

World
Social Marketing
Conference 2008

Where we are now



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Private Sector Contribution in Social Marketing
Seynabou Mbengue
ADEMAS Executive Director

Private sector contribution in Social Marketing

Lessons learned through social marketing
in Senegal (West Africa)

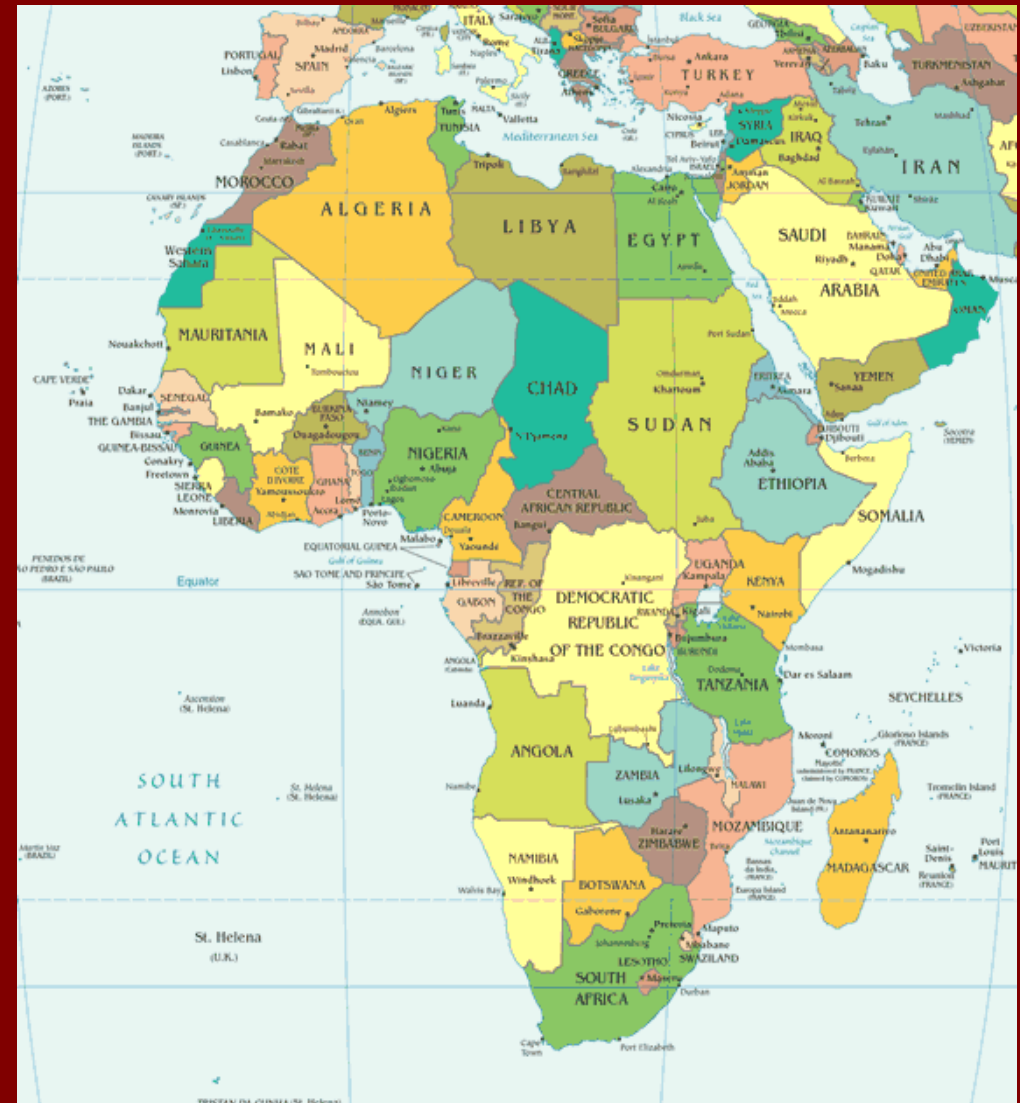
Dr Seynabou Mbengue
ADEMAS Executive
Director

INTRODUCTION

- Africa : main areas of social marketing covered
- Senegal Context and ADEMÁS
- Lessons learned with the contribution of private sector
- Replication issues
- Other lessons outside the involvement of private sector

Social Marketing in Africa

- Programs in most Sub-Saharan Countries
- Different Models and Approaches
- Variety of areas / products and services
 - HIV/AIDS
 - RH/PF
 - MCH
 - Malaria



Senegal context in Africa



Senegal is bounded by :

the Atlantic Ocean,

Mauritania, Mali, Guinea, and Guinea-Bissau.

The Gambia penetrates more than 320 kilometers (200 mi.) into Senegal

Senegal Demographic & Health Highlights

- Population (2007 est.): 12,521,851
- Area: 196,840 sq. km. (76,000 sq. mi.)
- Annual growth rate: 2%
- Religions: Muslim 95%, Christian 4%, traditional 1%
- Education: primary 75.8%, middle school 26.5%, secondary 11%
- *Literacy: 59.1%*
- *Infant mortality rate: 60.15/1,000*
- *Life expectancy: 56.69 yrs*
- Work force (4.0 million): *Agriculture 70%*
- *Wage earners (350,000): private sector 61%, government and parapublic 39%*
- 75% of Senegal's population is rural

Health Highlights: FP & HIV-AIDS

DHS IV (2005)

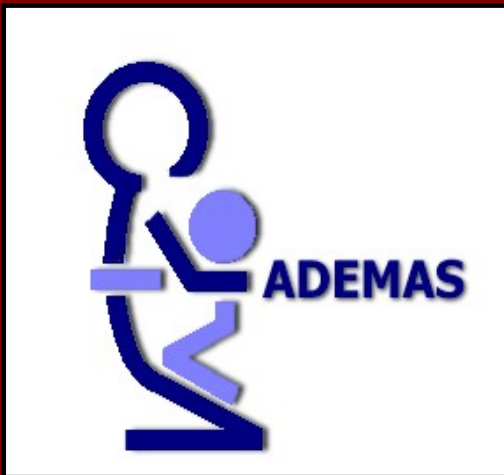
- Fertility : 5.3 children
- CPR modern methods among MWRA: 10.3%.
- Prevalence of HIV/AIDS among the general population: 0.7% nationally (but pockets of higher prevalence and risk do exist)

Health Highlights: Private sector

DHS IV (2005)

- commercial private sector accounts for 22 % of contraceptive supply (it was at 5% on DHSIII)
- rate below the capacities of this sector
- whenever they have the choice and if the products and services are affordable, people prefer to deal with the private sector.
- need to further increase the involvement of the commercial private sector in order to meet population needs and to increase their access

ADEMÁS, a Senegalese SMO



*Le Marketing au Service
du Social*

- ADEMÁS (Agency for the Development of Social Marketing)
- local non for profit organization created in 1998
- Reproductive Health/FP
- HIV-AIDS Prevention
- Malaria

ADEMÁS

- ADEMÁS structure was put in place under USAID's centrally funded SOMARC Project
- Established strong working relationships with private sector; the press, opinion leaders,
- Designed effective promotional and educational activities including radio and TV spots, community sensitization activities with MOH departments, NGOs and Civil Society; training sessions on ST/HIV/AIDS prevention and contraceptive technologies in the private sector;
- during the period 2005 to 2007 Created 5.666 Protec points of sale including non-traditional points of sale .

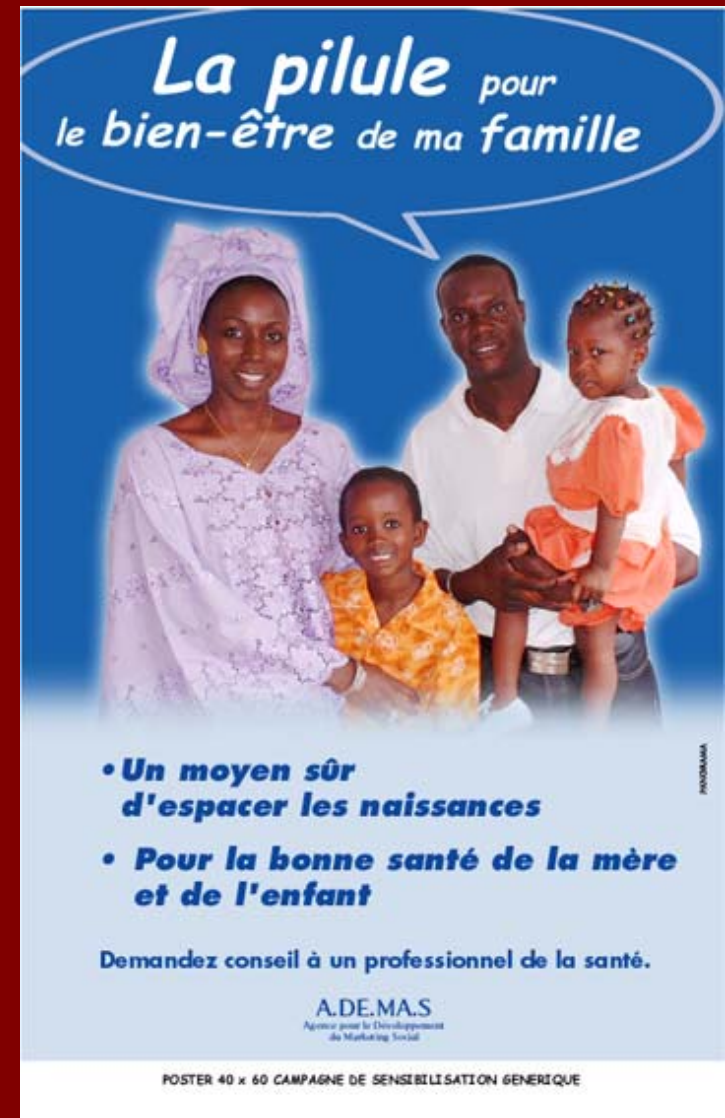
USAID supported program: FP/HIV-AIDS



- PROTEC male condoms



- SECURIL, oral contraceptive



Pill/ Generic poster

USAID supported program: Malaria posters



**Chaque jour, plus de
10 grossesses
sont menacées
par le paludisme
au Sénégal***



**On peut lutter contre
le paludisme...**



*Incitons les femmes enceintes à se rendre
en consultation prénatale (CPN)
dès les premiers signes de la grossesse.*



*Rendons nous dans les structures
de santé dès l'apparition de la fièvre.*



*Dormons sous une moustiquaire
imprégnée...*



Pour les sauver, protégeons-les
Demandez conseil à un agent de santé




**Ils ont choisi
de ne pas faire partie
des 8 000 personnes
que le paludisme tue
chaque année
au Sénégal***



**On peut lutter contre
le paludisme...**



*Dormons sous une moustiquaire
imprégnée...*



*Incitons les femmes enceintes à se rendre
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Pour les sauver, protégeons-les
Demandez conseil à un agent de santé




**Chaque jour,
le paludisme
tue 2 enfants
de moins de 5 ans
au Sénégal***



**On peut lutter contre
le paludisme...**



*Rendons nous dans les structures
de santé dès l'apparition de la fièvre.*



*Incitons les femmes enceintes à se rendre
en consultation prénatale (CPN)
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*Dormons sous une moustiquaire
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Pour les sauver, protégeons-les
Demandez conseil à un agent de santé



KFW supported program: Youth HIV-AIDS



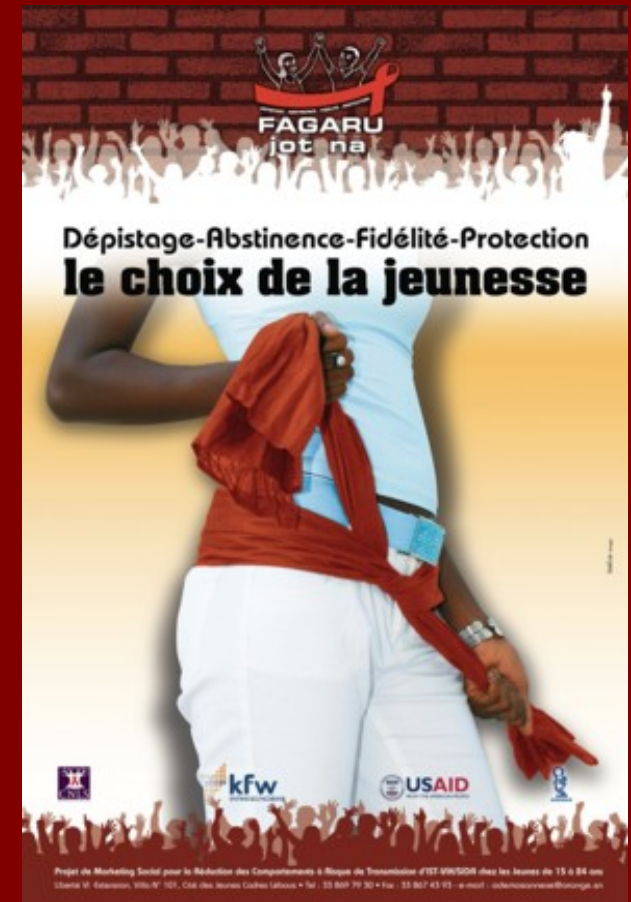
Project Umbrella logo

KFW supported program: Youth HIV-AIDS

Male and female condoms



KFW supported program: Youth HIV-AIDS Posters



The Health Private Sector

- Private sector in Senegal has grown steadily and is dynamic with engaged leaders
- ADEMAS has been collaborating with Significant supplier of well respected products, VALDAFRIQUE, Laboratories CANONNE
- Protec and Securil hold a substantial market share but they depend on donor supply
- Prices are the lowest in the market
- VALDAFRIQUE returns funds to the project corresponding to the price of products on the international market

Lessons learned

(1) Established feasibility of private sector to make an important contribution in the social sector.

- ADEMÁS has demonstrated that the private sector with its focus on the "bottom line" is efficient and effective in establishing a reliable distribution network and in product promotion and advertising.

Lessons learned

(2) Established viability of social marketing for the private sector.

- PROTEC (male condoms) and SECURIL (pills) have become profitable products showing a reasonable return to wholesalers, pharmacists and other detailers.
- Also demonstrated that there is a significant market for low cost products pack of 3 condoms at 150 F CFA (0,23 euros) , and a cycle at 400F CFA (0,61 euros).

Lessons learned

(3) Achieved "demystification" and acceptability of contraceptives and mainly male condoms.

- By moving slowly and taking into consideration the social sensitivities, ADEMÁS has been successful in gaining the support of opinion leaders and in establishing the acceptability and credibility of the contraceptives.

Lessons learned

- (4) Demonstrated that the public and private sectors operate differently and ultimately that public sector control restrains the efficiency of the private sector.**
- Public private partnership was necessary, given the sensitive environment in which this program evolves. Nonetheless, continued public oversight would hold back the effectiveness of the private sector to expand and make optimal use of the commercial market to make products more

Lessons learned

(5) Demonstrated that the utilization of existing commercial networks leads more quickly to self-sustainability.

- The private partner and commercial distributor calculated that it could manage the distribution of products independently (probably including purchase of the products) without a subsidy if it were sold at a slightly increased price (after more than ten years 150F to 200F) and if promotional activities were continued

Replication issues

- Whenever possible, the involvement of a dynamic private sector distributor is recommended
- Link procurement of commodities to manufacturers (less burden and responsibility and allows to focus on demand creation and market growth)
- the commercial sector generally cannot afford to invest in: we will need to help to access rural markets and services as well as other to harder to reach and to convince targets

other lessons

- other lessons outside the involvement with the private sector:
 - Putting together Public and Private sectors systematically (training sessions; PR: debates; etc)
 - Bringing service providers outside their clinics to sensitize target groups
 - Working with alphabetization monitors

Thank you
for your attention

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