

Harnessing the Strengths of Local NGOs to Build the Condom Market in the Dominican Republic



CARISMA II

CARISMA, now in its second phase, is a regional social marketing programme which aims to prevent HIV and improve sexual and reproductive health in selected Caribbean countries. The programme promotes safer behaviours among at-risk populations, and works to improve the availability of quality, affordable contraceptives, including condoms. CARISMA is a development programme of the Caribbean Community (CARICOM), financed by the Federal Republic of Germany through the German Development Bank (KfW). See www.carisma-pancap.org.

The Best Practices in Social Marketing series aims to share learning from CARISMA with other regional and international social marketing organisations (SMOs), and their partners in government and non-governmental organisations (NGOs).

Introduction

NGOs are vital partners in distributing and generating demand for condoms in all CARISMA countries. To varying degrees, all of the SMOs in CARISMA utilise NGOs as distribution channels for both information and contraceptives. This study focuses on the experiences of PSI/Dominican Republic (PSI/DR), for whom NGOs are the cornerstone of their successful condom distribution and behaviour change communication (BCC) programme. Working directly with partner NGOs has provided a variety of benefits, including facilitating the rapid scale up of targeted social marketing interventions by capturing the insights and networks of local people; and helping to build the capacity of local groups, which will ultimately support the DR's national response to the HIV epidemic.

Aims of PSI/DR's programme under CARISMA:

- 1) Increase consistent condom use with all sexual partners
- 2) Reduce risky behaviours among priority populations
- 3) Improve the supply of affordable high quality condoms

While circumstances vary greatly from country to country and region to region, this case study provides useful insights for practitioners working towards similar aims. It examines:

- How and why PSI/DR began to work with NGOs;
- What works well in terms of the relationship between PSI/DR and their partner NGOs;
- The challenges experienced as the project developed; and
- Lessons learned along the way.

Background

PSI/DR first opened its office in 2003, with the aim of establishing the Pantè condom brand in the DR for HIV prevention. However, it soon became clear that working through existing commercial channels to distribute a socially marketed condom would not be an effective way of reaching the most vulnerable populations. Existing condom distributors did not see an economic benefit in promoting condoms to harder to reach groups.

Learning from this, PSI/DR's HIV prevention programme has since been based on a mutually beneficial arrangement: networks of local NGOs act as primary project implementers for both BCC and distribution activities, and alongside this, PSI/DR has worked to strengthen their organisational capacity. This has included training in fund management, budgeting, administration, sales, marketing, programming of BCC activities, and monitoring and reporting.

PSI/DR contracts NGO partners with particular expertise in working with the project's three main target groups: Commercial Sex Workers (CSW), batey* residents, or youth (aged 15 – 24 years). See the appendix for a full list of PSI/DR's current NGO partners.

Ultimately, the NGO approach has led to successful outcomes, with PSI/DR distributing more than 14 million male condoms (Pantè brand) per year on average. The model has proven to be particularly effective in targeting and reaching high-risk populations, while not threatening

sales in the commercial condom sector[†]. Over the course of CARISMA 1, PSI/DR demonstrated improvements in key behavioral indicators among target groups. For instance, condom use at last sex by CSWs with non paying partners increased from 58% to 84% between 2006 and 2008; condom use by youth at last sex with regular partners increased from 32% to 43% between 2004 and 2008; and use of condoms at last sex with a regular partner among batey residents increased from 64% to 88% between 2006 and 2008.

Recruiting the NGOs

From the outset, numerous local NGOs expressed interest in participating in the programme. PSI/DR selected its partners according to several criteria: successful past experience of working with target populations to address social needs; ability to carry out STI/HIV prevention work in their communities; and leadership in Dominican society. The assessment also included an analysis of the NGOs' legal status, and interviews with managers and technical staff to assess their capacity in terms of programme, administrative and financial management. Upon successful completion of the assessment, NGOs were asked to submit proposals describing the activities and strategies by which they planned to reach the target population, as well as an estimated budget and work plan. PSI/DR then worked with them to clarify and refine their proposals.

From an initial cadre of six NGO partners in 2003, the programme now includes a total of 13 local

NGOs distributing and promoting condoms as part of CARISMA. Among the CSW NGOs, over 200 sales agents have been trained to date, covering over 3,000 sales points. Batey NGOs are working in 130 bateyes, with over 200 sales promoters trained, and more than 600 points of sale.

"We have helped women who have suffered violence when their clients won't use condoms: now, they are ready to report such clients. The promoters have many similar stories. We have also really improved the willingness of businesses to stock condoms. We give it to them at a better price. At the start, Pantè condoms were only in motels, but now you find them in pharmacies, colmados, and even small stalls selling food near where I live and work."

Condom Promoter from CEPROSH, a CSW NGO

Mechanisms

The Role of the NGOs

NGOs are responsible for selling condoms to sales outlets in selected territories assigned by PSI/DR. For example, NGOs working with CSWs target sales to outlets in *hot spots* (areas where sex work is concentrated) and NGOs working with batey communities target their sales to a wide range of retail outlets located in bateyes.

From the outset, profit margins for Pantè condoms have been set deliberately high to provide NGOs and their promoters with incentives that contribute towards their financial sustainability. The project's two donors, USAID and KfW, subsidize the price to ensure that the price at point of sale is affordable to the three target group. A 2009 study (ibid) found that Pantè was one of the lowest

* Settlements primarily occupied by Haitian immigrants/sugar cane workers

[†] See www.carisma-pancap.org/attachments/186_EUROMONITOR%20REPORT.pdf

priced condom brands on the market, being sold at around US\$0.05 per unit.

PSI/DR sells condoms in two different forms: dispensers containing 24 packs of four condoms each (96 units) for small street kiosks and other shops in high risk zones; and individually in bulk (1,920 units) to motels, brothels and other sex establishments. Bulk sales have risen steadily over the years and now constitute nearly 70% of total Pantè sales.

Figure 1. A Pantè promotional poster



Pantè condoms are distributed in two types of outlets, traditional (pharmacies) and non-traditional (small shops and other informal vendors located near *hot spots*). This allows the product to address two fundamental objectives of the CARISMA programme: increased access to and availability of condoms.

Condom marketing to non-traditional outlets is primarily focused on establishments where sexual negotiations and activities are carried out, such as motels, brothels, car washes (which often provide additional services for

Dominican drivers), bars and nightclubs. The policy environment in the DR is supportive of this effort: for instance, there is a legal requirement that condoms be available in all hotel and motel rooms.

In addition to distribution activities, partner NGOs are responsible for most of the project’s interpersonal communication activities. They organize regular promotional and educational activities focusing on safer sex and correct condom use with target populations, along with the distribution of BCC materials and other promotional items (see figure 2). Partner NGOs also collaborate closely with PSI/DR in the development of project BCC materials and the execution of research activities.

Figure 2. NGO members perform a skit highlighting safer sex, targeting nightclub clientele.



Figure 2 illustrates a drama skit performed in a nightclub, highlighting the importance of condoms. At the end of the skit the facilitators hand out promotional kits which include two Pantè condoms, one lubricant tube or sachet and two educational brochures on steps to correct condom and lubricant usage.

“There has always been open communication between PSI/DR and ourselves. On a personal level, we like doing the work, because we see the results with sex workers. One of the main things we have done is improve the self-esteem of sex workers, and their negotiation skills.”

Condom Promoter from CEPROSH, a CSW NGO

Communications activities such as these are typical of those conducted by partner NGOs. Their aim is to tailor messages to appeal directly to the target audience, responding to what motivates them, and using local language and humour. The activities are conducted in places and at times that suit the target population.

PSI/DR’s Role

PSI/DR has a number of roles in this arrangement:

- To **coordinate NGO committees** for each of the target groups.

The aims of these committees are to build consensus around programme strategies, and ensure regular communication and coordination with and among member NGOs. It is also an opportunity for NGO community-based health workers and peer educators to provide feedback. The involvement of NGOs in these committees ensures that PSI/DR has access to immediate and honest feedback from members of target audiences, as many members of NGOs come from the target audience themselves. This close relationship facilitates a deeper understanding of customer perceptions and needs.

- To organize **regular sales trainings and quarterly meetings** with NGO Programme Managers.

This includes discussing institutional issues, collaboration, reviewing sales performance metrics, discussing research findings and sharing best practices.

- Ongoing coordination with **key governmental agencies**.

These include COPRESIDA (Consejo Presidencial del SIDA) and DIGECITSS (Dirección General de Control de Infecciones de Transmisión Sexual y SIDA). This ensures that the appropriate distribution channels are utilized to reach priority populations, for both Pantè and free condoms (no-logo condoms provided by the Dominican government). It also enhances the NGOs' ability to present a united front to government decision makers, allowing them to communicate a strong and coherent case for the needs of the target groups they represent.

- **Procuring, storing and packaging condoms.**
- Contracting a wide range of **research** and impact evaluation studies.

Monitoring

A crucial role for PSI/DR is **monitoring** NGOs' activity. NGO partners are contracted to meet specific targets, and performance is closely monitored through the following mechanisms:

- An **annual NGO re-contracting process** which allows PSI/DR to resolve emerging issues such as high staff turnover, pricing anomalies or

unauthorized expansion of sales territories.

- PSI/DR's **management information system (MIS)** captures data reported by NGOs on a monthly basis, enabling the tracking of sales points by geographical region. This includes details such as NGO name, type of sales point, sales person, and an accurate history of BCC activities carried out.
- PSI/DR's **Sales Supervisor** is required to visit sales points throughout the country on a regular basis. This is done to verify sales trends, monitor product prices, and support the respective sales forces' efforts to maintain and increase the client base.
- **BCC activities** are also monitored to ensure that high quality standards are met. This is done through regular monitoring visits to observe and give feedback on performances.

Resources required

A number of core resources are required to implement this collaborative approach, including:

- **Specialized staff** to assess, contract, supervise, and provide technical and administrative assistance to NGOs, and to develop strategies and materials for targeted BCC interventions.
- **Strong administrative and financial systems** capable of supporting and monitoring NGO programmes.
- Adequate **financial resources** to conduct research; develop BCC materials; and procure, store, and distribute condoms to NGOs.

Benefits of the local NGO model

There are a number of benefits to this approach, including:

- Better **targeting** of condom distribution by utilizing NGO personnel and their informal channels/contacts in targeted high risk communities.
- Enabling **rapid project scale-up**.
- **Complementing the commercial condom market**, rather than competing against it. The commercial market targets more expensive, branded condoms to higher-income segments of the population.
- Strengthening the **capacity of local NGOs** through technical assistance from PSI/DR, e.g. promoting improved internal control systems and transparent management of funds in their budgeting and reporting.
- Increased **sustainability for NGOs** from profit margins earned through condom sales. This results not only in better condom social marketing, but has a positive spillover effect for NGOs in their other ongoing programmes and fundraising efforts.
- **Complementing investments** in existing HIV prevention programmes in the government and NGO sectors by improving the level of coordination between different parties.

Challenges of the local NGO model

As well as a number of benefits, a number of challenges have also arisen under this approach:

- Local NGO **administrative and financial capacity is extremely uneven**. It has been necessary for PSI/DR to dedicate significant resources to setting up and maintaining appropriate financial and administrative controls.
- Historically, partner NGOs have not always respected set **geographical sales boundaries**, and PSI/DR has been required to play a mediating role in resolving ongoing tensions between NGOs working with the same target groups.
- PSI/DR devotes a **considerable amount of time to training and monitoring** NGO performance. This is extremely important in terms of ensuring quality, but requires considerable resources, particularly given the high turnover of project personnel working for partner NGOs.
- **Financial instability** faced by several local NGOs has resulted in implementation delays, particularly when activities are co-funded.

Keys to Success

Establishing a collaborative relationship between PSI/DR and NGO partners. PSI/DR has worked hard to build an environment of mutual respect and trust.

Regular opportunities for the NGOs to meet and share experiences. This is done at quarterly committee meetings and other centrally organized fora.

Flexibility: Recognizing the need to adjust to evolving project implementation and market dynamics, while simultaneously providing a clear structural framework for activities (such as setting quarterly sales and BCC targets). For instance, in the bateyes, a proliferation of free condoms has forced the batey NGOs to shift their attentions to promotional and educational work (rather than Pantè sales).

Regular monitoring of all project activities. In some cases this has involved PSI/DR staff attending up to 50% of the promotional and educational activities implemented by NGOs.

Adapting training. This has been important to meet the NGOs' evolving needs, e.g. instituting and using information from the MIS; sharing best practices and updates on the latest techniques in HIV prevention; and coaching to improve their educational drama performances.

Meeting the needs of target groups. PSI/DR, following one of the central principles of social marketing, have sought insights into the needs, concerns, and behaviours of their target groups based on research *and* the insights of NGO partners.

Maintaining accessible pricing. It is important that condoms are affordable to target audiences.

Thanks

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Appendix

PSI/DR's NGO Partners

Batey NGOs include:

- Asociación Dominicana de Planificación Familiar (ADOPLAFAM)
- El Movimiento Socio-Cultural para Trabajadores Haitianos (MOSCTHA)
- Centro de Desarrollo Sostenible (CEDESO)
- Centro de Investigación y Apoyo Cultural (CIAC)
- Batey Relief Alliance (BRA Dominicana)

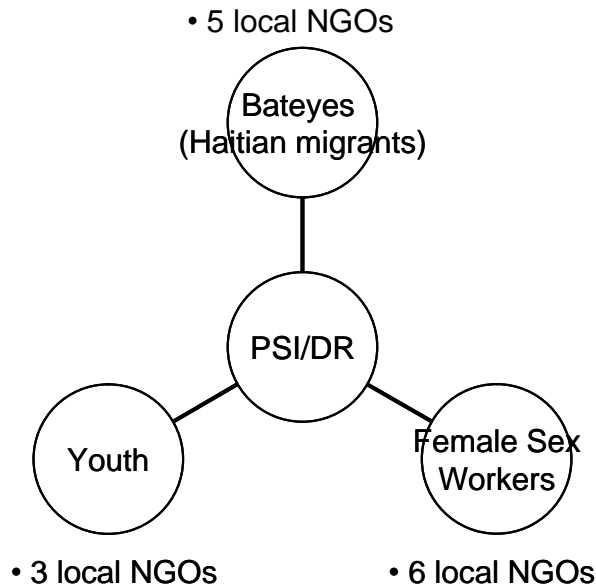
CSW NGOs include:

- Centro de Orientación e Investigación Integral (COIN)
- Asociación Dominicana de Planificación Familiar (ADOPLAFAM)
- Asociación Dominicana de Pro bienestar de la Familia (PROFAMILIA)
- Centro de Promoción y Solidaridad Humana (CEPROSH)
- Movimiento de Mujeres Unidas (MODEMU)
- Mujeres en Desarrollo Dominicana (MUDE)

Youth NGOs include:

- Centro de Investigación y Apoyo Cultural (CIAC)
- PROSOLIDARIDAD (Catholic Church Based Organisation)
- FUDOPROSA, Consorcio Mundo Joven

Figure 3. Configuration of NGOs



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