

Planning the Branding Strategy of MPASI Health Organization Bandung 2017

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Abstract. MPASI Program is a Bandung Health Service program that has not conducted branding activities. This research used Doctrine Brand Strategy theory from Duane E. Knapp. The results of this study showed that the orientation of the MPASI Program socialization conducted by Bandung City Health Office is a nutrition program that has been done before. Health Office of the city has not maximized in implementing its branding MPASI program, so it requires a planning to perform branding MPASI program. Head of Health Division of Bandung City itself realized the importance of branding activities for the program, but unfortunately these activities have not been implemented optimally.

Keywords: Branding, Doctrine Brand Strategy, Brand Knowledge, MP-ASI

Introduction

Nutritional problem is one of the problems still faced by people of Indonesia. The problem of malnutrition is still considered to be unable to be resolved and it led to other problems, such as obesity, especially in the middle and upper socioeconomic groups in urban areas which put Indonesia in multiple nutritional problems. This is considered a serious problem because it can threaten the quality of human resources in the future.

Indonesia up to now still faces nutritional problems that have serious impact on the quality of human resources. Inhibition of growth, low birth weight, stature, lean and obesity are some of the most common nutritional problems. According to Director of Community Nutrition Kemenkes (Health Ministry) Doddy Izwardy, the situation is still not resolved until now. Data from the Ministry of Health mentioned nutritional problems including: stunting (37.2%), anemia in pregnant women (37.1%) and toddlers (28.1%), malnourished children (19.6%), and over

nutrition children (11.9%). The government and community made several efforts to reduce the numbers in accordance with Presidential Regulation no. 42 of 2013 on the National Movement for the Acceleration of Nutrition Improvement. Aims of this program until the year 2025 is lowering toddlers who stunting up to 40%, underweight children under 5%, nullify the percentage of excess nutritional children, lowering the anemia patients as much as 50%, and exclusive breastfeeding to 50%.

The development of nutritional problems in Indonesia is increasingly complex today. In addition to still facing the problem of malnutrition, excess nutrients is also a problem that we must handle seriously. National Medium-Term Development Plan (RPJMN) of 2010-2014 stated that improving the nutritional status of the community is one of the priorities by reducing the prevalence of underweight to 15% and prevalence of short toddlers (stunting) to 32% by 2014. Riskesdas (basic health research) results from The year 2007 to the year 2013 showed the fact of concern where the

underweight increased from 18.4% to 19.6%, stunting also increased from 36.8% to 37.2%, while wasting decreased from 13.6% to 12.1 %. Riskesdas 2010 and 2013 showed that births with Low Birth Weight (LBW) <2500 grams decreased from 11.1% to 10.2%.

Stunting occurs due to chronic malnutrition caused by poverty and improper parenting which resulting in cognitive abilities of not developing to the maximum, easy to get sick and low competitive, so it can get caught in poverty. The first thousand days of a child's life is a critical period that determines his/her future. In that period, Indonesian children face a serious growth disorder. The problem, over 1000 days, the adverse effects of malnutrition is very difficult to be treated. To overcome stunting problem, people need to be educated to understand the importance of nutrition for pregnant women and toddlers.¹

diseases associated with high incidence of infectious diseases and poor environmental health.

Some of the factors causing nutritional problems in Indonesia are:

1. The first direct cause is the consumption of foods that do not meet the number and composition of nutrients that meet balanced nutrition requirements that are diverse, as needed, clean, and safe. For example, babies who do not get Exclusive Breast Milk of their mothers'.

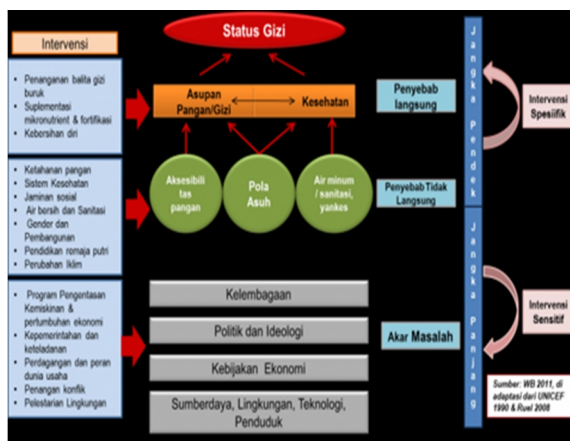
2. The second direct causal factor is infectious diseases related to the high incidence of infectious diseases, especially diarrhea, intestinal worms and acute respiratory diseases (ARI). This factor is related to the quality of basic health services, especially immunization, environmental quality, and healthy living behavior. The quality of the environment is mainly indicated by the availability of clean water, sanitation facilities and healthy living behaviors such as hand-washing habits with soap, defecation in toilet, no smoking, indoor air circulation and so on.

3. Other factors that also affect are the availability of food in the family, especially food for infants 0-6 months (Exclusive breastfeeding) and 6-23 months (MP-ASI), and nutritionally balanced food, especially for pregnant women. Things related to the quality of child care are patterns of foster care, environmental sanitation, family food access, and health care which influenced by education, income, and access to information, especially on nutrition and health.

4. Poverty and Nutrition Problems

In the opinion of economists, there is an assumption that the problem of poverty is the root of malnutrition problem of. Poverty blocks the access to food in households which causes people experiencing lack of various nutrients needed by the body. But it is little known that the opposite can also happen. Malnutrition, in fact, can impoverish people. Children or people who are malnourished and susceptible to illness, mean often absent to go to school or work. This is at risk of decreasing income. Being sick most of the time means higher expense for medical treatment. They can be poor because of the continuous expenditure of hospitals and doctors.

The malnourished children tend to have lagged behind of 2-3 years compared to their healthy peers. Due to relatively low education, and often get ill, the productivity of such children are also low. Opportunities to get good jobs are small. Thus, the consequences of malnutrition, if



Picture 1.

Thinking Framework of Causes Nutrition Problems in Indonesia

Source: World Bank 2011, adapted from UNICEF 1990 & Ruel 2008

Nutrition problems are the result of many interrelated factors. Picture 1 illustrates the causes of child nutrition problems. There are two direct factors that affect the nutritional status of individuals, namely food and infectious diseases, both of which affect each other. The first direct cause is the consumption of foods that do not meet the principles of balanced nutrition. The second immediate causative factor is infectious

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there is no improvement made, especially during 1000 HPK, can make the family poor or poorer.

The data obtained shows a summary of data on nutritional problems in Indonesia based on Basic Health Research (Riskesmas) in 2007-2010 and 2013. The most basic error in the picture is the term of malnutrition and malnutrition in the index BB / U which should be weight Less (underweight) and very less weight (severely underweight). A child weighing less is not necessarily a nutritional less or bad because the largest percentage of the data is short or very short. This is reflected by the low percentage of poor and bad nutritional status (in the picture called thin and very thin). Bandung City Health Office is one that has not socialized the importance of MPASI for toddlers. As one of the densely populated city, it is important to socialize early on to overcome malnutrition in children.²

The purpose of this study is to determine the preparation and implementation of branding strategy undertaken by the National Health of Bandung in forming brand knowledge and community understanding of the importance of MP-ASI early on.

MP-ASI is the second baby food that accompanies breastfeeding. Breastfeeding food is a food given to infants aged 6 months or older because breast milk is no longer meets the baby's nutritional needs. Breastfeeding supplementary food should be adjusted for children under five. It should be given gradually and varied, starting from thick porridge, fruit juice, fresh fruit, crushed food, soft foods and finally solid foods. Breastfeeding foods are given to infants in addition to breast milk.

The functions of complementary foods, among others, are to introduce new types of food, to meet nutritional needs that can no longer fulfilled by breast milk, to form the body's defense and development of immunological systems against food and beverages. MP-ASI can also train the development of infant (motoric and emotional), because 6-month-old baby has shown signs of ready to eat that has been supported by physical development, such as the strength of the neck in supporting the head, an ability of trying to sit, and begin to bite the object he/she is holding. The baby also has a fine and coarse motor response.

Food arrangements are good for maintenance, recovery, growth, and physical activity. It should be noted, considering age of 0-24 months is a period of rapid growth and development, which often be called as golden period or critical period. According to the MOH RI (2006), the golden period can be realized if at this time the infants and children get the appropriate nutrient intake for optimal growth. Conversely, if infants and children do not get food according to nutritional needs, then the gold period will turn into a critical period that will disrupt the growth of infants and children, starting from this time and the next.

In dealing with the case, the context of communication is certainly needed to support the MP-ASI to be understood by parents, especially mothers of children. In connection with planning strategy branding of MP-ASI, communication can certainly serve as a bridge that provide information to the community where the information needed can be delivered properly and overcome the problem of malnutrition in children. Communication is one tool that can be used to convey the message well with a good communication strategy that will certainly have an impact to achieve the desired goals.

Brand

According to American Marketing Assosiations (AMA), which quoted by Kotler (1997), "Brand is a name, term, sign, symbol, or design of a seller or groups of seller and to differentiate them from those of competitors ". While Keller (2003) says that "A brand in terms of having actually created a certain amount of awareness, reputation, prominence and so on in the marketplace". According to Kapferer (1997: 46), most branding activities are under the control of the department of marketing and communication, whereas branding is a whole set of elements that exist in a company, institution, or organization that brings the brand's values.

However, Hedlund (2003) summarizes some definitions of brands from the customer's point, among others Lagergren (1998), which stated that brand is a quality assurance. Kapferer (1997) also stated that the brand is a source of value for consumers and is a source of value for the company. Brand will exist if there is a perceived risk.

A brand has six levels according to Kotler (1997), namely:

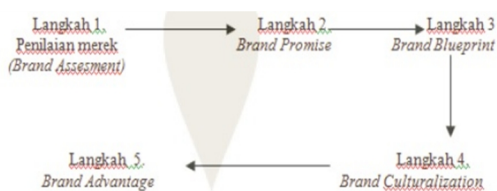
- 1) Attribute,
- 2) Benefits
- 3) Value

²<http://fakultaskesehatanmasyarakat.web.unej.ac.id> diak
sespada 2 Mei 2017 padapukul 17.10

- 4) Culture
- 5) Personality
- 6) User

Strategy Branding

In a branding concept, what needs to be seen is not only to make our marketing target choose us in a market full of competition, but also to make the marketing prospects see our brand as the only one who can overcome or provide solutions for them. Based on that, then in building a brand required appropriate branding technique (Knapp, 2001: 15), including: differentiation, relevance, esteem, awareness, and mind. Knapp (2001: 21) suggests about brand strategy based on what he has studied. The brand strategy doctrine is a comprehensive action plan used by an organization to determine its essence, to create a brand paradigm, and gain a continuous competitive advantage. The Doctrine Brand strategy process is described as follows:



Picture 1.
Process Brand Strategy
Sumber: (Knapp, 2001)

Based on the picture above, Doctrine Brand Strategy is a brand action manually written and includes five main steps:

- A. Assessing the current brand situation and future prospects (Brand Assessment)
- B. Developing Brand Promise
- C. Creating a Brand Blueprint (blueprint)
- D. Completing the Brand Culturalization plan and the written brand strategy doctrine
- E. Determining Brand Advantage

Brand knowledge is information about the brand in the consumer's memory, along with associations related to the brand (Keller 1998: 46-48). Brand knowledge consists of two main components, namely brand awareness and brand image.

Brand Awareness

According to Aaker (1995) in FandyTjiptono (2007: 40), brand awareness is an ability to recognize or remember that a brand is a member of a particular product category. According to Durianto, (2004: 54) brand defines as awareness (brand awareness), which is the ability of a potential buyer to recognize, recall a brand as part of a particular product category.

Brand Image

After creating brand awareness, then the next step that needs to be done is to create a set of positive brand associations in the minds of consumers. The most powerful and interconnected brand associations will create a series called brand image. The more associations are interconnected, the stronger the image of the brand.

Methodology

The method used in this research is descriptive approach where the researcher only exposes an event or situation and acts as observer. Subject in this study is the Health Department of Bandung, particularly public relations division, while the speaker selected to explain about the branding strategy of MP-ASI is the head of Public Relations and Deputy of Bandung City Health Office.

Research with descriptive method is a problem-solving procedure, investigated by describing the state of the subject or research object (someone, institution, society, etc.) at present, based on facts that appear or as it is (Nawawi 2003: 63). Descriptive method has a central feature of focusing on phenomenon or actual social reality and describing facts on the ground as they are, accompanied by adequate rational interpretation.

In addition to the descriptive method, researchers used a qualitative approach. Qualitative research is a research approach used to examine natural objects in which the researcher is a key instrument. Data collection techniques are conducted in triangulation, inductive data analysis, and qualitative research results which emphasize the meaning of generalization (Sugiyono, 2012).

Qualitative research aims to explain the phenomenon deeply. If the data obtained is deep and able explain the phenomenon being studied, then there is no need to look for other sampling. Qualitative research put more emphasis on the problem of data depth and not on the number of data (Kriyantono, 2007).

The data collection method used in this research is some techniques, such as in-depth

interview and non-participant observation. Meanwhile, the data which collected later, according to its type can be divided into two categories, namely primary and secondary data. Analytical technique used is qualitative data, meaning that data obtained in the study will be reported as it is, then analyzed descriptively to get a detailed picture of what things encountered by researchers during the process of data collection.

Discussion Result

In the results of this discussion, the researchers will describe the findings obtained by researchers in the field resulted from interviews, observations and literature study on branding conducted by Bandung City Health Office in forming brand knowledge on MP-ASI program. Researchers conducted research in April to May 2017 in Bandung Health Municipal Department, located at Jalan Supratman No. 73, Citarum, Bandung. Here are the findings of data that researchers get through interviews with interviewees and observations on the preparation and implementation of branding strategy of MP-ASI program.

Based on observation data and interviews that have been done about the preparation and implementation of branding strategy of MP-ASI in forming brand knowledge as a program that must be applied for mother who have baby child, researcher used concept which expressed by Knapp as doctrine brand strategy to analyze result of data discovery.

Brand Assessment

Associated with consumer research, so far in the framework of preparing the branding strategy, Public Health Division of Bandung City did not do consumer research specifically to find out how the public can understand about the importance of MP-ASI. According to Knapp (2001: 53), brand assessment is defined as all objectivity that becomes the first step in branding strategy. At this stage, the company or organization should take several steps that can be used as a valuation process, such as consumer research, current marketing strategies, business environment reviews, customer transaction analysis, market research and competition trends and technology transfer analysis.

Brand Promise

The vision of Bandung Health Department in forming its brand knowledge is to realize Bandung Healthy City that fair and independent. From the analyzes and solutions that have been

described before, a socialization campaign of MP-ASI made by the health service in cooperation with IDAI and AIMI which aims to inform and introduce the MP-ASI to the community. In the design of persuasion media (social campaign) about introducing an appropriate MP-ASI, it is necessary to have a proper design strategy so that messages will be delivered and well received effectively by mothers. A good design strategy will produce an expected effect.

According to Knapp (2002: 80) brand promise is a true brand carries and the core of its differentiation. Brand promise must communicates three inherent attributes, namely: (1) Something done, (2) Warranty to be expressed, (3) And future achievements.

Brand Blue Print

In order for information to be well received by the recipient, a communication approach is required in the information media about the importance of introducing appropriate MP-ASI, which aims to persuade, influence, and change the parent's behavior and thinking, especially the mother. Researchers suggest a strategic activity to be done by the Health Department of Bandung on how MP-ASI can be received by the right people, which is through the socialization to the people (especially, mothers) in Bandung, for example by doing counseling about the importance of MP-ASI at the activity of Posyandu, disseminating information about the importance of MP-ASI, and explaining the big impact of implementing program of MP-ASI to children.

Using Brand Ambassador

Bandung City Health Office in branding program of MP-ASI can use brand ambassador to attract parents to apply the MP-ASI, for example, a popular singer Andien Aisyah who uploaded photos and videos in her instagram account on giving the MP-ASI to her child. It would attract people to similarly applying MP-ASI for their children.

Branding in Social Media

Another activity that can be done by Bandung City Health Office is conducting a campaign in social media, for example by using hastag #MPASIforgoodfuture with assisting of brand ambassador and do a massive socialization on facebook. The existence of this activity will make MP-ASI is better known in the community.

In the whole set of brand strategy doctrines, brand promise is based on the question of "how are we going to communicate the brand?". Brand name is the first and largest

expression of a brand (Knapp, 2001: 122), if a brand has a strong name, then building a brand character will be easier.

Brand Culturalization

Based on the SOP provided by the Public Relations Division, researchers still encounter problems. This is because SOP delivered only orally. It will become better and realized if the regulation is printed and pasted to be easily remembered by employees of Bandung City Health Office itself. Based on observation, researchers apparently see the lack of hospitality addressed by employees as residents or community.

Conclusions

If the previous Bandung Health Office only has the SP of the importance of socialization of MP-ASI to the public, Public Relations Division of the National Health Office of Bandung realized that the socialization of MP-ASI program still needs to be developed in disseminating and applying of MP-ASI to the community. This study discussed about the preparation and implementation of Strategy Branding Program MP-ASI in forming brand knowledge based on the doctrine brand strategy as proposed by Knapp.

Based on the results of interviews conducted by researcher, Public Relations Division Bandung City Health Office realized that MP-ASI program needs to be well socialized and true to the community. This research discussed about the preparation and implementation of branding strategy of MP-ASI program in forming brand knowledge. The purpose of this study is to determine the preparation and implementation of branding strategy undertaken by the National Health of Bandung in forming brand knowledge and community understanding of the importance of MP-ASI in early on.

Based on the result of preparation and implementation of MP-ASI strategy, Bandung City Health Office still needs to do a better strategy designed to socialize MP-ASI program. Some things that still have not been done optimally and missing in action are evident from the socialization of the MP-ASI program that has not been fully done to the people of Bandung city. Whereas, in the Ministry of Health's decree and Presidential Regulation number 42 (2013) on the National Movement for the Acceleration of Nutrition Improvement as a form of combating

malnutrition and Combat malnutrition problem that is with the application of MP-ASI for children since early on.

Basically, branding is a must in the current era of competition in marketing products, programs, and a company. The formation of brand knowledge in the minds of people or consumers becomes a necessity in order to be remembered and applied, so as to achieve good goals in the future.

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