland and Teixeira (2009), but over the age of 18 in accordance with the university's Institutional Review Board. Eighty-eight percent of the participants (n = 30) were between the ages of 18 and 24. The sample was made up of 15 males and 19 females and 74% of participants lived off campus. The majority of the participants were employed part-time (62%, n = 21). Participants who were employed full-time comprised 20% (n = 7) of the sample while 18% (n = 6) of the participants were not

employed. The majority (n=33) of the participants indicated a household income of \$35,000 or less, and one (n = 1) participant made \$35,001-49,000.

Students were recruited by e-mail and asked to sign up for focus group times on a sign-up sheet in the researcher's office (Appendix E). To maintain homogeneity within groups, participants were asked to sign up for focus groups based on their experience with cancer. Two focus group sessions were set-aside for those with family or friends who had/have cancer. The researcher separated groups in order to investigate differences in perceptions of pink ribbon CRM and Susan G. Komen for the Cure between those who had a connection with cancer and those who did not. The result was one focus group of six participants who were closely related to someone with cancer. There were no differences in the thematic results between the groups. The themes reported in Chapter 4 were consistent across the group connected to cancer and groups that were not.

Focus groups were conducted in a private classroom at the participants' university. Participants were required to sign a consent form verifying their voluntary participation (Appendix F). During focus groups participants were only identified by their first name. In transcribing, the researcher assigned pseudonyms to ensure the confidentiality of the participants.

Procedures. One-hour focus groups were conducted using a semi-structured interview approach. The focus groups used a series of open-ended questions with follow-up questions (Appendix G). The first four questions were used in order to compare the participants' attitudes/beliefs with the results from Study 1. The remainder of the questions investigated the issues of partner choice and number of corporate/nonprofit partners. This portion allowed for proposition four of the SSM to be explored. As in Study 1, a survey

was given at the beginning of the focus group session to collect demographic data. Survey questions also asked participants to identify their social cause involvement and breast cancer NGO awareness (Appendix H).

In accordance with Morgan's (1997) suggestions, five focus groups were conducted in order to increase the probability of theoretical saturation. Focus groups contained 6-10 participants, in line with Keyton's (2006) recommendation for group size. As in Study 1, the focus group protocol was semi-structured to allow the participants greater freedom to discuss themes that may be unknown to the researcher.

During the focus groups, participants were asked several general questions about their perceptions of Susan G. Komen for the Cure CRM campaigns. Initial questions explored the participants' understanding of the CRM campaigns. More in-depth questions investigated their perceptions of the number of alliances that Susan G. Komen for the Cure communicates with their multiple CRM campaigns.

Tangible examples of Susan G. Komen for the Cure's CRM products were brought to the focus group sessions to give participants specific examples to reflect upon, if needed. To avoid undue influence, the products were shown toward the end of the focus group after participants had given sufficient examples of their own. These products were chosen based on their availability and visibility to the participants (i.e. proximity to campus). Some of the Susan G. Komen for the Cure CRM examples included a pink box of Cheerios, a package of pink Sharpie markers, and a pink KFC bucket.

Data Analysis. As in Study 1, after transcription of all of the focus groups the researcher performed an inductive analysis of the transcripts. All transcripts were read multiple times to become familiar with the data before the researcher began *open coding*.

Following *open coding*, codes were put into *themes* to organize data into larger interrelated groups. Once categories were determined, *axial coding* was performed. Open and axial coding were continued until theoretical saturation was reached.

Selective coding using *sensitizing concepts* was the last phase of data analysis. Sensitizing concepts "give the researcher a sense of how observed instances of a phenomenon might fit within conceptual categories" (Bowen, 2006, pp. 7-8). This study used proposition four of SSM to look at increased/decreased value of the nonprofit according to the number of alliances communicated. The sensitizing concepts were "perceptions of value," "perceptions of partner number," and the relationship between these elements. Utilizing sensitizing concepts regarding the SSM allowed any categories or sub-categories to emerge that were not previously identified during open and axial coding. A total of 2022 lines of transcription were coded for Study 2.

CHAPTER 4. RESULTS

Once the focus groups reached theoretical saturation, the researcher transcribed and inductively coded the transcriptions. Study 1 and Study 2 were independently transcribed and coded. Study 1 was transcribed and coded in October and November 2010. Study 2 was transcribed and coded June and July of 2011. Each study's themes are presented separately in this chapter.

Study 1

The research questions asked in Study 1 (N = 36) focused on participants' overall understanding and perceptions of CRM. Participants were asked about their comprehension of CRM campaign messages and where they discover CRM campaigns. As part of their discussion participants shared perceptions of CRM partnerships and partners in the campaigns. These questions led into their role as consumers when faced with purchasing CRM products. A total of 1904 lines were coded. The five themes that emerged from Study 1 were as follows: CRM comprehension (RQ1), CRM exposure location (RQ2), purchase motivation, CRM evaluation (RQ3 and RQ4), and pink ribbon saturation.

Theme 1: CRM Comprehension. The first theme that emerged was participants' comprehension of CRM campaigns. Comprehension is defined in this study as the participants' understanding of CRM communication (RQ1). This understanding includes the partners' goals of mutual benefit in practice and the element of CRM. A total of 333 lines were coded for CRM comprehension. Participants in this study were asked to explain their understanding of CRM messages. Initially, participants stated that they were unaware of "cause-related marketing." However, after the researcher defined CRM and displayed physical examples of co-branded CRM products, 35 of the 36 participants stated that they

saw it as a common practice. P.J. explained this comprehension by stating, “Actually, I’ve never heard of cause-related marketing before...but after seeing these examples it’s totally something I see everyday.” Though most participants could not name the marketing practice as CRM, nearly all participants (n = 32) could describe a campaign. Nora echoed this CRM awareness:

I bought a bunch of groceries last week that were attached to causes. My box of Cheerios was pink for breast cancer awareness. I see this sort of thing (CRM) all the time...companies and nonprofits partnering. I wasn’t aware it was a specific marketing tactic. I guess I assumed it was normal business practice now because these campaigns are on everything.

P.J. and Nora’s statements illustrate that participants were cognizant of philanthropic marketing and CRM partnerships in general. Although they did not recognize CRM by name, they could identify and provide detailed examples of the practice of CRM.

The majority of the participants (n = 30) understood the premise behind the monetary and social exchange between partners. Steph explained, “Each time I buy something that’s tied to a charity I know part of my money goes to help support the cause.” Clark added, “It (CRM) helps both the company and the nonprofit. The nonprofit gets money and the company gets social recognition. I think there’s a possibility for increased sales for the company too. People like to see corporations doing their part.” Each focus group acknowledged the mutual benefit of CRM. As Clark highlighted, participants understood the monetary gain for nonprofits and the social and possible monetary benefits of corporations. All of the focus groups had participants that felt CRM was a “win-win situation,” as Scarlett described, for both partners.

As participants discussed their comprehension of CRM, many of them gave specific examples of how they came to discover and learn about CRM. Roughly one-third (n = 13) of the participants' mentioned their discovery of CRM stemmed from something they purchased. Julie stated, "I first noticed it [CRM] with a credit card I got when I graduated. The credit card company gave percentages of the money I spent to the ASPCA animals." Other participants claimed that when the packaging of a familiar product changed, or when additional nonprofit logos were added, the changes would spark participants' curiosity to look into and learn about CRM. Julie stated, "I've been drinking Diet Coke for years. I started seeing the red dress symbol on the cans and I Googled it to see what it was. I read all about the campaign on the Coke website."

Many participants (n = 16) mentioned discovering CRM with the Nike and LiveStrong partnership. The popularity of the yellow bracelets that Nike manufactured made participants aware of the monetary and social awareness exchange. Connor stated,

I never noticed it until I was in middle school. We all had LiveStrong bracelets back then. I thought they were just cool bracelets at first...then I found out when you bought one Nike gave money to Lance Armstrong's cancer foundation.

Participants discussed their comprehension of CRM, and how their discovery led to their knowledge of the practice. Participants also talked about where they are currently exposed to these campaigns.

Theme 2: CRM Exposure Location. The theme of CRM exposure emerged as participants discussed their current shopping habits. CRM exposure location is the places that participants seeing CRM campaigns in their daily lives (RQ2). A total of 328 lines were coded for CRM exposure location. The researcher asked participants how they

discovered CRM campaigns. All of the focus groups listed CRM exposure in specific stores, on the internet, on television, and in magazines. Participants discussed how the levels of exposure differed across each medium, but agreed that they had encountered CRM in all four places. In each of the examples, participants included insights about their age/generation and their exposure to CRM.

Nearly all participants (n = 33) explained that they see the majority of CRM campaigns in big-box stores, grocery stores, and at the mall. Ben explained, "I mainly see cause-related marketing when I go to Target or Wal-Mart. It's not something I noticed until probably the last couple years. ... Maybe it's because I'm doing my own shopping now that I live away from home." The CRM products that participants mentioned they were exposed to the most were food, cosmetics, sporting goods, and technological items. Though these items aren't necessarily exclusive to the Millennial generation, participants believed CRM campaigns were also targeting younger consumers with more age-specific products, and that CRM campaigns were becoming more common in stores that cater to young adults.

Hannah explained:

I see more and more cause-related marketing on items for younger people like us, like the *I 'heart' boobies* bracelets. Those weren't made for our parents to wear. I bought the *I 'heart' boobies* watch at the mall when they partnered with Vestal, and my mom thought it was vulgar.

Owen added, "Or even the sunglasses I bought at Hot Topic for a teen cancer cause. They are definitely involving young people in cause-related marketing. And, well, Hot Topic is totally not your parents' store." Although most of the examples were general goods from grocery stores and big-box retailers, each focus group gave several examples of CRM

campaigns emerging in stores for younger markets. Ben suggests why younger adults are being included in CRM targeting: “I think companies are starting to focus on us [Millennials] because we’re just as involved in charities as our parents are. We spend money and care about social causes too.”

Over half of the participants (n = 22) suggested that they had seen CRM by way of technology and the internet. All of the focus groups discussed the evidence of CRM in online marketing. Participants said they were exposed to campaigns through social networking sites, sidebar advertising, and individual merchant websites. Ethan illustrated:

This may be because of Breast Cancer Awareness Month, but I’ve seen a lot of cause marketing with pink ribbons on Amazon and Facebook recently. It stuck out to me because my home page on Amazon was full of products that were pink or had pink ribbons on them.

Other participants echoed Ethan’s sentiments by adding websites such as Ebay, the Gap, and Overstock.com as marketing co-branded CRM products. But the consensus of participants exposed to CRM online was their surprise that they weren’t seeing it more often. Danielle concluded:

I think advertisers and marketers try to reach younger people through technology. It’s weird that we aren’t bombarded with CRM like some other marketing schemes. But I guess it’s just starting...give it a couple months and everything I buy on Etsy.com will be for a cause.

Although not all of the participants had seen online CRM campaigns, nearly all of them (n = 35) reported seeing CRM in magazines and television. Anne added, “Just yesterday I saw an ad in *Self* magazine for Yoplait and Susan G. Komen. Oh, and I also

saw one for Diet Coke and I think the American Heart Association.” Even though participants insisted that a large part of their time was spent online, CRM campaigns in print and television media were either more frequent or gained more attention. Participants were able to give numerous examples of magazine ads and commercials compared to a few online examples. The example that Anne highlighted was recognized by most of the participants. The focus group discussions about CRM comprehension and exposure led participants to analyze their motivation to purchase products connected to a cause.

Theme 3: Purchase Motivation. Purchase motivation can be understood as the determining factors influencing participants to buy a co-branded CRM product. A total of 323 lines were coded for purchase motivation. Two primary motivations were reported in inspiring participants to purchase CRM products: the nonprofit cause supported and the product itself. In regard to cause motivating purchases Henry stated:

My aunt has breast cancer, so when my family and I see anything with a pink ribbon, even if we don't necessarily need it, we'll usually pick it up. We donate directly to breast cancer causes, but we also like to show our support with pink items.

Though purchases motivated by the cause was mentioned in four of the five focus groups it was only supported by a small percentage of participants ($n = 9$). The cause-motivated participants said they would purchase most co-branded CRM products when it supported a cause they are passionate about, regardless of their need for the product. Elliott added, “I look on the websites of nonprofits I support all the time...like the Alzheimer's Association and environmental causes. I'll buy the [CRM] products just to help donate.”

The majority of participants (n = 27), however, reported that the product was the motivating factor in purchasing items. Unlike cause-motivated participants, the nonprofit donation in CRM was just an added benefit for product-motivated participants. P.J.

summed this up by saying:

If it (a product) is not something I need, I won't buy it just because it's supporting a charity. I mean, if I'm going to the store to buy chips and the one I want is supporting environmental causes or heart disease – great. But I'm probably not going to grab everything I see with a ribbon on it just because they donate money to charity.

Many of the participants shared the sentiment about the product determining their general purchase motivations, regardless of CRM. Jack highlighted, “The product I need is my first priority when I shop. If I need laundry soap, I get the cheapest one. The brand doesn't matter to me.” The product also emerged in the discussion as a determinant in choosing between a co-branded CRM item and one that was not. “If I need a new backpack I'm going to buy one that looks cool and functions well. I don't have a specific brand. If another one has a pink ribbon, but doesn't look as good, I wouldn't get it,” Kim added. Though product preference was the primary determinant, brand preference was also a factor in buying products.

Participants claimed they were loyal to brands that have partnered with nonprofits, but they are unlikely to switch from a brand they prefer just because of CRM promotions. Emily summed up the motivation of product loyalty in CRM by stating:

The only pop I drink is Diet Coke. If Diet Pepsi partnered with a cause I like I'm pretty sure I wouldn't switch to Diet Pepsi. I would probably donate to the cause directly and keep drinking what I like.

Close to half of the participants (n = 15) said that if they weren't loyal to a brand and needed a product, they would purchase a CRM product that was co-branded if the value and price were comparable to non-CRM products. Emily added, "...if I wanted, let's say pretzels, I would buy one with a cause attached because I don't have a favorite." Betty concurred, "I buy things at the grocery store with pink ribbons and heart health causes. I'm not picky about food, so I buy them if they aren't a lot more [money] than the competitors." Even though most participants were motivated to purchase goods based on the product or brand, they still were aware of CRM campaigns when they shop.

Theme 4: CRM Analysis. The next theme to emerge was the critical analysis of CRM. The theme of CRM analysis is defined as the partner and consumer components that factor into participants' perception of CRM (RQ3). A total of 440 lines were coded for CRM analysis. Participants were asked to discuss their feelings about the CRM partnerships in theory and in practical examples they have seen. All five groups broke down their perceptions of CRM by isolating the consumer, corporate, and nonprofit positions. Participants thought the practice of CRM was positive, but their optimism had exceptions when separating the NGO and corporation. Abbey summed up the analysis by stating, "The marketing itself is a good idea, but it depends on which perspective you look at it from. There are totally upsides and downsides depending on where you fit into the campaign." As participants discussed differences in CRM partner perspective, the researcher asked them their feelings about each individual partner (RQ4). The three sub-

themes that emerged in their analysis were consumer optimism, corporate resentment, and NGO sympathy.

Subtheme: Consumer Optimism. The subtheme of optimism emerged as the participants were discussing their experience and identification with CRM campaigns. Consumer optimism is defined as the positive feelings participants had for CRM as a practice (RQ3). A total of 130 lines were coded for consumer optimism. Nearly all of the participants (n = 35) stated that CRM is a positive practice, based on the perception that it improves the monetary and social standings for both parties, as well as allowing consumers an additional donation outlet. Scarlett summed up this optimism with the following:

I think cause-related marketing is a win-win for the most part. An NGO gets more money and more people interested in their cause, and the company looks good for helping a charity. I guess it also could be a win for the people who buy the products because we feel like we're doing something to help too.

It was a shared belief (n = 32) that CRM was a win-win in regards to the corporation and NGO, but participants also considered it a win for the consumer. Gerard claimed, "This (CRM) marketing is great because we're all pitching in...it's tough not to like it when there are obvious benefits. The company, NGO, and consumers are all being socially active, which should be done more often." Participants believed that CRM as a practice was encouraging. They felt it was a good way to get people who wouldn't normally donate involved. Rachel commented, "I might not send money, but I know I can give a little bit with purchasing co-branded things." Although the majority of participants expressed positive perceptions of CRM in theory, they were much more critical of corporate partners.

Subtheme: Corporate Resentment. The subtheme of corporate resentment emerged as group members discussed individual partners in CRM campaigns. Corporate resentment is the negativity and disappointment participants felt with corporate partners in CRM (RQ4). A total of 189 lines were coded for corporate resentment. Participants mentioned that not enough corporations partner in CRM campaigns. Robert explained this sentiment by saying, “More corporations can afford to give something back to society.” Nora added, “Companies have a lot of power and influence on consumers. If more of them would partner with NGOs there could be much more awareness for causes and more money donated.” The sentiment of increased corporate involvement in social causes and CRM was echoed by most of the participants (n = 32). Not only did participants feel more corporations should be involved in CRM, but they also stated that the corporations partnering in CRM don’t give as much money as they should.

Every focus group felt corporations currently involved in CRM campaigns could make larger donation amounts. Katherine reflected about a recent purchase in which she felt the for-profit company wasn’t giving a large enough contribution:

I bought a digital camera that was red for AIDS awareness. Before I tossed the box I read that Sony was only giving five percent of the proceeds to Product RED. That’s ridiculous. The camera was over \$200. Sony makes so much money, they can afford to give more than five percent.

Participants also believed that corporations make the most money from and receive the most benefit in CRM campaigns. Emily highlighted the corporate benefit:

I know that the NGOs get percentages of the profits, but think of all of the money and recognition the corporation gets. I really think sales increase when people see a

company donating to a cause. Some (consumers) will switch to their brand. And when the campaign is over, they (the corporation) stop donating proceeds but still ride on the profits of the converted customers.

Participants suggested that more corporations should participate in CRM campaigns, but strongly agreed that there were ethical considerations and standards associated with this type of partnership. They felt corporations should give a generous donation and make more long-term efforts to help the NGO. These considerations were due in part to participants feeling the NGO is the most vulnerable partner in the alliance.

Subtheme: NGO Sympathy. The subtheme of NGO sympathy was unanimous throughout all of the focus groups in Study 1. NGO sympathy is the reflection of sympathy about the dependent nature of NGOs in CRM. (RQ4). A total of 121 lines were coded for NGO sympathy. Most (n = 31) participants believed that NGOs have to partner with corporations to keep their charity afloat. Julie stated the following to emphasize this feeling:

Well, the underdog is definitely the nonprofit. I mean...the only money they get is from donations. And I'm sure they aren't getting as much as they should from the corporations they partner with. It's usually such a small percentage. It's pretty sad.

Because participants believed that NGOs were not as powerful as corporations, they felt that there was a chance that NGOs may be taken advantage of. Ethan elaborated on this idea by saying the following:

All companies have to do is slap a ribbon on their product and give a small donation. The product could sell millions more because of this (CRM co-branding)

but they won't have to necessarily give any extra to the nonprofit. And there's nothing that the nonprofit can do to change it.

NGOs were regarded as economically dependent on the for-profit partner. Participants felt that NGOs need corporations for money and that corporate partners take advantage of this. Participants sympathized with the position of the NGOs in evaluating each partner in the campaigns, although pink ribbon campaigns for breast cancer were given less compassion.

Theme 5: Pink Ribbon Saturation. Susan G. Komen for the Cure and pink ribbons for breast cancer were used as examples on many occasions during the focus groups. The theme of pink ribbon saturation is defined as excessive amounts of pink ribbon CRM. A total of 380 lines were coded for pink ribbon saturation. This theme emerged as the participants discussed their perceptions about CRM in general (RQ3) and individual partners (RQ4). "I'm kind of getting sick of the pink thing...even in other months [aside from October]. Too many companies are doing the pink thing...it's overwhelming," said Jack. Most participants described (n = 25) pink ribbon saturation as a negative effect of the popularity of pink ribbon CRM. Anne explained, "I'm sort of annoyed with it all [pink ribbon CRM]. It's used too much and like...a money-making scheme that doesn't feel like charity anymore."

Many participants (n = 31) suggested that pink ribbon CRM was overexposed and overshadowing other causes and NGOs. They believed pink ribbon charities were monopolizing the NGO market. Penelope highlighted this phenomenon by saying, "It feels like breast cancer charities are partnering with the most companies...they have so many markets covered." The perceived monopolization by breast cancer CRM was seen as negatively affecting other NGOs. Many participants (n = 18) also felt that pink ribbon

marketing was taking money from other deserving charities. Owen explained this feeling in the following statement:

All you see co-branded [in CRM] are pink ribbons...and breast cancer isn't even the biggest threat. I read that heart disease kills way more people. But pink just seems to be trendy so charities like heart disease are getting left behind.

Participants stated that they felt more NGOs from other social causes would get exposure if breast cancer charities were less aggressive in partnering with larger companies.

The majority of the participants (n = 31) suggested the monopolization of breast cancer CRM and pink ribbon co-branding was producing the oversaturation in the cause market. "Breast cancer awareness is the trendy thing now. So I'm sure most companies want to partner with those charities," Luke suggested. There was a consensus that the "trendiness" of pink ribbons for breast cancer put a shadow over other charities. One sub-theme emerged regarding the pink ribbons in breast cancer CRM: Susan G. Komen for the Cure domination.

Subtheme: Susan G. Komen for the Cure Domination. A subtheme that emerged from the data was Susan G. Komen for the Cure's domination in breast cancer CRM. This subtheme may be seen as Susan G. Komen for the Cure's individual role in pink saturation. A total of 267 lines from pink saturation were dedicated to Susan G. Komen for the Cure domination. Owen stated, "Susan G. Komen has a pink ribbons on my yogurt, my water, my football team, and everything else." Owen's statement was echoed by many of the participants (n = 20) in the focus groups. Participants believed that Susan G. Komen for the Cure was mainly responsible for pink saturation.

In some cases, participants used pink ribbon charities and Susan G. Komen interchangeably. At one point Danielle realized she had treated pink NGOs and Susan G. Komen for the Cure as one and the same saying:

It's almost like I assume everything pink is just Susan G. Komen. We've all been sitting here talking about pink ribbons and said Susan G. Komen was the nonprofit partner, even though I'm not sure she was...her charity just seems to dominate the rest of them.

The researcher asked if there were other breast cancer charities that they felt were also dominating the pink ribbon marketing. Participants were unable to name other charities. Some of them stated they did not feel other charities were dominating breast cancer marketing as much as Susan G. Komen for the Cure. Gerard added, "I kind of see Komen as the main perpetrator in this whole thing. She definitely does way more than any others [breast cancer NGOs]."

More than half of the participants (n = 26) felt this dominance was negative, although there was a small portion of participants (n = 5) who felt Susan G. Komen for the Cure's presence wasn't a problem. This exception was illustrated by Rachel who said, "If the money is going to a good cause then it doesn't matter to me which NGO is attached to it. It's all going to the same place [breast cancer charity] anyway." In opposition to Rachel's statement, those who expressed the negative domination of Susan G. Komen and pink suggest the tendency to shun pink co-branded CRM products.

Nearly half (n = 17) of the participants felt that the abundance of pink has made them ignore or stop purchasing pink co-branded CRM products. This behavior was due, in

part, to participants feeling pink ribbons are oversaturating CRM and turning the practice into a marketing ploy. Lucy explained the phenomenon in the following:

I see so many pink items each day that I've starting tuning them out. If I do notice them I sometimes make a point to buy other products. The whole pink thing has just gotten out of hand. It's not even about awareness anymore, because really...who isn't aware?"

This "tuning out" as Lucy mentioned was a shared action by many participants. Others said they notice pink ribbon marketing all too often. Elliott said, "It's almost like we can't go anywhere without pink ribbons. I notice it everywhere I go. I can't ignore it, but I can choose not to buy it." In both cases, the overabundance of pink co-branded CRM products is making the products undesirable; so much so that many participants (n = 15) reported that if they had a choice between two products aligning with NGOs, they would choose one other than breast cancer. Luke emphasized this action with the following statement:

That's why I don't even pay attention to pink ribbons anymore. It just seems like a marketing scheme that Susan G. Komen and companies use to make money. If I was choosing a kind of toothpaste and one was donating to breast cancer and one to autism, I'd probably choose the one for autism.

Other participants agreed that they were becoming desensitized to pink CRM products. There was a shared feeling that CRM was a good practice, but breast cancer CRM was becoming too trendy and over-marketed.

In summary, participants in Study 1 comprehended the concept of CRM and understood the messages in the campaigns. They discovered CRM in a variety of places including stores, on the internet, in magazines, and on television. Though they were

optimistic about the practice of CRM, participants reported skepticism toward the corporate partners and sympathy toward the NGO partners. One NGO partner and cause that was excluded from the participants' sympathy was Susan G. Komen for the Cure and pink ribbon campaigns. Participants believed pink ribbon and Susan G. Komen for the Cure CRM was monopolizing and overwhelming.

Survey Results. Before the discussion portion of the focus group started, participants were asked to fill out a survey indicating their demographic information and media consumption (Appendix A). The demographic information was included in the previous chapter. Participants were also asked about their media consumption (see Table 1) in order to compare data to previous literature about Millennials' media habits, as well as their responses in the focus group discussions. Participants were asked to indicate all of the media types that they regularly consumed. These results will be discussed in the following chapter.

Table 1. What types of media do you regularly consume?

Media Type	Percentage of participants
Magazines	59%
Television	91%
Internet	100%
Radio	59%
Newspapers	26%
Mobile phone media	26%
Other	1%

Study 2

The first two questions asked in the focus groups of Study 2 were similar to those asked in Study 1. These questions focused on the participants' understanding and perceptions of the CRM practice as a whole. By repeating these questions at the beginning

of the focus group, the researcher was able to check the consistency of the themes attained in Study 1. The recurrent themes between Study 1 and Study 2 were CRM comprehension and pink ribbon saturation. The difference is the additional themes that emerged in Study 2 were due to the change in focus from Study 1.

The remainder of the focus group questions in Study 2 concentrated on the CRM practices of Susan G. Komen for the Cure. The emphasis on Susan G. Komen for the Cure was the result of themes specific to the NGO that emerged from Study 1. All questions regarding CRM were attached to campaigns and partnerships associated with Susan G. Komen for the Cure's pink ribbon CRM. Areas of focus in the questions included partner choice and number of partners in CRM relationships. These areas of focus allowed proposition four of the SSM to be explored.

Once the focus groups reached theoretical saturation the researcher transcribed and inductively coded the transcriptions. A total of 2022 lines were coded. The four themes that emerged from the transcriptions were as follows: CRM comprehension, transparency, partner evaluation, and pink ribbon saturation.

Theme 1: CRM Comprehension. The theme of CRM comprehension that surfaced in Study 1 also emerged in Study 2. CRM comprehension is defined in this study as the participants' understanding of CRM communication. This understanding includes the partners' goals of mutual benefit in practice and the element of co-branding in CRM. There were a total of 349 lines coded resulting in CRM comprehension. Similar to Study 1, many participants admitted that the term "cause-related marketing" was new to them. After the researcher explained CRM, 32 of the 34 participants expressed their understanding of the practice. Alec explained, "We see this a lot now. They partner to raise funds for the

NGO. Companies also advertise the campaign a lot to show their customers they care.” Jonas added, “Yeah, it helps the NGO a lot but companies also make money with this. They [corporations] use it to gain respect and from the public which can increase their profits.” All of the focus groups understood there were mutual benefits for each partner as well as the consumer. Grace explained, “People feel good buying these products. I feel like I’m helping when I purchased something benefiting a charity.” The participants took turns explaining the trade-offs and benefits of CRM. To further gauge their understanding, the researcher asked participants to give examples of CRM campaigns they had seen.

A variety of examples were given during the focus groups to illustrate their comprehension of CRM. Nearly all of the participants could identify specific CRM pairings. Michael said, “I downloaded a CD on iTunes for the Japan tsunami. The Red Cross and iTunes partnered with a bunch of artists to raise money with the CD.” Some of the other CRM campaigns mentioned included Susan G. Komen for the Cure and Yoplait, Livestrong and Nike, (Product) RED and the Gap, as well as DoSomething.org and Hewlett Packard. The participants’ ability to provide tangible examples demonstrated their understanding and familiarity with CRM. As participants discussed their comprehension of CRM, many of them gave specific examples of how they came to discover and learn about CRM.

About half of the participants (n = 18) learned about CRM when a product or brand that they were loyal to co-branded with a NGO. Colin explained:

I first saw cause-related marketing when the MLB [Major League Baseball] started using pink bats and gear for breast cancer. I’m a huge baseball fan, and obviously

pink bats are pretty noticeable, so it was something that caught my eye. You could go buy pink MLB bats and gloves and stuff to support breast cancer.

All of the focus groups discussed the different campaigns that led them to identify and comprehend CRM. Some of them (n = 18) noticed through a purchase or brand, and others (n = 8) became aware through the NGO themselves. “My family gives to St. Jude [Children’s Hospital] regularly, so I [learned about it] when companies partnered with them.” After participants’ comprehension of CRM was discussed, they began to describe what they expected from CRM campaigns.

Theme 2: Transparency. The next theme to emerge during the focus groups was transparency. Transparency may be seen as clear and upfront communication of the CRM partnership on the co-branded products and in the marketing messages. The code of transparency had 202 total coded lines. The researcher asked participants to explain any benefits and/or drawbacks in CRM campaigns. As the conversations developed, participants in every focus group discussed the importance of transparency in the packaging and marketing of CRM. Many of participants (n = 25) stressed the importance of upfront donation amounts and clear donation destinations. Elizabeth explained:

There are so many cause-related marketing products that you have to look at the packaging to be sure it’s legit. Sometimes I can’t tell how much the donation amount is or where it’s going. If I can’t find that [information], I don’t buy it.

The concern about upfront donation information was exemplified by CRM involving pink ribbons and packaging for breast cancer. Emma added, “Especially with all of the pink ribbons. You really have to make sure the company isn’t just using pink because it’s popular. It [pink CRM co-branding] is so common people start to assume anything pink

goes to breast cancer.” Participants revealed that CRM products with transparent packaging (including donation amounts, donation terms, and NGO information) were better than those missing this information. Luke added, “If I can’t find how much money is being donated I feel like they are trying to hide something.”

Participants claimed that packaging is a way to gauge the legitimacy and commitment of the corporate partner. Specifically, the donation amount was used to assess the corporation’s contribution in the partnership. William stated, “If a product has information about the NGO and makes the corporation’s donation amount visible, I tend to believe they [the corporation] are actually interested in the welfare of the cause.” If information was missing, participants believed that corporations were trying to take advantage of the NGO or the consumer. Andy explained:

It’s possible for companies to manipulate their involvement, and not donate to their profit potential, and still get credit for being charitable. If a company like General Mills only donates \$100,000 I would be upset because they can afford to give more than that.

Andy’s comment reflected the feelings of participants in all of the focus groups. People in each group expressed skepticism of companies donating the minimum amount while trying to receive the maximum benefit. Jonas added, “I want to see how much a company is donating clearly on the package. I also pay attention to how much they put into advertising (the partnership). If the advertising seems to outweigh the donation amount...that’s a problem.”

Additionally, participants used CRM packaging to evaluate the NGO in CRM. Otis stated, “I like to know about the nonprofit’s mission too. Different nonprofits give to

different areas in causes. Like, does their money go to research, or prevention, or just awareness?" If this information was printed on the packaging, participants believed they could make a more informed decision about the nonprofit. They also mentioned that detailed nonprofit information could help engage new supporters for cause. Thomas said, "If there's enough good info about the nonprofit people might become long-term donators. Or at least have a better understanding of the cause."

Theme 3: Partner Evaluation. The next theme to emerge from the data was partner evaluation. Participants were asked how they separate and evaluate the different Susan G. Komen for the Cure partners. Partner evaluation is understood as the variables used to assess each partner in a CRM campaign (RQ2). Partner evaluation represented 707 total coded lines. Some of the participants (n = 11) said there was one element in particular, such as donation amount, that they used to evaluate a partnership. Most participants (n = 19) said they look at multiple pieces of a campaign's terms to differentiate partners. William commented, "You have to look at a lot of different things in these partnerships...I mean, each company is different. And with so many pink ribbon campaigns, it's hard to tell who's giving what to who." Partner evaluation emerged with the following sub-themes: donation amount, donation method, and congruency of the partners.

Subtheme: Donation Amount. Participants stated that the donation amount of the corporation was an important factor to Susan G. Komen for the Cure's campaigns. Donation amount is the corporate partner's donation total that was used in evaluating partner's reputation. Donation amount represented 324 of the total lines coded. Participants in every focus group said that donation amount was one of the first things they notice.

“Sometimes you have to read the fine print to see what a company is giving. But I want to know they’re donating a decent amount.” said Gene. Emma added:

It’s interesting how little money some of the big companies give. Or they’ll have limits, like up to a certain amount. Which is probably a fraction of what they make from the campaign. Like, Redken had a bunch of pink stuff with Susan G. Komen at my salon. All of it was pink, so you had no choice anyway. And I think they gave less than \$100,000 total. It costs like \$40 or \$50 and they sell tons...it seemed stingy to me.”

Participants didn’t have specific percentages or amounts that they considered adequate, but they used the size of the company and other campaigns to gauge sufficiency. “I don’t expect every company to give millions of dollars, but if you’re a company like Ford then, yes, you can give millions. I guess it’s hard to explain, but it’s obvious when companies are donating the bare minimum,” exclaimed Padma. Participants stressed that although there were not strict rules for donating, each of them felt capable of recognizing when a company was giving enough or too little.

Subtheme: Donation Method. The next element of partner evaluation was the donation method. Donation method is defined as the way in which consumers donate money to the CRM campaign (i.e. portion of purchase, sending in lids). Donation method represented 205 of the lines coded. The focus group participants discussed the benefits and drawbacks of donations from purchase and donations by participation. Many (n = 15) of the participants preferred when a portion of their proceeds went to Susan G. Komen for the Cure. Jonas explained, “I think it’s better when a company makes it so I can donate just by buying something...like when donations are a percentage [of the purchase]. It’s easier for

me.” Participants also believed that donations from purchase proceeds were beneficial because they could be done with little effort. Nigel commented, “I can donate by getting a product I’d normally buy anyway without having to do too much.”

Participants also felt that donating from a purchased enabled passive donations by people who normally may not contribute. A few participants (n = 3) believed donation by purchase was negative because people may be less likely to contribute in other ways. Luke explained, “I guess some consumers could believe that since they bought their Yoplait yogurt, or whatever product with a pink lid, that they’ve done their part.” Others (n = 8) felt that they would be more positive about this donation method if the corporation was giving additional money outside of the CRM campaign.

Some of the participants (n = 7) felt that actively participating in the donation process made them feel like they had done more. An example offered was Susan G. Komen for the Cure’s partnership with Yoplait yogurt as an example. Consumers must mail in the Yoplait yogurt lids, worth 10 cents each, to donate. Katherine explained, “It makes people feel like they are doing something to help. When my parents saved lids it made them proud to collect and then mail them.” While others agreed with Katherine’s comment, some believed that having to actively participate would generate fewer donations. Fred disputed, “Yeah, but think of how many people forget...or just don’t send the lids. That’s money Yoplait doesn’t have to donate. It actually works better for the corporation sometimes to make people mail in or do something.” Although there were benefits and drawbacks in the ways to donate, participants agreed that the donation method was important to evaluate.

Subtheme: Congruency of Partners. Many of the participants (n = 17) stressed that congruency between the corporation’s products and NGO’s cause was important in

evaluating partnerships. Congruency of partners is defined as how well the partners' missions, reputations, and/or products fit together. Congruency of partners accounted for 178 total coded lines. Participants disliked the partnership if the corporation's reputation, mission, or products conflicted with the NGO. Lily explained:

KFC and Ford have carcinogens and pollutants that conflict with breast cancer. It's a double standard...we'll take your money for the cause and pretend the corporation isn't hurting other areas of peoples' health. I'm sorry, that completely makes me disrespect Susan G. Komen and their partners.

Participants stressed that they understood the NGO's need for donations, but felt it was an ethical violation to accept money from a conflicting corporation. The existing partnership between KFC and Susan G. Komen for the Cure was most often used as an example of poor partner choice. This example was discussed in all groups before the researcher showed them an example of the pink KFC bucket. The Michael illustrated:

I had a problem with KFC partnering with Susan G. Komen. Like, when is it okay to undermine cardiovascular health in order to promote breast cancer awareness? Even if they [KFC] gave all of their profits for a month...does that make it less unethical? Not to me.

Furthermore, most of the participants (n = 20) felt the NGO was most negligent in an incongruent partnership. Participants believed that corporate donations, no matter the recipient, usually strengthened the corporation's reputation. It was the NGO's responsibility to protect the mission of their cause. They stated the NGO was responsible for accepting or declining corporate partners/donations. Alec hypothesized:

But if Philip Morris is donating millions to Susan G. Komen for the Cure, that's not okay. I mean, their products give people cancer. And it would make sense for big tobacco to donate, but it's like blood money if Susan G. Komen would accept.

Each focus group also suggested that donation size did not change the importance of congruency. Any donation amount, large or small, from a conflicting corporation was seen as negative.

Theme 4: Pink Ribbon Saturation. The next theme to emerge from the data was pink ribbon saturation, which was consistent with Study 1. The theme of pink ribbon saturation is defined as excessive amounts of pink ribbon CRM. Pink ribbon saturation made up 749 lines of coded text. This theme was prevalent throughout discussions during all of the focus groups. Participants brought up pink ribbon saturation at numerous times during the focus group. They believed that Susan G. Komen for the Cure, and other pink ribbon marketing, was reaching overexposure. Christina explained, "It's overwhelming from a consumer standpoint. There are entire aisles in stores that have pink ribbon products. It's important...that NGOs have partners, but there is a point when it's too much." In all five focus groups, participants attributed the saturation on a macro level to the breast cancer marketing's general popularity. On a micro level, participants stated that Susan G. Komen for the Cure's partner number and marketing was a source of saturation.

One explanation of the saturation of pink ribbons was social cause marketing trends. Cary commented, "Breast cancer awareness and pink ribbons have become the 'in' thing. Now breast cancer awareness is trendy and pretty and pink, and everyone seems to be a supporter." Participants in all five focus groups repeated comments similar to Cary's. This concept of trendiness and popularity was discussed primarily using examples of

extreme consumer support, followed by consumer fatigue and disinterest. Lily gave an example of this kind of saturation in the following:

Breast cancer awareness reminds me of the yellow LiveStrong bracelets for cancer. Everyone got them. They were super trendy, and we all wanted to do our part. Then the trend lost its luster...maybe we're fickle. That's the problem with marketing social causes like commodities; we start treating them like products instead of peoples' lives.

Participants believed that the current popularity and saturation of breast cancer awareness could be attributed to a fad. Participants claimed that fads are initially seen as a good thing, but consumers soon tire of the saturation.

Participants also felt social causes start to become less noticeable when they are overexposed. Alec stated, "Breast cancer awareness and pink ribbons are so common that I've become blind to it. It's like the recycling label...everyone puts it on their packaging, so it just becomes the norm." As with many trends and fads, participants stressed that they were initially eager to support Breast Cancer Awareness, but with the large increase in marketing it became too common. Kelsie reinforces this concept in the following:

It sounds bad but society has made breast cancer a glamorous and livable disease now. We've made breast cancer seem about as rare as the common cold. Maybe the overabundance of marketing has actually hurt Breast Cancer Awareness in a way.

Participants rarely discussed how to reverse pink ribbon saturation, but the majority of them suggested that this overexposure would end negatively for the NGO, corporation, and/or consumer.

While some participants suggested that saturation made pink ribbon products less noticeable, others claimed it made them lose value. Toby stated, “By attaching the cause to a product, you’ve turned cancer support into a commodity. And by having hundreds of partners and products, you make this commodity so common it loses value.” Toby’s statement exemplifies the feeling that many participants had; quality and value decrease in the eyes of the consumer when pink ribbon products become too common. Cary added:

There is a quality and desirability lost when things get too popular. If it’s something you see everywhere, you get sick of it and want it less than before. But something like a special edition DVD...those are limited and available for a short time and people will pay big bucks for it.

Limited availability and less exposure in this way seemed to mean higher value and quality to most participants. Furthermore, most participants associated pink ribbon products becoming too common due to larger numbers of partners.

The researcher asked participants to discuss their feelings about the (perceived) number of Susan G. Komen for the Cure partners (RQ1). Participants stated that numerous partners resulted in increased marketing of the co-branded CRM products. Increased marketing led pink ribbon saturation. They believed Susan G. Komen for the Cure’s numerous partnerships were responsible for the pink saturation and, in turn, reacted negatively. Michael explained, “Too many corporations partner with Susan G. Komen so we’re flooded with pink stuff. Now every market is covered with pink ribbons and it’s just become way too much.” Cary added, “Yeah, it’s turning into quantity over quality in a way...they’ve made consumers sick of pink ribbons or numb to the cause.”

Nearly all of the participants (n = 29) suggested that Susan G. Komen for the Cure had the greatest number partners, compared to other breast cancer NGOs. This perception made Susan G. Komen for the Cure a target for perpetuating the overexposure and negativity of breast cancer CRM. Fred stated, "I think Susan G. Komen is the most to blame...[they are] just trying to get their name on everything." When participants stated that Susan G. Komen for the Cure had too many partners, they felt the NGO's importance and value as a partner was diminished. Dexter said, "Susan G. Komen is turning into the Wal Mart of nonprofits. They're everywhere. But larger numbers don't always equal better value, like Wal Mart advertises."

Participants measured a NGO's need for donations using saturation. "It's obvious that they [Susan G. Komen for the Cure] are getting plenty of corporate partners...you see their pink ribbons on everything. I feel like they don't need the money as much as some other causes because they have so many corporations donating to them" (Grace). Many participants (n = 19) were quick to point out that the more pink ribbons they see on products, the more they were convinced that Susan G. Komen for the Cure was financially secure. The higher the number of corporate partners means the more money each of those partners is giving Susan G. Komen for the Cure.

Participants also believed the financial security reflected by Susan G. Komen for the Cure could be detrimental for other breast cancer NGOs. Participants stated that the large number of Susan G. Komen for the Cure's partners make them more desirable than other NGOs. Luke explained:

There's a competition between all nonprofits for money. And right now Susan G. Komen is like Goliath. They are the biggest, they get the most, and all of the other

nonprofits look weak in comparison. This must really be hard for other breast cancer nonprofits because they have to compete with Susan G. Komen for the Cure for donations.

Luke's explanation shows the perception that Susan G. Komen for the Cure's saturation could make it difficult for others to compete. The large number of partners made Susan G. Komen for the Cure look stronger and more stable, therefore making them more desirable to corporations.

Although this sentiment was largely agreed upon, others (n = 11) felt the large number of partners was detrimental to other breast cancer NGOs because of their association to the same cause. If consumers believe that all pink ribbons are connected to Susan G. Komen for the Cure they may avoid or backlash against the other breast cancer NGOs campaigns, believing other pink ribbon NGOs are Susan G. Komen for the Cure. Thomas explained, "I used to think all pink ribbons stood for Susan G. Komen. So if people think everything pink is Susan G. they might not buy another breast cancer nonprofit's pink ribbon product." Thomas' observation about the pink ribbon confusion was reflected in participants' comments in all groups. For example, Nigel said, "I'm a big football fan. And last year everything in the NFL was tagged with Susan G. Komen's pink ribbons." In reality, the NFL has partnered with the American Cancer Society since 2009, and is no longer associated with Susan G. Komen for the Cure.

Through the participants expressed their pessimism with pink ribbon saturation and Susan G. Komen for the Cure CRM, they still felt the practice in itself could be beneficial. Elizabeth explained, "I like seeing pink ribbon products because I think it does help. My mom had breast cancer and I really support the cause. But I don't agree with how Susan G.

Komen has cornered the breast cancer market.” Elizabeth’s comment seemed to summarize the feeling that buying pink ribbon products, whether participants liked Susan G. Komen for the Cure’s CRM campaigns or not, would still be donating to a breast cancer cause. Kelsie added, “It’s really hard to backlash against breast cancer. It’s sad to resent a social cause because of one nonprofit’s marketing schemes and trends. It just hurts those with the disease and the people connected to them.” Nearly all groups debated this question; was buying something when you agree with overall cause but disagree with the way it’s communicated better than doing nothing for those in need?

Participants also found that pink CRM products were often the only way that some people would give to the cause. Cary explained, “It might help people donate that wouldn’t normally send a check. I don’t always send money straight to a nonprofit, so buying their co-branded product can be a way to help.” In contrast, participants worried that by purchasing CRM products many people would feel that they had done enough. Luke suggested, “I think it takes away from motivating people to donate. Some consumers could think that since they bought their Yoplait yogurt with a pink lid that they’ve done their part.” The majority of participants agreed that donating money directly to the NGO was superior to participating in CRM purchasing. They believed that many of the CRM campaigns’ donation amounts were less than \$1 per product.

Survey Results. Before the discussion portion of the focus groups took place, participants were asked to fill out a short survey (Appendix H). They were asked a variety of questions to gather descriptive statistics, report their regular media consumption (see Table 2), indicate their involvement with social causes and nonprofits (see Table 3), and gauge their understanding of Susan G. Komen for the Cure (see Table 4). The demographic

information was included in the previous chapter. The survey was given in order to compare data to previous literature about Millennials, as well as their responses in the focus group discussions. These results will be discussed in the following chapter.

Table 2. What types of media do you regularly consume? (Study 2)

Media Type	Percentage of participants
Magazines	59%
Television	91%
Internet	100%
Radio	59%
Newspapers	26%
Mobile phone media	26%
Other	1%

Table 3. What is your involvement with social causes?

Social Cause Involvement	Percentage of participants
Volunteering	56%
Donating money	32%
Purchasing products that donate proceeds	68%
Advocating/Telling others about a charity	41%

Table 4. How many corporate partners do you believe Susan G. Komen for the Cure has?

Number of Susan G. Komen for the Cure's corporate partners	Participants answer
0-25 corporate partners	3
26-50 corporate partners	7
51-75 corporate partners	6
76-100 corporate partners	8
More than 101 corporate partners	10

Summary

Participants in Study 2 concurred with those in Study 1 in their CRM comprehension. Participants were able to name multiple pink ribbon and Susan G. Komen for the Cure CRM campaigns and use them for examples throughout their conversations. Study 2 participants were directed to focus the discussions more on their perceptions about Susan G. Komen for the Cure and their partners. Their feelings and evaluations of the

partnerships emerged concerning donation amounts, donation methods, and congruency of partners. Study 2 participants also highlighted pink ribbon saturation as being an issue, similar to Study 1. Participants connected the saturation with the popularity of the pink ribbon issue and Susan G. Komen for the Cure's number of CRM partners.

CHAPTER 5. DISCUSSION

The purpose of this study was twofold. First, this study sought to uncover the perceptions and involvement of Millennials with CRM campaigns. Second, this study provides the first qualitative inquiry grounded in the SSM's proposition four. Study 1 served as an exploratory research for Study 2, which asked alliance-specific questions that were not covered in Study 1. The findings discussed in the previous chapter will be used to answer the research questions presented at the end of chapter 2. This chapter will also outline the unique findings of both studies, the areas of limitations, and suggestions on future research.

Study 1

The findings in Study 1 make several contributions to our understanding of Millennials' perceptions regarding the CRM campaigns and partners. In this exploratory research, focus-group participants had various perceptions about CRM practices and partners. The data suggests that participants are familiar with CRM (RQ1; RQ2), and believe it to be a positive practice (RQ3), although there are qualifiers to their approval of partners. They believe more corporations should be involved in CRM and should give a respectable amount of proceeds (RQ4). Participants were also sympathetic to NGOs, seeing them as having less power than their corporate partners. However, if the cause or NGO became too saturated they were perceived negatively. The unique findings are explained below.

In general, Study 1 coincided with much of the previous research regarding Millennials and CRM that says Millennials are well aware of CRM (Bruell, 2010; Cone Inc., 2006; Cone Inc., 2010). In response to RQ1 and RQ2 participants expressed an

understanding of CRM and explained the extent to which they are exposed to campaigns. The majority of the participants found campaigns through in-store exposure, brand loyalty to products participating in CRM, magazines, and television. Although many of the participants had seen CRM online, they expressed that this was not as prevalent as other mediums. This finding coincides with previous research that online CRM marketing exists (Kerwin, 2010), but differs in that online CRM is not the most used outlet in Millennial CRM targeting (Ferguson & Goldman, 2010; Husted & Whitehouse, 2002; Pitt, Keating, Bruwer, Murgolo-Poore, & de Bussy, 2002). Millennials are characterized as technologically savvy. According to the survey collected before the focus group the most common media they used was the internet. Therefore, utilizing online CRM may be more influential in gaining their participation in CRM.

Participants expressed their anger and disappointment at the for-profit partner (RQ4). They believe that not enough corporations are participating in CRM campaigns. This concurs with assumption that CRM is becoming necessary for corporations to compete in a socially conscious society (Adkins, 1999; Crane, McWilliams, Matten, Moon, & Siegel, 2008). Participants also believed corporations involved in CRM are not giving enough money. This may be attributed to Millennials' characteristics regarding their skepticism of corporate marketing techniques (Cone, Inc., 2006; Cone, Inc. 2010; Cui, Trent, Sullivan, and Matiru, 2003; Yarrow & O'Donnell, 2009). Because corporations are highly scrutinized by Millennials it is important that they involve themselves in some form of social responsibility, such as CRM. Furthermore, corporations that participate in CRM must give an adequate amount of money to be seen as genuine.

The negative reaction to Susan G. Komen for the Cure and pink ribbon CRM was the exception to NGO sympathy (RQ4) and consumer optimism in CRM. Susan G. Komen for the Cure was described as greedy and monopolizing by dominating the cause market. On some level, the pink saturation was used as a general theme for all breast cancer NGOs and Susan G. Komen for the Cure. Aligning with a small number of partners, or partnering with causes/partners that don't have excessive visibility, may prevent saturation and backlash. This may also help NGOs avoid the illusion of trendiness and increase longevity. Additionally, NGOs may find less negativity if they market their cause differently from those in the same cause market. For instance, because pink is now synonymous with breast cancer awareness, it may be helpful for a breast cancer NGO to market themselves in other ways than the pink ribbons and packaging in order to differentiate themselves from other NGOs.

There was an interesting dichotomy in participant responses to CRM. On one hand, they called for more corporations to partner in CRM campaigns. On the other hand, they are quick to criticize saturation when too many partners aligned with a specific cause (i.e. pink saturation). Perhaps the diversification of causes is important to the success of a CRM partnership from the corporation's perspective. Partnering with a cause that is less marketed, or aligning with an NGO with fewer corporate partners, appears to cause less consumer resentment.

Participants also discussed that their purchase motivations had more to do with the product than a CRM partnership. In most cases, participants would not buy a product just because of CRM involvement. This finding conflicts with Cone, Inc.'s (2010) report that Millennials would change brands or buy a product based on CRM attachment. But it

concur with Brand Amplitude, LLC's (2009) report that Millennials are skeptical shoppers who examine price, reputation, and quality when deciding on a purchase. Additionally, few participants stated that their purchase motivations were a reaction of the cause involved. Brand loyalty and product want/necessity were the most determinant factors motivating their purchase.

Study 2

The findings in Study 2 make several contributions to the understanding of Millennials' perceptions regarding the number and differentiation of corporate partners. In this study, proposition four of the SSM was examined in order to understand Millennials' feelings about an NGO that communicates CRM practices with extensive numbers of corporate partners. The data suggests that participants believe there is an inverse relation between the value of Susan G. Komen for the Cure and number of partners communicated. Therefore, proposition four of the SSM was partially confirmed (RQ1), in regard to the NGO partner only. Participants also had difficulty differentiating between/among Susan G. Komen for the Cure's corporate partners (RQ2). Participants also discussed the themes of pink saturation, partner conflation, the importance of transparency in partnerships, and the dilemma of doing something vs. doing nothing regarding the purchase of pink ribbon CRM products. The unique findings are explained below.

Participants in Study 2 concurred with those in Study 1 in regard to pink saturation. Participants believed that the saturation of pink ribbon CRM from the campaigns being excessively communicated. Many participants believed that pink ribbon NGOs have become excessive, and the disproportionate marketing is overshadowing all other NGOs. This perception concurs with the findings in Frieswick's (2009) article that pink ribbon

CRM is beginning to instigate negative connotations and scrutiny. Participants expressed concern that pink ribbon CRM would make corporations more likely to partner with breast cancer NGOs due to their high visibility and popularity. This aspect could be beneficial from the corporation perspective. Participants' reactions in their disinterest in of pink ribbon CRM may open up an opportunity for successful campaigns with NGOs outside of breast cancer charities. In many of the focus groups, participants confirmed that the simple fact that a CRM campaign was not breast cancer was enough to get their interest and possibly motivate their purchase.

In response to RQ1 participants partially supported proposition four of the SSM. The SSM does not distinguish that the perceived value of the number of partners can be different for each partner in the alliance. The support of SSM was only evident in regard to the NGO. They believed that as the number of Susan G. Komen for the Cure partners increased, the value of the NGO declined. They also believed the value of the cause declined as well, due to breast cancer NGO's connection to the same issue as Susan G. Komen for the Cure. According to the survey data, nearly 71% of the participants believed that Susan G. Komen for the Cure had more than 50 partners. Because Susan G. Komen for the Cure has nearly 250 partners, the NGO may have more almost quadrupled a pink saturation threshold that participants indicated.

Most participants agreed that the more partners an NGO had, the less valuable they were. This finding also reflects Cilaldini's (1993) scarcity principle utilized in the SSM. The loss of value had negative effect on people's willingness to continue to support the fight for breast cancer, continued education efforts, and interest in the social issue generally. Participants suggested that if Susan G. Komen for the Cure and pink ribbon

marketing had remained smaller, there might have been more value in their brand. In this case, NGOs would benefit from a few strong partnerships in which the corporations were committed to the long-term support and a closer relationship.

In contrast, the SSM was not supported in regard to the corporation. Participants did not perceive a loss of value on the corporation due to increased numbers in alliance. In Study 2, participants were not asked to look at a specific corporation with multiple partners. They discussed that they wanted more corporations to partner in CRM, but it was not specified if they wanted individual corporations to have multiple NGO partners. Participants' stressed their support and optimism for CRM because it was beneficial to social causes. It is doubtful that a corporation with multiple partners would be criticized in the same way as the NGO. A corporation with multiple NGOs would project a higher level of social involvement and donation outlets. Furthermore, the SSM should be modified or clarified to distinguish between the perceived value of individual partners with multiple alliances.

Participants' in both studies provided evidence that Susan G. Komen for the Cure and pink ribbon NGOs are conflated. Participants most often believed that *all* pink ribbons were symbols for Susan G. Komen for the Cure. In a social issue industry dominated by a single symbol (the pink ribbon), its abundance made it very difficult for participants to differentiate among breast cancer NGOs (RQ2). For instance, the NFL was mentioned multiple times as having a partnership with Susan G. Komen for the Cure; the American Cancer Society is the actual partner.

On one hand, conflation is a testament to the power and visibility Susan G. Komen for the Cure has on the market. Susan G. Komen for the Cure the largest single-issue NGO

in CRM and has the same brand value as their corporate partners (Harris Interactive, 2011). On the other hand, the irritation and resentment Millennials in this study feel can be blamed on Susan G. Komen for the Cure, even if they are not the actual partner. The conflation of Susan G. Komen for the Cure and pink ribbon NGOs may also affect other breast cancer NGOs. Due to Susan G. Komen for the Cure's increasing partner number, participants believed the cause was financially stable. This could cause a halt in donations as consumers may attribute the wealth of Susan G. Komen for the cure to all breast cancer NGOs.

Additionally, when the participants were unable to differentiate among campaign partners within breast cancer industry they analyzed individual campaigns as a means to distinguish partners in general. Although they were not comparing partners by name, they used donation details to help them determine the quality of the partnership. Participants looked at specifically at donation amount, donation type, and congruency of partners. Donation amount was analyzed by measuring the corporation's perceived worth. The larger the corporation, the more money they were expected to give. Participants discussed donation amount at length, but could not give definitive guidelines as to the appropriate amount a corporation should give. However, they did specify that terms and limitations on donation amounts could sometimes indicate lack of corporate support.

In terms of the donation type, participants were torn as to which methods were most successful. Some participants agreed with Cui, Trent, Sullivan, and Matiru's (2003) study that donations not solely based on consumer transactions showed corporations were giving to the charity outside of the CRM campaign. Others found that passive donations from purchase were most helpful because they could donate to a charity to which they may never actually "send a check." A select number of participants found campaigns like the one with

Susan G. Komen for the Cure and Yoplait, to be most successful because the active participation made them feel personally fulfilled. In regard to donation type, there were positives and negatives to all suggested methods. It may be appropriate for a CRM partnership to offer multiple methods of donation or to change donation methods over the course of their partnership.

Participants used transparency to gauge the legitimacy of partnerships. Participants expressed frustration when they could not identify any other commitment the corporation was making to the social issue beyond a financial contribution; or no commitment of any kind was communicated beyond a pink ribbon. They wanted to know the amount of the donation and the donation destination. Due to the popularity of the pink ribbon in the last decade, criticisms have emerged about corporations using pink ribbons solely for profits, and sometimes not donating at all (Frieswick, 2009; Hutchinson, 2010; Poggi, 2008). Because these deceptions are being reported more frequently in media, corporations that include the donation amount and terms, the NGO, and the NGO's mission may be seen as more genuine.

In addition to donation amount and donation type, participants expected congruency between the CRM partnership in terms of the product and the partners' missions. This concurs with the importance of cause-brand fit in the success of an alliance (Gupta & Pirsch, 2006; Lafferty, Goldsmith, & Hult, 2004; Varadarajan & Menon, 1988). The reputation and products of the corporate partner were also important for participants to determine the value and legitimacy of the alliance. For example, participants mentioned KFC was poor a partner for health NGOs because their product was considered unhealthy.

Participants also felt the responsibility to maintain congruency was the responsibility of NGO and not the corporation. Corporations were regarded as the less ethical of the two partners; the NGO was obligated to hold firm to its mission regardless of the financial arrangement. Participants used the hypothetical partnering of Philip Morris with Susan G. Komen for the Cure as an illustration. Because cigarettes cause cancer, participants felt it would be hypocritical for Susan G. Komen for the Cure to accept donations for their breast cancer NGO. An NGO must be willing to dissolve relationships with corporations if their missions conflict, no matter the donation amount, in an attempt to maintain their reputation and mission.

The belief that NGOs were responsible in policing the quality of the partners they choose contradicts the results in Study 1. In Study 1 participants were sympathetic to NGOs in general, believing they had less power than their corporate partners. They felt that NGOs were dependent upon corporate donations and needed them to survive. Furthermore, this dependence meant NGOs needed multiple corporate partners to give generous donations. This contrast highlights the vulnerability of the NGO and illuminates the fine line they must walk. They need to gain as much corporate support as possible, but if they have too many corporate partners they risk oversaturating the market and backlash. In addition to the number of corporate partners they have to monitor, they also need to be cognizant of the reputations of the corporations they partner with. The paradox resulting from these contradictions begs the question, if NGOs are powerless and dependent on the corporation, why should they be responsible for policing the partnerships? Beyond the ethical responsibility that participants suggested, it seems unfair that the NGO is the only partner at risk.

Participants were conflicted about the importance of raising money to fight breast cancer and their negative feelings about the high number and opportunistic type of partnerships communicated. The participants acknowledged the NGO-corporate alliances could be very beneficial to the NGO; CRM partnerships have the ability to reach different groups of consumers, to educate and garner financial support, which might otherwise be impossible to gain. But the dilemma between buying something that the participants disagree with, and turning their back on those in need was not one that could be solved during the focus group sessions.

Results from Study 2 had similarities and differences with previous research on Millennials. Their general perceptions about CRM confirmed Cone, Inc.'s (2006; 2010) research. They were supportive about the practice and agreed that more corporations should participate in CRM. According to the survey data from Study 2, 56% of participants volunteer on a regular basis, which closely compared to the 64% in the Cone, Inc. (2006) survey. Thirty-two percent (32%) of participants in Study 2 indicated that they donated money to a charity, which is significantly lower than the 56% of those in Cone, Inc.'s (2006) research. Furthermore, 68% of the participants indicated that they regularly purchase CRM products, and 41% said they communicatively advocate social causes to others. No data was found from Cone, Inc. for purchasing or advocating. The similarities and disparities in numbers may indicate that the characteristics of Millennials and CRM are not entirely known. It is possible that Millennials' perceptions of CRM are vastly different and not as unified as previously reported.

While there is perception-based survey data regarding Millennials' overwhelming support of CRM, Study 2 provided reason to believe there are exceptions to their support.

Cone, Inc. (2006; 2010) conveyed that nearly all Millennials they polled were supportive for the practice of CRM, and the majority wanted to see it more often. The participants in this study agreed with this finding, but their support had numerous limitations and qualifiers. In theory, participants in Study 1 and Study 2 believed that CRM was positive. Upon close examination of specific elements to CRM alliances their support was dependent on elements in the reputation of partners, the CRM product, the number of partners in the alliance, and the cause. This finding provides evidence that Millennials may not believe that CRM campaigns and alliances are on-size-fits-all.

Furthermore, the participants illuminated that supporting CRM and purchasing CRM are significantly different. Just because they reported their support for CRM in general, it didn't guarantee a purchase. This study showed that the CRM product had the most influence on a CRM purchase. Only a small amount of participants bought products just for the cause. For corporations, Millennials buying their products may have more to do with their product and less with CRM. The purpose of CRM is to raise money for the NGO and increase the perception of corporate social responsibility for the corporation. In truth, consumers may find corporations more responsible for just donating outright and eliminating CRM campaigns. Especially in the case of pink ribbon CRM, where consumers are becoming fatigued and resentful of the abundance of pink CRM products.

Lastly, there was one focus group of six participants that had a close relationship to someone with cancer. This group was assigned to a separate session in order to maintain homogeneity. Interestingly, the themes that emerged from the group were no different than those in the groups with no cancer connection. The one unique distinction of the group affected by cancer was in regard to their examples. These participants were able to give

more personal examples and explain their feelings on a deeper emotional level than some of those not connected to cancer.

Theoretical and Practical Contributions

This study makes three theoretical and practical contributions. First, this study provides partial support for proposition four of the SSM, in regard to the NGO partner. Specifically, participants in this study stated that too many partners is undesirable and results in reduced support for the NGO partner and the social cause, but not the corporation. This finding is particularly concerning due to the longevity of social causes and fleeting nature of corporate sponsorships. The findings indicate a threshold may exist for the optimal number of alliance partners that should be communicated to consumers by an NGO.

Second, this study also illuminated Susan G. Komen for the Cure's significance within their social cause. Their centrality resulted in an inability for participants to differentiate between Susan G. Komen for the Cure and other NGOs. This finding may be of particular interest to issues that share a symbol, such as the pink ribbon.

Third, the NGO seems to be most at risk in determining which, and how many, corporations to partner with. In many instances, such as "green washing," criticism is aimed at the corporation. However, the pink fatigue expressed by participants in this study resulted in a negative association with the NGO for allowing corporations to exploit its cause. Similarly, participants were more critical of the NGO when it associated with too many, or undesirable, partners. This finding illuminates the challenges facing NGOs when they select an alliance partner.

Limitations and Future Research

There are several limitations in both studies that challenge the generalizability of research that may be improved upon through future research. Both studies contain elements that make it difficult generalize findings across demographic groups. The participant age used in both studies was not representative of the entire Millennial generation. Although this research concerns Millennials from ages 18-32, approximately 88-89% of participants' ages ranged from 18-24 in both studies. Future research may benefit from sampling older Millennials in the chance that they have different perspectives on CRM.

Another limitation is that Susan G. Komen for the Cure may not be representative of perceptions that other pink ribbon NGOs garner, let alone broader causes, in corporate alliances. Because just one single-issue NGO was studied in Study 2 generalizations cannot be inferred about NGOs in other cause markets. There are obvious limitations in studying only the perceptions of only a single organization and a single demographic group. All NGO partners may not garner the same reputation as Susan G. Komen for the Cure.

Furthermore, the findings on pink fatigue and pink saturation in Study 2 may have been intensified because the participants were specifically asked to discuss Susan G. Komen for the Cure. If participants were prompted to involve other CRM campaigns and social causes into the discussion, the abundance of data on pink saturation may have decreased. Future research should be mindful of choosing multiple and/or varied social causes and NGOs.

Additionally, focus groups for Study 1 were held during Breast Cancer Awareness Month (October). During October there is an increase in pink ribbon CRM campaigns, which could have contributed to participants' emphasis on Susan G. Komen for the Cure

and pink ribbon CRM. Future research studies should be cognizant of holding focus groups during months that coincide with social causes utilizing CRM (i.e. February for heart disease awareness and/or November for prostate cancer awareness).

Conclusion

The Millennial generation's size, critical thinking, and spending power may have the ability to dictate the future success of CRM campaigns. This study revealed how Millennials perceive CRM campaigns and the partners involved. First, this study examined Millennials' perceptions of CRM practices in general. Participants were asked their opinions about the practice of CRM, their experience with CRM, and their perceptions of both partners in CRM campaigns. The unique findings of the first study led to the inquiry of partner number and partner differentiation in the second study. Study 2 focused on examining the SSM with the CRM practices of Susan G. Komen for the Cure, the largest single-issue NGO participating in CRM campaigns.

The first study revealed how Millennials perceive CRM campaigns and the partners involved. In general, Millennials believe that the practice of CRM is beneficial, but they have explicit criteria when evaluating CRM campaigns. Participants were resentful of corporations because of their lack of CRM participation and/or their restricted donation amounts. Nonprofits received much more sympathy, as they were seen as the weaker and more dependent partner in the alliance. However, one specific partner and cause received a good deal of criticism.

Participants regarded Susan G. Komen for the Cure and pink ribbon CRM as the exceptions to nonprofit sympathy. Participants felt that Susan G. Komen for the Cure and pink ribbon NGOs were saturating the market due to their overwhelming presence in

society. The pink saturation led participants to either ignore their presence or boycott the purchase of any pink co-branded CRM products.

Participants in study one also mentioned their surprise that CRM campaigns were not as visible online as they are in other places. Participants expressed that they have become most familiar with CRM in stores, magazines, and on television. They feel that they are being targeted by CRM campaigns because their exposure has increased in stores and on products they consider to be exclusive to their generation. Even though their exposure has increased, Millennials were quick to describe what motivates their purchases.

The product they needed, or wanted, largely motivated the participants' purchases. Although previous literature states that Millennials are willing to purchase products just for the sake CRM, and/or switch brands for the cause, participants disagreed. Many of them stated that the product was most important in their purchase decisions, followed by the brand, and then the cause. If they were not loyal to a brand or in need of a specific product, participants said they would be willing to purchase a CRM product. The findings of this study 1 support the unique nature Millennial consumers, but there is still so much to learn about this young generation.

Study 2 was developed to further investigate participants' negative reactions to Susan G. Komen for the Cure and pink ribbon campaigns. The participants in Study 2 were asked to focus specifically on their perceptions of Susan G. Komen for the Cure and their corporate partners. The research question regarding the number of partners and the differentiation between partners were constructed in order to examine the SSM. This study was the first study, although partial, using primary data of proposition four of the SSM.

Participants concurred with the themes of CRM comprehension and pink saturation that emerged from Study 1. They were able to outline the purpose of CRM and give multiple examples of pink ribbon and Susan G. Komen for the Cure's CRM campaigns. They also reported that pink ribbon marketing and Susan G. Komen for the Cure were saturating the cause market.

Study 2 participants believed that the saturation of pink ribbon CRM made the marketing look like a trend. Participants were less likely to take pink ribbon CRM seriously, because they see it as a passing fad. One aspect they were concerned about was the pink saturation's affect on other nonprofits. Participants believed that Susan G. Komen for the Cure was the largest and most financially stable NGO. They worried that the pink saturation and visibility of Susan G. Komen for the Cure would make others less likely to donate to the cause.

Participants used transparency to investigate the legitimacy and commitment in a CRM partnership. Participants wanted to see upfront information about a campaign on CRM packaging in order to understand the value of the partnership, the corporation, and the nonprofit. All of the focus groups discussed the confusion that pink ribbon saturation has caused. Transparency is a way for them to investigate each campaign. Additionally, participants liked a substantial amount of NGO information on the package so they could learn more about their cause and mission.

Participants evaluated partners using the corporation's donation amounts, the donation method of the partnership, and the congruency of the partners. Donation amounts were regarded as a way to determine how genuine the corporate partner in CRM

campaigns. If participants thought corporations were not giving to their potential, they were quick to dismiss the corporate partner.

Participants discussed donation method by weighing the positives and negatives. Some participants believed that passive donations from purchases were the easiest and most beneficial donation methods. They suggested that purchase donations may help people donate that may not actually do so without the CRM product. Others argued that some consumers may think they have done enough just by purchasing a product. The focus groups were torn about the active involvement in CRM campaign donations. Yoplait yogurt's pink lid campaign was the most prominent example. Those in support of active participation said it makes them feel better to participate, but others said there is a risk of people not mailing the lids in.

The last method of evaluation that participants used was congruency. They expected that there be a fit between partners that align in CRM campaigns. Participants agreed that the partners' missions, product, and cause must align or they hold the NGO responsible. Because the NGO is seen as the most trustworthy and ethical in the partnership, participants were quick to conclude that they would blame the NGO for an incongruent partnership. Participants believed that the NGO should be the one to protect their cause.

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APPENDIX A

Please answer the following questions. Do not put your name on this form. All of your answers will remain confidential. Completion of this survey is voluntary.

1. Age

- | | |
|------------------|------------------|
| 5 – 18 year olds | 2 – 26 year olds |
| 6 – 19 year olds | 0 – 27 year olds |
| 3 – 20 year olds | 0 – 28 year olds |
| 5 – 21 year olds | 1 – 29 year olds |
| 4 – 22 year olds | 0 – 30 year olds |
| 5 – 23 year olds | 0 – 31 year olds |
| 4 – 24 year olds | 1 – 32 year olds |
| 0 – 25 year olds | |

2. Sex

What is your sex?

- 21 - Male
- 15 – Female

3. Residence

Which of the following best describes your current residence?

- 15 - I live on campus
- 21 - I live off campus

4. Employment

Which of the following best describes your current employment status? Check one only.

- 6 - Full-time
- 10 - Not employed
- 20 - Part-time

5. Education

How much education have you completed? Check the category that represents the highest level or degree received.

- 0 - High school graduate or equivalent
- 35- Some college but no degree
- 0 - Associate degree (academic or occupational)
- 1 - Bachelor's degree
- 0 - Master's degree
- 0 - Professional school degree (such as MD, LLB, JD, DDS, DVM)
- 0 - Doctorate (such as PhD, EdD, DrPH)

6. Household Income

Which of the following best describes your total household income this year?

Check one only.

- 33 - Under \$35,000
- 2 - \$35,001 – 49,999
- 1 - \$50,000 – 74,999
- 0 - \$75,000 and over

7. Types of media consumed

What types of media do you regularly consume? Check all that apply.

- | | | |
|----------------|------------------------|----------|
| 73% Magazines | 71% Radio | 3% Other |
| 95% Television | 59% Newspapers | |
| 100% Internet | 66% Mobile phone media | |

APPENDIX B

Dear student:

My name is Alicia Phillips and I am conducting a research study for the Communication department. I am interested in learning more about young adults' perceptions of for-profit marketing campaigns that donate money to charity. The study's results will help me learn more about attitudes relating to product advertising by companies who partner with nonprofit organizations. I am especially interested in learning how young adults feel about these campaigns.

I am conducting focus groups to discuss perceptions about cause-related marketing campaigns. This will give participants a chance to discuss their ideas within a group of their peers. If you are between the ages of 18 and 32, you are invited to participate in this study. The focus group will take approximately 60 minutes, including a short survey that you will complete on your own at the beginning of the session. Completing this study will count toward 10 points of your research participation for COMM 110.

Your participation is voluntary and you may withdraw your consent at any time, for any reason, without penalty. Every effort will be taken to protect your identity as a participant in this study. You will not be identified in any report or publication of this study or its results.

If you are interested in participating, please sign up for a date and time in Minard 201. These sessions will be filled on a first-come, first-serve basis. If you are unable to attend a session you signed up for, please email me to possibly reschedule.

If you have any questions about the rights of human participants in research or to report a problem, contact the NDSU IRB office at (701) 231-8908, or ndsuirb@ndsu.edu. If you have any questions regarding this research study, please contact me at Alicia.Johns@ndsu.edu, or Dr. Platt at CarrieAnne.Platt@ndsu.edu.

Thank you for your time and consideration.

Alicia Phillips
NDSU Department of Communication
Masters Student

APPENDIX C

NDSU North Dakota State University

Department of Communication
P.O. Box 6050 Fargo, ND 58108

Office: 701.231.8203

Fax: 701.231.7784

Purchasing for a Cause: Perceptions and Purchasing Motivations of Young Adults in Cause-Related Marketing Campaigns

Fall 2010

You are invited to participate in a research study involving young adults' perceptions of marketing messages utilized by nonprofit and for-profit partnerships. The study is being conducted by Alicia Phillips, a graduate student in the NDSU Department of Communication, and Dr. Carrie Anne Platt, assistant professor in the NDSU Department of Communication.

Purpose of the Study

The purpose of this study is to examine how young adults perceive social cause-related marketing campaigns in which for-profit and nonprofit companies co-brand a product and/or event. Specifically, we wish to learn how they seek cause-related marketing messages, what messages they are receiving from the marketing, and how they respond to these messages.

Explanation of Procedures

As a participant, you will be asked to fill out a short survey and respond to a series of open-ended questions about your experience with cause-related marketing products and campaigns. These questions will be posed during a focus group in which you and your peers will be asked to discuss your experiences and ideas. The focus group should take about one hour to complete.

Potential Risks and Benefits

It is possible that you may feel uncomfortable when asked to explain your beliefs about social causes and purchasing motivations to others. Beyond this discomfort, there are no significant risks associated with your participation in this study.

Assurance of Confidentiality

The researchers are the only ones who will see your survey responses; your focus group responses will be given in a group of 8-10 people. We will emphasize to all participants that comments made during the focus group session should be kept confidential. It is possible that participants may repeat comments, outside of the group, at some time in the future. Therefore, we encourage you to be as honest and open as you can, but remain aware of our limits in protecting confidentiality.

Focus groups will be digitally audio-recorded to ensure accuracy. Digital recordings will be stored on a password-protected computer, and destroyed after they have been transcribed. For the purposes of transcription and reporting, a pseudonym will be used in place of your real name, and any identifying information will be removed from final transcripts and study results.

The university and principal investigator own the data and records created by this project. You may view any information collected from you by making a written request to the principal investigator. You may view only information collected from you, and not information collected from other participants.

Voluntary Participation and Withdrawal from the Study

Your participation is entirely voluntary. During the survey or the focus group you may skip any questions that you would prefer not to answer. If you decide to participate, you are free to withdraw your consent and to discontinue participation at any time.

Compensation

Participating in this focus group will count for all 10 research participation points required in the Communication 110 course. If you opt not to participate in the study, your Communication 110 instructor can provide you with an alternative assignment to complete for these points.

Questions and Information about the Study

You have the right to ask, and have answered, any questions you may have about this research. If you have questions, or concerns, you should contact the researchers listed below:

Principle Investigator:

Dr. Amy O'Connor
NDSU Department of Communication
(701) 231-7294
Amy.Oconnor@ndsu.edu

Co-Investigator:

Alicia E. Phillips
NDSU Department of Communication
(701) 799-7705
Alicia.Johns@ndsu.edu

All research on human volunteers is reviewed by a committee that works to protect your rights and welfare. If you have questions or concerns about your rights as a research subject you may contact the Institutional Review Board at (701) 231-8908 or by email to ndsu.irb@ndsu.edu.

Consent Statement

By signing below, you are stating that you have read and understand both this form and the research project, and are freely agreeing to be a part of this study. If there is anything you do not understand about the study, please ask one of the researchers before you sign the form. You will be given a copy of this consent form to keep for your records.

Participant's Signature	Printed Name	Date
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Researcher's Signature	Printed Name	Date
------------------------	--------------	------

APPENDIX D

Perceptions of Young Adults Regarding Cause-Related Marketing Focus Group Schedule

1. Explain what cause-related marketing means to you.

2. How do you learn about cause-related marketing initiatives? Where are you exposed to them?
 - a. (examples...Internet, actual store/location, television, cell phone)

3. Tell me about some of the cause-related marketing campaigns that you found most compelling, regardless of purchase.
 - a. Did you seek out the product after seeing the campaign?
 - b. Why/why not?

4. Have you recently purchased any co-branded items?
 - a. What were the items?
 - b. Why did you purchase these items?

5. Do you feel cause-related marketing campaigns are positive or negative?
 - a. Why/ Why not?

6. Is there anything else you would like to add that I didn't cover?

7. Do you have any questions for me or questions you feel should be included on the next focus group?

APPENDIX E

Dear student:

My name is Alicia Phillips and I am conducting a research study for my thesis in the Communication department. I am interested in learning more about Millennials' perceptions of cause-related marketing (CRM) campaigns. More specifically, I want to research how Millennials perceive a nonprofit that communicates CRM practices with multiple corporate partners. The study's results will help me learn more about the Millennial generation's attitudes relating to CRM campaigns.

I am conducting focus groups to discuss perceptions about the CRM partnerships with Susan G. Komen for the Cure. As a participant, you will have a chance to discuss your ideas within a group of your peers. If you are between the ages of 18 and 32, you are invited to participate in this study. The focus group will take approximately 60 minutes, including a short survey that you will complete on your own at the beginning of the session. Completing this study will count toward 10 points of your research participation for COMM 110.

Your participation is voluntary and you may withdraw your consent at any time, for any reason, without penalty. Every effort will be taken to protect your identity as a participant in this study. You will not be identified in any report or publication of this study or its results.

If you are interested in participating, there is a sign-up sheet in Minard 201.

These sessions will be filled on a first-come, first-serve basis. If you are unable to attend a session you signed up for, please email me to possibly reschedule.

If you have any questions about the rights of human participants in research or to report a problem, contact the NDSU IRB office at (701) 231-8908, or ndsuirb@ndsuh.edu. If you have any questions regarding this research study, please contact me at Alicia.Johns@ndsuh.edu, or Dr. O'Connor at Amy.Oconnor@ndsuh.edu.

Thank you for your time and consideration.

Alicia Phillips
NDSU Department of Communication

APPENDIX F

NDSU North Dakota State University

Department of Communication
P.O. Box 6050 Fargo, ND 58103

Office: 701.231.8203

Fax: 701.231.7784

CONSENT TO PARTICIPATE IN RESEARCH

Purchasing for a Cause: Millennial's Perceptions of Susan G. Komen for the Cure Cause-Related Marketing Campaigns
Summer 2011

You are invited to participate in a research study involving Millennial's perceptions of the cause-related marketing campaigns of Susan G. Komen for the Cure and their corporate partners. The study is being conducted by Alicia Phillips, a graduate student in the NDSU Department of Communication, and Dr. Amy O'Connor, an associate professor in the NDSU Department of Communication.

Purpose of the Study

The purpose of this study is to examine how young adults (Millennials) perceive social cause-related marketing campaigns in which for-profit and nonprofit companies co-brand a product and/or event. Specifically, we wish to learn how Millennials perceive a nonprofit (Susan G. Komen for the Cure) that communicates CRM practices with multiple corporate partners.

Explanation of Procedures

As a participant, you will be asked to fill out a short survey and respond to a series of open-ended questions about your perceptions of cause-related marketing products and campaigns. These questions will be posed during a focus group in which you and your peers will be asked to discuss your experiences and ideas. The focus group should take about one hour to complete.

Potential Risks and Benefits

It is possible that you may feel uncomfortable when asked to explain your beliefs about social causes and purchasing motivations to others. Beyond this discomfort, there are no significant risks associated with your participation in this study.

Assurance of Confidentiality

The researchers are the only ones who will see your survey responses; your focus group responses will be given in a group of 8-10 people. We will emphasize to all participants that comments made during the focus group session should be kept confidential. It is possible that participants may repeat comments, outside of the group, at some time in the future. Therefore, we encourage you to be as honest and open as you can, but remain aware of our limits in protecting confidentiality.

Focus groups will be digitally audio-recorded to ensure accuracy. Digital recordings will be stored on a password-protected computer, and destroyed after they have been transcribed. For the purposes of transcription and reporting, a pseudonym will be used in place of your real name, and any identifying information will be removed from final transcripts and study results.

The university and principal investigator own the data and records created by this project. You may view any information collected from you by making a written request to the principal investigator. You may view only information collected from you, and not information collected from other participants.

Voluntary Participation and Withdrawal from the Study

Your participation is entirely voluntary. During the survey or the focus group you may skip any questions that you would prefer not to answer. If you decide to participate, you are free to withdraw your consent and to discontinue participation at any time.

Compensation

Participating in this focus group will count for all 10 research participation points required in the Communication 110 course. If you opt not to participate in the study, your Communication 110 instructor can provide you with an alternative assignment to complete for these points.

Questions and Information about the Study

You have the right to ask, and have answered, any questions you may have about this research. If you have questions, or concerns, you should contact the researchers listed below:

Principle Investigator:

Dr. Amy O'Connor
NDSU Department of Communication
(701) 231-7294
Amy.Oconnor@ndsu.edu

Co-Investigator:

Alicia E. Phillips
NDSU Department of Communication
(701) 799-7705
Alicia.Johns@ndsu.edu

All research on human volunteers is reviewed by a committee that works to protect your rights and welfare. If you have questions or concerns about your rights as a research subject you may contact the Institutional Review Board at (701) 231-8908 or by email to ndsu.irb@ndsu.edu.

Consent Statement

By signing below, you are stating that you have read and understand both this form and the research project, and are freely agreeing to be a part of this study. If there is anything you do not understand about the study, please ask one of the researchers before you sign the form. You will be given a copy of this consent form to keep for your records.

Participant's Signature	Printed Name	Date
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Researcher's Signature	Printed Name	Date
------------------------	--------------	------

APPENDIX G

Millennial's Perceptions of Susan G. Komen for the Cure CRM campaigns Focus Group Schedule

1. Can you share with me about a time when you have seen a co-branded CRM product?
 - a. What are your thoughts about these alliances?
2. Have you ever purchased any co-branded items?
 - c. What were the items?
 - d. Why did you purchase these items?
 - e. How did you feel after you purchased the item?
3. Give me some examples of the benefits and drawbacks of these partnerships.
4. Are there any causes/situations that you think are ideal for CRM partnerships?
 - a. Is there an instance when you think nonprofits should not partner with corporations?

Susan G. Komen specifically...

5. What are your perceptions of the number of Susan G. Komen for the Cure CRM partnerships? (Think of the number indicated on the survey)
 - a. Why do you think corporations partner with Susan G. Komen for the Cure?
 - b. Can you name any partners?
6. How many partners do you believe they have?
 - i. How did you come to this conclusion?
 - ii. How do you feel about this number?

Show them examples of SGK co-branded products

7. Are all partners the same?
 - a. What do you think the similarities/differences are?
8. How do you tell the difference between partners?
9. Do you feel the number of partners they have is good/bad? Does it matter?
10. Is there a relation between quality and quantity in these partnerships?

APPENDIX H

Please answer the following questions. Do not put your name on this form. All of your answers will remain confidential. Completion of this survey is voluntary.

1. Age

3 – 18 year olds	0 – 26 year olds
6 – 19 year olds	0 – 27 year olds
6 – 20 year olds	0 – 28 year olds
4 – 21 year olds	1 – 29 year olds
4 – 22 year olds	2 – 30 year olds
4 – 23 year olds	1 – 31 year olds
3 – 24 year olds	0 – 32 year olds
0 – 25 year olds	

2. Sex

15 – Male
19 - Female
0 - Prefer not to answer

3. Employment

7 – Full Time
21 – Part Time
6 – Not Employed

4. Residence

Which of the following best describes your current residence? Check one only.

9 - I live on campus
25 - I live off campus

5. Household Income

Which of the following best describes your total income this year? This does NOT include your parents' income. Check one only.

33 - Under \$35,000
1 - \$35, 001 – 49,999
0 - \$50,000 – 74,999
0 - \$75,000 and over

6. Types of media consumed

What types of media do you regularly consume? Check all that apply.

59% Magazines	59% Radio	1% Other
91% Television	32% Newspapers	
100% Internet	26% Mobile phone media	

7. Social Cause Involvement

What is your involvement with social causes? Check all that apply.

- 56% Volunteering for a charity
- 32% Donating money to a charity
- 68% Purchasing products that donate proceeds to charity
- 41% Advocating or telling others about a charity

8. Social Causes

How important are social causes to you? Check one only.

- 7 - Very important
- 20 - Important
- 4 - No opinion
- 2 - Somewhat important
- 1 - Not important

9. Nonprofit Organizations

How important are nonprofit charities to you? Check one only.

- 11 - Very important
- 16 - Important
- 3 - No opinion
- 3 - Somewhat important
- 1 - Not important

10. Breast Cancer Awareness

How familiar are you with the Breast Cancer Awareness cause? Check one only.

- 7 - Very familiar
- 14 - Familiar
- 1 - No opinion
- 12 - Somewhat familiar
- 0 - Not familiar

11. Susan G. Komen for the Cure

How many partners do you believe Susan G. Komen for the Cure has? Check one only.

- 3 - 0-25 corporate partners
- 7 - 26-50 corporate partners
- 6 - 51-75 corporate partners
- 8 - 76-100 corporate partners
- 10 - more than 101 corporate partners