



**Condom Social Marketing Visioning
St. Lucia
June 30, 2005**

- 9:00-9:15 Registration
- 9:15-9:30 Introductions
- 9:30-9:45 Goals & Objectives & Plan for the day
- 9:45-10:00 What is Social Marketing?
- 10:00-10:30 The Total Condom Market and the Role of Social Marketing
- 10:30-10:45 Coffee/Tea
- 10:45-11:30 HIV/AIDS Prevention in St. Lucia today
- 11:30-12:00 Eastern Caribbean Social Marketing Initiative (ECSMI)
- 12:00 -1:00 Journey to the Future
- 1:00-2:00 Lunch
- 2:00-2:45 Back from the Future: Prioritising SM Needs in St Lucia
- 2:45-3:15 Making Social Marketing Work in St Lucia
- 3:15-4:00 Roles and Responsibilities
- 4:00-4:30 Wrap Up and the Way Forward

Pamela Faura
Caribbean Regional Director
PSI
42 Luis Street
Woodbrook
Port-of-Spain, Trinidad
Email: pfaura@psicarib.org
Tel: (868) 628-7318, 628-2497

Elizabeth Gardiner
Team Leader
Options Consultancy
Cap House
9-12 Long Lane
London, UK
e.gardiner@options.co.uk
+44 (0)7766760133

Visioning Condom Social Marketing in St. Lucia

June 30, 2005

I. Summary: The day long visioning exercise which was co-hosted by PSI/Caribbean, Options Consultancy Services and local partners, provided an opportunity to gain consensus on the condom social marketing programme in St. Lucia. Key stakeholders in HIV/AIDS prevention had the opportunity to learn about social marketing, identify needs of St. Lucia, consider potential social marketing results and take next steps to achieving the condom social marketing vision.

Participants represented a broad spectrum including the Ministry of Health, UNFPA, the OECS Regional Coordinating Mechanism and numerous NGOs. NGOs represented included the AIDS Action Foundation (AAF), the Red Cross, Caribbean Drug Abuse Research Institute (CDARI), St. Lucia Planned Parenthood Association (SLPPA) and the National Youth Council. The MOH was represented by the Project Coordination Unit and the Bureau of Health Promotion. The media briefly appeared to report on the event, and the commercial sector did not attend.

II. What Is Social Marketing: Participants discussed their impressions of social marketing and Options presented a summary presentation of social marketing. The presentation highlighted what social marketing is and how it can contribute to the growth of the total condom market through behaviour change communications and improved condom access. The participants very clearly summarised social marketing in the following words:

- Perceptions and attitudes of persons regarding the product
- Behaviour change communications
- Distributions (condoms) for sale
- Target groups reached
- Media: radio drama, posters, fliers, TV
- Price lower
- Free condoms to certain groups (e.g. homeless)
- Research based

III. Identification of Social Marketing Needs in St. Lucia Today: To help identify where the social marketing programme could contribute to HIV/AIDS prevention in St. Lucia, participants broke into small groups to discuss current programmes and access to condoms. Each group then presented summaries of their discussions. A key issue is the importance of local involvement in the development of HIV/AIDS prevention campaigns and activities in St. Lucia. The presentations are summarised here:

A. Condoms are considered very available. They are for sale in pharmacies, supermarkets, gas stations, bars, St. Lucia Planned Parenthood Association, street vendor trays, health facilities, strip joints/clubs and Ti Boutique. Free distribution is done by Health Centers (using Global Funds), AAF (distributed 2,500), barbers (distributed 2,000), NAP, NOW, UNFPA (sourced from UNFPA), Red Cross, concerned persons, private sector, CDARI and National Youth Council. The MOH distributes approximately 60,000 condoms annually.

Planned Parenthood makes its condoms from IPPF available for a subsidised price. The available commercial brands and their prices include:

- *Panther* EC\$4.00
- *Long Love* EC \$4.50
- *Durex* EC \$5.00
- *Rough Rider* EC\$3-6

- Choice – free
- Slam EC\$3.50
- Trojan EC\$7.00
- Jock EC\$3.50
- Protector Plus – free
- Femidom (female condom) – free
- Catapult EC\$2.00
- Nonoxinol 9 (outdated)
- Casanova
- Unbranded – free

B. Behaviour Change Communication Campaigns have included the following:

Interpersonal Communications

Activity	Target
Peer education: SLPPA, Red Cross, National Youth Council, Ministry of Health	Youth 15-35, sometimes under 15
VCT: AAF, MOH, SLPPA	Pregnant women, youth, MSM, CSW, PLWHA, other sexually active persons
Barber shop programme: AAF	Young persons
Taxi driver programme: SLPPA	Taxi drivers
Carnival band	Revellers, all age groups
Health education/condom demonstration and distribution	Uniformed groups, drug users (CHRC)
Health fairs and training workshops: AAF, MOH	

Mass media:

Activity	Target
TV & Radio Ads addressing stigma, judgemental attitudes, unwanted pregnancy, HIV/AIDS prevention, STIs (CFPA)	Youth 15-25
Wrap It Up!! (AAF – aired for free)	Sexually active persons
Breaking the Silence (Red Cross)	
Print: flyers, IYO magazine (youth magazine of <i>The Voice</i> newspaper), posters, Be Wise, Condomise, bumper stickers, billboards, T Shirts, key rings, packaging/condom wrapper for free give-away	General public (ABCD)

C. Research and Evaluation: In 2003 FHI carried out a survey on In and Out of School Youth in St. Kitts, St. Lucia and St. Vincent. The Alliance and CAREC are planning a study amongst MSM. The Behavioural Surveillance Survey to be conducted by CAREC, USAID and FHI is on hold while problems are sorted out. The communications campaigns are yet to be evaluated.

D. Existing Programmes for HIV/AIDS: St. Lucia is part of the Global Fund OECS program.

E. Attitudes toward Vulnerable Groups and Condom Promotion: Vulnerable groups in St. Lucia include MSM, CSW, crack users, economically vulnerable youth, married women, young professional women, young people, economically deprived young women engaging in sex for gain/transactional (“Makin’ Mum), youth on the block.

- Society's attitude toward vulnerable groups
 - Stigma & Discrimination toward MSM, CSW, crack users
 - Socially accepted & not targeted: married women, young professionals whose risk perception is low
- Media attitude about condom promotion:
 - Receptive and cooperative
 - Money issues (may require money to get good placements)
 - Susceptible to religious and political pressure
 - Conflicting and inconsistent messages
- Government attitude toward condom promotion
 - Donor driven
 - Financially driven
 - Religious pressure
 - Ensure availability at health outlets
- Religious attitudes toward condom promotion
 - Denominational differences
 - Promote abstinence and fidelity
 - Would not distribute condoms but may recommend their use for HIV/AIDS prevention only
 - Have asked health workers to speak to congregations on HIV/AIDS

IV. Journey to the Future: Proposed Activities & Results of Social Marketing in St.

Lucia:¹ Participants spent some time dreaming about what condom social marketing activities and results would be ideal and then focused the discussion on what activities would be realistic and desirable. The group developed a list, which was then narrowed to focus on those ideas which might be realistic and feasible. This list is included below, and includes activities that may take place under the Global Fund program and/or that PSI could consider including in their program:

A. Activities/Programmes

Condoms:

- World Cup where alcohol, sex [commercial & transactional] will be common amongst men and women, should have more condoms available at key locations e.g. vending machines, food stalls; condoms will be packaged for distribution
- More brands targeting youth with more creative names and packaging
- Female condoms widely available and affordable targeting certain populations, e.g. young, empowered professional women
- Stigma reduced so it is OK for men and women to buy and use condoms and talk about them
- Clubs making condoms available, e.g. vending machines in bathrooms for a small price
- Uniformed population: prevalence of condom distribution at stations, centers.

Behaviour Change:

- Marketing of condoms in relation to cricket, e.g. "Score 6" as a regional strategy
- Saturation of condom ads with assistance of private sector, e.g. wholesalers, businesses etc.
- AAF doing educational ads for condom use in general population
- Girls and women more able to negotiate condoms (Red Cross, SLPPA, CFPA)
- Regional BCC strategy for OECS countries with an over-riding theme and national flavour in each

¹ NB: Not all activities will be feasible or possible within the PSI project given that the programme and results were already specified within PSI's contract with CIDA.

- Country = youth
- More financing to buy more condoms and promote them: US\$1 million
- Youth better educated
- Youth buy phone card, get a free condom
- Increase in negotiation, peer and BCC skills among youth with youth becoming better condom advocates
- Make progress toward environment where MSM are more accepted and the environment more open, with less hiding
- Low-threshold drop-in centers for drug users where condoms are given out
- Drop in center/safe house for youth - with reproductive health services
- Parents have better skills to talk to their kids (UNICEF, MOE)

Results:

- BSS completed in 2005 and repeated in 2 years, and it will ideally identify and measure change in condom use, source of condoms, brand preferences
- Information on appropriate condom size, quality standards, testing etc. (Bureau of Standards now compiling)
- Know HIV/AIDS incidence and prevalence
- National view on acceptance of female condoms
- Increase in number of condoms imported
- Monitor availability and stock outs (e.g. pharmaceutical procurement service for the public sector and also monitor for private)
- All three segments of market addressed: those who cannot afford take the free ones
- Culturally appropriate materials developed for vulnerable populations, e.g. CSWs in Creole and English

Target audience: The group recommended that HIV/AIDS prevention programmes target MSM, CSW, youth and girls 15-24 especially with older men. The latter two are being addressed by Red Cross, SLPPA and MoH, so perhaps PSI could take on programs for MSM and CSWs. Considerable discussion surrounded the need to ensure that regional level materials were appropriate for the OECS, particularly concerning literacy (though there is no Creole-reading population in St. Lucia).

V. The Eastern Caribbean Social Marketing Initiative (ECSMI) is funded by the Canadian International Development Association (CIDA). The program aims to:

- Improve access to condoms
- Decrease barriers to use
- Enhance abilities to implement BCC and Social Marketing strategies for HIV/AIDS prevention
- Measure behaviour change and condom market growth

ECSMI will undertake activities on two levels.

Regional activities:

- Condom campaign targeting youth (slogan, TV, radio)
- Point of sale promotions
- Educational material for target populations
- Educational modules
- Regional research (pricing study, baselines)

St. Lucia activities:

- Condom market analysis
- Expansion of condom distribution
- Target group analysis
- Training of Peer Educator Team and Health Educators
- Validation of regional campaign/materials
- Implementation and monitoring of Interpersonal Communication (IPC) activities
- Measurement of results

Options will be involved in the monitoring and evaluation of the programme. This will include regional research on the impact of condom social marketing. Options will also be supporting programmes to overcome stigma and discrimination.

Programme Implementation:

A. To assist with the development of the programme in St. Lucia, PSI recommended the formation of an Advisory Committee. The participants noted that the committee was a good idea that would help to push the programme forward. Participants recommended that the Committee be a smaller sub-committee of UNFPA-Government of St. Lucia Committee that includes:

- MOH
- UNFPA
- St. Lucia Planned Parenthood Association
- Red Cross
- RCM
- National Youth Council
- AIDS Action Foundation
- Department of Youth and Sports
- Ministry of Social Transformation

The ECSMI committee would also add representatives from:

- A FBO e.g. the Christian Council
- Media Association
- Private Sector, e.g. Chamber of Commerce, Pharmacy Association

Additionally, AAF proposed that the ECSMI Project be integrated with the RCM of the OECS Global Fund Project. PSI welcomed this suggestion.

B. PSI asked that the Government provide a letter inviting PSI's social marketing programme to St. Lucia. PSI will follow this up with the AIDS Action Foundation.

VI. Next Steps

TO DO	RESPONSIBLE INDIVIDUAL/ORGANISATION	DUE DATE
Distribution of summary of visioning and participant list	Options	July 31
Advise PSI of possible interpersonal communications activities to reach target audiences	All participants	August 10
Review needs for educational materials for the target groups	PSI's Communications Manager, with assistance from all participants	Ongoing
Conduct condom market assessment	PSI's Marketing Manager with assistance from relevant	August 15

	participants	
Draft and sign PSI-MOH MOU	PSI MOH	August 15
Sign agreements with commercial distributors	PSI	August 31
Prepare activity plan and present to Advisory Committee	PSI	August 31

VII. Evaluation

Fourteen participants kindly completed an evaluation. A summary of the evaluations received rated the content, quality and usefulness of the sessions as mostly good or very good, with the "Total Condom Market/Social Marketing" being the session with the highest rating and the "HIV/AIDS in St. Lucia Today" session with the lowest rating. Suggestions included improving the ambience of the room. Participants also suggested that more can be done with prevention in St. Lucia today. PSI and Options hope this summary of the day helps to clarify what next for social marketing in S. Lucia!

Participant List – St. Lucia
Condom Social Marketing Visioning
June 30, 2005

NAME	ORGANISATION	POSITION	CONTACT TELEPHONE	EMAIL
Tessa Smith	Project Coordination Unit	Administrative Assistant	468-4486	tsmith@planning.gov.lc
Carlyn Auguste	Project Coordination Unit	Administrative Officer	468-4486	SWPCU @planning.gov.lc
Samantha Gaillard	St. Lucia Red Cross	Peer Educator	452-5582	
Desmond Pacogh	AIDS Action Foundation (AAF)	Volunteer	584-8879	
Marcus Day	CDARI	Director	458-2795	davm@candw.lc
Annette Jn Charles	Ministry of Health	Health Educator	468-5344	napslu@yahoo.com
Egbert Felix	AAF	Vulnerable Groups	716-8823	Justme592@yahoo.com
Kingsley Puospeor	Planned Parenthood	Administrative Assistant	452-4335	parenthood@candw.lc
Patricia Joseph	Bureau of Health Promotion	Director (Ag)	468-5300	Patjoseph_wi@yahoo.com
Shana Marius	AIDS Action Foundation (AAF)		452-7171	shotputz@hotmail.com
Tamara Felicien	AIDS Action Foundation (AAF)		452-7171	Sweettamika89@hotmail.com
Bennet Charles	National Youth Council	Public Relations Officer	452-9626 (?)	nyc@candw.lc www.stlucianyc.com
Lyndel Archibald	OECS – RCM	Program Manager	452-7171	lyndelsa@candw.lc
Joan Didier	AIDS Action Foundation (AAF), OECS/RCM	Director	452-7171, 518-7171	aaf@candw.lc , aaf.joan@gmail.com
Denis James	UNFPA HIV/AIDS Project (MOH)	Coordinator	451-6061; 720-3103	Unfpa_opec_gosl@hotmail.com