

Social Marketing : A Proposed Framework To Reduce Poverty In Indonesia

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Abstract. Social marketing first introduced by Philip Kotler and Gerald Zaltman in 1971, and aimed to answer whether marketing can be used for social good besides just to enhance products or services offered by a company. Social marketing then developed by aiming to bring desire change in society through behavior. Behavioral change can be acquired through the effect of fear, threat and shame that are shown by effective communication. Practically, social marketing has evolved differently between countries. In Indonesia, the practice of social marketing has proven succeed when promoted the family planning (Keluarga Berencana). This paper itself attempt to propose the framework that allows practitioners in Indonesia use it for social act, especially for Program Keluarga Harapan (PKH). Program Keluarga Harapan, is one of program implementation of Sustainable Development Goals to reduce poverty in Indonesia. The programme itself is executed by giving conditional cash transfer to the chosen poor household with certain categories, through Social Ministry. This programme has long term goal, which is to change the behavior of the poor, so that they could have better living and no longer categorized as poor family.

Keyword : *social marketing, marketing, communication, program keluarga harapan*

1 INTRODUCTION

The term social marketing firstly proposed by Kotler and Zaltman on 1971, to offer that marketing filosofies and tools can be used to sell other things besides commercial products and services. On their articles, Kotler and Zaltman used the work of PSI (Population Service International) as the example. This programme was founded in 1970 to improve reproductive health using commercial marketing strategies [10]. The 4P's of marketing mix, can be implemented through the work of PSI, where different contraceptive product offerings for birth control (products), make sure that the products were available in

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distribution (place), selling at an affordable price (price), and accompanied with sufficient information and promotion (promotion).

Later, Andreasen explained the difference in the objective of social marketing with other areas of marketing, stated that social marketer will seek to influence social behavior not to benefit the marketer. It is known that marketing has been successful in encouraging people to buy products and use services. In other line marketing should also can be used to encourage people to adopt behavior that will enhance their own and other's lives. Social marketing is an approach aimed at changing or maintaining people's behavior for the benefit of individuals and society as a whole. This technique has been used extensively in international health programs, especially for contraceptives, oral rehydration therapy, drug abuse, heart disease prevention, and organ donation.

In Indonesia, the implementation of social marketing is known as the success of family plan programme. Through the slogan "Dua Anak Cukup" the government succeed on controlling the number of births that formerly uncontrolled.

Nowadays, Indonesia through Ministry of Social executed Program Keluarga Harapan that aimed to reduce poverty in Indonesia. The short term aim of this programme is to give conditional cash transfer to the chosen very poor families with certain categories. The long term aim of this programme is to change the behavior of the people that received the aid, so they are no longer include as the poor category family.

This paper attempt to propose framework that can be used as tools to help the government to elevate the family that are grouped as the aid receiver of Program Keluarga Harapan to the next level where they are no longer grouped as the poor family. Besides give insight of what social marketing is, this paper will also give broader insight about Program Keluarga Harapan and what social marketing can help on this programme.

2 DEFINING SOCIAL MARKETING

There are many definitions of social marketing. Kotler and Zaltman (1971) points out that social marketing is the design, implementation, and control of programmes calculated to influence the acceptability of social ideas and involving considerations of 4Ps, product, planning, pricing communication, distribution, and marketing research as well [10]. While Andreasen (1994) stated that social marketing is the application of commercial marketing technologies to influence the voluntary changing behavior of target audience to improve their personal life and their society, with considering the analysis, planning, execution, and evaluation [1].

Kotler, et al (2002) expanding his view emphasizing on the use of technique and other marketing principles to target audience to voluntarily accept, reject, modify, or abandon a behavior for the benefit of individuals, groups, or society as a whole [11]. While Grier and Bryant (2005) proposed social marketing as a consumer-centered, research driven approach to promote voluntary behavior change in a priority population [8]. To sums up, National Social Marketing Centre (2006), give the definition that social marketing is the systematic application of marketing alongside other concepts and techniques to achieve specific behavioral goals, for social or public good [6].

From above definitions, it can be concluded that social marketing is aimed to reach the society's wellbeing through voluntarily behavioral change, with the target audience spread from individual, group, or society as a whole, without neglecting the practice or implementation of marketing principles and techniques. Further, the changing behavior can be implemented through effective communication being executed by the stakeholders.

3 DEVELOPMENT OF SOCIAL MARKETING

Social marketing grows and evolving along with commercial marketing. Back in late 1950s-1960s, marketing academic expand the concept of marketing combined with a shift of public health policy toward disease prevention, marked the beginning of social marketing. In 1971, Kotler and Zaltman published their seminal articles titled "*Social Marketing : An approach to planned social change*" as the notation for the first time the social marketing term was introduced. Here, the social marketing defined as "*the design, implementation and control of programs calculated to influence acceptability of social ideas and involving considerations of product, planning, pricing, communication, distribution and marketing research.*"(p.5) [10]

In practice, social marketing was being explored by a number of people at the same time, including Paul Bloom, Karen Fox, Dick Manoff, and Bill Novelli. Early example of social marketing emerged during the 1960s as part of international development efforts in third world and developing countries (Manoff 1985, Walsh et al 1993) [13,18]. At this stage social marketing already implemented under the collaboration of the program that will be done with the marketing technique, such as audience segmentation and mass communication.

In early 1990s social marketing in practice expanded its field in public health through lively debates on its applicability and contribution conducted by Lefebvre and Flora (1988) and Hastings and Haywood (1991,1994) [5,9]. By this time, many countries already applied social marketing and the publication also widespread and grow its popularity (Lefebvre, 1997)[12].

Kotler itself, divided the stage of social marketing into 4 stages [11]. The first stage is focusing on behavior by clarifying the objective result that social marketer should pursue in developing their social marketing plans. Stage two, was the decision to develop a process view of social marketing planning. Stage three arose when Alan Andreasen (2005) proposed three levels of social marketing practice: downstream, mid-stream, and upstream social marketing [1]. Most social marketing research and application has been focused on downstream strategies to influence the behavior of target maker, for example smokers, drug abuser, etc. While mid-stream is referring to influencing the peers of the target market. The peers include friends, relatives, acquaintances, and role models who might bring a positive influence to bear on an individual or group. The last level proposed by Andreasen (2005) is organizations and institutions that play an important role in supporting an undesirable behavior or that can play some positive role in supporting the desirable behavior [1]. Last stage proposed by Kotler was incorporating the social media into social marketing. Kotler stated that the campaign on social marketing can be supported by social media platforms. Social media would make people who interested in behavior change easily look up for informations and also answer, tips and suggestion.

4 LITERATURE REVIEW

4.1 Social Marketing in Indonesia

The social marketing practice in Indonesia, is actually neglectible even though it is stil only known as social campaign. The easiest example of social marketing used in Indonesia is the Family Planning Programme (Program Keluarga Berencana). This program issued on 1957 by Presiden Soeharto. Through good campaign and good ads, the program with slogan "*2 anak cukup*", is succeed to be practiced in Indonesia. Formerly this programme is aimed to reduce the number of population Indonesia. And nowadays, we can see that in many household in Indonesia, the family is already aware on the importance on only having two children to improve their living.

The succeed of this programme can be inevitable from the slogan promoted by the government. “*Dua anak cukup*” represented that the old slogan told that “*banyak anak banyak rezeki*” is no longer applicable for the modern world, due to the the increase of the living cost. Furthermore, the social marketing in Indonesia nowadays, is no longer only spread by the slogan of the government – even though it is still found as an effective ways. The media as movie, advertising, the social media ads, are now being used by many organization (not exclude the company) to spread their social messages. The government using the principle of social marketing to spread their programme. The Energy Saving Programme and the use of generic medicine, are two among examples of social marketing implementation. Besides, the corporation and NGO also use social marketing to succeed their programme.

The research on social marketing itself in Indonesia, actually hasn’t received any spotlight from many researcher. There are still few research regards to this topic. Below are lists of reasearch regards to social marketing conducted in Indonesia :

Table 1. Lists of research regards to social marketing in Indonesia.

Title	Researcher	Year Published	Publisher
Pemasaran Sosial dalam Program Keluarga Berencana	Tri Agus Susanto	1998	Jurnal Cakrawala Pendidikan, STKIP PGRI Blitar
Strategi Mengatasi Masalah Kesehatan dan Lingkungan Hidup di Pemukiman Kumuh lewat Program Pemasaran Sosial	Wahyuni Pudjiastuti	2002	Jurnal Makara Sosial Humaniora, Universitas Indonesia
Evaluasi terhadap Pelaksanaan Komunikasi Pemasaran Sosial <i>Non-Government Organizations</i> (NGO) untuk Isu-isu Anti Kekerasan terhadap Perempuan	Tri Hastuti Nur R	2004	Jurnal Ilmu Komunikasi, Vol. 1 No. 1
Penilaian Kelompok Kritis terhadap Sosialisasi Inpres No. 10 tahun 2005 : Suatu Tinjauan dari Sudut Pemasaran Sosial	Hatane Samuel & Foedjiawati	2006	Jurnal Manajemen Pemasaran, Universitas Kristen Petra Surabaya
<i>Corporate Social Responsibility</i> (CSR) sebagai Aktivitas <i>Social Marketing Public Relations</i>	Neni Yulianita	2008	Jurnal Mediator Vol. 9 No 1
<i>Social Marketing</i> : Pemasaran atau Penasaran?	Bambang Siswanto	2012	Proceeding Call for Paper Pekan Ilmiah Dosen FEB-UKSW

4.2 Communication in Social Marketing

Andreasen (1994) suggests that build an effective communication campaign to change the behavior, understanding of the needs and perceptions of spesific target audience is necessary [1]. A message designed and developed must be tailored to the needs, concerns, and interest of the target audience. To make the communication succesfull, effort must be put to understand what people know and believe along with their expectation from communication process. To make the communication effective, knowledge and perception of public on the issue and level of motivation towards it, must be determined. Fischhoff and Downs (1997) stated that even though people are already know abot the information being spread, but they think that the information is not relevant, then the whole effort to communicate are wasted [7]. Therefore, before the communication is upheld, good

understanding of the targeted audience is essential. The key to effective message development is the recognition that, individuals are unique and each individual respond to a message using their own filters of knowledge and experience. McDermott et al. (2007) suggest the communicators to define the target audience so as to suggest appropriate channels for communication [16]. World Health Organization (2002) has observed that spesific needs of a target audience are met by selecting spesific media preferred by that audience. Acceptance of message by an individual depends upon the source of information. Hence, audience should be reached through trusted channels of communication (Freimuth et al., 2000). A study by Buzby and Ready (1996) indicated that 40% of the respondents did not trust the information received from government publications and food labeling on food safety as reliable. Rather people relies more on the information available in cookbooks [4].

People sometimes ignore risk communications with the assumption that the message are targeted at more vulnerable populations (Sparks and Shepherd, 1994) [15]. Consumer based focus group have suggested to use words that affect people at emotional level to make an effective message (USDA FSIS, 2001). Moorgan, Cole, Struttmann, and Piercy (2002) found that messages based on stories have more impact in comparison with the presentation based on statistics alone [14]. McDermott et al. (2007) suggested to pretest the message with target audience to revise on the basis of the results so obtained [16].

4.3 Social Marketing and Program Keluarga Harapan

Program Keluarga Harapan (PKH) is the social protection programme through cashless grant given to certain categories categorized as very poor household. The general aim of this program is to cut off the poverty chain, increase the human resources quality, and also to change the behavior that are not supporting the wealthiness elevation for this very poor society category. These aims are directly aligned with the effort to fasten the achievement of millennium development goals' (MDG's) target.

Formerly PKH is dedicated to household that are categorized as very poor household. And then its developed its category to the family that are categorized as very poor family. The family here means that both parents (father and mother) together with teir children has the responsibility for the better education, health, the welfare and also the future of the children. That is why family is the most important entity that are very relevant on supporting the behavior changing to cut off the poverty chain inter-generation.

The changing behavior of the target recipient of PKH is shown through the activity of the children at school (the absenteeism rate of children at school), the active involvement of pregnant mother to take care their baby by continously have their baby checked at local health unit, and also the involvement of the parents to take care the kids aged below 5 years old. These are the changing behavior expected from PKH programme, since mostly the very poor family in Indonesia, will neglect their kids education and force kids to also take part to look for money for the family. Besides, they also usually do not really care on the healthy issues, especially when the mother of the family is pregnant, that will lead to prenatal mortality both for baby and the mother. In every five year, the membership of PKH recipient will be recertified. This process is an evaluation of the member categorization of PKH grant recipient, and also the social economic status of PKH grant recipient. If the result show the changing social and economy status or no longer categorized as very poor family, then the grantee will be excluded from the program (graduated) by the sixth year. Beside the changing social econonomy status, this graduation is also marking the behavioral change of PKH grant recipient.

Social marketing is relevant to implement to support the succeed of PKH since the main aim of social marketing itself is behavioral changing. As stated by Kotler and Lee (2008),

that the main aim of social marketing is to change behavior that benefit society through the application of marketing process and marketing techniques. Thoroughly social marketing is the application of marketing tools (market research, market segmentation and positioning, product development, accessibility and advertising), to induce behaviors beneficial to society by appealing to people's self interest.

Social marketing and the success of PKH is having close relationship between these two. PKH promote an act to certain categories society to change its behavior. While social marketing, give the theoretical framework for the success of PKH programme.

5 PROPOSING FRAMEWORK OF SOCIAL MARKETING FOR PROGRAM KELUARGA HARAPAN

As already stated above, it can be concluded that social marketing is an act for social goods promoted through right communication with stakeholders. The right communication will always be different for every segment. This paper is specially discussed about Program Keluarga Harapan where the aim of Program Keluarga Harapan besides giving the conditional grant for the very poor family, it also aimed to change the behavior of the very poor family so they will be no longer categorized as very poor family.

Social marketing with the aim of behavioral change that are dedicated to the middle class and upper middle class surely will be different with those social marketing that are sounded to the poor family. The middle class and the upper class, are known that they already have the resources to gain any information, to get through any consciousness and awareness, and then make some behavioral change. If social act or social ideas is targeted to these segment, there will be a lot of communication way to spread the social ideas and influences the behavioral changes.

The situation will be different for the poor. They are lack of capability to have the information, besides it will also hard for them to receive any new information that force them to change when they themselves is already lack of resources. The communication for social marketing for the poor, in this case for Program Keluarga Harapan, play an important role. The way government socialized their program should be on its very right way. Below are the proposed framework for the social marketing implementation for Program Keluarga Harapan.

The first step to be taken is, to analyze the social marketing environment. It means that the stakeholder should notice, where is the location of PKH is being implemented. Even though the target market are already categorized as very poor family, that mostly based on their income, it is also important to take note where they are living in. It is very important, since the areas in Indonesia are diversified between one areas and another. The social life, culture, the another society categories that are living nearby the areas, are important entities to take consideration of. These step is also a notion of step two, that is to research the target adopter population.

The third step is to define social marketing problem or opportunity. It is important to know, how are this target market value, behavior, belief and attitude, so that the way to define and solve the social marketing problems can be achieved. The fourth way is to plan the social marketing mix. And the last step is to choose the appropriate communication channels or media. This last step play an important role for the success of PKH. It is mandatory for the stakeholder to choose the right communication channels (Andreasen, 1995). Direct socialization is chosen for the success of PKH. This can be implemented through the stakeholder needs to have spoken person to keep the grantee on its track to follow all programmes of PKH. This is actually already be executed by Indonesian Social

Ministry. But besides it, the stake holder, need also make one slogan just like the former government use, that can be reemember by the PKH grantee so that they know that they are doing the right things by following all the programmes that PKH offered.

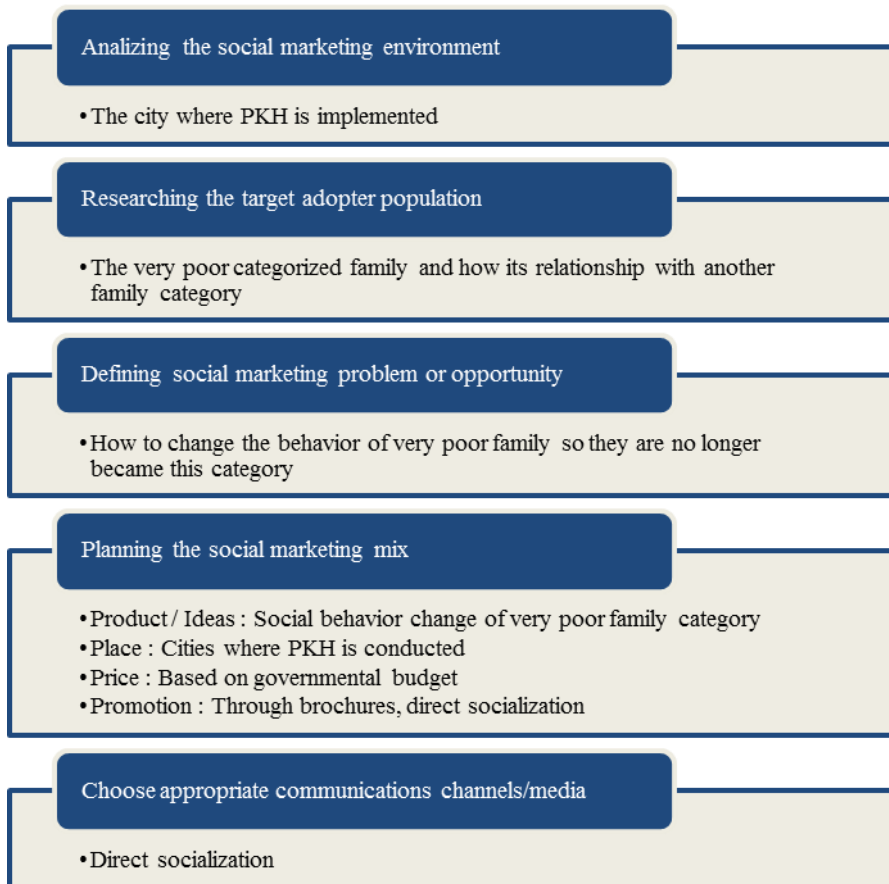


Fig. 1 Implementing Social Marketing for Program Keluarga Harapan

6 CONCLUSION

Social marketing is one of branch of marketing areas that aligned with commercial marketing but different on what they are “selling”. Social marketing specialized its way through implementing what commercial marketing theory stated but also aimed to change the target behavior for social goods. PKH itself is a programme conducted by Indonesian Social Ministry, to help the very poor family with grant of conditional cash transfer. This programme is not just aimed to help the poor with grant or donation, but more to change the behavior of the family categorized as very poor family. This family is urge to have behavior change on their kids education, health lifestyle, and so on. This programme succeed can be helped through the implementation of social marketing. Social marketing would help to identify what are way to make this programme succeed nationwide. It give insight of how to target the society where this program is conducted, since the culture of Indonesian people is generally diversified. By knowing how to target, it will be easy to determined what right

communication strategy to be implemented based on areas where this program is conducted.

References

1. Andreassen, Alan R, *Social marketing: Its definition and domain*. (Journal of public policy & marketing : 108-114, 1994).
2. Andreassen, Alan R., and Benjamin Herzberg, *Social marketing applied to economic reforms*. (Social Marketing Quarterly 11, no. 2 : 3-17, 2005).
3. Atkin, Charles K., and Vicki S. Freimuth, *Formative evaluation research in campaign design*. (Public communication campaigns 3 : 125-145, 2001).
4. Buzby, Jean C., and Richard C. Ready, *Do consumers trust food-safety information?*. (Food Review-Washington DC- 19 : 46-49, 1996).
5. Craig Lefebvre, R., and June A. Flora, *Social marketing and public health intervention*. (Health education quarterly 15, no. 3: 299-315, 1988).
6. French, J., and C. Blair-Stevens, *Social marketing national benchmark criteria*. (National Social Marketing Centre, UK, 2006).
7. Fischhoff, Baruch, and Julie S. Downs, *Communicating foodborne disease risk*. (Emerging infectious diseases 3, no. 4 : 489, 1997).
8. Grier, Sonya, and Carol A. Bryant, *Social marketing in public health*. (Annu. Rev. Public Health 26 : 319-339, 2005).
9. Hastings, Gerard, and Amanda Haywood, *Social marketing and communication in health promotion*. (Health Promotion International 6, no. 2 : 135-145, 1991).
10. Kotler, Philip, and Gerald Zaltman, *Social marketing: an approach to planned social change*. (The Journal of Marketing: 3-12, 1971)
11. Kotler, Philip, Ned Roberto, and Nancy R. Lee. *Social marketing: Improving the quality of life*. (Sage, 2002.)
12. Lefebvre, R. Craig, *25 years of Social Marketing: looking back to the future*. (Social Marketing Quarterly 3, no. 3-4 : 51-58, 1997).
13. Manoff, Richard K, *Social marketing: new imperative for public health* (1985).
14. Morgan, Susan E., Henry P. Cole, Tim Struttman, and Larry Piercy, *Stories or statistics? Farmers' attitudes toward messages in an agricultural safety campaign*. (Journal of agricultural safety and health 8, no. 2 : 225, 2002).
15. Sparks, Paul, and Richard Shepherd, *Public perceptions of the potential hazards associated with food production and food consumption: an empirical study*. (Risk analysis 14, no. 5 : 799-806, 1994).
16. Stead, Martine, Ross Gordon, Kathryn Angus, and Laura McDermott, "A systematic review of social marketing effectiveness." (Health education 107, no. 2: 126-191, 2007).
17. Walsh, Diana Chapman, Rima E. Rudd, Barbara A. Moeykens, and Thomas W. Moloney. *Social marketing for public health*. (Health Affairs 12, no. 2 : 104-119, 1993).