

**First session:** 112. Fertility, Family Planning, and Reproductive Health: Policy and Government Intervention

**Second Session:** 116. Men’s Fertility, Family Planning, and Sexual and Reproductive Health

**Title:** Product, Placement, and Price: Generating mixed-methods data to inform a total market approach in Tanzania

## **Background and research question**

The family planning market in Tanzania is characterized by a high level of government and donor interventions. Recent assessments funded by the Gates Foundation, UNFPA, and USAID have highlighted the degree to which condom programs rely on commodities donated by international actors (Field-Nguer et al., 2015; Baleva et al., 2016; Mann Global Health, 2017). For example, a recent Gates assessment found that while the overall market for condoms had stayed relatively constant between 2010 and 2017, the share of free condoms supplied by donors increased from 68 to 76 percent of the condom market (Mann Global Health, 2017).

This increasing reliance on subsidies places the condom market’s sustainability in jeopardy and could threaten supply if donors make sudden programmatic changes. The use of a total market approach (TMA) can help address these concerns by using data to improve the targeting of free and subsidized commodities to create space for increased sales of sustainable, commercial condom brands without decreasing access.

A TMA involves coordinating strategies and investments to increase a market’s equity, efficiency, and sustainability. A TMA considers all market actors, helps stakeholders understand demand and supply-side dynamics, and uses market data to inform decision-making. A TMA lens helps governments and donors to allocate their resources so that they complement rather than compete with private investments and assists commercial suppliers to identify opportunities to grow their market share.

A critical step in the development of a TMA is to explore consumer behavior so that products can be targeted to specific user groups. Understanding the relative importance of price, location, and brand appeal in consumer decisions to obtain a condom from a particular source is particularly helpful in determining who needs free or subsidized condoms. In Tanzania, there is currently little information regarding users’ willingness to pay (WTP) for condoms and their condom selection motivations, nor the availability and average price points of commercial and socially-marketed condom brands currently on the market.

To strengthen the sustainability of Tanzania’s condom market, USAID’s Sustaining Health Programs through the Private Sector Plus (SHOPS Plus) project is collaborating with the Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC) to implement a TMA for condoms. To that end, the project conducted a mixed-methods study to answer the following research questions, filling a critical gap in existing data to inform a government-led TMA for condoms in Tanzania.

1. *Qualitative research with male condom users:* What motivates consumers’ condom selection choices? How do condom users value price, product location, and branding when obtaining a condom?

2. *Quantitative survey of retail outlets:* What is the availability, price, and market volume of condom brands across types of retail outlets in Tanzania?

These data will allow us to revisit assumptions regarding what guides consumers’ condom selection behavior as well as assumptions with respect to condom pricing, supply distribution, and branding. Ultimately, policymakers and market actors will have the necessary information to develop appropriate condom programming decisions regarding condom subsidization, free product distribution, and efforts to increase the commercial sector share.

**Data and research methods**

To inform TMA implementation, SHOPS Plus conducted focus group discussions (FGDs) with male condom users and a statistically representative survey of fast-moving consumer goods (FMCG) retail outlets in nine regions prioritized by US President’s Emergency Plan for AIDS Response (PEPFAR) and USAID as well as all five districts of Tanzania’s most populous and urbanized region, Dar es Salaam.<sup>1</sup> Methods for each research activity are detailed below.

Focus group discussion with male condom users

SHOPS Plus conducted 16 FGDs with male condom users age 18-49 in Dar es Saalam, Mwanza, and Iringa. Each FGD had 6 to 10 participants, totaling 142 participants total. FGDs were segmented by age, socioeconomic status (SES), and urbanity (see *Table 1*). The majority of FGDs were conducted in urban areas because the condom market is more centralized there. Socioeconomic status was determined using Tanzania’s validated Poverty Probability Index, a 10-item household asset questionnaire (Schreiner, 2016). A sample size of 16 FGDs was selected in order to reach theoretical saturation, the point at which themes are repeated in the data and new information does not appear (Glasser and Strauss, 1967; Francis et al., 2010; Guest et al., 2006).

**Table 1: Segmentation of Focus Group Discussion Participants**

	Urban (Dar es Salaam and Mwanza)		Rural (Iringa)		TOTAL
<b>Lower SES (bottom two wealth quintiles)</b>	3 FGDs	3 FGDs	1 FGDs	1 FGDs	8 FGDs
<b>Higher SES (top two wealth quintiles)</b>	3 FGDs	3 FGDs	1 FGDs	1 FGDs	8 FGDs
	<b>Younger men (18-29)</b>	<b>Older men (30-49)</b>	<b>Younger men (18-29)</b>	<b>Older men (30-49)</b>	<b>16 FGDs</b>

Three FGD moderators and three note-takers were trained in qualitative methods and conducted a two-day pilot. Recruitment was based on a time-location sampling approach. Field teams worked with local government officials to generate a list of popular venues where men gather and heavy-traffic times for each venue; venues and times were randomly selected from the list. All FGDs were audio recorded, transcribed verbatim into Kiswahili, and translated into English. All names were redacted from transcripts. NVivo 11 was used to analyze transcripts using a deductive and inductive coding approach.

<sup>1</sup> The nine regions include: Mwanza, Arusha, Dodoma, Iringa, Shinyanga, Kagera, Mbeya, Tanga and Njombe. The districts within Dar es Salaam are: Kigamboni, Kinondoni, Ilala, Temeke and Ubungo.

The FGD moderators asked participants about condom selection and the relative value of condom price, condom attributes, and location. Moderators facilitated a structured conjoint-based WTP activity in which participants simulated condom purchases and an activity in which the group evaluated the relative cost and quality of condom brands by placing visual representations of each brands on a matrix.

All FGD participants underwent informed consent prior to participating in the research, and the study obtained ethical approval from the Abt IRB and Tanzania’s National Institution of Medical Research.

### Survey of retail outlets

The survey sampled 4,471 FMCG outlets located in ten administrative regions of Tanzania. Data from a 2013 AC Nielsen retail outlet census in Tanzania were used as the sampling frame, and 314 wards were selected as primary sampling units using a stratified, multi-stage approach. In the first stage, five districts within each region were selected using a probability proportionate to size methodology. After district selection, wards were randomly selected and stratified by rural or urban designation. To align with census results, 70 percent of the sample was allocated to urban wards and 30 percent of the sample was allocated to rural wards within each region.

<b>Outlet type</b>	<b>Anticipated percent of total sample (based on 2013 census)</b>
Pubs, bars, and night clubs	11%
Large dukas	8%
Small dukas	70%
Pharmacies and ADDOs	7%
Grocery stores	4%
Total	100%

Within each ward, five types of FMCG outlets were eligible for the survey. These outlet types are detailed in Table 2 alongside the anticipated proportional outlet distribution for the total sample, based on the 2013 Nielsen census.

Prior to enumeration in each selected ward, the research team consulted with community leaders to develop a sketch map of main streets and landmarks. The team divided the map into ten pieces and cut it up to randomly select two segments of the map out of a bag. The supervisor selected a landmark on the map segment, which served as the starting point for sampling. The fieldwork team used the left hand rule, turning left every time there was an option. In urban areas, every 6<sup>th</sup> eligible outlet was sampled. In rural areas, an eligible outlet was sampled every 50 meters (or the closest thereafter 50 meters) due to lower outlet density. This sampling procedure continued until the designated number of outlets for each ward (ranging from 10-25) had been sampled. Descriptive statistics will be used to examine brand availability and cost across outlet types. All analysis will be completed in Stata 14.

The Abt IRB exempted this study from ethical review, as it is market research. All retailers surveyed underwent informed consent.

### **Expected findings**

Preliminary qualitative findings show that brand preference is a key motivator for condom selection. Most men are loyal to subsidized condom brands, equating these brands with high quality and noting that they will travel to several locations in order to purchase their favorite brand. Men indicate a higher willingness to pay for these subsidized brands than the current market prices. While most men consider free, government-provided condoms to be of acceptable quality, these condoms are looked down upon

by many users. In addition, men value convenience when selecting a condom, and government condoms are only supplied in clinics and hospitals, which have limited hours.

There is a substantial price differential between subsidized and commercial condoms in Tanzania: commercial brands can cost up to ten times as much as subsidized brands, making these products unaffordable to many Tanzanians. This vast price increase is associated with only a marginal increase in perceived quality of commercial compared to subsidized brands. Additional analysis will explore if and how use of commercial condoms as well as overall condom selection vary by socioeconomic status.

The retail outlet survey data will provide new data on condom distribution coverage, average prices, and market share of various brands. We will identify geographic areas with a high degree of commercial sector activity, cautioning that marketing of subsidized condoms in such areas could crowd out commercial activity and jeopardize sustainability. We will assess the extent to which there may be excessive subsidization of social marketing condom brands relative to consumer need or, conversely, a shortage of subsidized brands in areas where they might be needed to meet the needs of low-income men and women.

These data fill a critical gap in the TMA effort and may help re-examine condom pricing, branding, and distribution strategies. These data will allow stakeholders to better understand consumer motivations and behavior, information that is currently lacking in Tanzania but necessary to implement a sustainable condom program. In collaboration with the Tanzania Ministry of Health and other key stakeholders in the condom market, SHOPS Plus will use these findings to improve the targeting of donor-supplied condoms and generate opportunities to increase the commercial share of the condom market, with the goal of achieving a more efficient, equitable, and sustainable condom market.

## References

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