Getting to Know Key Audiences: Field Research that Informs Demand Creation Strategy

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In an Ideal World...

Slight scarcity can create demand and buzz for product.
Makambako Health Centre, June 2011
Problem Plaguing Many Countries

Diagram showing the balance between demand and supply.
A Not So Ideal World

Empty Waiting Areas

Idle Providers
Diffusion of Innovations

BRAND CAMP

NEW PRODUCT ADOPTION

I THINK I CAN I THINK I CAN

I'M KING OF THE WORLD

SMOOTH SAILING

OOF, I'M PATHETIC

JUST WORKING OUT THE KINKS

I HEARD ASHTON KUTCHER HAS ONE

I FOUND IT AT SAM'S CLUB

SIGH

WOW BRILLIANT

WHAT NEW PRODUCT?

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SKYDECKCARTOONS.COM
Stages of Change Models

- Different people need to hear different things…
Something for Everyone?

Women

Men

Adolescents and Guardians
When Demand Doesn’t Match Supply (or isn’t in the desired profile…)

- Investigate why
Example: Tanzania and Age of VMMC Clients
MCs by Age – All Delivery Models

62%*

* Only 23% aged 20 or above

38%
“Embe” Formative Assessment

- In 2011 MCHIP conducted a formative assessment to explore facilitators and barriers to VMMC service uptake by clients aged 20 and above in Iringa region.
- Conducted other “dip stick” surveys and key informant interviews over the past year.
- Issues fall into two categories
  - Socio-cultural barriers
  - Service delivery-related barriers
## Socio-cultural Facilitators and Barriers

<table>
<thead>
<tr>
<th>Facilitators</th>
<th>Barriers</th>
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</thead>
<tbody>
<tr>
<td>Positive perception of circumcised men by both men and women</td>
<td>Strong preference for circumcision at pre-adolescence</td>
</tr>
<tr>
<td>Community thinks of circumcision as “clean”, “hygienic”</td>
<td>Stigma associated with being circumcised after marriage, particularly after children (because of association between HIV/STIs and VMMC?)</td>
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<tr>
<td>Many women express preference for circumcised men</td>
<td>Fear of partners straying during the abstinence period</td>
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<tr>
<td>Women starting to talk to/try to convince their partners to seek VMMC</td>
<td>Lack of confidence in ability/desire to abstain for six weeks post-circumcision</td>
</tr>
<tr>
<td>Perception that circumcised men are better/more pleasurable lovers</td>
<td>Inability/lack of desire to take “off” the days needed to attend services and heal</td>
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Approaches – Build on Facilitators

- Greater engagement of female partners in making the case for VMMC
  - Increase in community mobilization and IPC directed towards women (and by women)
  - Print materials and radio designed to help women make the case to partners
- Reinforce positive perception of VMMC as “clean” and “hygienic”
- Allow women to say in their own words what they think of circumcised “lovers/partner”
- Use “satisfied clients” to make the case to other men and women
Address the Barriers (1)

- Try to mitigate link between HIV/STI prevention through VMMC and perceived promiscuity
  - Make additional case of VMMC as modern, clean, hygienic, free, preferred by many women (in community and print and mass media)
  - Link these attributes to being a good husband/father
Address the Barriers (2)

- Enhance communication and practical skills of both men and women to prepare for and implement the abstinence period
  - Prepare men and women in the community prior to service provision – to make family plan (IPC and radio)
  - Enhanced post-operative counseling and brochure with practical tips
## Service Delivery Facilitators and Barriers

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<tr>
<td>Availability of VMMC services is widely known</td>
<td>Loss of face associated with exposing genitals in public environment</td>
</tr>
<tr>
<td>Services perceived as high quality and safe</td>
<td>Loss of face in waiting with and being served along with younger people from the community</td>
</tr>
<tr>
<td>Community knows providers have been specially trained to provide VMMC</td>
<td>Service sites “overrun” with adolescents, particularly during campaign and outreach activities</td>
</tr>
<tr>
<td>Services are free</td>
<td>Services not always available when man is available</td>
</tr>
</tbody>
</table>
Build on Facilitators

- Continue to promote services as safe and free, offered by highly trained providers
- Use providers own voices to promote services via radio
Address the Barriers (1)

- Promote static sites as VIP services for adult men
  - May require moving away from MOVE-style high volume/assembly-line approach
  - Enhance privacy
  - Offer appointments
- Offer special service delivery days for older men during outreach/campaign activities
  - Tried that in November and February to limited effect because youth still came in larger numbers and providers did not turn them away
Address the Barriers (2)

- Offer separate waiting areas/service delivery areas
- Offer special hours for clients who need them
- Offer special mobile teams to serve older clients ONLY
- Consider static sites opened 6 days per week
When Something Doesn’t Work

- How will you know?
- Must keep retesting!
Revised Branding

Maisha ni sasa! Kuwa Msafi. Pata Kinga. Wahi tohara!
Take Home Messages

- Effective demand generation efforts require knowing your audience and adapting to their needs.
- When it isn’t working, investigate and make changes! Keep going..
Thank You