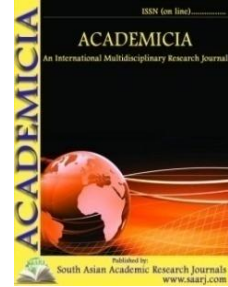




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AN OVERVIEW OF SOCIAL MARKETING IN INDIA

Dr. N. Ratna Kishor*; T.Ramanaiah**

*Assistant Professor,
Department of Commerce & Business Administration,
Acharya Nagarjuna University
Nagarjuna nagar
Andhra Pradesh, India.

**Research Scholar,
Department of Commerce & Business Administration,
Acharya Nagarjuna University
Nagarjuna nagar
Andhra Pradesh, India.

ABSTRACT

A healthier 21st century has been the target of our country. The governments in their manifesto before the onset of new millennium have flaunted the slogan 'Health for All by 2000 AD'. In reality it is still a myth. In Indian society, health care management is at the bottom of the welfare agenda. India lives in its almost 6.5 lakh villages. If basic health care does not reach the rural areas, no matter how much progress is achieved in the urban and semi-urban areas, overall growth as a nation will be retarded.

Social marketing concept is a relatively new concept in social science literature. Even though the father of social marketing is a Marketing expert, its popularity gained in recent times and incorporated into the sociology curriculum in most of the universities in India and the world. Social marketing concept was introduced by Marketing Guru Philip Kotler and Gerald Zaltman in the year 1971. For the first time they wrote an article entitled "Social Marketing: An Approach for Planned Social Change" which published in 'Journal of Marketing'. Since then this concept has been extensively used to promote healthy behaviour among the people. It focuses on influencing behaviours that will improve health, prevent injuries, protect the environment and contribute to communities. It is now realized that promotion of healthy activities depends on health education, lifestyle modification, behavior

change, environment modification. Particularly in 21st century there has been a shift in focus of health care experts toward the role of positive aspects of social marketing in diseases prevention. In this background this paper has been emphasized on principles & practices of social marketing. It is based on secondary sources only.

KEYWORDS: *Social Marketing, Commercial Marketing, Healthcare, Social Marketing Mix, etc).*

1.0 INTRODUCTION

1.1 THE BASIC IDEA

The most basic – and universally accepted - truth about social marketing is that it takes learning from commercial marketing and applies it to the social and health sectors: ideas and techniques that are being used to influence consumer behaviour can cross the profit divide and be used to influence health behaviour.

This thinking dates back to 1951, when Wiebe asked the question ‘Can brotherhood be sold like soap?’ He evaluated four different social change campaigns, and concluded that the more. Similarities they had with commercial marketing, the more successful they were. Over the next two to three decades, marketers, public health and social change experts developed and refined this thinking, learning particularly from international development efforts, where social marketing was used to inform family planning and disease control programmes (Manoff 1985).

Choosing Health argued for the “power of social marketing”, and “marketing tools applied to social good” being “used to build public awareness and change behaviour” (Department of Health 2004). This led to the formation of the National Social Marketing Centre for Excellence (NSMC), collaboration between the Department of Health and the National Consumer Council, which has already conducted a national review of social marketing and is developing the first National Social Marketing Strategy for Health in England. The potential of social marketing for improving health has also been discussed in two recent articles for the British Medical Journal (Hastings & McDermott 2006, Evans 2006). Lazer and Kelley’s classic definition of social marketing underlines the point that social marketing recognises both these phenomena, and, whilst learning from commerce, also adopts a critical perspective when its activities push competing agendas “Social marketing is concerned with the application of marketing knowledge, concepts, and techniques to enhance social as well as economic ends. It is also concerned with analysis of the social consequence of marketing policies, decisions and activities.” (Lazer & Kelley 1973: pix)

1.2 PUTTING THE IDEAS INTO PRACTICE

Social marketing does not imply one particular type of intervention, but rather a strategic way of thinking about and managing social change which is underpinned by marketing (MacFadyen et al 2003). Both marketers and social marketers adopt a strategic approach to planning their activities, guided by the following key stages:

1. Defining the problem
2. Defining objectives
3. Understanding the consumer
4. Segmentation and targeting
5. Understanding and addressing competition
6. The exchange
7. Developing the marketing mix

The NSMC has developed a useful guide to the social marketing planning process (based on similar steps) in its Social Marketing Pocket Guide (Department of Health and National Consumer Council 2005). This resource provides practical help for developing, implementing and evaluating social marketing programmes.

1.2.1. DEFINING THE PROBLEM

Any marketing enterprise, whether commercial or social, starts by defining the problem. In social marketing this involves looking at the particular behaviour – say teen binge drinking – and trying to determine what is causing it. The answer may lie in individual factors, such as a lack of understanding of the dangers of excessive alcohol consumption among young people; the behaviour of publicans and the drinks promotions they offer; or with licensing and taxation policy which have made drink too cheap and ubiquitous. Whether it be a matter of individual behaviour, professional practice or public policy (or, typically, a combination of all three) the social marketer seeks to get a clear view of the cultural, economic, societal and other forces which are influencing these. He or she then thinks through the opportunities and threats this analysis throws up, and maps these against their own organisation's strengths and weaknesses (often referred to as a SWOT analysis). This provides strategic direction. For example, an analysis of dental health in a particular region may suggest that fluoridation presents the greatest opportunity for bringing improvements, is politically popular with the current Government and is well within the professional capabilities and capacity of the social marketing organisation (Hastings et al 2000). It also identifies the main competition in the form of a vociferous group of antifuoridationists.

1.2.2. DEFINING OBJECTIVES

Based on a clear understanding of the problem, the marketer seeks to pinpoint clearly the precise behaviour change which is needed and to formulate clear objectives. Clear objectives are valuable for two reasons (Hastings et al 2005).

First, they ensure that a clear understanding and consensus about the intent of the intervention is developed by all those involved. This includes both people within the organisation and outwith it. For example, if an advertising agency is being used, well defined and agreed

objectives can ensure that they are absolutely clear about what their advertising has to achieve from the outset. Similarly, good objectives facilitate communication with superiors and controlling bodies. This can be particularly important in social marketing where funding agencies or politicians may have to be convinced of the value of an intervention.

Second, objectives provide an excellent management tool. They provide a clear focus for intervention design and make it possible to monitor progress and ultimately to measure success. Good objectives are measurable (ie. able to be readily evaluated) and realistic (ie. within the capability of the organisation). The latter point is particularly important; there is a tendency for social marketing efforts to be overly optimistic, perhaps because the behaviours they are trying to influence are so important.

1.2.3. UNDERSTANDING THE CONSUMER

The 'big idea' of marketing is that the consumer – rather than production – should be at the heart of the business process. Whilst Henry Ford focussed on selling what he could produce, offering his customer little choice but cheapness – “any colour that he wants so long as it's black” - modern marketers invert this rubric and produce what they can sell. This deceptively simple change has revolutionised commerce over the last fifty years and it has succeeded because, paradoxically, listening to consumers actually makes it easier to influence their behaviour. Social marketing, then, argues that we should move away from an expert-knows-best mentality, in which decisions are based on professional judgement and rigorous epidemiology, followed by post hoc research on how these perfectly defined interventions can be sold to the public (MacFadyen et al 2003). When people behave in a way that prejudices their health and safety – by having unprotected sex or driving too fast – we should not assume they are simply being irrational and need louder exhortation to be brought into line. Rather, we should recognise that other needs may drive their choices: taking risks, having fun, seeking solace or just trying to cope with life. Social marketers advocate that recognition of the complexities of life, and the need to help people navigate these, is integral to sustained behaviour change (Hastings & Stead, in press).

1.2.4. SEGMENTATION AND TARGETING

Successful marketing operates by offering optimum satisfaction of consumer needs (Kotler et al 2005). In theory, to do this properly, every individual needs to be treated differently and made a unique offering. Learly this would be impractical. Instead, there is a compromise, and people are grouped according to the similarity of their needs. A decision is then made as to which is (are) the most appropriate group(s) of consumers around whom to organise the marketing effort. In short, the population is 'segmented' into 'target markets'. The next task is to decide which segments will become targets (Patron 1998). Three principles guide this decision. First the target should be substantial - ie. Big enough to warrant attention (Kotler et al 2005, Dibb et al 1994). In commercial terms, it must be capable of generating sufficient profit, in behaviour change terms it must be capable of having a significant impact on the problem being tackled. Second it must be accessible (Kotler et al 2005, Dibb et al 1994) - viable channels of communication and service delivery must exist. In drugs prevention, school children are, for example, likely to be much more accessible than young adults. Third the target should be actionable: one that the marketer is

capable of serving (Kotler et al 2005, Dibb et al 1994). There is no point in having a big and accessible target if there is nothing to offer them or they are likely to be impervious to any initiatives. In social marketing the same principles of segmentation and targeting apply whether the target group is patients, members of the public, professionals or policymakers. For example, if the aim is to implement water fluoridation to protect dental health, it is clear that many groups are involved - including the media, politicians and the general public - but water providers are the key segment, because they have the power to make the desired behaviour change: to fluoridate the water (Hastings and Stead, in press). The decision may therefore be made to target all four groups, but with the greatest emphasis on the last.

1.2.5. UNDERSTANDING AND ADDRESSING COMPETITION

This stage asks what competition exists to the desired behaviour, and how the social marketing effort can best remove or minimise its influence. Good competitive analyses, as with so much else in marketing, looks at the world through the eyes of the customers (Hastings in press). What products do they use to satisfy the same need? What do they buy instead? Who do they see as the competition? For the commercial marketer the competition is typically other companies, products and services which customers may use instead of the marketer's own. In social marketing, similar commercial competition might exist: a social marketer trying to promote consumption of fruit as a snack among children faces competition from retailers like McDonald's who are also promoting foods to children. But in social marketing, competition also exists in the form of other health messages and campaigns (the same consumers may be simultaneously being targeted by a dental health initiative warning them against eating too much sugar or snacking between meals). Another type of competition is inertia: the powerful appeal of current behaviour or the status quo. For physical activity interventions this may be one of the most powerful forms of competition. Competition also clearly applies when the social marketer is working upstream. Tobacco control campaigns face severe competition from the activities of Philip Morris and Imperial Tobacco: how they stand in their customers' and stakeholders' eyes, their likely response to regulation, their possible future actions, their lobbying and media advocacy efforts and so on.

1.2.6. THE EXCHANGE

If marketing's underlying 'philosophy' is consumer orientation, its key mechanism is exchange. Kotler and Zaltman (1971) argue that: "marketing does not occur unless there are two or more parties, each with something to exchange, and both able to carry out communications and distribution" (p4). Exchange is defined as an exchange of resources or values between two or more parties with the expectation of some benefits. The motivation to become involved in an exchange is to satisfy needs (Houston and Gassenheimer 1987). Exchange is easily understood as the exchange of goods for money, but can also be conceived in a variety of other ways: further education in return for fees; a vote in return for lower taxes; or immunisation in return for the peace of mind that one's child is protected from rubella. The essence of exchange is the insight that consumers do not buy products, they buy solutions to problems (Houston and Gassenheimer 1987). This means thinking through what it is that consumers really want – often a deceptively simple challenge. By divining consumers' problems and needs and providing ever more

imaginative and intricate ways of satisfying them, marketers seek, not to force us to buy, but seduce us with mutually beneficial offerings (Hastings in press)

1.2.7. DEVELOPING THE MARKETING MIX

‘Commercial marketing is essentially about getting the right product, at the right time, in the right place, with the right price and presented in the right way that succeeds in satisfying buyer needs.’

(Cannon 1992, p46)

1.3 DEFINITION OF SOCIAL MARKETING

Social Marketing is engaged in the complex task of transforming human behavior and practices. The transformation should sustain over a long run. Sustainability means that the change has to be voluntarily maintained without the prop of the organization. Social marketing is the name given to the approach of applying lessons from commercial advertising to the promotion of social goals (in this case, improved hygiene behaviour). It is a systematic approach to influencing people’s behaviours and thereby reducing public health problems. As opposed to commercial marketing, Social Marketing has to overcome negative demand in the sense of resistance to an idea. Social marketers often deal with highly sensitive social issues, which are likely to offend cultural sensitivities. In order to be successful, they have to understand and adapt strategies to cultural norms. Social marketers bring about changes that lead only to invisible benefits and that too in the relatively longer run. Social Marketing does not always lead to direct benefits. Energy conservation and observance of traffic rules are examples of change that lead to benefits to society at large of which the individual is a part.

1.4 BASIC CHARACTERISTICS OF SOCIAL MARKETING

According to Philip Kotler and Nancy Lee (2006) some of the salient features of social marketing are

1. SOCIAL MARKETING FOCUSES ON BEHAVIOUR

Similar to commercial sector professionals, who sell goods and services, social marketers are selling behaviours. Change agents usually want to influence target markets to do one of the following things:

- a) Accept a new behavior (e.g composting food waste)
- b) Reject a potentially undesirable behavior (e.g. starting smoking)
- c) Modify a current behavior (e.g. increasing physical activity from 3 to 5 days of the week)
- d) Abandon an undesirable behaviour (e.g talking on a cell phone while driving).These can be achieved through proper education and effort should be made to alter existing beliefs, attitudes, or feelings. Then only social marketers scan influence people to ‘buy’ behaviour.

For e.g a specific behaviour among the youngsters of chewing gutka. Social marketer should influence and convince youngsters the negative effects of chewing gutka like mouth ulcer, oral cancer etc . Social marketers in the end measure success if the youngsters abstain from chewing.

2. THE BEHAVIOUR CHANGE IS VOLUNTARY

The most challenging aspect of social marketing is that it relies heavily on “rewarding good behaviours” rather than “punishing bad ones” through legal, economic or coercive forms of influence. Social marketers cannot promise a direct benefit or immediate payback in return for adopting the proposed behaviour change. For example, the task of increasing voter turnout- especially among youth

3. SOCIAL MARKETING USE TRADITIONAL MARKETING PRINCIPLES AND TECHNIQUES

Customer orientation is an important aspect of marketing. The marketing process begins with marketing research to understand market segments and each segment’s potential needs, wants, beliefs, problems, concerns and related behaviour. Marketers then select markets where they can best affect and satisfy. They establish clear objectives and goals. Then product is positioned to appeal to the desires of the target market.

4. SOCIAL MARKETERS SELECT AND INFLUENCE A TARGET MARKET

Marketers know that the market place is a rich combination of diverse populations. They have distinct set of wants and needs. They know that what appeals to one individual may not appeal to another. Therefore they divide the market into similar groups (market segments), measure the relative potential of each segment to meet organizational and marketing objectives. They chose one or more segments (target markets) for concentrating their efforts and resources. For each target a distinct mix of ‘P’s (product, price, place and promotion) is developed. Each designed uniquely to appeal the targeted segment.

1.5 SOCIAL MARKETING BENEFITS PRIMARILY SOCIETY

In commercial sector marketing the primary beneficiary is corporate or MNC’s. But the primary beneficiary of the social marketing program is society. It aims at bringing social change. Accept of correct behaviour benefits each and every individual. Thus Social Marketing attempts to bring about changes in ...

- People Individuals; groups; populations;
- Products ... ‘sin’ products; unhealthy products; healthy products; ...
- Places ... settings: creational, work, school, residential, Institutions; physical environment;
- Public institutions ... law; education; employment; health ...

1.6 DISTINCTION BETWEEN SOCIAL MARKETING VS. COMMERCIAL SECTOR MARKETING

It is quite obvious that a regular reader might be confused with social marketing is like the existing market system. But there are differences between the two. Even though social marketers use same techniques of commercial sector marketers, there are visible differences between social and commercial marketing.

Marketing mix	Commercial marketing	Social marketing
Product	Satisfies an identified consumer need (high demand)	Satisfies an identified public health need (may be little or no demand)
Price	Established to cover all costs and generate a profit	Often subsidized in order to provide maximum access to low/middle-income consumers
Place	Focuses on cost-efficiency (most profitable channels). Demand-driven	Focuses on access to target group. Required demand-creation activities
Promotion	Focuses on early market saturation then defending market share in competition with other brands.	Focuses on early market saturation then uses communication to increase overall market.

Some of them are (Kotler & Lee, 2006)

1. One of the major distinguishing factors lies in the type of product sold. In the case of commercial sector marketing, the marketing process revolves primarily around selling goods and services.
2. In the case of social marketing, the marketing process is used to sell a desired behaviour (i.e. eating low fat foods) or idea (i.e. eat five fruits (non-chemical) and vegetables for better health)
3. In commercial sector, the primary aim is financial gain; in social marketing primary aim is societal gain.
4. Social marketers strive to change the unhealthy behaviours of a large percentage of the target audience; commercial marketers are usually concerned with small increases in market share.
5. It may take months or years for health benefits offered in social marketing campaigning to result; in commercial marketers product marketers offer benefits that are realized soon or immediately after the purchase of the product.

6. Social marketers must strive for information and avoid over selling the benefits of recommended changes; but with product marketing, over selling and with some deception, consumers are compelled to accept.
7. Social marketers must usually attempt to achieve their goals with small budgets; commercial marketers attempt to achieve their goal with big budgets.
8. Social marketing is more difficult than commercial marketing. The challenges of social marketing are to influence people to do any of the following:
 - Give up an addictive behaviour(stop smoking)
 - Change comfortable lifestyle(reduce thermostats)
 - Resist peer pressure(Be sexually abstinent)
 - Establish new habits(exercise 5 days a week, wash hands, currency notes, keyboards, use plastic gloves,)
 - Reduce the use of cell phone(use land phone)
 - Ride safely (use helmets)
 - Learn a new skill (compost food waste)
 - Remember something (take your bags to the grocery store and reuse them)
 - Drink more water (drink 4-5 liters of water)
 - Concern for a social issue (global warming, domestic violence)

1.7 PRINCIPLES OF SOCIAL MARKETING

Social Marketing is the practice of utilizing the philosophy, tools, and practices of commercial marketing for health and/or social programmes. It encourages us to accept a new behaviour, reject a potential behaviour, modify a current behaviour and abandon an old behaviour. Success of marketing depends on the implementation of its principles. Some of the important principles of social marketing are:

1.7.1 THE PRINCIPLE OF MARKETING MIX OR MARKETING FRAMEWORK

Social marketing relies on commercial marketing's conceptual framework to guide programme development and implementation. This framework places consumers at the centre of exchange process in which they act primarily out of self-interest. Social marketing identifies consumer wants and needs and then develops way to satisfy them. The marketing mix includes four components. They are known as four P's-Product, price, place and promotion (McCarthy 1968)

PRODUCT: In business marketing, sellers study the needs and want of target buyers and attempt to design products and services that meet their desires. If well-designed and affordable, these products will be purchased. In social marketing, sellers (sociologists or social workers) also to have study the target audiences and design appropriate products. They must “package” the social idea in a manner which target audiences find desirable and are willing to purchase. However product design is typically more challenging in the social area than it is in the business area. For example the problem of marketing “safer driving” the social objective is to create safer driving habits and attitudes in the population. The product may also be service such as pre-natal care or immunization (polio-drops) with the objective increasing people’s utilization of the services. A product may also be a commodity such as condom.

PROMOTION: It is the communication strategy and tactics that will make the product familiar, acceptable and even desirable to the audience. Social marketing Relies on health communications to inform and educate consumers. (E.g.Indian family planning has poor promotional strategy Birth control methods-only male domination etc.)

PLACE: The third “P” in marketing framework is place. It is the location where services are provided, where tangible products are distributed (condom) or where consumers receive information about new products or behaviors (railways, bus-stop/highways)

PRICE: Price is the amount of money charged for a product or service or the sum of the values that consumers exchange for the benefits of having or using the product or service. To make the exchange more attractive to consumers, social marketing seeks to lower costs and to maximise benefits.

Four more Ps to the social marketing mix

- 1. PUBLICS:** To be most effective when planning and managing a social marketing campaign, one must take into account all of the people who can affect the success of the program. This includes the external publics—the target audience, groups that influence the target audience, policymakers, the media, and others outside the organization. Just as importantly, non-profit social marketers must involve their internal publics in the development and preparation for the program implementation. These are the people within organization—everyone from Board members and management staff who must approve plans, down to the receptionist who answers the phones and needs to know what to do when someone calls in response to the campaign.
- 2. PARTNERSHIP:** Many social marketing issues are so big that one organization cannot address them alone. Potential partners include organizations (other nonprofits, government agencies and businesses) that have one or more of the following attributes: similar goals, access to the target audience, and credibility with the target audience, interest in sponsorship of program, or resources that fill gaps in organization’s capabilities.
- 3. POLICY GOVERNMENTAL:** or organizational policies can act as a catalyst for social change on a large scale. When policies are put into place that provides an environment of support for a particular behaviour, individuals are much more likely to sustain that

behaviour change. For example, workplace non smoking policies make it easier for smokers to quit by ensuring that they do not see others lighting up around them and removing those social cues to smoking.

- 4. PURSE STRINGS** unlike businesses, many non-profit organizations are not able to automatically set aside a certain percentage of their revenue for marketing activities. Social marketers must be creative and proactive in seeking funding for their campaigns from sources such as corporate partners, foundations, donations, and government agencies

1.7.2 CONSUMER ORIENTATION: A central principle in the social marketing is a commitment to understand the consumer and to design products to satisfy consumers' wants and needs. Those applying social marketing methods need to know about the people whose behavior they want to change-their aspirations and values, their relevant beliefs and attitudes and their Social marketers believe that the behaviours being promoted should contribute to the consumers' and society's well being. Even though people have their own aspirations and desires or their own health practices, there is responsibility inherent in health promotion and education to design and deliver offerings that preserve and enhance social health. Thus marketing techniques do not escape from this responsibility. Social marketers also look at the broader social and cultural factors that influence consumer behaviour. They must recognise that behavioural change is influence by a combination of environmental as well as personal and interpersonal factors.

1.7.3 CONSUMER RESEARCH: A consumer orientation requires an examination of consumer perceptions of product benefits, product price, the competitions benefits and costs and other factors that influence consumer behaviour. Marketing healthful behaviours relies on the social and behavioural sciences to guide formative research and subsequent program design. Programme planners use consumer research findings to identify the factors to address in promoting behaviour change of the people. Most of the research studies concluded that the mix of internal and external factors have the greatest impact on people's health behaviour.

1.7.4 AUDIENCE SEGMENTATION: Audience segmentation is the process of subdividing a market into distinct subsets of customers that behave in the same way or have similar needs. Commercial companies usually segment according to one or more key criteria: Geography, Demographics, Psychographics, and Behavioural characteristics.

1.8 PROCESSES OF SOCIAL MARKETING

The social marketing approach differs greatly from public health programmes. These agencies have typically gone about developing programs or materials. In the past, health educators often focused on providing information to the general public about a particular topic. They expected that the people who needed it would realize they are at risk and change their behaviour as a result. In contrast, social marketers know that there is no such thing as "targeting" the general

public. To be most effective, a program must precisely specify its target audience and use much customized methods to reach those people. In addition, social marketing does not rely solely upon educating people about an issue, but uses persuasive messages developed through research with members of the target audience. The participation of the people for whom the program is intended is critical.

FIVE STAGES OF SOCIAL MARKETING PROCESS

- 1) Planning,
- 2) Message and materials development;
- 3) Pretesting,
- 4) Implementation, and
- 5) Evaluation and feedback.

However social marketing is not necessarily a clear series of linear steps but rather a process of feedback and adjustment that might require revisiting past stages to make changes based on new information.

1. Planning this phase (Step 1) use the foundation on which the rest of the process is built. To create an effective social marketing program, we must understand the problem that are to be addressed, the audiences that are targeted, and the environment in which the program will operate. Research is used to analyze these factors and to develop a workable strategy for effecting behavior change.

2. The message and materials development This phase (Step 2) uses the information learned in the planning phase to design the messages to be conveyed as well as the materials that will carry the messages to the target audience.

3. The pretesting This phase (Step 3) involves using various methods to test messages, materials and proposed tactics with the target audience members to determine what works best to accomplish the program's objectives. It is not uncommon to go back and forth several times between development and pretesting as you make necessary changes in the messages, materials or overall strategy and explore whether the new approach works.

4. Implementation: In this phase (Step 4) the program is introduced to the target audience. Reparation is essential for success and implementation must be monitored to ensure that every element proceeds as planned.

5. Finally, the evaluation and feedback This phase (Step 5) assesses the effects of the program as a whole as well as the individual elements of the strategy. Evaluation occurs throughout the process of program development. It is not just at the end, and feedback is used at each stage to improve the program.

1.9 SOCIAL MARKETING OF THE HEALTH PROGRAMMES

Social marketing is the use of marketing principles to influence human behaviour in order to improve health or benefit society. It refers to all such activities that are aimed at changing the attitude and behaviour of the targeted people toward any social issue or practice. These activities are performed on a nonprofit basis some social, governmental, religious or political organisation. Social marketing is critical because it looks at the provision of health services from the view point of the consumer. Several marketing tools and concepts such as segmentation, positioning, communication, promotion, distribution etc...and concepts related to the dynamics of the market change can be effectively albeit with some modifications, used to address the aforementioned problems.

The programmes follow the consumer marketing principles, but the outcome is a behavioral change, which is a social one, unlike in commercial marketing the outcome is profit, a financial one. A brief of the marketing principles for the social marketing of health programmes are discussed below

- **AUDIENCE** – social marketing begins and ends with the target audience. they are at the nucleus for all the action taken and efforts put in. understanding audience with respect understanding the barriers why they are not behaving in the way they are expected.
- **PRODUCT** - represents the desired behavior audience are expected to do and the associated benefits, tangible objects, and/or services that support behavior change.
- **PRICE** - is the cost (financial, emotional, psychological, or time-related) or barriers the audience faces in making the desired behavior change.
- **PLACE** - is where the audience will perform the desired behavior, where they will access the program products and services, or where they are thinking about your issue.
- **PROMOTION** - stands for communication messages, materials, channels, and activities that will effectively reach your audience.
- **POLICY** - refers to the laws and regulations that influence the desired behavior,
- **ACTION** - The process of heightening awareness, shifting attitudes, and strengthening knowledge is valuable if, and only if, it leads to action.
- **EXCHANGE** -. If you want someone to give up, or modify, an old behavior or accept a new one, you must offer that person something very appealing in return.
- **COMPETITION** - always exists. Your audience can always choose to do something else.

1.10 CONCLUSION

Social marketing takes learning from commercial marketing and applies it to the social and health sectors: ideas and techniques that are being used to influence consumer behaviour can cross the profit divide and be used to influence health behaviour. Social marketing techniques and thinking have spread considerably and are now at the centre of health improvement in many developed countries.

Social marketing implies a strategic way of thinking about and managing social change. Both marketers and social marketers adopt a strategic approach to planning their activities, guided by seven key stages: defining the problem, defining objectives, understanding the consumer, segmenting and targeting consumers, understanding and addressing competition, creating an exchange, and developing the marketing mix.

Social marketing principles and techniques are used for improving public health, preventing injuries, protecting the environment, and engendering community involvement. Finally goal of social marketing is improve society by designing and implementing social marketing campaigns that achieve high levels of community education, self-efficacy and beneficial behavior change.

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