



(Pages : 2)

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Reg. No. :

Name :

**IV Semester M.B.A. (Full Time) Degree Examination, July 2009
(2006 Scheme)
RURAL MARKETING**

Time : 3 Hours

Max. Marks : 60

PART – A

Write short notes on **any five** questions. **Each** question carries **three** marks.

(5×3=15 Marks)

1. What do you mean by rural marketing ?
2. What is seasonal demand ?
3. What do you mean by innovation adoption ?
4. Who is a “bargain hunter” ?
5. Explain “Concentrated strategy”.
6. Explain the meaning of “line pruning”.
7. What is the role of state Handicrafts Development Corporations ?
8. Differentiate penetration pricing from skimming pricing.

PART – B

(3×10=30 Marks)

Answer any **3** questions elaborately. **Each** question carries **10** marks.

9. Is Rural India becoming part of Cyber India ? If yes, how ? Will it sustain the IT revolution ?
10. What is positioning ? Suggest suitable positioning for the following :
 - a) Primary Health Center.
 - b) Nagarjuna Fertilisers.
 - c) Nyle Hair Shampoo.
11. “Explain the role of co-operatives for the development of Rural India”.
12. Develop a marketing strategy for small industries.
13. What are the alternative forms of promotional mix that suit to rural marketing ? Discuss in detail about any 2 promotional campaigns.

P.T.O.



Read the following case carefully and answer the questions.

IGNORANT MOTHERS & DIARRHOEA

Rural Mothers do not recognise a serious diarrhoeal problem as soon it occurs though the disease kills some 4000 young children in India every day.

The study sponsored by the United Nations International Children's Educational Fund (UNICEF) at the request of the Union Government revealed the following :

- The Mothers usually recognize the disease only when the child has passed 4-5 loose motions in the course of a day. And she gets concerned enough to act only when the frequency increases to six (or) seven such motions.
- Rural Mother has a strong inclination to see medical treatment for the child hit by diarrhoea.
- Though a wide array of medicines, pills and even injections were prescribed only six percent of patients received Oral Rehydration Therapy (ORT).
- On an average Mothers spent about Rs. 38/- on treatment for a single diarrhoea episode.
- Dehydration is more noticed than understood. Even those who perceive loss of fluid believe it be a case of non-absorption of water that was ingested instead of net loss of fluids from the body.
- Home based fluids, if promoted, or likely to be accepted by most mothers as a proper responds to childhood diarrhoea. Since rice, sugar (or) gur is available in 75-83% of all rural households, it is possible to successfully promote the use of home based fluids.
- Mothers, however, have reservations about adding sugar and salt to certain types of fluids and water. Glucose water and rice water emerged as the favoured fluids. It therefore suggests, that communication strategies be designed to reach the mother so that she recognize a single loose motion as an indication of a potentially serious problem at act promptly giving her child extra fluids to drink.

Questions :

- 1) What does the case suggest to rural Marketers, particularly to pharmaceutical companies and the Government ?
 - 2) What kind of promotion activities can you suggest to Pharma companies ? To Government ?
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