## Step 5: Determine Activities and Interventions

Suggested approaches and activities and illustrative examples are presented here as appropriate choices for communicating to primary and influencing audiences about female condoms. These suggestions are a starting point and close collaboration with communication and creative professionals can help ensure that design and execution are innovative and compelling.

Illustrative activities for a demand generation program on female condoms are tabulated below based on five key intervention strategies:

1. Integrating female condom promotion into existing services and programs such as:
* Clinic-based services such as family planning, RMNCH, prevention of mother-to-child transmission of HIV, HIV counseling and testing, voluntary medical male circumcision, and STI treatment.
* Community-based health services and health education programs.
* Community mobilization initiatives, particularly those focusing on women’s empowerment and gender/relationship norms, youth/adolescent friendly services, and support services for individuals and families affected by HIV.
* Life skills programs, particularly those teaching communication and negotiation skills to women and girls.
* Outreach programs targeting female sex workers and their clients, and including sex work organizations and networks.
* Formal and informal workplace programs targeting, e.g., food, agriculture and mining industries, brothels, and uniformed services.
* Social marketing programs and public sector condom distribution networks.
1. Creating awareness and acceptance of female condoms among all audiences via:
* Inter-personal communications.
* Community mobilization, including entertainment-education.
* Mass media promotion, including entertainment-education.
* Media engagement and mass media reporting.
* Social media and websites.
1. Leveraging the private sector, via
* Traditional private sector condom outlets, e.g. pharmacies, clinics
* ‘Non traditional’ private sector condom outlets, e.g. bars
* Outlets frequented by target female condom users, e.g. hair salons
* Training for staff of private sector outlets

*For a guide to PPPs in demand generation, see the “P for Partnership” tool [available at LINK]*

1. Creating momentum and capacity by training nurses, lay counselors, pharmacists and community health workers
* Pre-service training
* In-service training
* Medical detailing
1. Building stakeholder support through targeted advocacy and participation including:
* Sensitization meetings, presentations, workshops and conferences.
* Participation in technical working groups, e.g. on HIV/AIDS, family planning, RMNCH, gender and women’s empowerment.
* Participation in health sector policy, strategy and operational planning forums.

*Example activities in each of these five intervention domains are presented below.*

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| **5.1 INTEGRATING FEMALE CONDOM PROMOTION WITH EXISTING SERVICES AND PROGRAMS** |
| **Illustrative Channel Mix** | **Target Audiences** | **Purpose** |
| **Clinic-based services**: RMNCH, and HIV testing / care / treatment / support services | Women in relationshipsSingle womenMale partners | * Give users a choice of male condoms and female condoms to increase overall condom uptake.
* Expand contraceptive choice to include both male and female condoms.
* Co-locate promotion with product distribution to facilitate trial, repeat use and regular use.
* Promote female condoms at scale through public sector health facilities.
* Use primary healthcare settings to reinforce positioning of female condom for dual protection and de-emphasize disease prevention.
* Reach women and their partners together via counseling services (e.g. couples testing for HIV) and facilitate discussion of fertility preferences.
* Promote female condoms for STI/HIV prevention through one-on-one counseling, as part of HIV services, and through PLWH networks.
* Give women and couples the chance to handle female condoms, receive education, practice insertion on pelvic models, and ask questions to trained providers.
* Through routine follow-up sessions, support new users to overcome any difficulties they are experiencing.
* Provide negotiation skills training to reinforce competency with product itself.
* Ensure continuity of support to help new users through difficult trial periods and motivate ongoing use.
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| **Community-based health and support services and health education programs**E.g. RMNCH and HIV/AIDS interventions, and support groups for people living with HIV (PLWH) |
| **Outreach programs targeting key populations at risk** | Female sex workers  | * Recognize stigma that prevents female sex workers accessing female condoms via mainstream channels.
* Integrate commodity distribution with female condom skills and safe sex negotiation skills training.
* Ensure continuity of support during critical trial period for a coitus dependent audience.
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| **Community mobilization initiatives,** particularly those focusing on women’s empowerment and gender / relationship normsE.g. community consultations, interactive theater, videos that stimulate dialogue | Women in relationshipsSingle womenMale partners | * Address harmful social, gender and relationship norms, and cultivate healthier norms.
* Engage communities, families and couples in dialogue on gender, including gender roles, women’s health, and HIV transmission.
* Promote discussion of fertility preferences between couples as a healthy relationship norm.
* Foster social change that increases women’s ability to negotiate safe sex.
* Integrate female condom skills training with life skills programs.
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| **Life skills programs**, particularly those teaching relationship / communication / negotiation skills to women or couples E.g. Stepping Stones |
| **Social marketing programs and public sector male condom distribution networks** | * Give users a choice of male and female condoms to increase overall uptake.
* Reinforce female condom positioning as a complement / alternative to the male condom.
* Utilize existing sales and interpersonal communication skillsets of condom distribution agents.
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| **5.2 CREATING AWARENESS AND ACCEPTABILITY** |
| **Illustrative Channel Mix** | **Target Audiences** | **Purpose** |
| **Inter-personal communications**Female condom-specific IPC activitiesE.g. one-on-one or small group activities on university campuses, at workplaces, churches, youth groups  | Women in relationshipsSingle womenMale partners | * Give women and couples the chance to handle female condoms, receive instructions, practice insertion on pelvic models and discuss questions / difficulties with trained outreach workers.
* Provide negotiation skills training to reinforce users’ competency with the product.
* Ensure continuity of support to help new users through difficult trial periods and motivate ongoing use.
* Direct audience to female condom distribution outlets.
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| **Community-based entertainment-education events,** both health and non-health relatedE.g. Community events, health fairs, roadshows on college campuses, marketplace female condom demos | * Reach large audiences at single events.
* Use role models (either community or public figures) to support female condom initiatives.
* Increase general awareness and social acceptance of female condoms, fostering a more enabling environment for women to initiate discussion of female condoms with male partners.
* Direct audience to female condom distribution outlets.
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| **Mass media promotion** Low-budget options:E.g. radio call-in shows, sponsored radio shows, product / message placement in media shows or reportingHigh-budget options:E.g. Multi-media campaigns using radio, television, print media, billboards, text messaging  | All | * Create widespread awareness and acceptability within both primary and influencing audiences.
* Prepare the ground for other channels.
* Publicize access points, campaigns and events.
* Create positive perceptions based on product attributes.
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| **Media engagement and mass media reporting**E.g. Media workshops, media training events, press releases, outreach to journalists; print, broadcast and online coverage | JournalistsAll target users | * Generate media coverage to create awareness of female condoms.
* Counter any existing negative perceptions of female condoms among journalists.
* Create positive perceptions of female condoms among the media and their audiences.
* Create conducive conditions for other demand generation activities by raising general awareness.
* Create widespread awareness and acceptability within both primary and influencing audiences.
* Publicize access points, campaigns and events.
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| **Social media and websites** | All | * Create widespread awareness and acceptability within both primary and influencing audiences.
* Create positive perceptions based on product attributes.
* Use role models to support female condom initiatives.
* Publicize local events and female condom distribution points.
* Allow audiences to select the content they receive, including detailed content.
* Make training, programming and other tools more widely available at low cost.
* Target younger and urban / peri-urban users.
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| **5.3 LEVERAGING THE PRIVATE SECTOR** |
| **Illustrative Channel Mix** | **Target Audiences** | **Purpose** |
| **Traditional condom outlets** e.g. pharmacies, grocery stores | Women in relationshipsSingle womenMale partnersFemale sex workers | * Increase product / brand awareness and create positive associations (e.g. family planning, sexual pleasure) through visible point of sale promotion.
* Promote alternative female condom products to those distributed through free channels to stimulate interest in the category as a whole.
* Train pharmacy staff to demonstrate and promote female condoms.
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| **Private healthcare providers** | Women in relationshipsSingle womenMale partners | * See above, clinic based services.
* Target women / couples from higher socio-economic backgrounds.
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| **Non-traditional condom outlets** (targeting general population audience segments)E.g. hair salons, barbers | * Opportunity to promote female condoms in female-friendly settings where there is time for instruction, negotiation skills training and dialogue.
* Option of free or for sale female condoms.
* Point of sale promotion benefits category as a whole.
* Male-friendly outlets such as barbers can be used to increase male awareness and acceptance.
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| **Non-traditional outlets**(targeting key populations at risk)E.g. bars, nightclubs, brothels, hotels, motels, guest houses, late night stores, taxi/moto-taxi stands | Single womenMale partnersFemale sex workers | * Make female condoms available close to where high risk sex acts occur.
* Complement outreach programs targeting female sex workers with venue-based promotion and distribution that reaches clients and high-risk women who are not sex workers but engage in casual and/or transactional sex.
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| **5.4 TRAINING HEALTH PROVIDERS AND HEALTH EDUCATORS** |
| **Illustrative Channel Mix** | **Target Audiences** | **Purpose** |
| **Government and NGO training programs** for nurses, lay counselors, community health workers, and health promoters.E.g. Policies, guidelines, curricula, manuals / materials, rollout planning, delivery, support and monitoring | Health providers and health educators | * Ensure consistency of messaging.
* Change / shape behavior and attitudes.
* Equip audience with knowledge, skills and competencies to promote female condoms effectively.
* Combat negative product perceptions.
* Create enthusiasm and momentum for distribution and promotion, at scale and at grassroots level.
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| **5.5 ENGAGING DECISION MAKERS** |
| **Illustrative Channel Mix** | **Target Audiences** | **Purpose** |
| **Sensitization** meetings, presentations and workshops at all levels, i.e. national to community | Stakeholders | * Target key focal points who can cascade information.
* Sensitize leadership and key teams within target organizational units (e.g. of ministries of health).
* Garner support for female condom programming.
* Recruit champions.
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| Participation in **technical working groups** on e.g. SBCC, HIV/AIDS, RMNCH, gender & women’s empowerment | * Ensure that female condoms are on the right agendas.
* Garner support and recruit champions.
* Draw on technical expertise of membership.
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| Participation in **health sector forums** for policy, strategy and operational planning | * Integrate female condom program strategy with national planning cycles.
* Garner support and recruit champions.
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