

Research and Evaluation

Reflection on social marketing in Pakistan

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Abstract

Background: Pakistan offers a unique cultural, historical, and geographical blend. Its geographical positioning holds strategic significance for South Asia, as it is situated between India and China, the two largest economies in the region. Since its independence, Pakistan has undergone significant changes in its political structure, economy, and social system, resulting in numerous social challenges. However, as a young economy, Pakistan has demonstrated remarkable resilience in addressing these challenges.

Primary Social Problems in Pakistan: The country faces numerous social issues, including unsustainable population growth, gender inequality, energy conservation, waste management, and inadequate education for children. Although the economy is growing rapidly, it is vital to address these social issues to ensure overall social well-being. Despite some efforts from the government, NGOs, and other non-profit organisations, there is a need for a more effective approach to tackling issues that affect the general public, society and, ultimately, the economy.

Use of Social Marketing: The use of social marketing in Pakistan is inconsistent. It is primarily used in family planning programmes. However, as a proven behaviour change technique, the field holds immense potential to tackle a broader range of social and behavioural issues. Its potential in Pakistan is vast, and with consistent application, it can bring about significant positive change.

Academic Stakeholders and Activities: The study highlights the current state of academic activities related to social marketing in Pakistan, underscoring the need for more academic institutions to offer comprehensive social marketing courses, which are crucial for the field's development.

Discussion and Conclusion: Social marketing is progressing slowly in Pakistan, where government, non-profit, and other organisations are working towards making social changes using social marketing applications (albeit limited). We offer recommendations for teaching, research, and practitioners to improve practice, emphasising the crucial and urgent need for academic development in this field.

Keywords

social marketing, Pakistan, academic courses, practice, research

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There is ongoing confusion among corporate social responsibility, social marketing, societal marketing (marketing that considers the long-term welfare of society), and social media marketing, which limits the reach of social marketing in Pakistan, a common problem in the field (Akbar et al., 2022; Lee, 2020). In addition, due to the limited understanding of social marketing at the governmental level, there is a reliance on health promotion, public health, behavioural science, marketing, and communication in designing and delivering behaviour change programmes. While drawing on these disciplines is not seen as a weakness, the limited use of social marketing is alarming, as it restricts its applications in Pakistan.

Currently, the systematic and explicit use of social marketing in Pakistan is focused on contraception, family planning, condom promotion, and population control (e.g., Agha & Davies, 1998; Agha & Meekers, 2010; Azmat et al., 2013; Kiyani, 2014; Mutum et al., 2015; Samad et al., 2008; Samad et al., 2010). Applications in other domains, such as natural disaster management, polio and HIV/AIDS prevention (Husain & Shaikh, 2005; Rodrigo & Rajapakse, 2009), promotion of iodised salt (Khattak et al., 2017; Spohrer et al., 2012), anti-smoking (Rao et al., 2014), mosquito net promotion (Qazi & Shaikh, 2007), women's health and education, energy conservation (Javed et al., 2016), climate change (Bhatti et al., 2021), and prevention of child molestation, deforestation, and intolerance, are typically implicit or partial, reflecting a broad lack of knowledge and understanding of the discipline.

While a few studies have described specific social marketing interventions in the Pakistani context (e.g., Firestone et al., 2017; Saini & Mukul, 2012), there has been no comprehensive investigation into the overall scope and implications of social marketing practices in Pakistan. This identifies a clear research gap. To address this, the present study provides a critical reflection on the role, scope, and potential of social marketing in the Pakistani context.

First, we provide an overview of Pakistan to set the scene, followed by a discussion of the country's key social issues. Next, we present social marketing applications that showcase current practices in Pakistan. We then turn our attention to academic activities related to social marketing, followed by recommendations to increase the uptake of social marketing in Pakistan.

Pakistan's Demographics, Economic Evolution, and Development Challenges

Pakistan is the fifth most populous country globally, with a population of over 241.49 million people residing in an area of 796,095 square kilometres (Digital Digtal Census, 2023). Pakistan is located in Southern Asia, bordering the Arabian Sea, and is bordered by Afghanistan and Iran to the West, India to the East, and China to the North. Pakistan is the 33rd largest country by area and has the world's 2nd largest Muslim population (Qasmi & Robb, 2017). Pakistan is a federal parliamentary republic; power is shared between the federal government and the provinces. It comprises four provinces, two autonomous territories, and one federal territory (Wynbrandt, 2009). It is one of the youngest democracies in the world, having held its first-ever general elections in 1970. The president is the chief of state, although the prime minister manages the day-to-day administration. Pakistan is diverse in terms of ethnicity, languages, culture, and religion. The major ethnic groups are Punjabi, Pashtun, and Sindhi; the religions include Islam (96.4%), Hinduism, and Christianity (3.6%), with representation from many other faiths, such as Sikhism. Multiple languages are spoken in Pakistan, including Urdu, Punjabi, and English. Urdu and English are considered official languages (Qasmi & Robb, 2017).

After independence in 1947, Pakistan experimented with several economic models. Soon after the partition, Pakistan was a dominant agricultural state with a small share of services, manufacturing, and infrastructure, backed by millions of refugees. Later, from 1958 to 1968, during a period of bureaucratic-supported capitalism, the economy grew three times faster than in

other South Asian countries. The growth rates exceeded 20% per annum, and both the agricultural and industrial sectors experienced significant development. However, many criticised the non-liberal policies of the bureaucratic capitalism model, as it was believed to have increased income inequality (Rosbach & Aleksanyan, 2019). Thus, the economy was primarily based on private enterprise, and its significant sectors were nationalised in the early 1970s following the socialist economic model, including financial services, manufacturing, and transportation (Khan, 2012).

Pakistan has a diverse economic system that combines free-market activity with government intervention (Rosbach & Aleksanyan, 2019). Further changes were made in the 1980s, and an Islamic economy was introduced, outlawing practices forbidden by Sharia law (Khan, 2013). Although portions of the Islamic economy have remained in place, the state began to privatise, in whole or in part, large sectors of the nationalised economy in the 1990s. Pakistan operates a mixed economy in which state-owned enterprises account for a large portion of the gross domestic product (GDP).

The economy, primarily agricultural at the time of independence, significantly shifted to semi-industrialised (textiles, agriculture, and food production) and recently pushed towards technological diversification (Saber, 2018). No longer the largest sector, agriculture contributes roughly 20% of GDP, while manufacturing provides about 20%. Trade and services, the most significant economic component, have grown considerably and contributed approximately 60% to GDP. Regarding the structure of its economy, Pakistan resembles the middle-income countries of East and Southeast Asia more than the poorer countries of the Indian subcontinent. Pakistan's economic performance compares favourably with many other developing countries; it has maintained a sustained and steady annual growth rate since its independence (World Bank, 2021).

There has been a relentless increase in population. Despite real economic growth, output per capita has slowly risen (Goujon et al., 2020). However, this slow growth in per capita income has not coincided with a high incidence of absolute poverty, which is considerably smaller in Pakistan than in other South Asian countries. Nonetheless, a significant proportion of the population lives below the poverty line. The relative prosperity of the industrialised regions around Karachi and Lahore contrasts sharply with the poverty of Punjab's barani areas, semiarid Balochistan, and Khyber Pakhtunkhwa (Goujon et al., 2020). Rapid population growth and its causes continue to affect the country, particularly in the areas of hunger and poverty, gender inequality, and poor health and education systems. Poverty is also a significant driver and predictor of population growth, and one of the significant challenges faced by Pakistan. Poverty in Pakistan is closely related to fast population growth. Pakistan's population is growing at a rate of 2.0% annually. Pakistan's fertility rate stands at 3.6, exceeding the global rate by 157%, putting pressure on natural resources and the economy (Shabaneh, 2022). Approximately 60.83% of the Pakistani population falls within the 15 -64 age range (World Bank, 2020). Figure 1 presents further population analysis based on the 2023 population census.

Among all the issues, Pakistan's biggest concern is unsustainable population growth, with limited focus on eradication of poverty, feeding the population, health and well-being, access to quality education, gender inclusivity and equality, access to clean water and sanitation, affordable and clean energy, availability of work and economic growth, reduced inequalities, climate actions, and responsible consumption and production. The country is ranked as one of the region's lowest spenders on health and education; however, it is gradually making progress towards poverty reduction. The poverty headcount ratio, which was 44.1% in 2007, was reduced to 24.3% by 2015. Besides poverty and unsustainable population growth, Pakistan's other major challenge is the AIDS/HIV epidemic. Although most countries in the South Asian region are in the low AIDS prevalence category (Husain & Shaikh, 2005), numbers are slowly increasing in Pakistan, especially among the 20-40-year-old male category (Ahmed et al., 2019).

				POP	ULATION-20)23					2017-2023
NAME OF ADMINISTRATIVE UNIT	AREA IN SQ.KM	ALL SEXES	MALE	FEMALE	TRANS GENDER	SEX RATIO	DENSITY PER SQ.KM	URBAN PROPORTION	AVG. H.HOLD SIZE	POPULATION 2017	AVG. ANNUAL G.RATE
PAKISTAN	796,096	241,499,431	124,324,406	117,154,694	20,331	106.12	303.35	38.88	6.3	207,684,626	2
RURAL		147,614,729	75,592,790	72,017,097	4,842	104.97			6.3	132,013,789	1
JRBAN		93884702	48,731,616	45,137,597	15,489	107.96			6.2	75,670,837	3
KHYBER PAKHTUNKHWA	101,741	40,856,097	20,845,747	20,009,233	1,117	104.18	401.57	15.01	6.9	35,501,964	2
RURAL		34,724,801	17,685,692	17,038,648	461	103.80			6.9	29,626,670	- 2
URBAN		6131296	3,160,055	2,970,585	656	106.38			6.7	5,875,294	(
PUNJAB	205,345	127,688,922	65,448,376	62,226,589	13,957	105.18	621.83	40.71	6.4	109,989,655	
RURAL		75,712,955	38,625,841	37,083,868	3,246	104.16			6.4	69,442,450	1
JRBAN		51975967	26,822,535	25,142,721	10,711	106.68			6.3	40,547,205	4
SINDH	140,914	55,696,147	29,014,424	26,677,501	4,222	108.76	395.25	53.97	5.6	47,854,510	:
RURAL		25,639,408	13,245,373	12,393,405	630	106.87			5.4	23,021,876	1
JRBAN		30056739	15,769,051	14,284,096	3,592	110.40			5.8	24,832,634	5
BALOCHISTAN	347,190	14,894,402	7,768,166	7,125,471	765	109.02	42.90	30.96	6.4	12,335,129	:
RURAL		10,282,574	5,379,780	4,902,339	455	109.74			6.1	8,928,428	- 2
JRBAN		4611828	2,388,386	2,223,132	310	107.43			7.0	3,406,701	
SLAMABAD	906	2,363,863	1,247,693	1,115,900	270	111.81	2,609.12	46.91	5.7	2,003,368	2
RURAL		1,254,991	656,104	598,837	50	109.56			5.5	994,365	3
URBAN		1108872	591.589	517.063	220	114.41			5.9	1.009.003	1

Figure 1. Pakistan population census 2023 (Pakistan Bureau of Statistics, 2020).

Key Social Challenges and Behaviour Change Efforts

This section discusses the key social issues uniquely associated with Pakistan, stemming from its socio-economic landscape.

Poor Waste Management

Pakistan produces approximately 87,000 tons of solid waste weekly, mostly from key cities such as Karachi, Lahore, Rawalpindi, Multan, and Quetta¹ (International Trade Administration, 2024). The government, private and non-profit organisations collect 50% of this waste (Masood et al., 2014). The remaining waste is left on the streets or dumped in open areas (see Figure 2). This is highly hazardous to the environment, as garbage mainly enters sewage systems, causing blockages and triggering health and environmental problems (Pakistan Youth Outreach Foundation, 2018). Moreover, due to the continuous and significant increase in the population, waste per capita is also increasing, creating a greater demand for waste disposal services. Unfortunately, Pakistan is not yet fully equipped to collect and dispose of waste, which has led to more significant environmental concerns and diseases. Although various organisations are undertaking small-scale waste collection and recycling efforts at the national and district levels, the problem lies in the lack of efforts at the government level, as well as a lack of education and awareness among the public.

Out-of-School Children

Around 43% of Pakistan's population falls within the age bracket of under 16 years (Pakistan Bureau of Statistics, 2017). Despite being in the limelight, the issue of children's rights, particularly education, remains an unresolved concern for Pakistan (Figure 3). Pakistan is believed to have the highest number of out-of-school children. According to data collected in 2017,



Figure 2. Waste left in the open Air (Mirza, 2021).

approximately 44% of children aged 4-16 did not have access to education (Hunter, 2020), primarily due to low budget allocation for children's education and rapid population growth.²

Cumulative education expenditures by federal and provincial governments in FY2020 totalled 1.5% of GDP, down from 2.3% in FY2019. Education expenditure rose gradually till 2018-19, but in 2019-20, education-related expenses decreased 29.6%, i.e., from Rs 868 billion to Rs 611 billion (Pakistan Economic Survey, 2021). This decrease resulted from COVID-19 lockdowns and the reallocation of the education budget to social sectors. Even with a standing of 2.3% in the previous year, the education expenditure falls short of its recommended 4-6% (Pakistan Economic Survey, 2021).

The main reasons include limited and low public financing, resulting in weak efficacy in eradicating educational poverty, which is also a key factor in the cycle of income inequality. This disparity in education widens the differences in underdeveloped regions, socio-economic status, and gender. The government has initiated specific programmes to improve access to and quality of education for children, and in 2019, the government highlighted its priorities (Pakistan Economic Survey, 2021). For example, decrease out-of-school children and increase enrolment by focusing on (i) school infrastructures, (ii) removing financial hurdles and improving the practice of providing stipends to girls, (iii) improving teacher and student knowledge, (iv) providing free online education, and (v) improving access to education in remote areas. Additionally, the government aims to achieve uniformity in educational standards by standardising the curriculum across all types of schools in Pakistan.

Population Control

As mentioned earlier, the increasing population is a major social issue that results in poverty and other public health-related concerns³. Many non-profit organisations operate in family planning areas to control the growing population. For example, GreenStar Social Marketing⁴ actively engages with the public to raise awareness about population control, free access to condoms and contraception, free counselling, and medical treatment facilities. Various platforms, including newspapers, billboards, posters, and television advertisements, promote these services nationwide (Agha, 2000; Bhattacharyya et al., 2010; Greenstar, 2021). Additionally, public service messages promoting family planning are broadcast nationwide by the health ministry via television channels (Agha & Beaudoin, 2012; Raza, 2018).

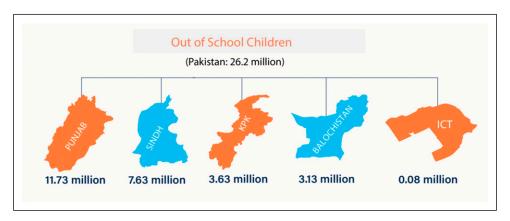


Figure 3. Out of school children in Pakistan (Pakistan education Statistics, 2021-22, 2023).

Social Marketing Applications

To showcase how social marketing is currently applied in Pakistan, we selected four programmes - two from family planning and reproductive health, one from gender equality, and one from the energy sector.

Considering the inconsistent use of social marketing applications in Pakistan, we used Andreasen's benchmark criteria to assess their applications in these programmes (see Table 1). The literature suggests that programmes that incorporate significant aspects of these criteria can be classified as social marketing, even if they do not fully encompass all of them (Akbar et al., 2020; Carins & Rundle-Thiele, 2014; Kubacki et al., 2015, 2017). Table 1 shows that all four programmes used a minimum of five or more than five criteria; therefore, they are considered social marketing programmes and are discussed below.

The use of Andreasen's benchmark criteria addresses the previous criticism that highlights the inconsistent use of social marketing in Pakistan, which makes it challenging to categorise between those programmes that are considered social marketing and those that are not. In addition, we assessed these programs using Andreasen's benchmark criteria, and how or why each initiative qualifies as social marketing.

Family Planning/Reproductive Health Interventions

Social marketing techniques for family planning and reproductive health in Pakistan were initiated in 1985-86 with funding from the United States Agency for International Development (USAID). This facilitated the launch of Pakistan's first socially marketed condom, Sathi. By 1996, additional funding from bilateral donors and private foundations enabled the expansion of the social marketing programmes (Samad et al., 2008). Two prominent social marketing organisations spearheaded this effort:

- GSM, the local partner of Population Services International
- KSM, a project managed by Futures Group International

These programmes aimed to complement the public sector by expanding service coverage and making contraceptive products, particularly hormonal contraceptives (such as pills and injections), available at affordable prices. Additional objectives included raising general awareness

Table 1. Applications of Andreasen (2002) benchmark criteria.

	Andreasen (2002)	(2002) benchmark criteria					The UK's Marketin (2010) a criteria	The UK's National Social Marketing Centre's (2010) addition to the criteria
Programme	Behavioural objectives	Formative/ Segmentation, ta consumer research and positioning	Segmentation, targeting The marketing and positioning mix		Exchange	Customer Exchange Competition Theory orientation	Theory	Customer orientation
Greenstar social marketing Yes (GSM)	Yes	Yes	Yes	Yes	o Z	°Z	Yes	Yes
Key social marketing (KSM)	Yes	Yes	Yes	Yes	Š	°Z	Yes	Yes
Roshni Baji	Yes	Yes	Yes	Yes	Ŷ	٥ Z	Ŷ	Yes
Energy efficiency and conservation (EE&C)	Yes	Yes	Yes	Yes	No No	o N	o N	Yes

about contraceptive methods, creating consistent demand, establishing distribution systems to reach a broader population, and achieving commercial independence and sustainability (Samad et al., 2010). However, most programmes have historically focused on the supply side, with limited efforts to generate demand for contraceptives (Hakim & Tanweer, 2000).

Building on earlier efforts to address the growing population and its associated resource pressures, the focus shifted to underserved rural areas and regions with low contraceptive prevalence, introducing new social marketing initiatives in the 2000s. For example, in 2008, the Marie Stopes Society (MSS) launched the Social Franchise model branded as "Suraj" (meaning "sun" in English). This initiative aimed to deliver high-quality, accessible, affordable long-term family planning services, particularly to rural populations. To achieve this goal, MSS trained private healthcare providers, strengthened marketing and branding efforts, and introduced a voucher scheme to attract potential clients. By 2010, the Suraj network had successfully partnered with over 100 female health visitors, midwives, and nurses, all of whom operated from private clinics (Azmat et al., 2013).

In 2012, DKT Pakistan began operations with a specific focus on serving the poor and marginalised populations, who exhibited higher unmet needs and a lower contraceptive prevalence rate (CPR). DKT Pakistan's primary strategies included the social marketing of condoms and other contraceptives. Additionally, they established a network of clinical facilities called Dhanak Health Care Centres ("Dhanak" translates to "rainbow"), which are managed by midwives. These centres aimed to provide affordable reproductive health services to women in hard-to-reach areas (DKT Pakistan, 2025).

Both MSS's Suraj network and DKT Pakistan's Dhanak centres reflect a shift from earlier efforts, moving beyond the traditional supply-side focus of campaigns. These initiatives emphasise creating demand, improving accessibility, and ensuring sustainable, high-quality reproductive health services in areas with the greatest need. Building on the groundwork laid by GSM and KSM, they expand contraceptive availability and awareness while targeting populations previously underserved by health campaigns. This evolving landscape highlights Pakistan's efforts to address supply and demand challenges in family planning and reproductive health, utilising social marketing techniques to engage diverse communities.

Among these initiatives, GSM and DKT International stand out as Pakistan's leading private-sector social marketing organisations, which are pivotal in promoting contraceptive use, primarily through mass media campaigns. These organisations boast the most extensive track record of producing and airing television commercials on family planning, achieving the highest market visibility (Bill & Melinda Gates Foundation & Population Council, 2016). With over three decades of experience, GSM laid much of the groundwork for social marketing in the country. DKT Pakistan, a newer but highly impactful entrant, has rapidly expanded its influence.

Formative Research. Health communication has traditionally relied on quantitative methods, focusing on individual behaviour change (Dutta-Bergman, 2005). While media campaigns have proven effective in spreading health messages globally (Wakefield et al., 2010), such initiatives have been relatively rare in Pakistan. To address these gaps, GSM and DKT Pakistan have conducted comprehensive formative research to better understand the barriers to the use of contraceptives. Their research highlights the importance of culturally appropriate messaging, debunking myths about contraception, and ensuring privacy in consultations. Research has also identified a lack of contraceptive knowledge and the influence of gender dynamics, particularly in rural areas (DKT Pakistan, 2022). Findings underscore the need for privacy in service delivery and gender-sensitive messaging to overcome misinformation and fears about side effects (GSM, 2024b). These insights emphasise the necessity for localised and culturally sensitive approaches to reach diverse communities across Pakistan effectively.

Theories to Facilitate Behavioural Change. The campaigns leverage social norms theory to drive behaviour change by reshaping societal attitudes towards contraceptive use and enhancing sexual health education through positive examples. In tandem, the Health Belief Model addresses perceived barriers to contraceptive use, such as concerns about side effects and social judgment. By emphasising the benefits of contraceptive use and boosting individuals' self-efficacy, these campaigns strive to create a supportive environment conducive to informed sexual health choices (GSM, 2024b). This dual approach not only aims to normalise contraceptive practices but also empowers individuals to make decisions based on accurate information and personal confidence.

DKT Pakistan's core communication strategy is to raise awareness and change behaviour through consistent, simple messaging that highlights core values. The goal is to generate discussion and interest around contraception, though the direct impact of messaging on awareness remains debatable. DKT Pakistan employs a long-term approach to ensure retention, frequently using humour and themes of pleasure and enjoyment in their advertisements. A key objective is to encourage individuals, especially married men of reproductive age, to feel comfortable asking for condoms, as exemplified in campaigns like Josh. By framing family planning as enjoyable and emphasising pleasure over fear, DKT Pakistan aims to dispel myths that condom use reduces pleasure, thereby fostering behavioural change (Azhar, 2020).

Since 2015, GSM's primary communication strategy has shifted towards dispelling myths about family planning through below-the-line initiatives, prioritising ground-level engagement, such as organising community camps and facilitating direct conversations. They train Lady Health Workers to enhance interpersonal communication, from producing TV commercials to focusing on direct interactions (Azhar, 2020). GSM invests in advocacy to leverage enhanced provincial autonomy for setting family planning and maternal and child health (FP/MCH) priorities in the post-devolution context. Their broader goal is to influence development partners, policymakers, media, and communities to generate demand and establish FP/MCH as essential health interventions, ultimately improving government healthcare indices (GSM, 2013).

Target Segment. Both GSM and DKT Pakistan primarily target married couples, particularly those in rural and peri-urban areas, as well as urban youth who face challenges in accessing accurate sexual health information. Special attention is given to women of reproductive age, who often bear the primary responsibility for family planning. Notably, the campaigns also aim to engage men as active participants in contraceptive decisions, recognising the considerable influence of gender dynamics on reproductive choices. Both brands focus on distinct target populations based on their contraceptive types:

- Saathi Condoms (1987): This economical option for rural men and lower socioeconomic urban residents is registered with the government and features the tagline "Two children are the best."
- Touch Condoms (2006): An upscale brand targeting urban, upper-middle-class men in Pakistan (GSM, 2016).
- Do Condoms (2017): A premium brand launched by GSM, targeting affluent urban men and conforming to international standards, positioned as a high-cost commercial product (GSM, 2018).
- Sabz Sitara Campaign: This GSM initiative promotes the Sabz Sitara franchise clinic, focusing on married women in rural areas who seek family planning advice, particularly regarding intrauterine devices (IUDs). The campaign offers IUD placement consultations and emergency contraceptive pills, complemented by the Nisa campaign, which targets women from all socioeconomic backgrounds in both urban and rural areas.

- Josh Condom: A mid-range brand that appeals to rural and urban youth, particularly men. It competes with GSM's Saathi brand.
- Prudence Premium Condom: A high-end brand targeting urban men, particularly young, educated couples, with Do Condoms as a primary competitor.
- Heer IUD: This brand targets married women of reproductive age (15-45), particularly those
 in remote areas. It focuses on low-income women while catering to a range of income
 groups (Chaudhary, 2019). Heer competes with the Nisa brand.

This structured approach enables each brand to effectively engage its target audience, fostering informed reproductive choices and promoting family planning practices.

Marketing Mix. To support the social marketing mix (price, place, promotion, product, and positioning), practitioners often utilise partnerships with local businesses. For instance, partnering with condom manufacturers is crucial for providing better-quality products to lower-income groups. Table 2 compares how GSM and DKT Pakistan employed different approaches to the marketing mix, depending on the programme's aim and the target groups' needs. The Table shows that, while both programmes aim to improve reproductive health access in Pakistan, GSM takes a more traditional and educational approach. In contrast, DKT Pakistan combines public health goals with aspirational and culturally adapted promotional strategies.

Knowledge-Attitude-Behavioural Objectives. The primary goal of these campaigns is to (a) raise awareness of contraceptive options and safe sex practices, (b) enhance attitudes towards the acceptance and use of contraceptives, and to reduce cultural and gender-based stigma, and (c) encourage behavioural changes by promoting consistent contraceptive use and regular visits to reproductive health clinics. Desired outcomes include an increase in contraceptive prevalence rates, a reduction in unintended pregnancies, and greater community acceptance of open dialogue about sexual health.

Table 2. Social Marketing Mix Comparison.

Element	GSM	DKT Pakistan
Positioning	Focuses on enhancing quality of life through healthier choices and access to affordable, high-quality health products/services	Aims to remove barriers to family planning, such as a lack of information and poor access
Product	Offers a broad range of contraceptives, supplements, clean delivery kits, health vans, water purifiers, and a network of healthcare providers	Provides various contraceptive options (oral, injectable, condoms, IUDs) tailored to diverse needs
Price	Mostly free or low-cost (e.g., Sathi condoms at Rs. 35PKR); designed for affordability	Primarily subsidised or free for low-income groups; premium products priced for wealthier segments
Place	Distributed through private providers, pharmacies, clinics, and lady health visitors	Delivered via social franchises (Dhanak), pharmacies, mobile health units, and midwife-led centres
Promotion	Informative and conservative, family-focused messaging dispels myths around family planning through traditional media and clinics	Uses mass and digital media, local language, humour, and street theatre to educate and engage communities. Combines public health with aspirational messaging ("pleasure with purpose")
Campaigns	Saathi-Jeet Ka Sultan, Nisa, Touch, Do, Sabz Sitara	Josh, Dhanak/Heer, Prudence Premium

Budget. GSM's and DKT Pakistan's initiatives are funded through international donors, private sector contributions, and local partnerships. This funding covers the availability of contraceptive products, the education and equipping of healthcare providers to effectively communicate and promote sexual health practices and raising awareness through targeted media campaigns. These efforts are supported by public-private collaborations, emphasising the importance of comprehensive funding strategies to enhance sexual health initiatives (DKT International, 2024; GSM, 2024a)

Outcomes of the Initiatives. The initiatives have improved contraceptive use and reproductive health literacy across Pakistan. GSM reports an increase in contraceptive uptake among their target populations over the initial years of campaigning. CPR rates have increased from 26% to 34% (UNFPA, 2024); however, this remains the lowest among average CPR rates in South Asian countries (53%) (Qureshi & Bari, 2024) and has remained stagnant for some time. In parallel, DKT Pakistan's campaigns have contributed to the annual distribution of over 825 million condoms and other contraceptive products. Both organisations have successfully reduced the stigma associated with family planning and sexual health, as evidenced by increased engagement with sexual health clinics and a rise in consultations for contraception and reproductive health advice (DKT International, 2024). These efforts have markedly improved reproductive health outcomes, leading to a reduction in unintended pregnancies and enhanced access to sexual health services. Additionally, community feedback suggests a decline in the stigma surrounding discussions of sexual health, reflecting a cultural shift towards greater acceptance of family planning and reproductive education (GSM, 2024b).

Challenges. The most significant challenge is the conservative nature of Pakistani society, which is characterised by numerous societal barriers that render family planning topics culturally and religiously sensitive, thereby severely impacting their practice (Shafiq et al., 2008). For example, organisations involved in reproductive and sexual health often adopt a conservative stance in their message creation (metaphorical) and delivery to align with societal norms and avoid controversy. While this approach aims to respect the comfort levels of the target audience, it can result in less clear messages and be less effective in conveying crucial health information (Qureshi & Shaikh, 2006). Consequently, the challenge lies in striking a balance between cultural sensitivity and the need for clear and impactful communication. Another challenge is recognising the importance of the extended family of the target audience. For instance, for women to adopt contraceptive methods (IUDs), it is essential to convince the husband, mother-in-law, and other in-laws. Myths associated with healthy behaviours restrict social marketing practices; for instance, many women fear becoming sterile from using IUDs (Nishtar et al., 2013). Such concerns need to be addressed by social marketing to foster a positive attitude towards sexual and reproductive health and birth spacing in Pakistan. Although some recent efforts have yielded positive results (Jafree et al., 2022), further initiatives are needed to achieve a more significant impact.

From Pakistan's perspective, the emphasis should be on high-risk, low-income groups to improve social marketing practice, who are most vulnerable to misconceptions, fallacies, and myths about health (Qureshi & Shaikh, 2006). To achieve this, the focus should be on community-based social marketing instead of information-intensive programmes to foster sustainable behaviour in the target population (Agha, 2000). Although advertising effectively creates awareness, its impact is limited when it comes to fostering long-term behavioural change. In community-based social marketing, programmes focus on uncovering and removing the barriers inhibiting people from engaging in the desired behaviour (Hastings et al., 2000). One scenario involves setting up health promotion committees composed of local people to openly discuss their concerns, develop a sense of trust, and reduce these traditions.



Figure 4. Pioneering female electricians in Pakistan (GuarantCo, 2022).

Roshni Baji

Pakistan has a young population with a gender ratio of 51% males and 49% females (Pakistan Bureau of Statistics, 2017). However, the society has been patriarchal, with authority and power historically concentrated in the hands of men. Additionally, global influences on female appearance and conduct have perpetuated restrictive norms, which remain prevalent in Pakistan today. Consequently, societal views on gender roles are shaped by both enduring traditional practices and external pressures, hindering advancements in gender equality (Ali et al., 2022). The history of women in Pakistan remains complicated. Pakistan is the first Muslim country to have a woman (Benazir Bhutto) as head of state. Nevertheless, the country is still marked by nuances of limited access to education and inheritance rights for women. Despite this, there have been encouraging signs of change in this traditional mindset in recent years. Women's enrolment in education and the workforce has been rising, and corporations are taking responsibility for designing jobs and creating opportunities specifically for women (Khan & Kirmani, 2018). This reflects the realisation that the nation can only flourish by creating a safe environment for women both within and outside the home (Khan, 2020).

Pakistan ranks 151 out of 153 on the World Economic Forum's Gender Gap Index 2020 (Ahmed, 2019), highlighting the urgent need for initiatives that address gender inequality. In February 2021, K-Electric (KE) launched the Roshni Baji programme, a groundbreaking initiative designed to train women as grid officers and promote gender diversity in the power sector (KE, 2022a). This programme was selected for its innovative approach to breaking stereotypes in one of Pakistan's most male-dominated industries while simultaneously enhancing community safety.

The Roshni Baji programme operates on two levels: (1) empowering women to become safety ambassadors and (2) raising awareness about electrical safety and energy conservation in communities. Participants make two critical decisions: to enrol in the programme and undergo training, and to adopt safer, more informed practices in their daily lives. These decisions are interconnected, as the desire to learn and contribute motivates women to join, while the training equips them with the skills to make informed choices (see Figure 4).

The programme aims to establish a platform for gender diversity and inclusion, enabling women to become agents of change in society. Participants are appointed as ambassadors of safety

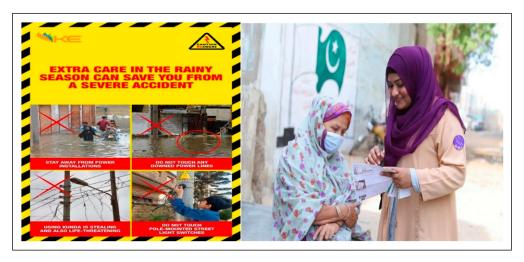


Figure 5. Roshni Baji creating awareness of electrical safety (KE, 2025b).

and change, engaging with communities to disseminate vital information on electrical and fire safety, new electricity connections, and customer feedback. By stepping into these roles, they challenge traditional gender stereotypes associated with the power sector. Additionally, the programme provides self-defence training to address gender-based threats, enhancing participants' confidence and effectiveness in their roles. Upon completion, women are certified as Pakistan's first female electricians. A key aspect of the programme is its focus on raising awareness about safe electricity usage (see Figure 5). This is particularly critical in Pakistan, where unsafe electrical practices are a leading cause of preventable injuries and deaths (Rahman, 2022). By integrating gender diversity efforts with practical safety education, the Roshni Baji programme addresses both gender inequality and public health concerns.

Formative Research. The programme's design was informed by formative research conducted after the 2020 monsoon season in Karachi. The Health, Safety, Environment, and Quality team analysed data on electricity-related accidents, identifying areas most vulnerable to safety hazards and the root causes of frequent accidents. The research revealed a widespread lack of basic safety knowledge and improper use of electrical infrastructure (Health And Nutrition Development Society, 2020).

Theories to Facilitate Behavioural Change. While no formal behavioural theories were explicitly cited in the programme's design, the Roshni Baji initiative aligns with principles from several frameworks. For instance, it reflects Social Cognitive Theory, as Roshni Bajis is a role model, demonstrating safe practices and energy-efficient behaviours that encourage community adoption. It also aligns with the Theory of Planned Behaviour by enhancing self-efficacy and equipping women with motorcycle riding, self-defence, and electrical safety education skills. Additionally, the programme embodies the Diffusion of Innovations framework by spreading safe practices through early adopters, fostering broader community change. Reduced safety accidents, improved safety practices, increased legal electricity connections, and retaining Roshni Bajis in the labour force measure the impact.

Target Segment. The programme targets low-income areas in Karachi that are particularly vulnerable to safety hazards. These communities often lack basic safety knowledge, and women and



Figure 6. Diversity initiative enabling women to rewire the system (KE, 2025c).

children are disproportionately affected by electrical accidents. Focusing on women as primary caretakers, the programme addresses safety education and gender empowerment.

Knowledge-Attitude-Behavioural Objectives. The programme aims to raise awareness about electrical safety among women. The intended outcome is to promote better safety practices within households, educate children and adults on identifying hazards and responding to emergencies, reduce safety-related accidents, encourage the use of legal electricity connections, and retain Roshni Bajis in the labour force, either within the programme or in the broader energy sector (see Figure 6).

Marketing Mix. The product's design and placement ensured that the selected intervention areas were receptive to and would benefit from such a programme. The programme aims to address two social issues. Firstly, it seeks to raise awareness of safety practices and hazards to prevent accidents and fatalities. The victims of safety accidents are often women and children, as most incidents occur within homes. Thus, reaching the target audience directly through a woman-to-woman connection was crucial. Secondly, it will empower women and enable them to break stereotypes. The promotion of the programme relies on print, electronic, and digital media for extensive coverage. The positioning statement developed internally centres on three outcomes:

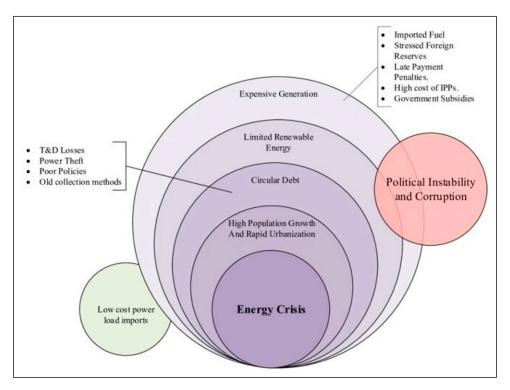


Figure 7. Reasons for energy crisis in Pakistan (Khatri et al., 2023).

empowerment of the Roshni Bajis, increased community safety knowledge and practices, and transitions to legal electricity connections.

Budget. GuarantCo and KE co-founded the project with an approximate budget of 33 million PKR.

Outcomes of the Initiative. The initiative helps women understand how to minimise electrical safety hazards in their surroundings. The knowledge about preventing such safety incidents at home also benefits women by changing their behaviour and adopting safe living habits, especially electricity. The fire and rain safety messaging also empowers women to take better care of their own safety and that of their children at home. According to KE's social media platforms, the programme has successfully provided safety awareness to over 107,000 households, engaged nearly 1,100 customers daily, and has a team of 40 certified women electricians serving the industry, with 60 additional women joining the second leg of this programme in November 2021. Long-term outcomes include reduced electrical accidents, increased adoption of energy-efficient practices, and greater female participation in the energy workforce. The programme's success is evident in its global recognition, including Pakistan's first-ever S&P Global Platts Energy Award (Startup Pakistan, 2021).

EE&C

Load shedding (temporarily cutting electricity in certain areas to manage power shortages and avoid wider outages) and lack of electricity disproportionately impact Pakistan's poor and marginalised population (Pasha & Saleem, 2013; Sher et al., 2014). Various reasons for the energy crisis are noted (see Figure 7). Although electricity is poorly utilised, the energy savings potential



Figure 8. NEECA to conduct national-level EE&C awareness competition (Radio Pakistan, 2023).

(17% of total electricity usage) from efficiency measures and energy conservation in Pakistan is substantial. The inefficient use of electricity and the resulting electricity shortage also present significant investment opportunities for both the private and public sectors⁵.

Pakistan heavily relies on fossil fuels to produce electricity. Imports account for nearly 43% of the country's primary energy, with substantial quantities of liquefied natural gas frequently imported to bridge the demand-supply gap (Ministry of Planning, Development, and Reform, 2019). Energy prices steadily increase, raising significant affordability concerns among various audience segments. An uninterrupted energy supply is crucial for promoting economic growth, enhancing efficiency, generating employment opportunities, and reducing inequalities (Biresselioglu et al., 2019).

A National Energy Efficiency and Conservation Authority (NEECA) has been established to address energy issues in two ways. First, knowledge management promotes energy efficiency and conservation. Second, it implements an outreach and awareness plan (see Figures 8–10). For knowledge management, NEECA focuses on establishing an EE&C policy institute, industrial assessment centres at universities in collaboration with the Higher Education Commission, National Vocational and Technical Training Commission training programmes, an electric vehicle research centre, a scholars exchange programme with Full Bright, and collaboration with international organisations for the capacity building of technical staff at NEECA.

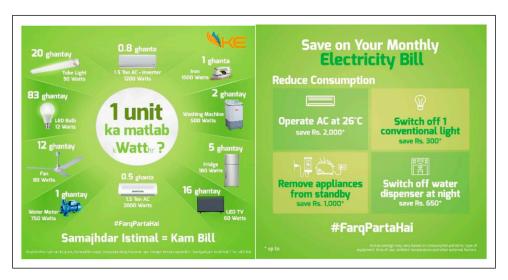


Figure 9. EE&C campaign domestic consumer segment (KE, 2023).

Formative Research. Pakistan aims to adopt desirable future energy plans from developed countries. Therefore, it is essential to gather data on the expected and actual energy savings resulting from energy efficiency gains and demand-side management through energy conservation measures (Biresselioglu et al., 2019). The data is collected by the Pakistan Bureau of Statistics to install home-based energy monitoring devices in major cities, such as Lahore, Karachi, and Islamabad, for energy audits based on global standards, and to promote the purchase of energy-efficient appliances in the market (KE, 2022b; NEECA, 2020). Through this data, NEECA focuses on areas that prioritise creating and mapping awareness, training, and capacity building.

Theories to Facilitate Behavioural Change. NEECA aims to combine a broader range of behaviour change strategies with traditional technology-based energy efficiency programmes. The initiative focuses on efficiency and conservation; thus, conservation requires behavioural changes at both individual and collective levels to reduce energy consumption. For example, three types of behaviour are targeted in the residential sector: curtailment, maintenance, and more efficient purchasing (Consortium for Development Policy Research, 2018).

Target Segment. Three groups are targeted: (1) consumers (industry, agriculture, transport), (2) commercial businesses, and (3) domestic consumers. The special focus is on youth within the domestic segment. The primary reason is that the awareness raised with the students will have the potential to be further disseminated to their parents through their children. This awareness will also help the youth understand how to conserve energy, the importance of energy efficiency, and the changes in behaviour that can help conserve energy in the future as responsible adults (National Energy Efficiency Conservation Authority, 2021).

Knowledge-Attitude-Behavioural Outcomes. For all targeted segments, the initiative aims to drive demand-side behaviour change through information-based programmes, social integration programmes, and education and training initiatives. Information-based programmes focus on home energy reports, real-time feedback on energy use, and personalised energy audits. Social integration programmes emphasise community-based activities, games, and competitions. Finally, education and training programmes concentrate on strategic energy management for industrial and



Figure 10. EE&C campaign commercial consumer segment (KE, 2025a).

commercial customers, campus education, and specific communities. The desired behaviour outcome for residential customers is to install energy efficiency measures, reduce energy consumption at home, and purchase energy-efficient appliances (Biresselioglu et al., 2019). For commercial customers, the behavioural outcome is to encourage businesses to implement energy efficiency measures, reduce energy use at work, and minimise transport-related emissions, among other objectives.

Marketing Mix. All the selected intervention points for the EE&C initiative were highly receptive to the programme, including educational institutions, manufacturer associations, and energy auditors. Awareness campaigns were promoted through social, print, and electronic media. Educational campuses were targeted via on-site visits, competition-based learning, video games, and school channels. The campaign has been partially successful, as evidenced by the increased adoption of conservation measures and energy-efficient appliances compared to previous years. The positioning statement developed by NEECA is focused on three primary outcomes: improving the quality and affordability of energy through efficiency and conservation, formulating, disseminating, and implementing EE&C policies and programmes, and lastly, ensuring sustainable, sufficient, and accessible energy to the responsible future generation of Pakistan (Ministry of Energy, 2020).

Budget. To promote EE&C, knowledge management is co-funded by the Ministry of Energy and the Public Sector Development Programme, with an approximate budget of 500 million PKR. On the other hand, the outreach and awareness plan is co-funded by the Asian Development Bank and the United Nations Development Programme, with a budget of 40 million PKR.

Outcomes of the Initiative. To date, the initiative has been partially successful, as negligible efforts have encouraged consumers to adopt energy-efficient utilisation patterns. The primary reason is

that, without technical and behaviour change-based interventions in the past, the general energy consumption pattern for domestic households in Pakistan was primarily influenced by economic factors. Hence, consumers in the lower economic segment tend to be more cautious about energy consumption due to high energy prices than those in the upper economic segment, who often do not prioritise energy efficiency.

Furthermore, consumers have started to adopt curtailment behaviour (repetitive efforts, such as switching off lights, fans, and other appliances), but still have a long way to go before reaching the *maintenance* and more *efficient purchasing* stage. A possible reason for not reaching the maintenance and more efficient purchasing stage may be a lack of consideration of equality issues when planning and implementing behaviour change activities. Men and women tend to have different preferences and priorities that affect their use of energy and energy-consuming products, and, significantly, their willingness to change usage patterns in response to new information. Thus, a focus on gender equality can be integrated into existing efforts at minimal (or no) cost, yielding significant potential returns regarding uptake and impact.

Reviewing the current EE&C initiative reveals that consumer behaviour toward energy efficiency solutions is complex, with significant ambiguity and diversity in attitude and preferences. The traditional method of energy providers focusing on cost and risk priorities is insufficient to achieve the expected outcomes. Thus, consumer-centric programmes revolving around conservation initiatives are needed.

Can we Categorise These Programmes as Social Marketing?

The analysis of the four programmes supports the argument presented in Table 1, that all programmes met at least five criteria, thereby justifying their classification as social marketing interventions. Formative research played a crucial role because each of these programmes addresses social stigma, such as family planning being a taboo subject, and a male-dominated society concerning women's roles, as well as conservative social views. Such issues pose significant challenges when trying to change behaviours or implement interventions that conflict with these social norms. Researching these norms not only provided a detailed understanding that informed the planning of behavioural objectives and interventions but also aided in the design of segmentation, targeting, and positioning, along with the development of messages and materials, and the implementation of the social marketing mix. However, notable gaps appeared in the systematic application of the exchange concepts used for the intervention and in addressing competing behaviours. The lack of a clear exchange strategy indicates that programmes may not adequately identify or enhance the perceived benefits of desired or new behaviours relative to the costs for target audiences (such as emotional or psychological costs). Similarly, limited recognition of competing behaviours (e.g., cultural norms, such as religious views on family planning, or commercial products) reduces opportunities to develop targeted counter-strategies that could strengthen the effectiveness of the interventions.

Andreasen's benchmark criteria promote using theoretical foundations in behaviour change programmes (Andreasen, 2002). Only GSM and KSM explicitly incorporated theoretical frameworks; the other cases embedded theoretical principles implicitly, without clear explanation, which hindered the replicability and assessment of their approaches. Similarly, the social marketing mix was applied, but its implementation varied. For example, GSM's method relied more on traditional educational messaging, whereas DKT used aspirational and pleasure-focused framing. In contrast, the Roshni Baji and EE&C initiatives used it in more limited ways, concentrating on promotion without equally strong product, price, and placement strategies. Interestingly, all programmes emphasised building partnerships with wider stakeholders, which

Institute	Name of the course
National University of Sciences and Technology (Islamabad)	Social marketing is part of the MSc in marketing Course name: social marketing (20 credits) ⁶
The National University of Computer and Emerging Sciences (Islamabad)	This course is not part of any degree programme; it is mainly offered on a demand-based level Course name: social marketing
Agha Khan University (Karachi)	Social marketing is part of the health promotion, education & advocacy, which is part of a master's degree (Standalone course with graduate credits) ⁷
Institute of Business and Information Technology, Punjab University (Lahore)	Social marketing is elective for a Bachelor's in business and information technology course 8 Course name: marketing for not-for-profit organisations (credit hours, 3)

Table 3. Institutes Offering Social Marketing Courses in Pakistan.

highlights their strength, as partnerships are considered central to social marketing strategy (Povilionis et al., 2025).

An important insight is that none of these programs documents Andreasen's benchmark criteria applications or reveals the use of social marketing strategies in annual reports, websites, social media, blogs, or other materials. We can only speculate that the main reason for this practice is a lack of understanding of social marketing and its role in broader social and behavioural change efforts. Furthermore, these programs can be seen as social change or corporate social responsibility initiatives; however, our analysis and application of Andreasen's benchmark criteria demonstrate that these programs qualify as social marketing initiatives.

Academic Activities

Social marketing is taught only in a few public and private universities and institutes, both at the undergraduate and postgraduate levels, as part of marketing specialisation courses. However, some institutes offer social marketing as part of a health education degree, either as a separate course or as part of non-profit marketing/public health courses (see Table 3).

Identifying how long these courses have been running is difficult, considering that little information is shared on the universities' websites. Many courses are run by academics interested in the field, but as academics change roles and jobs, such courses are often abandoned. For example, a social marketing course at the Institute of Business Administration Karachi⁹, which ran until 2023, was discontinued due to the changing roles of the primary instructor, highlighting concerns related to capacity building.

In addition to academic offerings, various training opportunities, including social marketing content, are available for professionals working in the health sector. For instance, the Continuing Education Programme offered by the Department of Community Health Sciences at Aga Khan University, Karachi, provides such opportunities. This programme aims to strengthen professionals' skills and expertise. It is particularly useful for mid-level health and development workers, managers, researchers, and planners working at different levels in the public health sector, government, and international not-for-profit agencies. These programmes focus on the technical aspects of reproductive health and family planning, aiming to improve related outcomes by building the capacity of managers in behaviour change. These programmes also include reproductive and sexual health components in their action plans, assess the country's family planning and reproductive health situation, and analyse the policy and legal environment

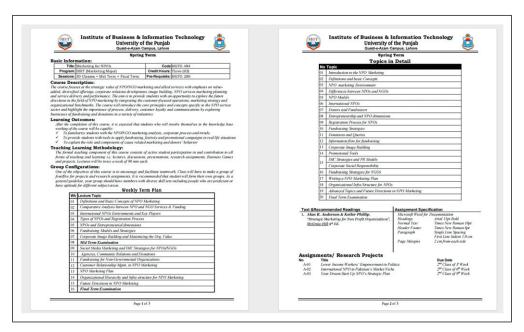


Figure 11. Example of social marketing course.

regarding family planning and reproductive health, incorporating gender relations and their dynamics into family planning and reproductive health action plans.

Another notable programme is the Initiative for Mothers and Newborns under GSM Initiatives, which aims to improve and expand maternal and newborn health services and coverage. The training goal is to provide mother and child health services, suitable delivery kits, birth preparedness and complication readiness, public-private partnerships, and training and evaluation of health care providers (Afridi, 2010).

Although a range of courses and training workshops are available, in most instances, the term "Social Marketing" is not employed to promote these courses or training. Instead, alternatives are used, such as marketing for not-for-profit organisations, health promotion, education, and advocacy courses. Similarly, social marketing is often combined with other behaviour change techniques, which divides the focus of the course (see Figure 11). Little is known about how these courses were developed and their uptake, as there is either no information available on the university websites or the information is not current.

Additionally, the contents of these courses/workshops are not current. For example, most of these courses are designed around downstream social marketing applications for individual social well-being (Akbar et al., 2022). The academic offering can take advantage of the latest developments, such as behaviour maintenance techniques (Carvalho & Mazzon, 2020), value cocreation (French & Russell-Bennett, 2015), systems thinking (Domegan et al., 2016), design thinking approaches for complex issues (Lefebvre & Kotler, 2011), practitioners' reflexivity (Millard & Akbar, 2024), critical social marketing (Gordon et al., 2022), and other latest planning frameworks, such as the GDPS planning framework for social marketing (Akbar & Barnes, 2024). This indicates that academic activities have not yet advanced, highlighting the need for academics in Pakistan to focus on incorporating more recent and up-to-date social marketing principles into the curriculum.

Recommendations

Our reflection on how social marketing is taught and practised in Pakistan highlighted that, despite slow progress, more needs to be done given the diversity of social issues the country faces. Social marketing is a proven behaviour change technique that transcends individual behavioural changes. Therefore, its uptake must be increased, and for this reason, we recommend placing equal emphasis on teaching, researching, and practising social marketing, which would address many social issues in Pakistan.

Recommendations for Teaching

The current teaching practice is foundational; courses do not concentrate on theories, models, or frameworks. The social marketing curriculum should include a robust theoretical focus on social marketing with an international perspective, incorporating case studies from other countries. This approach would enable learners to grasp the theory and practice holistically. This can be achieved by incorporating international guest lectures into the curriculum, which will provide students with a broader perspective of social marketing and help them appreciate the diversity and inclusiveness of the field. Institutions providing social marketing courses should also extend membership (for academics and students) in the International Social Marketing Association, enabling students to access various resources and networking opportunities through the association and relevant conferences.

The assessment of social marketing courses, training, and workshops must be based on real-life case studies. This would enhance social marketing's reach beyond sexual health and contraception. Pakistani social marketing practices provide unique case studies due to their culture, geography, and various historical factors; incorporating such case studies would be a valuable strategy to enable students to acquire theoretical and practical knowledge simultaneously. Similarly, social marketing should be integrated into a broader curriculum, encompassing public health, health communication, marketing, education, and psychology, at both undergraduate and postgraduate levels, to achieve a wider impact.

Recommendations for research

Integrating social marketing into various pedagogical programmes would foster a culture of learning about social marketing principles and research. Numerous funding bodies, research centres, and scholars in Pakistan engage in diverse behaviour change projects. However, social marketing is rarely utilised for ongoing projects due to a lack of awareness. No research centre in the country currently offers research support or funding for social marketing initiatives. Establishing a learning culture and understanding social marketing would encourage publications and research. Universities and training bodies involved in providing social marketing must assume responsibility for advocating social marketing as a proven behaviour change technique to researchers and funding bodies. This can be achieved by collaborating with funding bodies and organising workshops, discussions, and seminars on social marketing.

Most of the published social marketing literature comes from researchers living abroad. This may be because the social marketing pedagogy is not strong enough to encourage local researchers to engage with research. Researchers in Pakistan must be encouraged to collaborate nationally and internationally. We can only speculate that one reason for the lack of engagement with social marketing research is the absence of a local association for social marketing. Even though Asian Social Marketing is in progress, local researchers should be encouraged to attend the International Social Marketing Conference, the World Social Marketing Conference, the European Social

Marketing Conference, and other similar events for exposure and networking opportunities. Funding to attend these conferences would be a potential issue. However, bridging the gap between pedagogy and research would help overcome such barriers.

Recommendations for Practice

There is considerable evidence of social marketing practices in Pakistan. However, the practice is limited in many ways: (1) programmes do not openly disclose the use of social marketing applications and planning frameworks; (2) because of a lack of academic support, social marketing has limited understanding among practitioners. (3) Most practitioners who deal with behaviour change programmes seek support from public health, health communication, behavioural sciences, and other disciplines that are well established in Pakistan, leaving a small scope for social marketing. It is an encouraging sign that disciplines competing with social marketing are well-established in Pakistan; introducing social marketing would add a further competitive advantage, ultimately contributing to social well-being. Therefore, we have adopted recommendations from Levit and Cismaru (2020) for practitioners. Consulting a broader range of social marketing planning models (Akbar et al., 2019, 2021) would help design interventions, especially for those new to social marketing. Additionally, practitioners should consult published resources and case studies to inform their practice. ¹⁰

Social marketing academics are adept at using academic language and the terminologies used in social marketing principles and models. A barrier to the broader use of theory, theoretical models, and findings from prior research is the lack of clarity in the language employed. For research and theory to be more frequently adopted and implemented, it is essential for the writing to be more easily comprehensible (Akbar et al., 2023; Andreasen, 2002). Practitioners must collaborate with academics to gain insights from both perspectives and develop effective and successful social marketing programmes. Lessons must be learned from prior social marketing interventions, both nationally and internationally. Furthermore, practitioners must network with social marketing academics and practitioners globally to understand the practical implications of the field. Additionally, practitioners must recognise that failed interventions provide important lessons for improved future practice (Akbar et al., 2021).

Conclusion

We learned from this study that social marketing is underutilised in Pakistan but has great potential to be embedded within broader practice dealing with wider social issues. Similarly, despite its proven potential, its academic and institutional policy is weak but critical. More focus must be given to teaching, researching and promoting it among practitioners.

Limitations

While this work provides a foundational overview of social marketing in Pakistan, it has notable limitations. The reflection is based on available data and does not fully capture the extensive history and impact of social marketing in Pakistan. Significant financial investments in social marketing since the early 2000s, along with their inclusion as an indicator in the Demographic Health Surveys, are crucial aspects that warrant more in-depth exploration within the Pakistani context. A systematic literature review or other forms of literature analysis (such as narrative or integrative review) could advance the conversations on this topic. Such an approach would help better understand the historical significance and the linkage between funding and social marketing outcomes. Researchers should also be encouraged to explore a broader range of social marketing

initiatives, evaluate the long-term impacts of existing interventions, and incorporate more diverse case studies. For example, an analysis of the role of social marketing on reproductive health, child health, family planning, sexual health, population control, etc., is needed to provide a clearer picture of how social marketing has been implemented historically and to understand its current landscape within these domains. Similarly, an analysis of non-public health-related issues and the role of social marketing is also required. Additionally, future studies should focus on filling gaps in the current understanding, such as the role of social marketing in various sectors and its evolving practices within the country. This will provide a more comprehensive and up-to-date perspective on social marketing in Pakistan and its potential for driving effective behaviour change. Significantly, our recommendations are based on general reflection, which is not informed by any empirical investigation. Therefore, an empirical analysis would support more informed recommendations for better uptake.

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Notes

- 1. Waste Management.
- 2. Pakistan Out-Of-School Children Exceed 26 Million Amid Population Growth, Economic Hardships.
- 3. Pakistan's Population Crisis.
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