



# Social Marketing Matters

A Newsletter for Marketers of Public Health-Recommended Products

VOLUME 1 / NUMBER 1

NOVEMBER 1995

**S**ocial Marketing Matters, a communication resource for marketers of health products and services worldwide, is designed to connect you to the global community of socially responsible marketers. Created to serve this audience with up-to-date news and views on social marketing, this newsletter reflects the marketing community's interest in information exchange and in promoting a global support network for marketers of public health products and services.

*Social Marketing Matters* will feature state-of-the-art information on social marketing, provide information on global public health trends to give you new product ideas, show you marketing case studies to demonstrate practical country experiences, and include articles and commentaries from experts.

*Social Marketing Matters* is a place for you to share ideas and success stories, pose marketplace questions, and discuss the marketplace challenges you face. We invite your input and active participation. If you are interested in contributing an article or have a story idea that needs to be covered, please write to the editor and express your views. ☺

## ALLIES IN MARKETING:

### How to Team Up for Success

by **Haider Karrar,**

General Manager and Director  
Searle Pakistan Ltd.

**A** private company can improve both its marketing options and public image by joining a marketers' alliance and including the public sector as an ally in its marketing plans. By working together in an alliance, companies can increase their marketability and access to public agencies. Most importantly, private and public sector

collaboration motivates private sector companies to take public health goals and turn them into workable business options, which is the essence of social marketing. In addition, the image and credibility of corporations are improved in the eyes of the government, physicians, and, ultimately, the public.

### Benefits of a Marketers' Alliance

Collaboration between and among public agencies and private companies can be a very powerful tool for achieving such public health goals as improving availability of oral rehydration salts

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Through participation in an ORS marketers' alliance, an ORS marketer can learn about state-of-the-art public health information.

#### Social Marketing Matters

*Social Marketing Matters* is a quarterly newsletter for marketers of public health-recommended projects. Articles can be reprinted if credit is given to BASICS. To contribute an article to *Social Marketing Matters*, send your material to the editor at the address below.

BASICS (Basic Support for Institutionalizing Child Survival) is an innovative five-year project funded by the U. S. Agency for International Development (USAID) with the strategic goal of reducing infant and child illness and death worldwide. Working in collaboration with other international agencies, BASICS implements strategies and approaches which provide high-quality technical assistance to countries' priority health programs. For more information about BASICS, contact the Information Center at the address below.

Director of Information  
Donna Vincent, PhD

Technical Editor  
Camille Saade

Newsletter Coordinator  
Dana Inerfeld

Partnership for Child Health Care, Inc.  
(Academy for Educational  
Development, John Snow, Inc. and  
Management Science for Health)

1600 Wilson Boulevard, Suite 300  
Arlington, VA 22209 USA  
Phone: 703-312-6800  
Fax: 703-312-6900  
Internet: csaade@basics.org



#### Allies in Marketing

*continued from page 1*

(ORS) and disseminating oral rehydration therapy's (ORT) educational messages. One way to achieve greater collaboration is for ORS marketers and producers to form an ORS marketers' alliance. Such an alliance, based on shared interests, is much more powerful than one company operating alone. For example, by representing a group of companies—

- the alliance can negotiate more effectively with public health organizations and governments;
- alliance members can benefit from each other's resources—one company may use another company's unused manufacturing capacity to produce ORS; and
- alliance members can collaborate on promotion, thereby improving overall market penetration.

Public health agencies also benefit when private sector companies form alliances. It is easier for public health agencies to reach the private sector through an alliance than to work with companies individually. As a result, it is easier for these agencies to pass on information on health policies and concerns through an alliance. In fact, educating several companies one-by-one is often prohibitively time consuming for the public health educator. Through participation in an ORS marketers' alliance, an ORS marketer can learn about state-of-the-art public health information such as the necessity of including food and breastfeeding messages in any ORS promotion.

#### Benefits from Collaboration

Discussions with government representatives for appropriate deregulation of particular products can be of enormous financial benefit to a company. In Pakistan, ORS producers and international health organizations worked together in 1988 to eliminate barriers to ORS marketing expansion. A USAID-funded health project encouraged ORS producers to request a rebate on the government import duty placed on foil, which is the preferred packaging for ORS powder and the most expensive raw material used in the ORS production process. The government obliged. It lifted the restriction on selling ORS as a pharmaceutical product and allowed it to be sold in general stores throughout the country, rather than just in pharmacies, which are located mainly in urban areas.

These gains, which in many cases turned ORS into a profitable product, would not have been achieved if Pakistani ORS marketers had not been willing to work with the government. By joining forces and receiving endorsement by influential organizations such as UNICEF and USAID, ORS was delisted and a rebate on the purchase of foil obtained as well.

*continued on page 8*

*One of the big challenges I faced in my life was to turn health objectives into business opportunities. While you are doing your normal business activity, an important national goal is being achieved.*

—Haider Karrar

## HAND WASHING WITH SOAP:

### Both a Business Opportunity and a Public Health Objective

by Barbara Boyd and Camille Saade

Promoting hand washing with soap presents a good business opportunity for soap manufacturers who want to expand their market beyond laundry and toilet products. Research in Indonesia, for example, has demonstrated that while hand washing is a routine behavior for rural mothers, it is done by rinsing with water only. More than 90 percent of these same mothers, however, use soap for washing clothes and cleaning cooking utensils. Herein lies the opportunity.

One soap producer, Unilever, realized that there was a potential to increase the use of its products and increase sales by positioning a brand of its soap specifically for hand washing. The soap advertising campaign carried a message about the importance of hand washing to prevent contamination leading to diarrheal disease.

As a result of its advertising campaign, Unilever—a leader in the laundry and toilet soap markets—successfully secured a market niche in a new area, hand washing soap. In addition, the manufacturer contributed to improving the health of rural Indonesians by emphasizing the importance of hand washing for hygiene purposes.

In many places, it is common to find mothers who do not use soap to wash their hands, but use soap for other purposes. This means soap manufacturers have an opportunity to expand the current use of soap by adapting it to a new purpose. In the case of Indonesia, Unilever found willing allies in the Department of Health and the Indonesian Medical Association to help promote hand washing. Unilever gained these allies because they saw that one of the simplest and most cost-effective ways to prevent diarrheal diseases is frequent hand washing with soap, especially after defecation and before handling food. Soap producers can play an important role in this public health issue by increasing soap's availability and encouraging its use for hand washing. 🧼

*Promoting hand washing with soap presents a good business opportunity for soap manufacturers who want to expand their market beyond laundry and toilet products.*



**Ingat! Cucilah Tangan Sebelum Makan.**

Pesan Layanan Masyarakat ini disampaikan oleh:



**IKATAN DOKTER INDONESIA** bekerjasama dengan **Lifebuoy**

A careful review of available consumer research indicated that mothers had limited knowledge of the diarrheal symptoms of dehydration.

## Establishing a Brand Identity: Naming an ORS Product in Malawi

In Malawi, Pharmanova, a pharmaceutical company, is collaborating with the Ministry of Health to introduce a new, locally manufactured oral rehydration salts (ORS) product to the Malawian market. The new product is intended to replace the imported ORS sachets previously supplied by UNICEF and will be distributed through both public and private channels.

One of the company's first marketing tasks was to develop a brand identity for the new ORS product. A brand identity builds name and product

recognition with consumers, using words, images, and symbols. A successful brand name speaks with one voice, is attention-getting and memorable, and improves consumer awareness, trial use, and correct product usage.

A team composed of representatives of Pharmanova, UNICEF, and BASICS, and a local researcher quickly developed a consumer market research program. In Malawi, as in other countries, the primary targets for ORS are the caretakers, particularly mothers, of children under five years of age. A careful review of available consumer research indicated that mothers had limited knowledge of the diarrheal symptoms of dehydration. Most, however, recognize weakness as the primary danger sign. The research also suggested that mothers were primarily seeking a medical product that would restore the child's strength.

As a result of these findings, the team decided that the new ORS product/brand should be positioned as a special oral solution that maintains and restores the child's strength by replacing fluids lost from diarrhea. This positioning differentiates the new product from other home fluids by emphasizing that it is a special medicinal product and is superior to other fluids available for home use. By focusing on what consumers already recognize as an important end benefit—restoring the child's strength—it speaks directly to what mothers want most in an ORS product. In addition, the team wanted the product packaging to be positive and reassuring to give mothers a good feeling about the product without undermining its image as a pharmaceutical. The packaging also needed to show correct oral

**MADZI A UMOYO**  
AMAPATSA MWANA WANU MPHAMVU PAMENE AKUTSEGULA M'MIMBA

		
<b>Sambani m'manja.</b>	<b>Yesani madzi m'botolo la kokakola katatu, kuti akwanire lits limodzi.</b>	<b>Sungugulani mankhwalani onse a mupaketi m'madziwa.</b>
		
<b>Mwetseni mwana madziwa ndi kapu pang'onö mosalokeza.</b>	<b>Pitirizani kuyamwitsa mwana, mwa masika onse ngati ali oyamwa.</b>	<b>Ngati mwana ali wankulu, mpatsoni zakudya zokwanira kuti asanyentchere.</b>
<b>Tayani madzi otsalawo, ngati alipobe, pakutha patsiku.</b>		
Mupaketi ili yonse muli michere ya mitundu iyi: Glucose Anhydrous 20.0 g, Sodium Chloride 3.5 g, Sodium Citrate 2.9 g, Potassium Chloride 1.5 g, Excipient Kulemera kwake. 27.9 g		
Mankhwalawa ndi wopangidwä ndi a: <b>Pharmanova Ltd. P.O. Box 30073 Blantyre 3, Malawi</b>		

Figure 1.

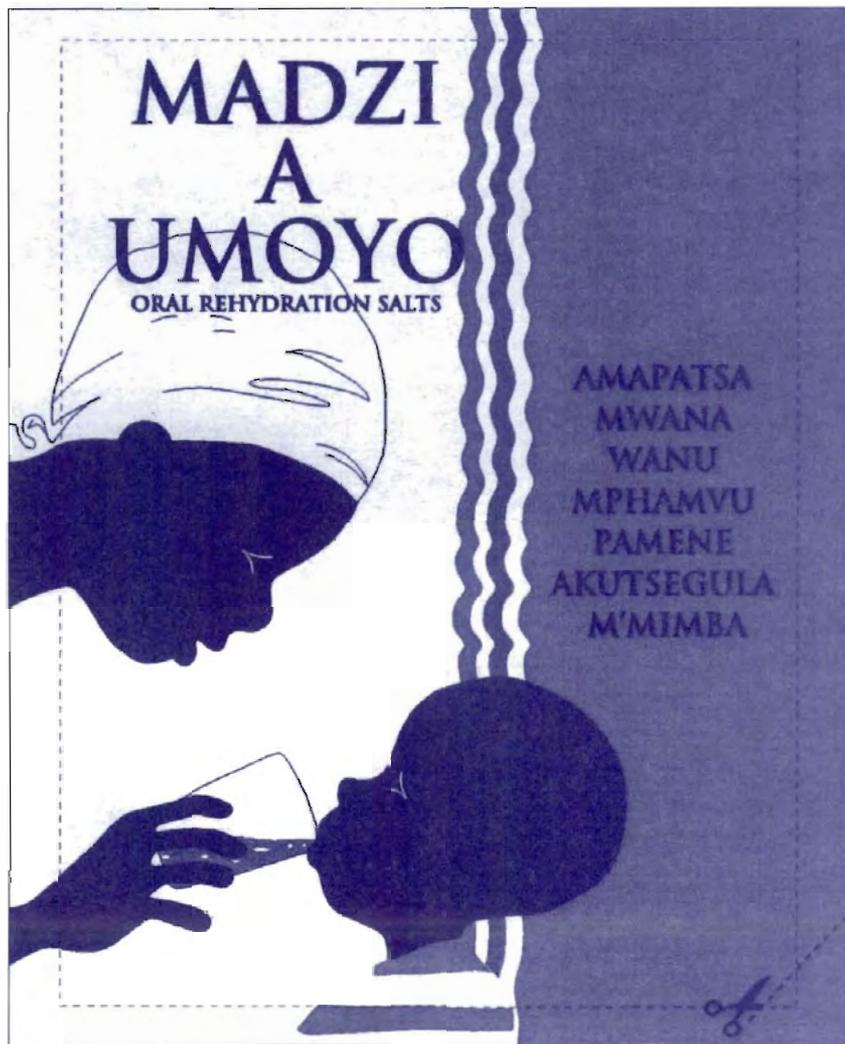


Figure 2

rehydration therapy procedures including product mixing, administration, and feeding.

The team's creative director developed five graphic concepts for preliminary screening and created illustrated mixing instructions (Figure 1) aimed at non-literate consumers and based on Ministry of Health guidelines. Using suggestions from Pharmanova workers, the team developed a list of possible product names. After the team's initial review, a short list of product names, graphic concepts for product packaging, and product benefit statements, together with the illustrated mixing instructions, were tested with mothers in focus groups.

The focus group approach provided a rapid and reliable check on the creative development process. The findings were clear-cut, making it easy to select a graphic design, product name, and basic packaging copy that effectively communicated the product to consumers. The winning package design was a silhouette of a mother giving a drink of ORS solution to a child (Figure 2). The brand name, *Madzi a Umoyo*, or Water of Health, communicated and reinforced the product's health-restoring properties. Based on suggestions from the mothers in the focus groups, the mixing instructions were revised and then retested successfully with non-literate mothers. ☺

## NEWSFLASH

Unbeknownst to the ORS marketing team, a local healer has claimed to have discovered a cure for AIDS, cancer, and other diseases. This cure is commonly being referred to as *madzi a moyo*. Through word-of-mouth, this new cure generated a tremendous amount of attention from the media and is now known nationwide. The brand development team, concerned that its new ORS product not be confused with a purported cure for AIDS, decided not to use the name *Madzi a Umoyo*. Fortunately, alternative names had been tested in the focus groups and *thanzi*, meaning strength or vitality in Chichewa, tested almost as well as *Madzi a Umoyo* and was selected as its replacement. The other packaging components were unchanged.

(The brand development team members were: Victor Kasinja, Creative Director, UNICEF; Samu Samu, Research Director, Bunda College; Terry Kearon, Managing Director, Pharmanova; and Camille Saade and Bob Porter, BASICS.)

*Bed nets are already popular in many African communities where they are used for privacy, as well as for protection against biting insects.*

## **Insecticide-Treated Bed Nets: A Preventive Tool for Malaria Control**

by **Barbara L. Boyd**

**W**ith the growing prevalence of malaria in sub-Saharan Africa, there are significant business opportunities for manufacturers and distributors of insecticide-treated bed nets. These opportunities include producing and supplying nets to retailers, selling nets to institutions, and producing and marketing insecticide for net retreatment.

Bed nets are already popular in many African communities where they are used for privacy, as well as for protection against biting insects. These conventional nets, however, are not very effective at protecting against clinical attacks of malaria. When treated with an insecticide which repels mosquitoes, however, the protective effect of nets is substantially enhanced.

### **The Bed Net**

Traditionally, bed nets have been made of cotton. While reasonably priced and readily available in Africa, insecticide-treated cotton nets have relatively little repellent effect. The insecticide is so well-absorbed into the cotton fibers that little remains on the outside to come into contact with mosquitoes. Users seem to prefer cotton nets to those made of synthetic fibers, because cotton permits better air circulation and is easier to fold for storage.

Synthetic nets repel mosquitoes more effectively than cotton nets. The insecticide remains on the outside of the fibers allowing direct contact with insects. A recent study found that importing ready-made synthetic nets from Thailand was the most cost-effective way of making bed nets available to Africans. As user preferences vary widely from region to region, however, the creative marketer will have to research local material preferences to maximize sales and investment.

### **The Insecticide**

Pyrethroids, the only class of insecticide currently available in formulations suitable for use on nets, come in two varieties. The first is a high-potency, longer-lasting (one to two years) formulation, such as lambda-cyhalothrin; the second is a lower-potency, shorter-lasting (six months) product, such as permethrin or deltamethrin.

Lambda-cyhalothrin is initially more expensive than permethrin, but its cost is often outweighed by the less frequent need for retreatment. Both products can produce undesirable side effects such as itching skin and burning eyes, although less so with permethrin. These effects are transient, however. No long-lasting effects from the pesticides have been reported in the scientific literature.<sup>1</sup>

Whatever insecticide is used, retreatment is needed at regular intervals. The bed nets lose their insecticide

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<sup>1</sup>Lines, J.D. "Technical Issues Raised by the Question: 'How Can Bed Net Impregnation Be Made Widely Available,'" prepared for IDRC/WHO-TDR.

from frequent washing and from drying in the sun.

### Bed Net Retreatment

Sales of pretreated nets are an option for companies investigating this business opportunity. Companies must follow up on their sales with one of the following methods of retreatment:

- *Coordinated treatment of many nets at once.* Companies can find a market in mass net retreatment for institutions such as health centers, schools, hospitals, or large agricultural businesses who provide boarding for their workers. Whole communities can be encouraged to participate in “dipping days.”
- *Individual net treatment services.* Companies can supply the product and train local retailers to perform the service for a small fee (approximately US\$.40). This service is probably essential for building a viable domestic market for insecticide-treated bed nets.
- *Home treatment.* Companies can market small packets of insecticide so that individual users can treat their own nets. Kits for home retreatment, in the form of sachets or small bottles of emulsifiable concentrate, are now being sold to tourists in some countries.

### The Sales Effort

Promotion is the major task in any insecticide-treated bed net sales effort. Research in Tanzania shows that people are willing to buy bed nets because they confer higher status to the owner. They also provide a concrete benefit—people sleep better at night. Nets treated with insecticide—and therefore more expensive—are more difficult to sell. People often do not understand that malaria is caused by a particular kind of mosquito and treated nets repel these insects. They also do not understand the need for on-going retreatment.

The experience in Tanzania, however, demonstrates that in villages where there is a strong interest in protecting public health, large-scale, group net retreatment efforts can be successful.

Peter Winch, MD, at Johns Hopkins University’s School of Public Health and an international authority on malaria and bed nets, recommends promoting the idea of retreatment even before introducing the concept of bed nets as a protection against malaria. “If you sell consumers first on the idea of treating the nets with insecticide,” he says, “the idea of the bed net itself naturally follows. The commercial sector can play a vital role in helping reduce mortality from malaria by doing what it does best—marketing a service or a product.” 🧐

■

*People often do not understand that malaria is caused by a particular kind of mosquito and treated nets repel these insects.*



*Improved communication  
between these groups can  
improve your corporate image.*

## Allies in Marketing

*continued from page 2*

### Steps to Achieving Private-Public Alliances

- Identify a national objective that is clearly related to your product or service. Recast the national objective as a business opportunity and build a promotional strategy for your product around this opportunity.
- Improve your product's appeal by promoting it as a therapy that accompanies other proven child health measures; e.g., breastfeeding and feeding along with ORS. Research shows that ORS, when combined with breast-milk and feeding, can help reduce stool output and duration of diarrhea.
- Assign a monetary value to the public relations benefits you achieve from the activities above. The added value will probably justify devoting corporate time, money, and energy to any socially-beneficial product or service.
- Forge ties between your company, other producers, and the government. Improved communication between these groups can improve your corporate image and facilitate efforts to improve the regulatory climate toward your product.



1600 Wilson Boulevard, Suite 300  
Arlington, VA 22209 USA



# Social Marketing Matters

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## Social Marketing Theory and Practice

The question of how directly theories about social marketing and behavior change can be applied in the real world is an important one for us at BASICS, as it is for many people involved in public health-related activities around the world. In this issue of *Social Marketing Matters*, we explore the theory and practice of social marketing from a variety of perspectives.

Of course, no one theory can take into account the myriad of circumstances and practical considerations that arise in planning or implementing health-related programs. However, as the articles in this issue demonstrate, theory can provide a common frame of reference for a wide variety of public and private sector marketing and behavior change activities.

Dr. Alan R. Andreasen, Professor of Marketing and Associate Dean for Faculty at Georgetown University School of Business, provides a theoretical framework for planning and implementing social marketing programs (see page 2). He argues that successful social marketing involves both marketing and behavior change activities and that the crucial link between the two is consumer-oriented market research.

Jack Bagriansky also shows how formative research can be used to launch public/private initiatives (see page 4). He works with the nonprofit Program Against Micronutrient Malnutrition and is helping representatives of the international health community and the food industry work together to address the problem of micronutrient malnutrition. As he explains, representatives of both groups were surveyed about their priorities for public/private dialogue, and the results helped define the potential scope of their partnership by outlining areas of convergence and divergence.

The importance of such market research in establishing public/private partnerships is demonstrated in a case study from Bolivia (see page 6). Mario Telleria, a marketing consultant from Bolivia, outlines how surveys, focus groups, and other types of formative and pretesting research were used to develop a new ORS (oral rehydration salts) product.

The final article in this issue deals with discrete aspects of how social marketing can be used to promote certain health behaviors. Samad Khalil, a marketing executive with Searle Pakistan, outlines how companies can use interpersonal communication with health providers and consumers to simultaneously promote healthy behaviors, market their products, and improve their corporate image (see page 7).

We hope that by juxtaposing these various perspectives, *Social Marketing Matters* will help stimulate an ongoing dialogue about the intersection of the theoretical and the practical in marketing health products and services. Can you apply Dr. Andreasen's framework to a recent marketing or behavior change effort in which you have been involved? Write or e-mail us with your comments and experiences so that we can share them with other readers of *Social Marketing Matters*. 

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- contribute an article
- receive additional information on programs or publications cited
- suggest additions to our mailing list
- learn more about BASICS
- relay a comment or reaction to a story published in *Social Marketing Matters*

### Social Marketing Matters

*Social Marketing Matters* is published quarterly by BASICS (Basic Support for Institutionalizing Child Survival), an innovative five-year international health project funded by the U.S. Agency for International Development (USAID). The project provides both technical leadership and practical field programs for reducing infant and childhood illness and death worldwide. BASICS operates programs in approximately 35 developing countries of Africa, Asia, Latin America and the Caribbean, and in the Newly Independent States of the former Soviet Union. The project works, in the following programmatic areas:

- sustaining immunization programs
- integrating effective case management of childhood illnesses
- strengthening the link between nutrition and health
- promoting and sustaining healthy behaviors
- improving techniques for monitoring and evaluation
- establishing public/private partnerships

*Project Director:* Glenn O. Patterson, MScEcon

*Deputy Director for Technical Direction:* Ronald J. Waldman, MD, MPH

*Director of Information:* Donna M. Vincent, PhD

*Social Marketing Matters* is a communication resource for marketers of health products and services worldwide. It serves to connect socially responsible marketers around the globe who have expanded their commercial objectives to meet humanitarian needs.

*Technical Officer for Private Sector/Social Marketing and Editor:* Camille Saade

*Newsletter Coordinator:* Dana Inerfeld

*Acting Managing Editor:* Linda Griffin Kean

# BASICS

1600 Wilson Boulevard,  
Suite 300  
Arlington, VA 22209 USA  
Phone: 703/312-6800  
Fax: 703/312-6900  
Internet: [infoctr@basics.org](mailto:infoctr@basics.org)



## MARKETING SOCIAL CHANGE

### The Four Stages to Behavior Change

by Alan R. Andreasen, PhD  
*Georgetown University*

Social marketing has been accepted as a legitimate behavior change technology. Consequently, it is no longer necessary to justify its use over other approaches. The challenge today is how to use it most effectively. There is a wide recognition that effective use of social marketing to achieve an organization's social mission requires a broad, workable strategic framework for planning and action. In *Marketing Social Change* (San Francisco: Jossey-Bass, 1995), I set forth such a comprehensive framework. This framework is well supported by the marketing and social science literature and by my twenty years of experience advising managers of social marketing programs around the world.

### Social Marketing Is Changing Behavior

My framework, or paradigm, is based on the fundamental precept that social marketing is really all about *influencing behavior*—not merely creating product awareness or changing attitudes (see Figure 1). Given this behavioral “bottom line,” it follows that effective social marketing requires a mindset that puts the target customer at the center of every strategic decision. It also means that the process of social marketing must begin with an attempt to understand target customers (often called formative research). The process must include constantly going back to these same target customers to gauge their likely reactions (pre-testing research) during development of a program. Finally, the process also must include mechanisms that the social marketer can use to continually touch base with consumers to learn how the program is working (monitoring research)

The overall success of a customer-centered approach, however, depends on developing a deep and sophisticated understanding of the target customers. While it is possible to gain such a sophisticated understanding through random observation and hours of customer research, it is more likely to be gained when such observation and research are guided by a model or representation of how target audiences make decisions and take action.

### Stages of Behavior Change

The model I propose begins with a recognition that audiences come to undertake important behavior changes in stages rather than all at once. Although some writers propose five or six stages,<sup>1</sup> I suggest that customers progress through four stages:

<sup>1</sup>See, for example, J. O. Prochaska, C. C. DiClemente and J. C. Norcross, “In Search of How People Change: Applications to Addictive Behaviors,” *American Psychologist* 47:9 (September 1992), pp. 1102–1114; and Everett Rogers, *Diffusion of Innovations*, fourth edition (New York: Free Press, 1995).

## Marketing Social Change

Changing  
Behavior to  
Promote  
Health, Social  
Development,  
and the  
Environment

ALAN R. ANDREASEN

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350 Sansome Street,  
San Francisco, CA 94104-1310  
Tel. 415/433-1740

- **Precontemplation:** when customers have not really thought about undertaking the action or have concluded (we hope, temporarily) that it is not appropriate for them.
- **Contemplation:** when customers are actively thinking about taking the action but have not yet done so. This stage includes two components: in Early Contemplation, they have just begun to evaluate the possibility; in Late Contemplation, they are close to taking the crucial first steps.
- **Action:** when customers are trying the new behavior.
- **Maintenance:** when customers are settling into new patterns of behavior, presumably never to return to the “old ways.”

The challenges facing the social marketer differ depending on the behavior change stage of the target market. The goal is to move target audiences to the next stage in the process, not to move them to the final stage in one leap! Thus, in Precontemplation, the challenge is to overcome consumers’ tendencies to selectively ignore or screen out social marketing messages in order to create awareness and interest.

### Determinants of Behavior

The social marketing challenge at subsequent stages of the process is made much more complex by the many factors that influence behavior. Of these, four are most important:

- Perceived benefits: what good things could happen if the behavior is undertaken
- Perceived costs: what bad things could happen if the behavior is undertaken
- Perceived social influence: what important other people or groups are doing or are urging
- Perceived behavioral control: whether consumers think they can actually carry out the behavior

Thus, the challenge at the Contemplation Stage is to reduce perceived costs and to increase perceived benefits, social influence, and behavioral control. During the Maintenance Stage, consumers must feel rewarded and must have frequent reminders to continue the desired behaviors.

### A Flexible Framework for Social Marketers

This framework for understanding customers helps social marketers determine what to ask in formative research, what to look for in pretests, and what to monitor as programs roll out. It is also helpful in devising specific strategies and tactics to ensure that all behavioral influences are addressed and coordinated.

Finally, the framework is flexible enough to be used by social marketers to influence not only target customers but also others who are critical to the program’s success, including media gatekeepers, school teachers, distributors, politicians, and government bureaucrats, among others. What makes the framework robust is that, in each stage, the bottom line remains the same: the marketing manager needs to influence behavior. 🙏

Figure 1

#### Key Features of Social Marketing

- 1 Consumer behavior is the bottom line.
- 2 Programs must be cost-effective.
- 3 All strategies begin with the customer.
- 4 Interventions involve the *Four P's*: Product, Price, Place, and Promotion.
- 5 Market research is essential to designing, pretesting, and evaluating intervention programs.
- 6 Markets are carefully segmented.
- 7 Competition is always recognized.

Source: Alan R. Andreasen, *Marketing Social Change* (San Francisco: Jossey-Bass Publishers, 1995), p. 14.

Figure 1.  
Priorities for Public/Private  
Dialogue: Increasing Public  
Awareness and Creating  
Consumer Demand

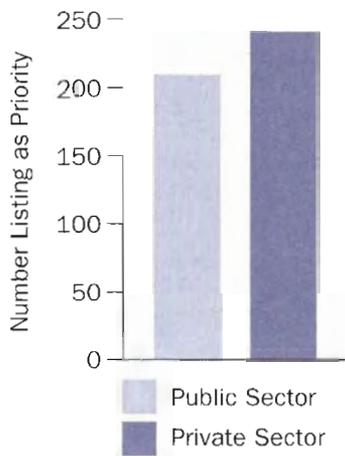
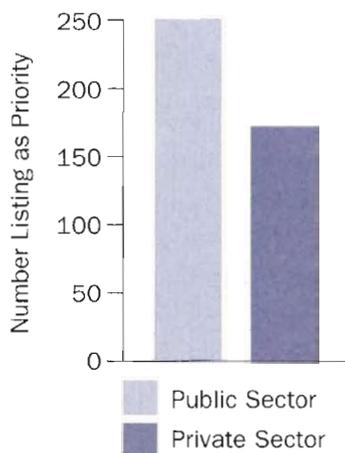


Figure 2.  
Priorities for Public/Private  
Dialogue: Professional  
Communications



## FINDING COMMON GROUND

### The Food Industry and the Public Sector Target Micronutrient Malnutrition

by Jack Bagriansky, MA, MPH  
*Program Against Micronutrient Malnutrition*

The international health community and the global food industry are collaborating in an effort to eliminate “micronutrient malnutrition,” a lack of certain vitamins or minerals in the diet which causes illness, death, and mental and physical impairment for huge numbers of people around the world. In December 1995, leading food producers, representatives of international development organizations and policy makers from ten developed and developing countries met to discuss how to use food fortification to combat this scourge. Participants in the “Ottawa Forum” sought to identify areas of common concern, priority, and commitment upon which to build a collaboration.

Micronutrient malnutrition—vitamin A deficiency, iron deficiency, and iodine deficiency—can be eliminated by increasing the availability of certain foods (in natural, processed, or fortified states) to vulnerable populations. Forty million children worldwide suffer from vitamin A deficiency, making them less resistant to infections that cause illness, disability, and death. Iron deficiency anemia, which affects 1.3 billion people, slows learning, reduces work capacity, and endangers the lives of pregnant women and infants. Iodine deficiency affects one-fifth of the world’s population and is the single greatest cause of mental impairment (including low I.Q.). To combat iodine deficiency, governments worldwide are encouraging the salt industry to produce only iodized salt by the end of 1996. The principal challenge for this budding partnership between the health community and the food industry is to develop and distribute products to eliminate vitamin A and iron deficiency.

The Ottawa Forum launched a dialogue on using food fortification to tackle this

challenge. The forum was convened by the Micronutrient Initiative, the Program Against Micronutrient Malnutrition (PAMM), and the Keystone Center. In preparation for the meeting, a survey was conducted of about 250 public and private sector actors to identify their views on micronutrient issues. The survey included executives, public officials, and academics from 12 developing countries, the United States, Canada, and Europe. The survey results provided Ottawa Forum participants a sense of where the priorities of the public and private sectors diverge or converge on a number of key issues.

The survey identified areas where the private and public sectors currently agree, areas where different definitions or performance indicators lead to different perceptions and expectations, and areas where the two sectors disagree (see Figures 1–4). The areas of general agreement provide common ground on which to develop concrete strategies and action plans. Where perceptions diverge, there is an opportunity for the sectors to learn from each other. Finally, the areas where there is disagreement over goals define the limits to public/private collaboration.

#### Areas of Agreement

■ **Increasing Public Awareness and Creating Consumer Demand:** Both sectors see value in working together on public information and demand-creation campaigns in order to help the private sector get into the market for fortified foods and to ensure that the public uses these foods appropriately (see Figure 1).

■ **Professional Communications:** All respondents want to increase the flow of scientific, nutritional, technical, and marketing information—in both directions (see Figure 2). For example, many patented food-fortification technologies owned by the private sector could be usefully applied to simple products such as flour, sugar, or oil in countries where these patents do not apply. Licensing agreements or seminars to share information were identified as possible ways to get over the “fear of trying,” particularly for iron fortification.

### ■ Mechanisms for Collaboration:

Respondents see a need to establish processes to facilitate cooperation between the public and private sectors and to define, clarify, and validate roles (see Figure 3). The dialogue process, when repeated at the national level, can provide such a mechanism for planning collaborative education and awareness activities, developing professional relationships, and building organizational linkages.

### ■ Divergent Perceptions

■ **Market Research:** There is little agreement on the need for market research (see Figure 4), which is tenth on the public sector list of priorities for dialogue and third on the private sector list. The public sector often brings in marketers only at the end of a process, to promote products or ideas developed without their input. The private sector views marketing as the way to *develop* the solution—not just to deliver it—and looks to utilize a full mix of marketing tools for product development, pricing, packaging, distribution, and promotion. The public sector might be able to better serve its “customers” by bringing in marketing much earlier in the process.

■ **Long-Term Growth Opportunities:** The public sector sees fortified foods as a long-term growth opportunity, while the private sector is more circumspect. Most business respondents expressed a reluctance to take risks and to judge opportunities without first seeing “the numbers.” Both sectors need to better understand the other’s approach to risk-taking. Then, they can use market research, as outlined above, as a tool for collaboratively developing solutions to micronutrient malnutrition. Specifically, market research can correlate the public sector’s estimation of the size of the need to the private sector’s estimation of the size of the opportunity.

■ **The Role of Regulation:** When asked about their motivation for implementing food-related regulations, standards, or other codes of conduct, public sector respondents mentioned health, safety, quality assurance, and social responsibility. The private sector identified the need

to provide an environment that allows companies seeking to develop safe, high-quality products to compete, innovate, and develop the growing market for fortified food products. Public sector respondents saw only their regulatory role, not their enabling role in bringing fortified foods to market.

### ■ Areas of Disagreement

■ **Cost of Food Fortification:** Seventy-five percent of public sector respondents were gloomy about the economic prospects for food fortification. Private sector respondents were split: half reported achieving economic benefits in fortification, and half foresaw some constraints. This split in perception could be the result of a narrow focus by the public sector on the “poorest of the poor,” in contrast to the private sector’s view that there is a spectrum of niche markets of opportunity. Again, market research may help align these contrasting perceptions by identifying opportunities for new products, pricing mechanisms, and distribution vehicles to exploit food product niches among low-income consumers—that is, to create a “public health market” for food products.

■ **Public Sector Bureaucracy:** One of the private sector participants’ top priorities for public/private dialogue concerns their perceptions that the public sector lacks “a results orientation, clear goals, decisiveness, and follow-up.” They believe that the public sector seeks to determine which foods are appropriate to fortify and which consumer groups are appropriate to target—a perception that is unfounded according to the survey. Public sector respondents did not identify bureaucratic reform as an area for public/private dialogue, although one-third did mention politics, bureaucracy, and legal issues as barriers to fortification.

The survey provided a good starting point for a fruitful dialogue between the public and private sectors. It offered participants in the Ottawa Forum a measure of self-awareness, a recognition of each other’s limitations, and a realization that differences do not preclude working together. 📌

Figure 3. Priorities for Public/Private Dialogue: Mechanisms for Collaboration

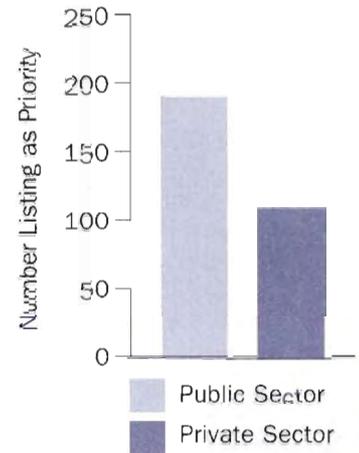
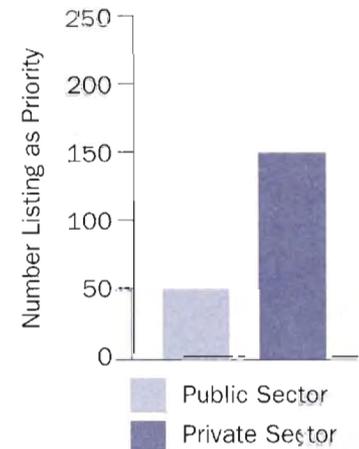


Figure 4. Priorities for Public/Private Dialogue: Market Research



■

The task force set objectives for the program and developed a broad marketing plan to meet those objectives from both a commercial and a public health perspective.

## LAUNCHING A PUBLIC/ PRIVATE PARTNERSHIP

### A Case Study from Bolivia

by Mario Telleria  
UNICEF/Bolivia

In recent years, international aid donors and developing country governments have increasingly sought to pursue their child survival and public health goals by creating alliances with commercial enterprises. I have been privileged to be part of a successful public/private partnership in Bolivia to increase the availability, accessibility, and use of oral rehydration salts (ORS) on a national level. This article outlines how this partnership was established.

While ORS has been available in Bolivia for a number of years, infants and young children throughout the country continue to die from the effects of diarrheal dehydration. The Bolivian Ministry of Health (MOH) sought to increase and sustain ORS availability beyond its own limited distribution system. The MOH decided to encourage the private sector to help achieve this goal, with the support of three international donor agencies—the Pan American Health Organization (PAHO), United Nations Children's Fund (UNICEF), and U.S. Agency for International Development (USAID).

#### The Challenge

A major obstacle to increasing the availability of commercial ORS in Bolivia is the limited market for ORS and consequent lack of economies of scale for current and potential ORS producers and marketers. Pharmaceutical companies had little interest in setting up local production and/or marketing operations because of the lack of demand for ORS. This was compounded by the high cost of importing the raw materials for ORS and its packaging. In addition, the large quantity of ORS being imported and distributed at subsidized prices by the MOH effectively limited the commercial ORS market.

#### Mobilizing the Partners

The public sector took the first step by establishing a task force charged with

increasing national use of oral rehydration therapy (ORT) and reducing the high infant mortality rates attributable to diarrhea. The task force was comprised of key personnel from the MOH and representatives from the three donor agencies.

The task force requested the technical assistance of two outside marketing experts, one from UNICEF headquarters and one from the BASICS (Basic Support for Institutionalizing Child Survival) Project. As a local marketing consultant based in La Paz, I was hired by UNICEF to team up with the two marketing consultants to ensure local continuity. We made use of existing market research data to help the task force assess existing knowledge about ORS use and attitudes toward treating diarrhea in children.

The task force set objectives for the program and developed a broad marketing plan to meet those objectives from both a commercial and a public health perspective.

#### Approaching the Target Companies

The marketing experts on the task force initiated contact with local pharmaceutical and food manufacturers and distributors. The marketing team conducted a systematic analysis of the capacity of 17 pharmaceutical and consumer goods companies. Then, we created a matrix to identify the best candidate companies by matching their capabilities with the criteria agreed upon by the task force (see Figure 1).

Two companies were selected: *Dróguerie Inti*, which controlled a large share of the Bolivian pharmaceutical market, produced ORS locally, and had extensive marketing and distribution mechanisms in place; and *Laboratorios Alfa*, a small ORS producer.

#### Profiling the Consumer

The task force contracted a local, professional market research agency to survey consumers' perceptions, attitudes, and behaviors concerning diarrhea and ORS. The survey confirmed several assumptions underlying the preliminary marketing strategy. It also confirmed that there was a large, untapped potential market for ORS.

The task force used the market survey results to develop a marketing and positioning strategy, which included the product

*continued on page 8*

## MARKETING WITH A HUMAN FACE

by Samad Khalil  
Searle Pakistan, Ltd.

Most business organizations are looking for opportunities to enhance their corporate image. Educating people on matters of health and population can be a particularly attractive way of achieving this goal. No additional expenditures or separate programs are needed. Rather, education is imparted in the process of a promotional effort. For example, companies marketing oral rehydration salts (ORS) can promote breastfeeding and appropriate feeding as a concomitant therapy for treating diarrhea. The message can be included as part of the sales story. Little extra effort is required, and no extra funds are needed. Similarly, companies marketing other health care products can promote immunization, personal hygiene, and healthy spacing between children.

These messages can be conveyed through the mass media, in doctors' clinics, in retail pharmacies, and through nongovernmental organizations (NGOs). The use of mass media as an outlet for such messages is familiar to everyone, but other outlets may be less commonplace. What follows is an outline of how these various outlets can be used.

### Doctors' Clinics

Messages to doctors can be supplemented by providing them with prescription pads or with display charts (identifying the sponsor) to hang in waiting rooms or examining rooms. Leaflets with a similar message (again, identifying the sponsor) can be passed on to patients by the doctors. Experience has shown that doctors are willing to participate if they can see the need for and the relevance of the effort. For example, doctors can provide counseling to groups of mothers on immunization, increased spacing between children, and how to prepare and use ORS.

### Retail Outlets

Retail outlets provide a more regular point of contact with the target audience. Experience has shown that retailers will

participate in such promotional efforts if the material is suitable and attractively designed. Posters and charts, for example, can be hung inside retail outlets or used as window displays.

To elicit active participation, however, it is essential to impart useful knowledge. The most opportune time to provide product knowledge (and information about related health concepts) is during the launch phase of a product. Trade seminars also provide an opportunity. Booklets, leaflets, and circulars sent through the field sales force allow the retailer to discuss and clarify concepts and implementation. As knowledge leads to participation, companies can then ask for active retailer participation in delivering the messages to the consumer.

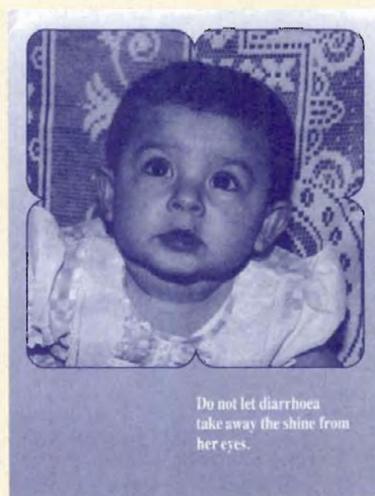
### NGOs

No marketing organization has a large enough budget to undertake all the programs or exploit all the opportunities it can identify. Similarly, no NGO has a large enough budget to undertake all the activities necessary to achieve its objectives. Socially active marketers and alert NGO officials therefore need to identify and exploit opportunities to work together.

NGOs may provide the forum for organizing health-related educational *cum* recreational activities (e.g., Baby Shows.) The marketing organization may then use the forum not only to promote its products but also to enhance its corporate image. All of this can be achieved at a very small cost.

Collaboration benefits the NGO as well as the marketer. NGOs are eager to support events that provide their members an opportunity to interact with the community, enhance their skills, expand their social networks, or give them the satisfaction of promoting a worthwhile cause. Again, the cost of such an event is a small fraction of what it would cost to organize it without a partner.

In Pakistan, the opportunity is wide open for collaboration among commercial marketers, doctors, retailers, and NGOs to educate people on matters of health and population—to market with a human face. ☺



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Experience has shown the importance of gaining the support of physicians and pharmacists in ensuring the sustainability of ORS demand and use.

### A Case Study

*continued from page 6*

name and presentation, logo and visual concept, and the consumer benefits the product would deliver. Based on mothers' descriptions of their children's symptoms during diarrhea, the task force decided to position the new ORS product as a restorer of strength lost during diarrhea.

### Building a Product Identity

The market research agency used focus group discussions with caretakers of young children to test the visual concept, possible brand names, and packet designs. The focus group participants selected the product name *Suero de la Vida* (Serum of Life)

and refined the packet design, which contains an animated drawing of an ORS packet on the front and four visual panels of ORS mixing instructions on the back.

### Creating an Advertising Strategy

The task force developed an advertising brief, a statement of work, and a set of criteria for selecting an advertising agency. After the agency was selected, separate marketing strategies were elaborated for each of the four target audiences (caretakers, physicians and nurses, pharmacists, and other retailers).

### Launching the Product

Experience has shown the importance of gaining the support of physicians and pharmacists in ensuring the sustainability of ORS demand and use. Therefore, the task force decided to launch the new ORS product in two stages. The first stage involved an intensive promotional campaign by the companies. In the second stage, the commercial partners targeted caretakers in both urban and rural areas using mass media and community activities.

All the task force partners will participate in evaluating the impact of the ORS commercialization effort on behavior change among the four target audiences, using the market research conducted prior to the product launch as a baseline.

*In the next issue of Social Marketing Matters, we will examine in detail the development and implementation of the marketing strategy for the new ORS product.*

Figure 1

#### Bolivia ORS Initiative: Task Force Criteria for Assessing Companies' Capacity

Importance	Criteria	Points
1	Extensive Distribution at National Level	11
2	Capacity/Experience in Marketing Consumer Goods	10
3	Distribution to Rural Areas	9
4	Ability to Produce High Volume at Low Cost	8
5	Distribution to Urban Areas	7
6	Active Promotion and Sales to Pharmacies	6
7	Active Promotion and Sales to Stores/Others	5
8	Promotion to Physicians and Pharmacists	4
9	Sufficient Production Capability of ORS	3
10	No Marketing of Antidiarrheals or Infant Formulas	2
11	Access to Packaging Equipment	1

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# Social Marketing Matters

A Newsletter for Marketers of Public Health-Recommended Products

VOLUME 1 / NUMBER 3

SEPTEMBER 1996

## Seizing Social Marketing Opportunities

**S**ocial Marketing Matters seeks to stimulate a discussion about how theories on social marketing and behavior change can be applied in the real world. The previous issue offered a variety of perspectives on both the theory and the practice of social marketing. This issue focuses on how to assess social marketing opportunities and how to plan and implement a campaign to exploit them.

Using research to gauge the target audience is central to the marketing strategy of a public/private partnership in Bolivia to market ORS (oral rehydration salts). In a continuation of his article from the previous issue, Mario Telleria outlines how the partnership defined the target audience for its new commercial ORS product, developed a product that appeals to those consumers, and launched the product (page 2). We found that the practical experience of this partnership matches quite closely with Dr. Alan Andreasen's four key factors influencing behavior, described in the previous issue of *Social Marketing Matters* (page 8).

Dana B. Inerfeld, of *Social Marketing Matters*, attended the Second Annual Conference on Social Marketing, held outside Washington, DC, in May 1996. Based in part on a panel discussion at the conference, she outlines the benefits that can accrue to companies engaged in cause-related marketing, including improved sales, profits, and employee relations (page 4).

Dr. Peter Winch, from the Johns Hopkins University School of Hygiene and Public Health, examines a social marketing project to promote the use of insecticide-treated bed nets for malaria control in Tanzania (page 6). He explains how members of the community helped overcome some problems encountered in distributing the nets. ☺

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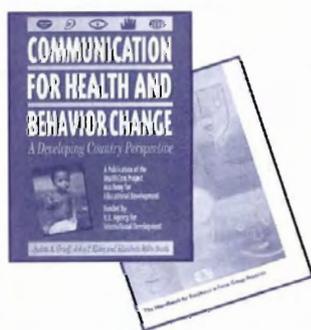
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## We Need Your Help

Our goal is to make *Social Marketing Matters* a stimulating and practical marketing resource. By completing the reader survey enclosed with this issue, you can help us meet that goal.

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# Developing and Implementing a Marketing Strategy for ORS

## A Case Study from Bolivia

by Mario Telleria  
UNICEF/Bolivia

### Social Marketing Matters

is a communication resource for socially responsible marketers of health products and services worldwide who have expanded their commercial objectives to meet humanitarian needs.

Technical Editor:

Camille Saadé

Editor:

Linda Griffin Kean

Newsletter Coordinator:

Dana Inerfeld

Design/Desktop Publishing:

Lynda Nygrer

*Social Marketing Matters* is published quarterly by BASICS (Basic Support for Institutionalizing Child Survival), an innovative five-year international health project funded by the U.S. Agency for International Development (USAID). The project provides both technical leadership and practical field programs for reducing infant and childhood illness and death worldwide. BASICS operates programs in Africa, Asia, Latin America and the Caribbean, and the New Independent States (NIS). BASICS collaborates closely with a wide range of nongovernmental organizations, other donors, and public health institutions in the following six programmatic areas:

- sustaining immunization programs
- integrated management of childhood illnesses
- strengthening the link between nutrition and health
- promoting and sustaining healthy behaviors
- improving techniques for monitoring and evaluation
- establishing public/private partnerships



1600 Wilson Boulevard  
Suite 300  
Arlington, VA 22209 USA  
Phone: 703/312-6800  
Fax: 703/312-6900  
Internet: [smm@basics.org](mailto:smm@basics.org)



In the previous issue of *Social Marketing Matters*, I recounted steps taken to launch what has become a successful public/private partnership in Bolivia to increase the availability, accessibility, and use of oral rehydration salts (ORS). The initiative works through a task force that includes representatives of all the partners: the Bolivian Ministry of Health (MOH), Pan American Health Organization (PAHO), United Nations Children's Fund (UNICEF), the Basic Support for Institutionalizing Child Survival (BASICS) project of the U.S. Agency for International Development (USAID), and two private pharmaceutical firms—Drogueria INTI and Laboratorios Alfa.

In this article, I outline how the task force developed a marketing strategy for a new commercial ORS product. Two other marketing experts with extensive experience in other countries provided technical assistance to the task force. Together, we worked with local market research firms to assess the potential market, identify the target audience, and develop and test the product's positioning, price, promotion, and distribution strategies.

### Formative Research

Our first step was to analyze existing market research data to help the task force assess current knowledge about ORS use and current attitudes toward treating diarrhea in children. Usually, such data consist primarily of studies conducted by public health agencies, international donor organizations, or commercial ORS suppliers. In Bolivia, information on ORS was included in family health surveys previously conducted by the MOH, USAID, UNICEF, and PAHO. In addition, we had access to market information contained in trade audits of the pharmaceutical industry.

We used this research to develop a preliminary marketing strategy and a brand identity for the new ORS product, which included a description of the target audience, the positioning statement, and the product rationale. The product was positioned as "a special oral solution that maintains and restores the strength of the child by replacing fluids lost during diarrhea."

The preliminary marketing strategy was the basis for market research among potential consumers. We used surveys to gauge current perceptions, attitudes, and behaviors regarding the correct treatment of diarrhea through ORS or other home-available fluids. Individuals were surveyed in three different regions of Bolivia, each of which contained distinct ethnic groups and had rural and urban populations.

The surveys confirmed many elements of the preliminary marketing strategy, including the existence of a large potential market for ORS. The survey also facilitated segmentation of the market into four primary audiences: parents, physicians and nurses, pharmacists, and other retailers.

### Pretesting Research

The pretesting research involved the "four Ps" of the marketing mix: product positioning, price, promotion, and place (distribution).

■ **Positioning.** To position the product, we held focus group discussions with parents of young children in rural and peri-urban areas. Seven successive focus groups were used to test nine preliminary visual concepts, choose among possible brand names, and refine the key message. One visual concept was unanimously preferred and was successively fine-

tuned (along with two other finalists): an animated ORS sachet that conveyed joy, vitality, and strength (see Figure 1).

The product name was chosen: *Suero de la Vida* (Serum of Life). The key message was refined to include a promise to “recuperate and give strength to the child with diarrhea” (*recupera y da fuerza al niño con diarrea*). The focus groups also assessed visual panels illustrating ORS mixing instructions.

■ **Price.** The task force conducted a price-sensitivity study on the new product. Target consumers in rural areas were ready to pay an average of 1 Boliviano (US\$0.20) per packet of ORS. However, the high cost of importing the materials to produce and package ORS meant that the producers could not sustain this price without subsidies. After considerable debate, the task force agreed with the producers’ recommendation to set the wholesale price at 1.70 Bolivianos (US\$0.34) and to allow retail outlets to determine the final price to consumers.

■ **Promotion.** The marketing experts on the task force invited executives of the two companies to participate in developing the advertising strategy for the product. After the advertising agency was selected, separate marketing strategies were elaborated for each of the four target audiences.

Sixty percent of the campaign budget was earmarked for interpersonal communication—using the companies’ sales forces—to reach physicians, pharmacists, and retailers. The remaining 40 percent of the budget was allocated to radio, TV, village fairs, and other community activities to reach parents.

The donor agencies agreed to share equally the cost of the first-year advertising campaign. The companies made an in-kind contribution to the effort by mobilizing their sales forces and donating their time. The larger of the two companies, *Droguería INTI*, developed product displays for use in pharmacies and general stores. All promotional material was tested with the appropriate target audiences.

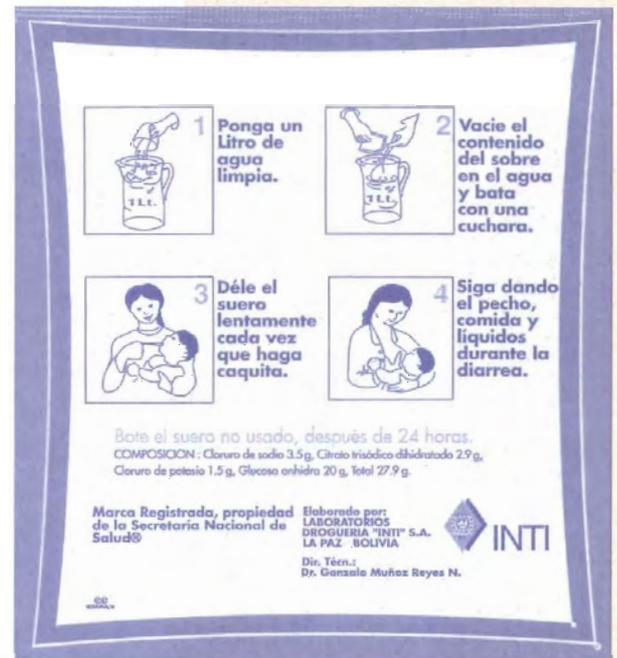
■ **Place.** A survey was conducted to assess the attitudes and behavior of the key links in the private sector distribution channel: pharmacists and shopkeepers. Pharmacists knew ORS, but the product was new to the majority of shopkeepers, who generally limited their stock of health products to painkillers, antacids, and rubbing ointments.

Among pharmacists, 97 percent reported recommending ORS for treating children’s diarrhea. However, given the very low sales of commercial ORS, we conducted a simulation survey to confirm this finding. Trained female interviewers posed as mothers and sought advice from pharmacists about treating a child with diarrhea. Only 5 percent of pharmacists recommended ORS as a first choice for treatment. Addressing this enormous discrepancy between reported and observed behavior on the part of pharmacists became a key focus of our marketing strategy.

### Implementing the Marketing Strategy

The task force decided to launch the new ORS product by first targeting private health care professionals (physicians, pharmacists, and nurses), in part because the support of physicians and pharmacists has proven essential to stimulating the use of ORS. The first stage involved an intensive promotional campaign using the companies’ medical representatives. This complemented efforts by the public sector to train public health workers in the use of ORS. The companies sought to ensure that ORS was:

Figure 1



continued on page 8

# A Report from the Second Annual Conference on Social Marketing

## Using Cause-Related Marketing to Boost Sales

Dana B. Inerfeld

*Basic Support for Institutionalizing Child Survival (BASICS) Project*

The term “cause-related marketing” was initially coined by the American Express Company. Changes in the financial services market had affected the company’s local markets in the late 1970s. In an effort to increase use of its charge card, American Express allied itself with a high-profile effort to preserve and restore one of the most recognizable American landmarks—the Statue of Liberty. The company donated a percentage of its profits to help restore the statue in time for the landmark’s 100th birthday.

Seeing the success of this marketing strategy, a number of companies followed this approach. According to Dr. Alan Andreasen, professor of marketing at the Georgetown University School of Business, most corporations engage in social marketing through cause-related marketing, which he defines as “any effort by a corporation to increase its own sales and profits by contributing to the objectives of one or more nonprofit organizations.”

Dr. Andreasen made his remarks during a panel discussion on corporate alliances at the second annual Conference on Social Marketing. The two-and-a-half-day conference, held in Fairfax, Virginia, in May 1996, involved about 150 participants from business, academia, government, and the nonprofit community. In fact, the breadth and size of the conference attests to the growing recognition of how far-reaching the benefits can be for the partners in successful public/private alliances.

### Types of Cause-Related Marketing

There are four types of cause-related marketing:

■ **Corporate Issue Promotion.** In the United States, caretakers are required by law to put children in protective safety seats when they travel in an automobile. Midas Muffler Shops chose to use its far-reaching network of stores to sell child car seats at cost to customers and employees. Midas also collected used car seats and distributed them free of charge to needy families.

■ **Total Company Promotion.** According to its corporate mission statement, Ben & Jerry’s Homemade, Inc., a Vermont-based ice cream and frozen yogurt company, is “dedicated to the creation and demonstration of a new corporate concept of linked prosperity.” There are three parts to this mission: ensuring fine-quality products, promoting economic growth and financial rewards for shareholders and employees, and recognizing the social role of business by attempting to improve the quality of life for the local, national, and international community.

Ben & Jerry’s has developed a positive corporate image through donating 7.5 percent of pretax profits to charity and supporting projects that are “models for social change.”

■ **Cause-Related Marketing Alliances.** Corporations form cause-related marketing alliances with nonprofit organizations or government agencies for several distinct purposes. “Joint issue promotion” is a partnership to simultaneously promote a product and a social/political message. An example is

*Panel of presenters at the Second Annual Conference on Social Marketing (from left): Minette Drumwright, University of Texas at Austin; Martin Fishbein, University of Illinois at Urbana-Champaign; Alan Andreasen, Georgetown University School of Business; and Marvin Goldberg, Penn State University.*



*Glamour* magazine teaming up with a national cancer organization to promote the use of mammograms for early detection of breast cancer.

“Sales-related fundraising” is best exemplified by the American Express Statue of Liberty campaign: the company makes donations to nonprofit organizations tied to sales of its product(s).

Finally, nonprofit organizations may “license” their names for use on products or promotional campaigns. For example, the nonprofit Arthritis Foundation licensed its name to Johnson & Johnson, which now makes and sells a product called “Arthritis Foundation Pain Reliever.”

■ **Seal of Approval.** A fourth type of alliance involves gaining a seal of approval from a respected organization or government agency for use in packaging or promoting a product. For example, Honduran-based Corporacion Cressida gained a seal of approval from the Ministry of Health for its chlorine product for water purification.

Cause-related marketing campaigns become more effective as companies and their nonprofit and government partners gain experience. In one five-year period in the early 1980s, following its successful Statue of Liberty campaign, American Express carried out more than 80 such campaigns in 15 countries.

Natalia Cherney Roca, Senior Director of National Marketing Establishment Services for American Express, notes that this strategy allowed the company to gather “some formidable knowledge and experience with regard to the appropriate and effective criteria that need to be established in order to manage a successful cause-related marketing campaign.”

### **Benefits of Cause-Related Marketing**

Why do companies like American Express, Midas, *Glamour*, Johnson & Johnson, and Cressida pursue alliances with nonprofit organizations? The usual motivation is to improve the company's bottom line. Cause-related marketing brings many benefits to the corporation, and they all can help boost sales.

One benefit is to increase consumers' preference for the company and its products. A cause-related marketing campaign can be effective in repositioning an old product, better differentiating a product from its competitors, or attracting new customers. Many consumers will switch brands or pay a premium to help promote a cause they support.

Cause-related marketing also results in what Mark Sarner, president of Manifest Communications, calls the “halo effect.” The public often mistrusts the motives and actions of corporations. Alliances with respected nonprofit or government organizations can provide companies with a halo of public credibility.

Cause-related marketing campaigns can yield internal as well as external benefits. Such campaigns are often seen by high-level managers as an opportunity to improve the company's image by showcasing its commitment to responsible citizenship. For example, the product and campaign may be given a bigger promotional budget or increased internal resources such as more public relations support.

Dr. Minette Drumwright, senior lecturer at the University of Texas at Austin, believes that cause-related marketing is an effective means of realizing internal company objectives. She points out that adding a social dimension to an advertising or marketing campaign can serve an effective employee-relations function. The campaign can help improve the overall corporate culture and can increase employees' loyalty to the organization. Employees are more likely to take pride in their company when it engages in activities that make them feel good about themselves.

### **Win-Win**

Overall, corporate alliances result in a “win-win” situation for all parties involved. Nonprofit organizations benefit from increased donations and higher visibility. Government organizations can improve the effectiveness of social, health, or public safety messages. Corporations can enjoy increased profits, an improved corporate culture, and greater customer and employee loyalty. 🤝

Cause-related marketing brings many benefits to the corporation, and they all can help boost sales.

The experience of the USAID-funded Bagamoyo Bed Net Project in coastal Tanzania may be instructive for overcoming some of the barriers to broad social marketing of bed nets.

## Social Marketing of Mosquito Nets in Coastal Tanzania

### Overcoming Barriers to Effective Distribution

by Peter Winch, MD, MPH  
*Johns Hopkins University School of Hygiene and Public Health*

Malaria is a major public health problem in almost all parts of Tanzania (population 2.7 million). A number of research studies have demonstrated the effectiveness of insecticide-treated mosquito (bed) nets on malaria in different parts of the country.

As a result, there is a growing consensus within both the Ministry of Health and the larger public health community that mosquito nets have an important role to play in malaria control in Tanzania. This has led to an improvement in the supply of bed nets within the country: nets are now exempt from import duties, and a private firm in the northern town of Arusha is manufacturing nets for commercial distribution.

### Barriers to Social Marketing

In many ways, Tanzania is now ready for large-scale social marketing of nets. However, any social marketing scheme would need to overcome a number of barriers. These include the weak transportation infrastructure in many parts of the country and the limited reach of the private sector in some rural areas.

Furthermore, the presence of a number of mosquito net projects funded through different organizations has in some ways made the social marketing challenge more difficult. For example, because nets are offered free by many projects, people may be reluctant to pay for them.

Finally, while nets are increasingly available, the nets alone are not very effective at protecting against malaria, and it is still difficult to obtain the insecticide needed to treat (and to periodically retreat) the nets. (For a more thorough discussion of the malaria-control benefits of treating nets with insecticide, see the first issue of *Social Marketing Matters*.)

The experience of the USAID-funded Bagamoyo Bed Net Project in coastal Tanzania may be instructive for overcoming some of these barriers to broad social marketing of bed nets. This article focuses in particular on the lessons related to distribution.

### Establishing Local Distribution Channels

The Bagamoyo project established a community-based system for distribution and periodic retreatment of nets in a rural area, which had a population of 25,000. The 13 villages participating in the project were divided into four groups. Nets were distributed to the four groups at six-month intervals during 1992–94.

During planning of the project, villagers were asked how the mosquito nets could best be distributed and retreated. Most of them suggested a “mosquito net committee” for two main reasons. First, a separate committee was perceived to be more acceptable because it would resemble committees already in place to address other village issues such as education, and because it would be relatively easy to monitor. Second, villagers felt their government officials were too busy.

Village net committees were established. Members were selected using recommendations from village leaders, project staff, and a random group of villagers.

### Marketing Directly to Villagers

Committee members attended a day-long seminar on malaria, which included a debate on how best to distribute, sell,

and treat nets. Committee members then conducted a house-to-house survey to promote the nets, to assess the number of nets needed, and to make advance sales.

On distribution day, a play was presented that addressed the most common problems villagers might have using the nets. Those who bought nets or had their nets treated were given easy-to-understand instruction booklets. Funds from the sale of nets were deposited in a village revolving fund, to be used for purchasing more nets and insecticide.

One major difficulty was pricing. Villagers did not appreciate that the nets would be ineffective unless they were treated with insecticide. They were therefore much more willing to buy nets than insecticide, which made it difficult for the insecticide to be priced high enough to yield a profit. Also, if nets and insecticide were sold at even a slightly subsidized price, there was significant leakage of nets outside the project area—potentially compromising the ability of the village revolving funds to sustain the program.

### Improving the Distribution Process

Committee members participated in a post-distribution seminar to assess the results and to discuss possible improvements to the process. They identified several problems:

- Both sellers (the net committee members) and potential customers were uncomfortable with exchanging money before the nets were delivered.
- Many people purchased the wrong size net because committee members did not have all three sizes when they conducted the house-to-house visits.
- Village leaders were not involved in the pre-distribution seminar, and, as a result, some were indifferent or resistant to the project.
- Some people were unclear about who needed a net—for example, some

families that could not afford nets for everyone bought them only for the adults rather than for children as well.

- The single day and central location for distribution, coupled with the amount of time it took villagers to purchase their nets and have them treated, made the process inconvenient for many people.

Changes were made in the process to address these problems. For example, advance sales were discontinued. Village leaders were invited to the pre-distribution seminar. Efforts to publicize the program were stepped up to generate interest and to promote net use for children. Nets were distributed over three days at several locations, and the amount of time it took to buy nets and have them treated was shortened.

### Improved Results

Sales of nets significantly improved during the second phase (see Figure 1). Overall, at least 64 percent and up to 95 percent of the estimated need was met. The project also produced some significant health benefits, including a three-fold reduction in the number of episodes of clinical malaria over a comparison group.

Public funding for the project has ended, but the village net committees continue to operate. They now purchase nets and insecticide through commercial distributors using the village revolving funds. ☺

Figure 1

#### Net Sales during Phase 1 and Phase 2 of the Bagamoyo Bed Net Project

	Village	Estimated Number of Nets Needed	Number of Nets Sold in 1992	Total Nets Sold to December 1993	% of Need Met as of December 1993
Phase 1	1A	630	379	498	79.0
	1B	896	322	578	64.5
	1C	698	239	542	77.7
Phase 2	2A	1125	593	1013	90.0
	2B	1170	785	1112	95.0
	2C	1399	762	1196	85.5

Source: Ahmed M. Makemba, Peter J. Winch et al., "Community-Based Sale, Distribution and Insecticide Impregnation of Mosquito Nets in Bagamoyo District, Tanzania," *Health Policy and Planning* 10:1 (1995).

Figure 2

**Behavior Change Theory in Practice**

**Andreasen's Key Factors Influencing Behavior Change**      **Bolivia ORS Marketing Strategy**

**Perceived Benefits**

Ideas about what will happen if particular behavior is performed

Focus groups tested the product positioning as a "restorer of energy lost during diarrhea," a meaningful and valued outcome to parents.

**Perceived Costs**

Ideas about negative consequences of adopting a behavior

Pharmacists set the retail price of ORS, which compensates for profits lost from decreased sales of other, more expensive diarrhea treatments.

**Perceived Social Influence**

Perceptions about whether the behavior has been adopted by others and is socially/culturally acceptable

Formative research was used to assess current knowledge and practice for treating diarrhea and ORS use. Results highlighted the importance of gaining the "doctors'" endorsement of ORS.

**Perceived Behavioral Control**

Judgments about the capability to carry out the behavior

The packet includes clear visual mixing instructions, and parents were educated on using ORS correctly to revitalize children weakened by diarrhea.

- available in all pharmacies
- actively recommended by pharmacy personnel
- prescribed by physicians and paramedics for treatment of diarrhea

In the second stage, the commercial firms would target parents in urban and rural areas. The goal was to expand the reach of ORS by

- increasing the availability of ORS beyond pharmacies into the popular market, including *tiendas* (small shops), village fairs, open-air markets, and street vendors
- gaining the support of retailers through educational and commercial incentives linked to ORS
- creating demand among parents
- educating parents to use ORS correctly

**Evaluating the Results**

The partners agreed to evaluate the impact of ORS commercialization efforts on the behavior of the four target audiences a year after the product launch, using as a baseline the market research data gathered prior to the launch. 

The Partnership for Child Health Care, Inc.  
1600 Wilson Boulevard, Suite 300  
Arlington, VA 22209 USA



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