Contraceptive Social Marketing



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ZAIRE: Contraceptive Social Marketing Project

CN & Population Reference Bureau [PRB] he Zaire Contraceptive Social Marketing Project

demonstrates that a sizeable market for condoms exists in this Francophone African country, and that health-related behavior can change in a relatively short period of time. During the project's first four years, annual condom sales increased from less than 1 million in 1988 to more than 18 million in 1991. Sales of vaginal foaming tablets also grew by 800 percent during this period. Condom sales were stimulated by a companion project that promoted AIDS prevention among youth and young adults using mass media, concerts, and other promotional activities. Despite political and ecomonic turmoil in Zaire and a reduction in donor funding, the social marketing project continues under the management of the Zaire Family Health Association (ASF-Zaire), a local non-governmental, non-profit organization.

NATIONAL CONTEXT

Although Zaire has not adopted an official population policy, the government supports family planning services and maternal and child health care. In 1972, the government approved the establishment of the Zaire Association for the Well-Being of the Family² (AZBEF), a private organization that was originally created to coordinate family planning activities. Today, AZBEF provides family planning services in government facilities and other sites and is active in staff training, communication, and in-school education. In 1982, the Department of Public Health established a Family Planning Services Project. Over the last 10 years, this public sector project has become the de facto national agency for managing, coordinating and implementing family planning activities.

Child health remains a serious problem: one in six children dies before his/her fifth birthday. AIDS is also a major concern, although HIV seroprevalence-estimated to be at 5 to 7 in the capital of Kinshasa—is low compared to that of neighboring countries. Studies indicate that the current level in Kinshasa has been holding since 1986. Rural seroprevalence is still largely unknown. The government does have a comprehensive AIDS prevention policy implemented by the National AIDS Program, and is

known in Africa for having been particularly responsive to the establishment of AIDS programs as early as 1985.

Zaire is currently undergoing considerable political and economic turmoil. In September 1991, incidents of looting and violence resulted in a loss of many Zairian lives, a massive evacuation of foreigners, and a withdrawal of most foreign aid. Because of continued outbreaks of violence and a deteriorating infrastructure, commerce has nearly ground to a halt.

CONTRACEPTIVE SOCIAL MARKETING **PROJECT**

Owing to the Zaire Social Marketing Project, in just three years contraceptive sales soared to the highest level of any country in sub-Saharan Africa. Before the project started, fewer than 200,000 condoms annually had been sold in pharmacies or given away in family planning clinics in Zaire. In the project's first year, condom sales rose to 943,000. By 1991, condom sales had skyrocketed to more than 18 million. Sales of vaginal foaming tablets also grew rapidly, from 246,000 packets in 1988 to 1.9 million in 1991. In 1992, the project introduced oral contraceptives. By the end of that year, nearly 400,000 cycles had been sold.

The project was initiated in 1987 by Population Services International (PSI) in conjunction with the Zaire Ministry of Health and the National AIDS Program. After a year of test marketing condoms in Kinshasa, PSI ex-

DEMOGRAPHIC INDICATORS, 1992

Population	37.9	million
Birth Rate	46.0	per 1,000 population
Death Rate	14.0	per 1,000 population
Growth Rate	3.1	percent
Population Doubling Time	22.0	years
Infant Mortality Rate	83.0	per 1,000 live births
Total Fertility Rate	6.1	births per woman
Contraceptive Prevalence	(not available—roughly	
	2 percent in 1982-84)	

panded its sales area to 15 cities, with spill-over into nearby peri-urban and rural areas. By 1991, the project covered 30 cities and was active in all provinces. Activities during 1988-1991 were funded by the U.S. Agency for International Development (USAID), with annual budgets of about US\$1 million. Budget estimates exclude the costs of contraceptives which were all donated by USAID.

A major factor in the project's success was the extensive publicity on AIDS prevention generated by the AIDS Mass Media Project, initiated by PSI in 1988 with USAID funding. Zaire's accomplishments show that the added investment in intensive promotion pays dividends in increased product sales and greater public awareness of both AIDS and family planning issues.

Owing to the perceived sensitive nature of the subject matter, the government was initially hesitant to allow project staff the autonomy they needed to expand and to function freely in the marketplace. By 1989, however, the government signed a decree granting autonomy to the project, in essence giving it free reign to expand as it deemed appropriate.

Later, the Governor of Kinshasa signed a document granting non-governmental (NGO) status to ASF-Zaire, enabling it to become the managing organization. Because of the civil disorder, USAID terminated project funding and allowed the NGO to use sales income from existing project commodities to support operating costs. Despite transport difficulties, hyperinflation, a packaging shortage, and the general hiatus of commercial activities, ASF has managed to continue condom sales at close to 50 percent of previous levels. Due to reduced funds and concerns about personal safety, all promotional activities have been suspended.

Social Marketing Techniques

Much of the project's success can be attributed to its use of state-of-the-art marketing techniques. Market surveys, focus group discussions, and consumer intercept surveys were used to plan, monitor, and evaluate the project. The Mass Media Project used a two-phase, longitudinal, program-impact study to compare changes in knowledge, attitudes, and practices between one project region and a control region with no special promotional activities. Sales reports provided a clear indication of behavior change.

The marketing strategy made contraceptives as affordable, accessible, and attractive as possible. Commercial brands of condoms were prohibitively expensive; 99 percent of all Zairians could not afford to buy them. The

free condoms available in family planning clinics had few takers, in part because the clinics were hard to reach and the perceived quality of the condoms was suspect because they were free. By offering sleekly packaged, inexpensive contraceptive products at well frequented outlets, the Contraceptive Social Marketing Project removed many of the barriers to use.

Project managers have always paid close attention to the four major elements of social marketing, known as the "4 Ps": product, price, place, and promotion.

■ Product

The project initially distributed condoms and vaginal foaming tables. Brand names and packaging were developed after careful research. Condoms are called *Prudence* to stress their role in preventing both AIDS and pregnancy. The slogan "For the self-confident man" seeks to counteract men's reticence to use condoms. Foaming tablets are called *Graine*, or seed. All promotional products carry the project's logo for easy recognition.

■ Price

Project planners set a low price for *Prudence* condoms—about 35 U.S. cents a dozen, or less than half the price of a bottle of beer. Maintaining low prices has contributed to high sales volume, resulting in greater profits for retailers and motivating them to maintain adequate inventory levels.

■ Place

The number of commercial outlets carrying contraceptive products reached over 7,000 in 1991, but owing to current cutbacks is now believed to be around 4,000. Outlets include pharmacies, market stands, shops, hotels, bars, restaurants, street vendors, and river barges. Coverage is broad: 90 percent of pharmacies and 75 percent of medical centers in Kinshasa carry the products. A team of 20 salesmen, trained in sales techniques and AIDS prevention, visit the retail outlets, give out free samples, and explain correct usage. Pharmaceutical wholesalers ensure distribution to retail outlets not covered by the sales staff.

■ Promotion

Since the broadcast media do not allow condom advertising, point-of-purchase displays are the main promotional vehicle. Promotional items, including key rings, bartender aprons, calendars, hats, and signs, were given away to promote brand recognition and encourage people to try the product. This personalized approach

probably would have generated gradual increases in sales. The extremely rapid ascent in condom sales can be attributed in large measure to the AIDS Mass Media Project.

AIDS Mass Media Project

The 1988-1991 AIDS Mass Media Project sought to reduce misconceptions about AIDS transmission, educate the public about risk-reducing behaviors, and promote more sympathetic treatment of people with AIDS. The USAID-funded campaign was conducted in Kinshasa and four regions by PSI in collaboration with the National AIDS Program.

The campaign initially focused on youth ages 12 to 19 because of their high-risk behavior, and then expanded to those aged 20 to 30—prospective parents who could unknowingly transmit AIDS to their newborns. Media channels included:

- popular songs by well-known singers (two of whom subsequently died of AIDS), which were disseminated through concerts, music videos, and cassette tapes;
- radio and television spots broadcast in the five national languages during prime time;
- a four-part drama aired on radio and television;
- tape recordings of songs and AIDS messages played on public buses; and
- promotional materials consisting of student notebooks,
 T-shirts, buttons, caps, and calendars.

A national AIDS logo, slogan, and music jingle were used to provide a unifying theme. The campaign had a powerful effect. For example, two-thirds of the target audience reported that they had watched the TV drama, and three in four of these viewers said they intended to change their behavior.

To reach rural areas, project staff trained the producers of four regional radio stations on AIDS prevention and communication techniques. After one year of collaboration, the regional radio stations had produced and broadcast 28 feature programs, 22 spots, eight dramas, and two songs. A follow-up survey found that villagers in the regions with special radio broadcasts were much more knowledgeable about AIDS transmission and were more likely to accept condoms for AIDS prevention.

KEYS TO SUCCESS

- Consumer research. The project used research to guide strategic decisions, formulate messages, and develop appropriate materials.
- Synergistic projects. Initiating an HIV/AIDS Prevention Mass Media Project along with a Contraceptive Social Marketing Project focusing on condom distribution is mutually reinforcing.
- Emotional appeal. Millions of Zairians were moved by popular songs about AIDS and a drama broadcast on radio and television.
- Persistence. Project staff managed to overcome various logistical and bureaucratic obstacles by doggedly pursuing their goals and devising ingenious solutions.

PROGRAM ASSESSMENT

■ Impact

Given the cultural and logistical obstacles, the project made remarkable progress in just four years of operation. At the project's peak in 1991, contraceptive sales accounted for a contraceptive prevalence rate of roughly 2.5 percent, representing a doubling of the estimated contraceptive prevalence prior to 1987. Furthermore, condom sales, estimated to be at approximately 31 million through 1991, are believed to have contributed to a reduction in the spread of HIV infection.

In general, the project showed that it is possible to combine AIDS prevention and family planning activities. An intercept survey found that 27 percent of condom purchasers in pharmacies and clinics stated they were using condoms to prevent pregnancy, and 72 percent were using them for both AIDS and pregnancy prevention. The survey also found that family planning messages had been well understood: all the women purchasing foaming tablets confirmed that the tablets were for contraception and realized that they are ineffective in preventing AIDS.

Evaluation studies by the AIDS Mass Media Project found several significant changes: increased awareness

regarding asymptomatic carriers; increased acceptance and reported practice of abstinence and mutual fidelity; and increased knowledge, acceptance, and reported use of condoms for AIDS prevention. Another major impact of the project has been a more relaxed attitude among broadcasters regarding discussion of condoms on the air. This receptivity could extend to other contraceptive methods in the future.

■ Cost Recovery

To maintain the low prices, the project has been heavily subsidized. However, the benefits of educating the public about AIDS prevention, reducing HIV transmission, and involving men in family planning may more than compensate for the higher initial costs per user. Between 1989 and 1991, the cost per couple-year of protection (CYP) was \$18—typical of the average cost per CYP for social marketing programs in developing countries, but lower than many African programs. By 1991, costs per CYP had decreased to \$10.50. Currently, revenues from condom sales are paying for the majority of operating costs, although the project is selling about half the number of condoms as it did in 1991. Assuming the economy rebounds, the project shows promise for increasing cost recovery as it matures and expands over time.

■ Troubleshooting

Both PSI projects have managed to succeed—largely by sheer persistence—despite numerous obstacles. One major problem facing the project was the lack of research facilities and advertising firms to conduct market research and to develop messages and evaluate media campaigns. To overcome this obstacle, project staff enlisted university professors and social science students, and taught them the key principles of survey design, brand development, and impact evaluation.

FUTURE CHALLENGES

Until the current political unrest and economic chaos are resolved, the project cannot continue to implement an effective marketing campaign and cover large numbers of outlets adequately. Other obstacles—the poor transport system and weak health infrastructure—are likely to remain for some time.

The challenge for the future will be to increase sales while reducing per-unit costs through greater efficiency and economies of scale. Project managers are considering new products, such as oral rehydration salts and a higher-priced brand of condoms, which could generate additional sales income.

CONCLUSION

Against seemingly insurmountable odds, the Zaire Social Marketing Project rapidly ascended to the top echelon of contraceptive sales projects in Africa, only to see its achievements eclipsed by widespread political turmoil. Nevertheless, the ingredients of success remain and can be fully reconstituted once stability is restored in Zaire.

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