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CONDOM PROMOTION National AIDS Control Programme, Phase-III, India

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Publications from NACO in this series

National AIDS Control Programme: Response to HIV Epidemic in India Targeted Interventions: National AIDS Control Programme, Phase-III, India Condom Promotion: National AIDS Control Programme, Phase-III, India Care Support & Treatment: National AIDS Control Programme, Phase-III, India Red Ribbon Express: National AIDS Control Programme, Phase-III, India Monitoring and Evaluation: National AIDS Control Programme, Phase-III, India

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CONDOM PROMOTION

National AIDS Control Programme, Phase-III, India

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CONTENTS

Introduction to the National AIDS Control Programme and Condom Promotion Efforts	7
Accelerating Momentum – For Preventive Approach	7
Halting and Reversing the HIV Epidemic – A Strategic Approach	8
Condom Promotion for HIV Prevention – A Phased Approach	8
Achievements in 2009-10	9
Condom Usage – Behavioural Indicators	9
Guiding Strategies – Driving Accessibility, Availability & Usage	11
Increasing Availability, Accessibility, Awareness & Usage	13
Targeted Social Marketing Programme Phase-II (2009-10)	13
Targeted Social Marketing Programme Phase-III: Scale-up of Condom Social Marketing Programme	13
Condom Communication – Creating Impact for Behaviour Change	15
Condom Promotion Initiatives – The Way Forward	19
Social Marketing of Condoms at TI Sites for Saturated Coverage	19
Highway Coverage for Targeting Truckers and Cleaners	20
Coverage of Migrants	21
Strengthening Government of India's Brand of Subsidized Condom ("Deluxe Nirodh")	21
Coverage of STI Clinics with Socially Marketed Condoms	21
Optimisation of Free Supply of Condoms	21
Innovation to Propel Programme to Greater Objectives	22
Using Research for Evidence Based Programming	24
Baseline Condom Promotion Impact Survey, 2010	24
Condom Access and Coverage Evaluation, 2010	24
Condom Fate Study	24
Post-Campaign Quantitative Study	25
Condom Vending Machines Programme Evaluation Study	25
Condom Quality Audit	25

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ACRONYMS

AIDS	Acquired Immuno-deficiency Syndrome		
BCC	Behaviour Change Communication		
BSS	Behavioural Surveillance Survey		
ССС	Community Care Centre		
CSMP	Condom Social Marketing Programme		
CSW	Commercial Sex Worker		
CVM	Condom Vending Machine		
FMCG	Fast Moving Consumer Goods		
FC	Female Condom		
FSW	Female Sex Worker		
HIV	Human Immuno-deficiency Virus		
HLFPPT	Hindustan Latex Family Planning Promotion Trust		
IDU	Injecting Drug User		
IPC	Interpersonal Communication		
LAC	Link ART Centre		
MoHFW	Ministry of Health and Family Welfare		
MSM	Men who have Sex with Men		
NACO	National AIDS Control Organization		
NACP	National AIDS Control Programme		
NFHS	National Family Health Survey		
NRHM	National Rural Health Mission		
NGO	Non-Governmental Organization		
NSS	National Service Scheme		
IO	Opportunistic Infections		
RTI	Reproductive Tract Infection		
SACS	State AIDS Control Society		
SMO	Social Marketing Organization		
STD	Sexually Transmitted Disease		
STI	Sexually Transmitted Infection		
TI	Targeted Intervention		
TSG	Technical Support Group		
ART	Anti Retroviral Therapy		
ICTC	Interpersonal Counseling and Testing Center		

6 • Condom Promotion

INTRODUCTION TO THE NATIONAL AIDS CONTROL PROGRAMME AND CONDOM PROMOTION EFFORTS

Since 1992, India's response to the HIV epidemic has been led by National AIDS Control Organization (NACO), Department of AIDS Control, Ministry of Health and Family Welfare, Government of India through three successive phases of the National AIDS Control Programme (NACP).

The first and the second phase of the programme (NACP-I & II) focused on increasing awareness about HIV/AIDS. The current programme under NACP-III emphasises condom promotion as one of the key strategies for HIV prevention with focus on high risk groups and bridge populations. These groups include female sex workers (FSWs), injecting drug users (IDUs), men who have sex with men (MSMs) and transgenders (TGs).

"NACP-III emphasises condom promotion as a key strategy for HIV prevention with focus on high risk groups "

Accelerating Momentum - For Preventive Approach

The primary goal of NACP-III is to halt and reverse the epidemic in India by 2012 by following an integrated approach of prevention, care, support and treatment. NACO has taken measures to ensure that people living with HIV have equal access to quality health services. By fostering close collaboration with NGOs, women's self-help groups, faith-based organizations, positive people's networks and communities, NACO hopes to improve access and accountability of the services. It stands committed to build an enabling environment where those infected and affected by HIV play a central role in all the responses to the epidemic – at the State, District and grassroots levels.

This will be achieved through the following four stages:

- 1. Prevention of new infections among high-risk groups and the general population, through
 - a. Saturation of coverage of high-risk groups through targeted interventions (TIs)
 - b. Scaled-up interventions for the general population

NACP-III Objectives for Condom Promotion

- Increase condom usage to 3.5 billion pieces per annum by 2012
- Ensure access to condom within a 15 minutes walking distance
- Increase access to condoms especially to men who have sex with non-regular partners
- Increase the number of condom stocking outlets to 3 million by 2012 with a focus on non-traditional outlets in high risk areas
- Increase the number of free condoms distributed through ICTC, ART, STI clinics and other service delivery outlets

- 2. Providing greater care, support and treatment to a larger number of people living with HIV
- 3. Strengthening the infrastructure, systems and human resources in prevention, care, support and treatment programmes at the District, State & National levels
- 4. Strengthening a nation-wide Strategic Information Management System

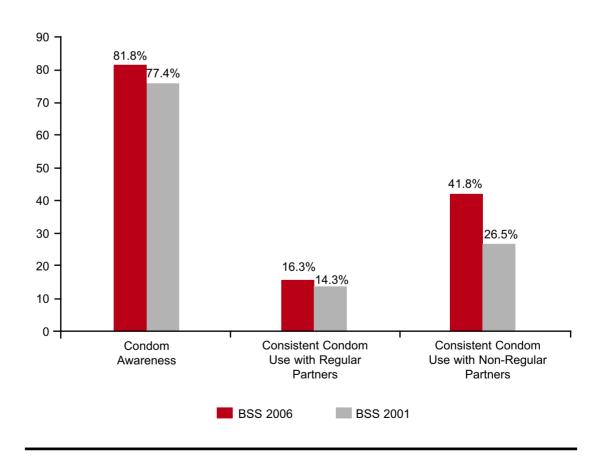
Halting and Reversing the HIV Epidemic – A Strategic Approach

The specific objective of the above strategy is to reduce new infections as estimated in the first year of the programme by:

- 60% in high prevalence states so as to obtain the reversal of the epidemic
- 40% in the vulnerable states so as to stabilize the epidemic

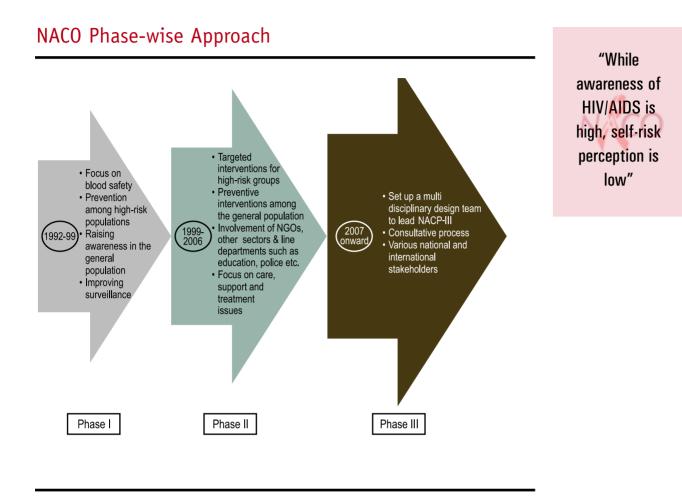
Condom Promotion for HIV Prevention - A Phased Approach

The Ministry of Health and Family Welfare (MoHFW) has been promoting condoms as an option for contraception in India since the late 1960s and has been responsible for the generic promotion, condom procurement and supply. This contributed significantly to increased condom use in northern states like Uttar Pradesh and Punjab. However, condom use was low in south Indian states where female sterilization was the main focus of family planning programmes.



Awareness and Consistent Condom Use

INTRODUCTION



The promotion of condoms received a major impetus and significance with the outbreak of HIV. With nearly 86 percent of HIV transmission through unsafe sex in the country, NACP has been promoting condom use as a safe sex practice for prevention of STI/RTI and HIV and protection from unwanted pregnancy.

Achievements in 2009-10

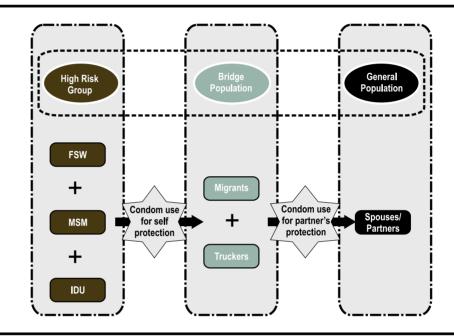
2009-10 represented the second year of the Condom Social Marketing Programme. The performance has been encouraging and is reflective of the enormous potential of this programme.

Condom Usage – Behavioural Indicators

Currently, around 2.27 million people in India are infected with HIV, with a prevalence of 0.29% (*Source*: HSS & HIV Estimation 2008 – NACO). A review of data derived from BSS has indicated that while awareness on HIV/AIDS appears to be high (80.4%), self-risk perception is fairly low. Closely aligned to this is the fact that while condom awareness is high (81.8%), consistent use of condoms is as low as 41.8% and the reported condom usage during the last sex encounter with non-regular partners is 58.3%. Among clients of sex workers as well, while awareness that consistent condom use can prevent HIV is nearly 90%, consistent use with commercial sex partners is low at 74% and falls to an alarming low level of 13.4% when it comes to consistent use with regular partners. (*Source:* BSS 2006).

- 87% of the Condom sales targets have been achieved in 2009-10
- 101% of the outlet coverage targets have been achieved as on April 2010
- Non-traditional outlets like cigarette and tea shops now contribute to 40% of sales
- 66% of the total outlet coverage has been contributed by non-traditional outlets
- 50% of the total sales contributed from rural areas

Target Group for Condom Promotion





Transgender supporting condom use

This reflects that awareness about condoms has not translated into behavioral outcomes. Based on this realization, the communication strategy has evolved to bring in behavioral change interventions to the core of social marketing programmes. The key is to addresss low self-risk perception. As a result, the focus of communication efforts has graduated from 'Condom Normalisation' to 'Enhancing Risk Perceptions.' The objective remains consistent to the earlier desired outcome of motivating target population to consistently use condoms for every sexual encounter – with regular and non-regular partners.

Guiding Strategies - Driving Accessibility, Availability & Usage

In order to achieve the primary programme objective of increasing consistent use of condom to near 100% and creating easy accessibility of condoms, NACO has adopted the following guiding strategies:

Increasing Retail Availability

Better access in rural and remote areas: Under NACP-III, NACO seeks to increase condom availability by integrating social marketing with targeted interventions, integrating condom supply chain management with the networks of major cooperatives and FMCG companies, and developing village level interfaces with self-help groups, post offices, rural banks, etc., besides skill building of health and link workers.

Condom - Behavior Change Communication

All channels of communication are being explored to promote condom use. While normalisation of condom use had been accorded prime importance in the initial stages, the current communication campaign focuses on enhancing risk perception to motivate the target group to use condoms.

A worker accessing condom from a CVM



Expected Outcomes

- The consumer off take of socially marketed condoms will increase from 640 million to 2 billion per annum by 2012
- Number of social marketing programmes in India will increase from 10 to 25 by 2012
- Number of outlets retailing condoms will increase from 1 million to 3 million by 2012
- 80% of the general population will be able to access condoms within 15 minutes of walking distance by 2012, as compared to 30 minutes of walking distance as it exists today

Priorities for Condom Promotion Programme

- Intensive efforts are undertaken to increase the availability of condoms in a much larger number of retail outlets spread across urban and rural markets and comprising traditional and non-traditional outlets
- Coordinated behaviour change communication to normalize and promote the consistent use of condoms
- Social marketing agencies provide service to the target population through supply and promotion of condoms for paid and casual sex partners of vulnerable groups
- The Logistics arrangements and the systems are set up to provide free supply condoms to the targeted population
- Access to female condoms to empower FSW
- Special condoms for MSM to increase condom usage among high risk groups



Promotion of condom among women

INCREASING AVAILABILITY, ACCESSIBILITY, AWARENESS AND USAGE

Targeted Social Marketing Programme, Phase-II (2009-10)

NACO continues to support the Condom Social Marketing Programme (CSMP). In 2009-10, NACO CSMP was implemented in 294 high priority districts across 25 States/Union Territoriess. With a budget allocation of US \$13 million, the programme provides performance-based funding for organisations implementing social marketing programmes. The social marketing organizations cover targeted interventions and the truckers' intervention areas in the states allocated to them, apart from the general population. Six Social Marketing Organizations (SMOs) are contracted to implement this programme. "Condom social marketing programme to be scaled-up to cover 370 high priority districts"

SMO	State
PSI	Andhra Pradesh, Delhi, Goa, Karnataka, Orissa, TN, Pondicherry and Rajasthan
DKT India	Assam, Manipur, Meghalaya, Mizoram, Nagaland, Tripura and Gujarat
Janani	Bihar
HLL	Punjab, Haryana, Chandigarh, Chattisgarh and West Bengal
PHS India	Jharkhand
HLFPPT	Madhya Pradesh, Maharashtra and Uttar Pradesh

As of April 2010, the NACO, CSMP, Phase-II had achieved a secondary sale of 268 million condoms by servicing 0.53 million condom outlets.

Targeted Social Marketing Programme, Phase-III: Scale-up of Condom Social Marketing Programme

Under NACO Condom Social Marketing Programme, 2008-09, 194 high priority districts were covered across 15 states. The programme was further scaled-up to additional 100 districts in year 2009-10 to cover 370 high priority districts. The number of Social Marketing Organizations has increased from four in year 2008-09 to six in 2009-10.

The programme has come a long way from covering 310,000 condom retail outlets to 520,879 in 2009-10. The condom volume target has also increased from 110 million condom sales in phase-I to 306 million condom sales in Phase-II during 2009-10.

Based on the extremely encouraging results from the previous years, NACO has approved to further scale-up the condom social marketing programme to the additional 76 high priority districts in 2010-11 to cover 370 high priority districts across India. This will cover 83% of the total population

of India. The estimated budget of this activity is US\$ 15.5 million. The proposed CSM programme is focused on increasing condom accessibility in rural as well as high risk areas.

The endeavour has been to target more ambitious yet achievable deliverables. The details of the CSM Programme Phase-III 2010-11 are as under:

Details	Deliverables	2010-11	Contribution to Total Deliverables
Programme Area	Numbers of CSM Districts	370	
	Total Sales Targets	453,584,508	
Condom Volume Sales	Dx Nirodh Sales	201,366,510	44%
	Rural Sales	222,824,191	49%
	Urban Sales	230,760,317	52%
	TO Sales	272,150,705	60%
	NTO Sales	181,433,803	40%
Outlet Coverage	Sales from New Outlets	90,716,902	20%
	Total numbers of Outlets	723,972	
	Rural Outlets	408,001	56%
	Urban Outlets	315,970	44%
	Traditional Outlets	289,589	40%
	Non-Traditional Outlets	434,383	60%
	New Outlets	180,993	25%
Communication	Mid Media Contacts	27,769,774	

CONDOM COMMUNICATION, CREATING IMPACT FOR BEHAVIOUR CHANGE

ondom promotion campaigns, both at the generic and brand promotion level, have been undertaken in India with varying levels of efforts over the last few decades. While the initial focus was on condoms as a key family planning method, the introduction of its "dual positioning" to address HIV prevention was introduced in the late 1980s. A variety of media and other approaches were tried for promotion with interpersonal communication (introducing the "triple protection" positioning, bringing in STIs in the gambit of protection.)

The overall impact of several years of communication on the topic has had an impact on the awareness levels about condoms in the context of their role in preventing unwanted pregnancies on one hand, and sexually transmitted infections, HIV/AIDS, on the other hand. Awareness about their preventative role, the establishment of certain brand identities,

"NACP promotes condom use for prevention of STI/RTI, HIV and unwanted pregnancy"

building facilitating environment such as freedom from embarrassment during purchase or hesitancy to talk about condoms, have all been attempted. Most have been successful, but the impact on behavior adoption in the context of usage of condoms has not been commensurate with the efforts made for condom promotion.

A conceptual approach and strategic framework for the way forward in communicating on condoms under NACP-III and the National Rural Health Mission is given below.



Strategic Framework for Condom Communication

The strategic approach outlined above may be best visualised when we understand condom behaviour as going beyond individual-centric decision-making to include a much wider contextual canvas as given in the diagram.

The overarching mood is upbeat about India having "arrived" on the global scene. Mobile phones, internet, malls are only some outward symbols that characterise a new confidence, a new belief that no one be left out and that technology and lifestyles once considered exclusive can now be accessed by many.

India has been quick to catch up with the changes. Even in areas such as social values, certain norms have come to be slowly accepted over time like having a small family and sending girl child to school are now widely accepted. Strategic positioning for condom communication, based on the above, rides on the dynamics of the times we live in and presents condom usage as the desired norm and non-usage as the exceptional behaviour. The best approach is to capture the adopter/user as one who has moved with the times, who has ridden the new wave of confidence, who radiates positive self-esteem, and who is genuinely surprised that "Aap condom nahin use kartey ho?" ("You mean you don't use condoms?").

Primary Target Audience

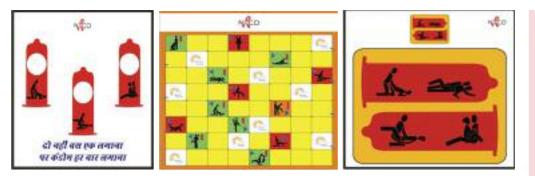
Sexually active men in age group of 15-49 years

Secondary Target Audience

- I. Sexually active women who would adopt condom usage for its triple benefits
- II. Retailers of condoms: they have been identified as significant change agents when it comes to consumer purchase behavior



Promotion of female condom through street theatre



"Mass media campaigns aim at normalising condom use and enhance risk perception"

BCC material for condom communication

While condom normalisation campaigns helped in gaining social support and promoted desirable beliefs, risk perception campaigns focus purely on the individual's behaviour. So with normalisation campaigns, an individual finds much needed encouragement and motivation to win over his social environment, i.e., community, peers and family. In risk perception campaigns, he is motivated to exercise his ability to act and change his behaviour with his responsible actions by using condom.

The underlying message of 'triple protection' would run through the communication, not overtly but as a necessary reinforcement, especially for newer audiences that get added to the audience profile every year. Messaging on triple protection forms the by-line of all the campaigns.

The Target Audience

The Target Audience for the campaign can be broadly classified into primary and secondary audience.

Campaign Objectives

- Increase in consistent condom use for prevention of HIV/AIDS, STI and unwanted pregnancies by 'normalising' condom usage and enhancing risk perceptions among the target groups and motivate them to use condoms consistently
- Establishment of a positive image of condoms and the condom user. Further, reinforcement of the fact that condoms give the user security to avoid HIV infection and other sexually transmitted infections.
- Maintaining a high level of awareness about risk with regard to unsafe sexual behaviour

Condom Normalisation

In the past, mass media promoting condom use had strong associations with commercial sex and promiscuity, which further reinforced a negative image of users. This has led to some levels of stigma associated with condoms such that they are not seen as an acceptable contraception product for family planning in places of high prevalence of HIV. NACO has undertaken successful mass media campaigns to normalize the use of condoms. These campaigns addressed this issue in multiple ways and harnessed social support and beliefs in favour of condom user.

Enhancing Risk Perceptions to Promote Condom Use

The latest research on major impediments to condom use has revealed that inspite the successful drives on condom normalisation, a sub-set of high risk population/general population do not perceive that they are at risk if they do not use condom regularly.

To address this NACO has prepared communication strategy to enhance risk perceptions associated with not using condom among target groups. The communication has been structured in three levels – to make consumer 'aware' about the risks being real for him, to make him prioritize taking risks versus using condom and to motivate him to be a consistent user of condom. With focus on each of these stages of messaging, different Behavior Change Communication campaigns are to be designed. These campaigns will collectively contribute to enhance risk perception among various population segments to promote knowledge and use of condoms.



Condom promotion activity during India International Trade Fair, New Delhi

CONDOM PROMOTION INITIATIVES— THE WAY FORWARD

Social Marketing of Condoms at TI Sites for Saturated Coverage

he key objective of the condom promotion programme is to protect all sexual contacts that can put someone at the risk of HIV and/or unwanted pregnancies. The NACP-III aims at enhancing the demand of condoms to 3.5 billion by 2012 and the number of outlets stocking condoms to 3 million by 2012.

Under NACP-III emphasis is placed on opening new non-traditional condom outlets. The objectives of condom promotion programme are being achieved through concentrated efforts towards increasing demand for condoms in the high-risk areas. Under NACO CSMP 2010-11, TSG has proposed to cover all the targeted intervention sites with social marketing of condoms.

NACP-III highlights the need to expand the social marketing programme to saturate coverage of highrisk areas and to bridge the gaps in the supply chain interfacing with the areas concentrated with the high-risk groups.

As on March 2010, there are 1,311 targeted interventions supported and managed by the State AIDS Control Societies, of which 79% are for high-risk groups, 15% cover migrants and remaining 6% cover the truckers. All the 38 states and union territories are covered through these targeted interventions.



Social marketing of condoms at a TI site

"NACP-III emphasis is on opening new nontraditional condom outlets"

Highway Coverage for Targeting Truckers and Cleaners

National Highways, nearly 60,000 km in length, are two percent of the total road network in India, but account for 40 percent of total road traffic. It is estimated that there are about 5 million truck drivers in India and about half of them ply on long-distance routes.

With an estimate of 11-16% HIV prevalence amongst long-distance truckers in India, 0.7 million truckers might be HIV positive. According to the BSS 2006, the occupation profile of the clients of sex workers shows that nearly 38% of them are either truckers or work in the transport sector.

This vulnerable community of truckers will be reached out and demand for condoms will be increased through coverage of halt points and highways that have high traffic flow. The focus is on National Highways 1 to 9, measuring nearly 12,000 km that pass through 16 states and 154 districts in India. They have high interstate traffic of truckers and nearly half of these highways pass through four high prevalence states. As part of NACO supported targeted interventions to reduce vulnerability of HIV to truckers, 131 trucker halt points have been mapped and identified. Through contracted social market organizations, 125 halt points have been prioritised and covered for condom promotion and distribution.

According to BSS 2006, the occupation profile of the clients of sex workers shows that nearly 38% of the clients of sex workers are either truckers or work in the transportation sector. As part of NACO supported targeted interventions to reduce vulnerability of truckers, 131 truckers halt points have been mapped and identified. Through contracted social marketing organizations, all these truckers halt points will be covered for condom distribution.

Out of this 131 trucker halt points; 99 trucker halt points are being covered for condom distribution activities under NACO CSMP for reaching truckers and cleaners which form one of the most concerning high risk group. In 2010-11, NACO proposes to enhance coverage to 125 truckers halt points across country.



Condom normalisation among truckers

Coverage of Migrants

There are over 200 million migrants in India (*Source:* NSS.) A recent analysis of Census 2001 data indicates that during 1991-2001, about 61% of migrants moved within Districts, 24% within States, and 13% moved inter-State. The condom programme will prioritise short-term migrants who account for a total of 8.9 million men and women.

Strengthening Government of India's Brand of Subsidized Condom ("Deluxe Nirodh")

"Deluxe Nirodh" brand of Ministry of Health and Family Welfare was launched in 1968 under the Government of India Condom Social Marketing Programme. This brand is distributed by

various agencies across country. These agencies are provided with promotional subsidies by MoHFW. In addition to its own brand of subsidized condom, these agencies also support Deluxe Nirodh across the country. NACO facilitates the provision of distribution rights from MoHFW to Social Marketing Organisations for Deluxe Nirodh.

Looking at the strength of the brand, NACO intends to reposition Deluxe Nirodh. This will be carried out systematically to ensure that (a) the brand is perceived as more contemporary and relevant, (b) build on existing brand equity, and (c) existing users of brand do not feel disconnected with the brand. The following strategy will be followed for the smooth and effective revamping of 'Deluxe Nirodh':

- Engaging with the supply partners at all levels for creating familiarity with the new packaging and positioning
- Design and develop communication material for mass media campaign
- Design and develop creative for below the line execution of communication concepts of brand positioning
- Consumer education through mid-media events and increased visibility of brand through local vehicles of mass media

Coverage of STI Clinics with Socially Marketed Condoms

NACO supports the Public Private Partnership programme for treatment of curable STIs by franchising the private health care providers. These private health care providers will be trained and supplied with drugs by partner organisations contracted by NACO.

Social marketing organisation distributing and promoting condoms in their respective contracted states will also ensure the coverage of these franchise outlets with condoms. A total of 20,000 STI health care providers franchised by the partner organisations will be covered through social marketing programmes.

Optimisation of Free Supply of Condoms

The targeted interventions of the National AIDS Control Organization and State AIDS Control Societies in coordination with the district health authorities organise the supply of free condoms. The NACP-III condom programme relies on social marketing for expanding use of condoms. Free supply is limited to targeted interventions.

"Condom programme prioritises TI sites, trucker halt points and shortterm migrants" NACO has adopted a multi pronged strategy to increase the efficiency of distribution system of free condom at various stages in the distribution chain which includes:

- Annual demand estimation of free condoms as done at the level of TI NGO and SACS based on previous year's data analysis.
- Regular monthly tracking of free condom supply received from MoHFW to SACS to avoid any stock out situation at SACS.
- Supply analysis of free condoms from SACS to TI NGOs and subsequent distribution of free condoms from various TI NGOs to the target group population

This strategy has proved fruitful as NACO has been successful in significantly reducing wastage of free condoms. The demand of 750 million pieces of free condoms (2007-2008) has been brought down to 599 million pieces of free condoms (2009-10.) This disciplined approach of NACO has led to the achievement of optimum coverage of free supply of condoms at all TI sites without any reported incidence of stock outs at SACS and TI sites.

Innovation to Propel Programme to Greater Objectives

NACO has launched a number of innovative approaches in promotion of condom use.

Condom Vending Machines (CVM)

During 2005-07, 11,025 CVMs were installed in 10 states under the Phase-I. The CVMs provide 24x7 access to quality condoms in a non-embarrassing situation. Another 10,025 CVMs were installed in 4 metros (Delhi, Mumbai, Kolkata & Chennai) and in two major cities of UP and Orissa during Phase-



Condom demonstration during outreach activity

II of this programme that began in 2008. A total of 2.2 million condoms have been vended by CVMs.

Female Condoms

The Female Condom programme objectives are:

- To address concern regarding unwillingness of male partner to use condom
- To empower FSW to take decision to use condom

The FC programme was implemented through selected NGOs in 8 states. The results from the pre-programme assessment indicated high levels of acceptance of FCs among sex workers and nearly 5% reduction in unprotected sex acts. Based on the encouraging results from the FC

pre-programming assessment in 6 states, NACO is funding the FC scale-up programme in 4 states of Tamil Nadu, Andhra Pradesh, West Bengal and Maharashtra. Another FC scale-up programme funded by UNFPA is being implemented in 4 states (Bihar, Jharkhand, Orissa and Rajasthan.) NACO is providing female condoms at highly subsidized rates. Based on the learnings of the current FC programme, TSG has proposed to scale-up the female condom programme in 2 to 3 districts of another 9 states. NACO has procured 0.3 million female condoms, out of which 0.24 million pieces have been delivered to implementing agencies.

Special Condoms for MSM

The prevention strategies of NACP-III recommend innovations in condom attributes to support coverage of MSM for HIV prevention. The MSM interventions implemented under NACP-II had articulated the limitation of the normal lubricated condoms for MSM. Product attributes such as thickness and provision of additional lubricants in sachets along with condoms have been considered to address the needs of the MSM. As a result, a thicker and more lubricated condom brand "Spice Up" is being launched to cater to the special needs of MSM. These condoms will be socially marketed in the targeted intervention sites.

"CVMs, Female Condom, special condoms for MSM are among the inovative approaches "

USING RESEARCH FOR EVIDENCE BASED PROGRAMMING

Using the year 2010-11, CSM programme is focusing on generating demand for condoms (particularly Deluxe Nirodh), minimizing wastage of condom in free supply distribution system, increasing condom penetration, quality of coverage in programme districts, operational efficiency, hence, number of studies have been planned to evaluate the effectiveness of these interventions such as:

- The study on Baseline Condom Promotion Impact Survey (CPIS) to establish condom related KAP indicators at the beginning of the programme to track the changes in indictors at the end of programme
- The study on Condom Access and Coverage Evaluation (CACE) to analyze the extent to which the programme has been able to create accessibility of condom
- The Condom Fate-Study (CFS) to estimate the wastage of condom in free distribution system
- The Post Campaign Quantitative Studies (PCQS) to evaluate the impact of the mass-media campaign to develop new communication strategy

Baseline Condom Promotion Impact Survey, 2010

The key objective of the study is to establish condoms related knowledge, attitude and practice (KAP) indicators. However, the study would also provide estimates related to availability, access and coverage of condoms. The study is also expected to inform programme about reach/exposure of the target groups to various communication/BCC campaign on condom promotion. The study will provide an accurate assessment of the market which will ensure that the interventions developed are specific to the needs of the target population, thus, accordingly demand generation and supply strategies will be streamlined.

Condom Access and Coverage Evaluation, 2010

The core objective of this study is to assess the coverage and quality of socially and commercially marketed condoms. The coverage would be seen across rural/urban, hotspot/trucker halt point site, traditional outlet/non-traditional outlet. Whereas, the quality of coverage would be assessed at retail outlet level that includes placement of condom, their visibility, POP material, incidence of condom stock out and operational timings. As the programme gears up for the next year, this evaluation will give feedback on coverage status to streamline supply related strategies and also provide insights on quality of coverage to inform SMOs for further improvements.

Condom Fate Study

The main objective of this study is to assess gaps in free condom supply from SACS to TI NGO and TI NGO to Targeted Group and estimate the wastage of free condoms supply at SACS level, TI NGO level,

high risk groups (HRG) and general population level. The study will generate accurate estimates of wastage at each of the above mentioned level and provide inputs to minimize wastage.

Post-Campaign Quantitative Study

A comprehensive quantitative study will be undertaken to measure the effectiveness of the communication campaign and explore the issues related to risk perception and major barriers or impediments to use condoms. The feedback on effectiveness of BCC campaign and their opinion would be used to develop new campaign strategy.

Condom Vending Machines Programme Evaluation Study

Though a large number of CVMs have been installed during second phase, the performance of CVMs has been significantly below target. At the national level the observed off take rate from each CVM is about 0.75 condoms per day which is far less than the target. Therefore, a research study has been commissioned to evaluate the performance of CVMs in selected cities in India.

The study will determine the reasons for low off take from the CVMs and provide recommendation on how to rectify the same. These recommendations will emerge after observing poor, average and above average performing CVMs on certain identified parameters. Hence, it is envisaged to distinguish CVMs in a city on the basis of their off take rate (poor, average and above average) and determine the factors which contributes to this. The factors contributing to above average may be replicated elsewhere, whereas, the ones which are below average, the major impediments of using CVMs can be explored in detail.

Condom Quality Audit

As part of NACP-III, condom promotion activities have led to increase in the demand of condoms but various social marketing agencies have faced situations of low quality condoms labeled as improper condoms. Besides there have been cases of near expiry condoms flooded with higher trade margins, which may expire by the time they find their way to the user. Further the deterioration in quality is also caused by improper storage in the supply channel. As it is imperative for a condom to be used at high-risk situations, the need to use a quality condom is extremely important.

Hence, a study on condom quality audit has been initiated in April 2010 to determine the quality of condom at the consumer level particularly in high risk and general population areas. The study would collect samples for selected condom brands (which have higher sales at the national/sub-national level) and conduct a quality test as per schedule 'R' of Drugs and Cosmetic act.

"CVM programme evaluation and condom quality audit studies initiated"

NACO envisions an India where every person living with HIV has access to quality care and is treated with dignity. Effective prevention, care and support is possible in an environment where human rights are respected and where those infected or affected by HIV/AIDS live a life without stigma and discrimination.

NACO has taken measures to ensure that people living with HIV have equal access to quality health services. By fostering close collaboration with NGOs, women's self-help groups, faith-based organizations, positive people's networks and communities, NACO hopes to improve access and accountability of the services. It stands committed to building an enabling environment wherein those infected and affected by HIV play a central role in all responses to the epidemic - at state, district, and grassroots level.

NACO is thus committed to contain the spread of HIV in India by building an all-encompassing response reaching out to diverse populations. We endeavour to provide people with accurate, complete and consistent information about HIV, promote use of condoms for protection, and emphasize treatment of sexually transmitted diseases. NACO works to motivate men and women for a responsible sexual behavior.

NACO believes that people need to be aware, motivated, equipped, and empowered with knowledge so that they can protect themselves from the impact of HIV. We confront a stark reality - HIV can happen to any of us. Our hope is that anyone can be saved from the infection with appropriate information on prevention. NACO is built on a foundation of care and support, and is committed to consistently fabricate strategic responses for combating HIV/AIDS situation in India.

