

Female Condoms: Lessons from Zimbabwe

Zimbabwe is regularly cited as a female condom success story and has the highest distribution and sales of female condoms in the world.¹ This success is due in large part to an array of factors including: strong civil society participation, innovative social marketing, comprehensive and robust condom distribution mechanisms, capacity building of service providers across sectors, and sustained financial and technical support from the Government of Zimbabwe and funding partners. The case of Zimbabwe provides important considerations for female condom introduction, effective distribution and programming, and high rates of acceptability among users.

FEMALE CONDOM INTRODUCTION

Women's rights and reproductive health organizations played a significant role in bringing female condoms to Zimbabwe by identifying a need for the product and advocating for their government's support in procurement. Women and AIDS Support Network (WASN) organized a successful, nationwide petition drive in support of female condoms that coincided with the government's efforts. The government of Zimbabwe launched the Female Condom in 1997. Following the launch, PSI marketed the branded Female Condom as '*Care Contraceptive Sheath*' while the unbranded FC was made available in the public sector through 30 pilot districts.

PSI's U.S.-funded programs used mass media to position *Care* female condoms as contraception so that use for HIV prevention was not stigmatized. PSI employed innovative social marketing strategies to promote the female condom, using hair salons in low-income, urban areas as training, distribution and retail outlets. With funding from the United States Agency for International Development (USAID) and the United Kingdom Department for International Development (DfID), PSI trained female hair stylists from 500 salons in low-income neighborhoods to demonstrate correct use, discuss common misperceptions and answer questions on female condoms.² The public sector program, however, faced setbacks due to many challenges including the need for a strategy to guide programming. Despite this, between 2002 and 2004, the percentage of Zimbabwean women who reported ever using the female condom increased from 15 percent to 28 percent.³

CURRENT FEMALE CONDOM DEVELOPMENTS

In recent years, many exciting developments have converged to reenergize and strengthen female condom procurement, distribution and programming in Zimbabwe. In 2005, the United Nations Population Fund (UNFPA) launched the Global Female Condom Initiative aimed at scaling up access to and use of female condoms by offering financial and technical support to country programs. Zimbabwe was enrolled in this initiative.

Recognizing the need for a more strategic urban/rural and public/social marketing approach in Zimbabwe, UNFPA facilitated and supported the government in forming a Technical Support Group (TSG) on condom programming.⁴ The TSG, consisting of representatives from the Ministry of Health and Child Welfare, the Zimbabwe National Family Planning Council, PSI, civil society organizations, and donors, assisted the government in undertaking a female condom research review as well as a situation analysis to provide evidence for the development of a national female condom strategy.

Next, the TSG organized a National Stakeholder Meeting in 2006 to discuss the research review and situation analysis and to outline a road map for scaling up female condom programming. Civil society had strong participation in the stakeholder meeting, with representation from organizations including the Interfaith Network, Men's Forum on Gender, Women's Action Group, Women and AIDS Support Network, Business Council on AIDS and the Network of People Living with HIV.⁵ This meeting culminated in the development of the Zimbabwe Five Year National Female Condom Strategy (2006-2010), which harmonized with the national AIDS response and reproductive health program.⁶ Since then, the stakeholders have had ongoing involvement in rolling out the Female Condom Strategy.

Female and male condoms are distributed from all public sector health institutions including Community Based Distributors (CBD) who work at the community level to distribute contraceptive commodities. Supported by JSI/Deliver through funding from USAID, the public sector adopted a robust system of distributing condoms directly to service delivery points throughout the country, reducing condom stock-outs to less than 5%.

For socially marketed condoms, male condom sales are mainly through commercial outlets such as retail outlets, pharmacies, beer halls and grocery stores throughout the country. Female condoms are mainly sold through a combination of pharmacies and through hair salons, as described above.

In addition to the hair salon initiative, program implementers have pursued alternative channels of distribution and programming, such as barber shops (targeting men), commercial sex worker networks, and support groups for people living with HIV and AIDS. For instance, women living with HIV and AIDS have been trained to conduct interpersonal communication trainings on positive prevention and have sold *Care* female condoms to support groups.⁷

As a result of these interventions, sales of the *Care* female condom and uptake of public sector female condoms have increased. Zimbabwe's distribution figures far exceed what most countries have been able to accomplish. Strikingly, from 2004-2007, *Care* female condom distribution increased 150 percent and public sector distribution tripled.⁸

LESSONS

Based on lessons from the Zimbabwean context, there are at least three basic elements that can contribute toward successful female condom programming⁹:

- Participatory development of a national female condom strategy, inclusive of diverse civil society actors.
- A strong mix of public sector and social marketing support in both urban and rural areas.
- Sustained political, financial and technical support for capacity building and commodities from the government, the bilateral community, the United Nations, and other donors.

While each country faces different opportunities, challenges and constraints around female condoms, it is critical to have robust support from civil society, public and private sectors and the donor community for sustainable and effective female condom distribution and programming.

NOTES

¹ United Nations Population Fund (UNFPA). 2007. *UNFPA Female Condom Global Initiative: 2006-2007 Progress Report*. New York: UNFPA.

² CHANGE. 2008.

³ CHANGE. 2008.

⁴ UNFPA. 2007.

⁵ Daisy Nyamukapa, e-mail message to Implementing Best Practices Global e-Forum on Female Condoms, May 1, 2008.

⁶ UNFPA. 2007.

⁷ Ibid.

⁸ Ibid.

⁹ Bruce Campbell, e-mail message to Implementing Best Practices Global e-Forum on Female Condoms, April 30, 2008.