Exploring Experiences and Perceptions on condoms in Tanzania

PSI/Tanzania 2009

© Population Services International, 2009

<table>
<thead>
<tr>
<th>Contact Information:</th>
</tr>
</thead>
<tbody>
<tr>
<td>James Kajuna, Research Director</td>
</tr>
<tr>
<td>Population Services International Tanzania</td>
</tr>
<tr>
<td>Msasani Peninsula</td>
</tr>
<tr>
<td>Plot No. 1347/48</td>
</tr>
<tr>
<td>P.O. Box 33500</td>
</tr>
<tr>
<td>Dar es Salaam</td>
</tr>
<tr>
<td><a href="mailto:jkajuna@psi.or.tz">jkajuna@psi.or.tz</a></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Amy Kate Herman-Roloff, Regional Researcher</td>
</tr>
<tr>
<td>Population Services International</td>
</tr>
<tr>
<td>Whitefield Place, School Lane</td>
</tr>
<tr>
<td>P.O. Box 22591-00400</td>
</tr>
<tr>
<td>Westlands, Nairobi Kenya</td>
</tr>
<tr>
<td>+254 20 444 0125</td>
</tr>
<tr>
<td><a href="mailto:aherman-roloff@psi.org">aherman-roloff@psi.org</a></td>
</tr>
</tbody>
</table>
Introduction

Program Description

PSI has been working in Tanzania since 1993 and is focused on the development of tools and communications to aid in the implementation of HIV/AIDS prevention, malaria prevention, reproductive health, and diarrheal disease prevention programs. With support from multilateral and bilateral donor organizations (The Global Fund to Fight AIDS, Tuberculosis and Malaria, DfID, the Royal Netherlands Embassy, KfW, and the Development Cooperation of Ireland) and the Tanzanian government, PSI/Tanzania plays a leading role in the distribution and promotion of affordable, essential health products and services, addressing critical health issues, whilst at the same time assisting in the development of private sector enterprise in the country.

In Tanzania, PSI socially markets three main condom brands, Salama, and Familia, both male condoms and Care, a female condom. The Salama umbrella brand has three lines, Salama regular (launched in 1993 and currently sold at the average consumer price of Tsh 100 for a pack of three condoms), Salama Studs (launched in 2004 and as, a premium brand currently selling at the consumer price of Tsh 200 per three pack, and Salama 3 Bomba (introduced in 2006 as another premium brand, colored and scented in three varieties - strawberry, banana and chocolate, and currently selling at a consumer price of Tsh 200 per three pack). PSI’s female condom “Care” first launched in 1998 and currently sells at the consumer price of Tsh 100 per two packs.

Familia PSI’s family planning dual protection focused male condom, launched in 2007, sells at a consumer price of Tsh 500 for a ten pack. The program has three main strategies to ensure the success of its social marketing activities: accessibility and visibility of products, affordability to low-income customers, and the creation of demand through strong brand associations and targeted communications campaigns. Salama brand condoms are positioned as an affordable option for young adults, specifically targeting 15 -24 year olds. The Familia brand is designed for adults in longer-term relationships and for HIV discordant couples. The Care female condom is positioned for women in steady relationships and commercial sex workers.

Study Rationale

Through a greater understanding of the target audience’s current perception of the Salama brand, drivers of Salama purchase as compared to similar market competitors and perceived positioning of Salama, this study will seek to:

1. Inform a new pricing strategy, and
2. Help to pilot and refine brand equity scales.

Anecdotal evidence suggests that the perception in the market of the intended audience for Salama does not match its current positioning. Additionally, the face of the brand has remained unchanged for more than five years and in an increasingly competitive market there are concerns the brand image appears outdated. Lastly, the price has not changed for more than five years, potentially undercutting the growth of a relatively new commercial market, and resulting in leakage cross borders into neighboring countries with stronger...
commercial markets (specifically Kenya where there are concerns of upsetting the balance of PSI’s socially marketed brand, Trust).

PSI/Tanzania has conducted two rounds of TRaC surveys among young adults, aged 15-24. While these surveys did cover a portion of the target audience intended for this FoQus, the surveys did not address perceptions on brand positioning, equity, or strength in the market, pricing, or drivers of condom purchase. Therefore the results of this FoQus on Marketing Planning will help PSI/Tanzania to better understand the strength of Salama as a brand, how it is actually and currently perceived by consumers in the market, who these consumers are, and if an image revitalization is necessary. This FoQus will additionally provide insight into a revised pricing strategy.

**FoQus on Marketing Planning**

FoQus on Marketing Planning is the process of discovering and refining an idea into a complete description for guiding intervention design and branding a product, service, or behavior. It uses qualitative research to facilitate more effective social marketing activities and give voice to the target audience.

FoQus on Marketing Planning is conducted when no segmentation results are available through quantitative research (TRaC studies). In some cases, the descriptive output produced through the FoQus on Marketing Planning process will serve as a surrogate for a quantitative segmentation “dashboard” table. In other cases, FoQus on Marketing Planning results will be used as input into a TRaC study design and questionnaire.

The six-step process listed below is used to design “the concept.” For steps one through four, qualitative methods are used to generate insight and understanding relevant for designing social marketing communication activities. The last two steps involve application of these findings to create specific social marketing outputs.

1. Identify beliefs to reinforce and beliefs to change
2. Build a person profile by:
   a. creating one or more character archetypes
   b. identifying successful strategies used to behave
3. Understand the current brand position and associations
4. Describe the target group’s openness and skill to process messages related to the product, behavior, or service being targeted
5. Draw a Category Map that identifies the frame of reference—the competing products, behaviors, or services—that forms the context in which the archetype makes decisions regarding adoption of the desired behavior
6. Identify likely determinants and create one or more Qualitative Segmentation Diagrams to guide marketers toward determinants most likely to maximize intervention impact

Through this process, PSI is developing a common language and set of tools for prioritizing intervention areas and developing concepts. FoQus on Marketing Planning enables country programs to learn from the target audience, build capacity to develop concepts based on evidence, and develop brands, campaigns,
and messages that are consistently effective at influencing health-related behavior. This document describes the objectives, methods and anticipated outputs relevant for the steps described above.

**Research Objectives**

This study aims to gather information useful for revitalizing the *Salama* brand for the following eight elements of the concept for salama among males and females aged 18 – 29 years.

Specifically, the study objectives are to:

a. Identify beliefs to reinforce and beliefs to change related to condom use

b. Build one or more character archetypes

c. Identify current strategies used by target audience members to overcome obstacles to the desired behavior

d. Describe the openings when, where, and by whom target audience members can be communicated with

e. Describe target audience members’ past experiences with the desired behavior and alternative behaviors in the category

f. Describe the level of knowledge and sophistication with which target audience members approach decisions about the desired behavior

g. Understand current condom brand associations

**Timeline**

It is planned that the data collection process takes place in October and November 2009 and the interpretation session during the month of December 2009. The study timeline can be found in Appendix A. The research process involves study design preparation, internal and external review of the study design, request for proposals and evaluation of proposals, training of research assistants, data collection, transcription and translation, data analysis and report writing.

**Methodology**

**Study Type**

Between October 2009 and December 2009 PSI/Tanzania will conduct a FoQus on Marketing Planning study to gather information on factors related to experiences and perceptions on condoms among males and females 18-29 in Morogoro region. A variety of qualitative methods will be used to collect information on this research topic, including spoken narratives, photo narratives and collage. These methods have been chosen for the rich textual data that emerges when study participants are given an opportunity to share their personal stories. It is expected that 20 interviews will be conducted among women and men aged 18 - 29.
Similarly, **photo narratives** allow study participants to describe their experiences both verbally and visually, presenting another means by which to understand their lives. A total of 4 photo narratives will be conducted in each location (urban Morogoro and peri urban Morogoro) for a total of 8 photo narratives. Two photo narratives will be divided into two males and females in both urban and peri urban. Photos allow study participants to choose what to photograph and, as a result, produce data that is driven by what is important to members of the target audience. Photos also capture details that might otherwise go unnoticed. Story telling takes place naturally when participants are asked “What’s going on in this picture?” Photos also enhance the analysis and interpretation processes by providing researchers (and marketers) with a view into the target audience’s world and the context in which decision making takes place.

Collages give the study participants a chance to express their views and opinions about the brand or desired behavior. The participant will get an opportunity to receive different picture of different characters in different environment and location and arrange them according to what they think describe the brand. This will enable the participants to provide their perception towards the brand or desired behavior. A total of 4 collages will be conducted in each location (urban Morogoro and peri urban Morogoro) for a total of 8 collages. 2 collages will be allocated into 2 males and females in both locations.

**Study Population**

This study will be conducted among men and women aged 18 – 29 from Morogoro urban and peri urban. The interviews will be conducted among ever used or current condom users.

**Sample size and sampling strategy**

The sample size to participate in the study will be 20 people living in Morogoro urban and peri urban. The sample will be stratified by urban 6 men and 4 women and peri urban (6 men and 4 women. Researchers will be instructed to recruit 6 men using Salama condom in both urban and peri urban, 6 men using other brands in both urban and peri urban. 4 women using Salama condom in both urban and peri urban, 4 women using other brands in both urban and peri urban.

Collecting data from those currently using and those using other brands should ensure that researchers are able to collect sufficient data on beliefs to change, beliefs to reinforce, and strategies used to behave. The data collection scheme is shown below:

<table>
<thead>
<tr>
<th>Location</th>
<th>Men using Salama</th>
<th>Men using other brands</th>
<th>Women using Salama</th>
<th>Women using other brands</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morogoro Urban</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Morogoro peri urban</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>6</td>
<td>6</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Participants in the narrative interviews will also be requested to participate in photo narratives. Two men using Salama in urban and other 2 from rural will be requested to participate in photo narratives. Similarly two women using Salama in urban and other two from rural will be given cameras to participate in photo narratives.
**Recruitment of Study Participant**

Respondents will be recruited with the help of local community informants in different locations. The Interviewers will introduce themselves to the local community informants who will update them of the geography of their location. The Local community informant will help the interviewers to identify hotspots where interviewers could target and recruit the right candidate. Recruitment criteria for this study will be as follows;

- Recruit males between the age of 18 – 29 who are users of Salama condom (current users)
- Recruit males between the age of 18 – 29 who are uses other brands apart from Salama condom.
- Recruit females between the age of 18 – 29 who are users of Salama condom
- Recruit females between the age of 18 – 29 who are users of other brands apart from salama condom.

Recruitment of participant will ensure that they are recruited from different social economic backgrounds to ensure the higher and lower income level income earners are well represented. The recruitment will also ensure people with different professionals and education are well represented to avoid bias. Recruitment will ensure all age groups are well represented (10 people between the age of 18-24 and 10 participants between the ages of 25-29). A screener will be administered and if they fall in the category and are willing to be interviewed they will be selected to participate in the interview. Measures will be taken to ensure the recruitment process is conducted in a professional manner. Recruiters will be encouraged not to use convenient methods by recruiting the people that they know. The manager in charge will be required to review all the screeners to ensure the above mentioned criteria’s are considered.

**Human Subjects Ethical Consideration**

This study has been determined to be “research” and will be initiated only after receiving written approval or written exemption from the University of Dar es Salaam, to which PSI has ceded review, then submitted later the PSI Research Ethics Board. Those implementing this study will comply with all policies and procedures of the PSI Research Ethics Board.

This study methodology has been designed to address the following ethical principles: respect for persons, beneficence and justice. Efforts are made to protect individual autonomy, minimize harm and maximize benefits and equitably distribute risks and benefits by using procedures which are consistent with sound research designs that take these issues into consideration.

**Respect for persons and individual autonomy:**

*What are the major risks and concerns associated with participation in this study?*

- Inconvenience when a survey is administered at an inconvenient time or place or simply takes too long to administer.
- Emotional or psychological effects when a survey causes upset, worry, or depression, given the sensitivity of the studied issues.

The most significant risk is a breach of confidentiality. The following risks are associated with a potential breach of confidentiality:

- Social risk due to stigma or other negative social outcomes of breach of confidentiality.
• Physical risk if revelations about other sexual partners get back to the participants’ main partners

**What strategies will be used to address risks?**
Interviewers will be carefully trained in human subjects protection, especially the importance of protecting privacy and confidentiality. No personal identifying information will be collected, i.e., name or initials, address, birth date, etc. Interviews will also be held in a private location of the informant’s choice.

**What strategies will be used to protect identity?**
There is a risk that respondents will experience discomfort revealing information about engaging in sexual activity (assumed through condom use and purchase). Respondents will be informed that they are allowed to choose to not respond to any of the moderator’s questions and are allowed to quit the study at any time. Respondents will be provided contact information for a PSI employee who will be available to answer any questions about condoms and condom use after the study. Field supervisors will be present to ensure that appropriate sampling and interview methodologies are being applied.

**Spoken Narratives**
Participants will be told that everything said during the study is confidential.

**Obtaining the informed consent**
No subjects will be interviewed without their informed consent. Prospective subjects will be read the attached statement which:
• Explains that they are being asked to participate in research
• Explains the purpose of this research and the number of subjects involved
• Clarifies the expected duration of the subject’s participation and the procedure followed
• Explains how the research will benefit the target groups and/or the participant, or society
• Describes potential risks if any are anticipated or explains that there are no known risks
• Explains that there will be no costs for participating
• Describes compensation for participating or explains that there will be no compensation
• Clarifies that the subject’s participation is anonymous and that individual responses will be not be linked to identifying information
• States that the subject’s participation is voluntary and that refusal to participate will have no consequences
• States that some questions may cause discomfort and that subjects may refuse to answer individual questions or desist from the interview at any time
• Provides the name and telephone number of a PSI staff member who the subject may contact with any pertinent questions about the research and health topics discussed, or to whom the subject may issue a complaint
• Explains how subjects provide verbal consent/assent

**Documenting informed consent**
The only record linking the subject and the research will be the consent form document and the principal risk will be potential harm resulting from a breach of confidentiality. A verbal consent form will be used. The interviewer will sign the form after receiving a verbal consent. Researchers will provide subjects with a written statement regarding the research.
**What methods will be used to protect the privacy of subjects and to maintain the confidentiality of data?**

As stated above, participants will not be linked to their responses via a signed informed consent form. Participants will not be identifiable via the transcripts. Quotations used in reports will not be attributed to the participants using the participants’ names. Instead, speakers will be identified with broad demographic characteristics.

**Beneficence (maximize benefits and minimize harm):**

**What are the benefits of this study? How do they compare to the risks?**

There is unlikely to be any immediate or direct benefit to participants themselves. However, knowledge gained about experiences and perceptions on condom purchase will be used to provide insight into:

1. Revitalization of the *Salama* brand based on perceived brand positioning among the target audience and within the market,
2. Revising the pricing strategy, and
3. Refining the brand equity scales.

**What are the provisions for monitoring the data collected to ensure the safety and wellbeing of subjects?**

The research director will periodically review the data collection to ensure that no information is included that could identify participant or others.

**Justice (equitable distribution of research benefits and risks):**

**How will you ensure that the selection of subjects is equitable?**

As described in the sampling section above, all relevant subgroups (age, sex, urban/rural) for whom results are expected to vary will have the opportunity to participate.

**Data collection**

The University of Dar es Salaam, department of Sociology and Anthropology will be subcontracted to conduct fieldwork for this study. Members of the team will include two principal researchers and four interviewers who have experience with qualitative data collection. The team will be the same as those who participated in the two previous PSI Tanzania FoQuS on IUD and CP studies in 2009 and the study team will be trained in the study design and FoQus methodology on this specific topic by PSI and will collect data over a three-week period in November 2009.

For photo narratives each study participant will be given a digital camera to use for 5 days. Participants will be told to photograph people, places, or other things that tempt them to use Salama condoms. They will be told to include the things that catch their eyes, when they see Salama condoms or other related visual that motivates them to use *Salama* condoms as opposed to other brands. They should also take a minimum of 15 photographs and a maximum of 25 Photographs. The photographs will be developed and printed for follow up interviews at the agreed venues after 5 days. Instructions will be provided to the respondents on what type of picture should be taken.
For collages participants will be provided with pictures from different magazines, newspapers, and journals, they will be required to sort the pictures according to who they think is a user of Salama condom and non user of Salama condom and give reasons. Places where Salama condom users and non users meet and any other interesting thing about Salama condoms and other brands
This will mainly give their perception of who they think is a user of Salama condom and users of other brands.

Data collection procedures

Once appropriate study sites have been selected, interviewers will attempt to identify eligible participants. Interviews will likely occur at any convenient or at a comfortable location where the participant would feel safe and secure. All interviews will be conducted in Swahili and audio recorded.
Breaks will be used to make sure that the respondent is energetic to answer all the questions. Once the interviewer has noted that the respondents are tired, she/he should use tactics to energize the respondents.

Participants of photonarratives and collage will be drawn from the 20 people who will be interviewed. Interviewer will explain photonarratives and collages to all participants and those who will be interested will therefore be given instruction on how to participate.

Data collection tool

PSI/Tanzania researchers and principal researchers from the university will prepare discussion guides in collaboration with programmers/marketers. The discussion guides will address the components of the FoQus on Marketing Planning framework and will also gather information related to brand equity of Salama condoms.

The guides are developed in such a way as to allow participants to provide as much detailed information as possible and to rely on anticipated and spontaneous probes to elicit additional detail. The guide will be written in English and then translated into Swahili. It will be pre-tested during the interviewer training and modified accordingly.

The PSI/Tanzania research team especially the qualitative research manager will oversee the training of research assistants and the data collection process, including management and supervision of field teams. One PSI staff will be responsible for supervising data collection.

The guide is not intended to direct the interview or dictate the order of questioning. Priority is given to giving participants an opportunity to explain their photos and describe their experience. Moderators/facilitator will refer to the guide only to remind themselves of the topics to be addressed.

Data Analysis

Interviews will be audio recorded, transcribed and translated into English. Interview transcripts will be coded according to the 9 codes for FoQus studies in Word documents, and coding will be verified by additional review of the coded transcripts. Once the initial coding is complete, a second round of coding will occur, during which 30% of the best pieces of coded text will be selected.
The research team from the University of Dar es Salaam will deliver to PSI/Tanzania both the complete coded transcripts of the interviews, as well as a document with all of the selected reduced codes. The reduced code document should organize all of the pieces of text according to their assigned code, i.e. Beliefs to Reinforce – the best 30% of codes, Beliefs to Change – the best 30% of codes, and so on.

Photos will be downloaded and labeled with a description that refers to the action or theme represented in the photo. Photos for each study participant will be kept in an individual electronic file. By focusing on recurring themes a unified photo narrative will be developed during the data analysis and photo selection process (from amongst all participants). Information from the photonarratives and collages will be analyzed and grouped into different themes that will immerge from the data and present during the interpretation session.

**Data Interpretation**

Two days in December will be spent with all members of the marketing and communications team and the HIV teams to interpret the data and complete the FoQus on Marketing Planning dashboard. The first day will start with the research team presenting a unified narrative. This will provide an overview of study findings and ground the rest of the data analysis and interpretation process.

Coded portions of transcript text will then be presented in a manner that allows session participants to analyze them in small groups. The coded data will be posted on the walls so that session participants can “shop” and compare different sub-groups of the target audience.

On day two, the team will identify statements in the data that are prospective determinants of behavior and complete the dashboard instrument. They will create one or more archetypes based on the narratives and collages, and study transcripts. The remaining 8 components of the dashboard will reference the archetype by name. A category map will complete the activities in the interpretation session.

After the completion of the interpretation session, the research team will produce Qualitative Segmentation Diagrams to guide programmers and marketers towards determinants most likely to maximize intervention.
## Appendix A – Timeline for FoQus

<table>
<thead>
<tr>
<th>Activity</th>
<th>Dates</th>
<th>Person responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepare study design</td>
<td>September 2009</td>
<td>HIV team</td>
</tr>
<tr>
<td>Internal review of study design</td>
<td>September 2009</td>
<td>Director of Research, Director of HIV Country Representative</td>
</tr>
<tr>
<td>External review of study design by regional researcher, PI for HIV, PI for Qualitative studies, Univ Dar es SalaamREB</td>
<td>September (for REB) 2009</td>
<td>Regional Researcher</td>
</tr>
<tr>
<td>Recruitment of interviewers</td>
<td>October 2009</td>
<td>University of Dar es Salaam</td>
</tr>
<tr>
<td>Train interviewers</td>
<td>October 2009</td>
<td>PSI Research Team</td>
</tr>
<tr>
<td>Data collection and supervision</td>
<td>November 2009</td>
<td>University of Dar es Salaam, PSI/Tanzania Qualitative Researcher</td>
</tr>
<tr>
<td>Transcription and translation</td>
<td>November 2009</td>
<td>University of Dar es Salaam</td>
</tr>
<tr>
<td>Data Coding</td>
<td>November/December 2009</td>
<td>University of Dar es Salaam</td>
</tr>
<tr>
<td>Review of Coded Data by PSI</td>
<td>November/December 2009</td>
<td>Regional Researcher, PSI Research Team</td>
</tr>
<tr>
<td>Preparation for Interpretation Session</td>
<td>December 2009</td>
<td>Regional Researcher, PSI/Tanzania Research Team, Sr. Researchers, Director for Family Planning, Director for HIV, Marketers, Programmers, Country Representative</td>
</tr>
<tr>
<td>Interpretation Session</td>
<td>December 2009</td>
<td>Tanzania Research Team, University of Dar es Salaam Sr. Researchers, Director for Family Planning, Director for HIV, Marketers, Programmers, Country Representative</td>
</tr>
<tr>
<td>ITEMS</td>
<td>DETAILS</td>
<td>COSTS (Tsh)</td>
</tr>
<tr>
<td>-------</td>
<td>---------</td>
<td>-------------</td>
</tr>
<tr>
<td><strong>A: TRAINING AND PILOT TESTING OF RESEARCH INSTRUMENTS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Transport allowance 6 people @ Tshs. 25,000/=</td>
<td>6 people x Tshs. 25,000/=</td>
<td>750,000</td>
</tr>
<tr>
<td>2. Training allowance 6 people @ Tshs. 50,000/=</td>
<td>6 people x Tshs. 50,000/=</td>
<td>1,500,000</td>
</tr>
<tr>
<td><strong>SUB-TOTAL</strong></td>
<td></td>
<td><strong>2,250,000</strong></td>
</tr>
<tr>
<td><strong>B: ACTUAL DATA COLLECTION PROCESS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) Pens, pencils, box files, note books, folders, writing pads etc</td>
<td></td>
<td>200,000</td>
</tr>
<tr>
<td>b) 10 pairs of dry cell batteries</td>
<td>10 Pairs x Tshs. 3000 each</td>
<td>30,000</td>
</tr>
<tr>
<td>c) Local transport within the field</td>
<td>Tshs. 150,000 x 13 days</td>
<td>1,950,000</td>
</tr>
<tr>
<td>d) Honoraria Researchers</td>
<td>Tshs. 100,000 x 4 x 13 days</td>
<td>5,200,000</td>
</tr>
<tr>
<td>e) Honoraria Principal Researchers</td>
<td>Tshs. 250,000 x 2 x 13 days</td>
<td>6,500,000</td>
</tr>
<tr>
<td>f) Incentives for respondents</td>
<td>Tshs. 20,000 x 18 respondents</td>
<td>360,000</td>
</tr>
<tr>
<td><strong>SUB-TOTAL</strong></td>
<td></td>
<td><strong>14,240,000</strong></td>
</tr>
<tr>
<td><strong>C: DATA PROCESSING AND ANALYSIS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) Transcription and translation</td>
<td>Tshs. 100,000 x 3 people x 5 days</td>
<td>1,500,000</td>
</tr>
<tr>
<td>b) Data coding (Principal Researchers)</td>
<td>Tshs. 250,000 x 2 people x 5 days</td>
<td>2,500,000</td>
</tr>
<tr>
<td>c) Data interpretation (Principal Researchers)</td>
<td>Tshs. 250,000 x 2 people x 5 days</td>
<td>2,500,000</td>
</tr>
<tr>
<td><strong>SUB-TOTAL</strong></td>
<td></td>
<td><strong>6,500,000</strong></td>
</tr>
<tr>
<td><strong>D: INSTITUTIONAL FEES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Institutional fees at a rate of 10% of the total budget</td>
<td></td>
<td>2,299,000</td>
</tr>
<tr>
<td><strong>24,684,000</strong></td>
<td><strong>GRAND TOTAL (Tsh)</strong></td>
<td><strong>25,289,000</strong></td>
</tr>
</tbody>
</table>

*** 1USD = 1280 Tanzania Shillings ***
Appendix B

FoQus on Segmentation
Appendix C – In-depth Interview Discussion Guide

Exploring experiences and perceptions regarding condoms in Tanzania

In-depth Interview Discussion Guide

Discussion Guide: Target population using Salama / other brand of condoms

Screening Criteria
- Males and females between the ages of 18-29
- Ever used or currently using condoms
- What brands of condoms do you use
- Which condom are you currently using

Introduction and Informed Consent: After ensuring that the respondent that was recruited meets the eligibility criteria (is a man or woman between the ages of 18-29, currently using or have ever used condoms)— greet him and provide him with a brief explanation of;
- The purpose of the study
- Why we would like to speak with him
- The sorts of questions we would like to discuss
- How long the interview will take (approx. 1 hour)

“PSI / Tanzania is conducting a study on perceptions and experiences about condoms available in Tanzania. The purpose of this interview is to learn about your experiences and perceptions regarding Salama and condoms in general. Participation in the study is voluntary. You are free to join this study or opt out at any time. If you would like to participate in this study, I will ask you to meet with me to have a short one-to-one conversation to share information about yourself and your experiences. These conversations will take approximately 1 hour.

During this interview I will ask you some questions that some people may have difficulty answering. Your responses will be completely confidential. Your name will not be recorded and no information that could allow for your identification will be presented with your responses at any time. You do not have to respond to any questions that you are uncomfortable responding to and you can end the interview at any time. Complete honesty in your responses will help us better understand what people think, say, and do with regards to some behaviors related to Condoms in Tanzania. We will keep the records in locked files and only study staff will be allowed to see them. Your name or other facts that might identify you will not appear when we report the findings of this study. Your results will be combined with those of 20 other people.

By participating in this study you and your community will benefit from your participation, as the knowledge gained from this study will be used to improve Salama condoms; availability, targeting, pricing and its image. NO incentives and/or remuneration will be offered for participating in this study.

If at any time you have questions about the study, you may speak to the following person at PSI/Tanzania head office: James Kajuna (mobile: 0713 80 56 25)

Are you willing to participate in this study?
If you agree, we would like to audio record this interview. Audio recordings will help us make sure that we capture all of your responses, because it is difficult to try to write down everything you say.

Do you agree to have me audio record your responses?"

SECTION 1: Introduction
Warm-up: Life circumstances, aspirations, and fears

I’d like to ask you about your day yesterday, to get an idea of what a typical day in your life is like. Please tell me - How did it start? What did you do? Who did you see? Where did you go? How did it end? Please include as many details as you can remember.

Have you always lived in ____________ ____? Do you have your own source of income? What do you do in your free time?

What are you most proud of in your life?

Please tell me about the important challenges that you face in your life. What problems do you encounter? What issues are you concerned or worried about?

- This can be anything – personal, professional, economic, educational

Tell me about how you overcome or cope with these challenges? What could help you better manage these challenges?

Tell me about what you like your life to be like in five years.

- Probe for aspirations / goals for herself and also for family

- What are you most proud of in your life?

- Do you ever talk about HIV with this partner? What have you discussed? Can you tell me about a conversation that you had with her about HIV?

- Please tell me about your friends, or people outside your nuclear family who are important in your life.

- Who do you discuss personal or sensitive matters with?

- In whom do you confide?

Family & Relationships

Please describe your family to me: (FOR SINGLES: Moderator should probe for both families even the parents families i.e. the parents and the current family in order to get rich information and to find out as to whether the background of the family contributes to different behaviors)
Please describe your partner(s) to me:

- Ask about primary partners, especially wives, as well as additional sexual partners (if any)
- Ask about age, occupation, and level of education of partners

For each of the above-mentioned partners ask:

- If they use condoms with this partner
- Who makes decision to buy condoms? Why?
- What are your brand preferences with this partner and why?

**SECTION 2: Experience and perceptions on Salama condoms or any other brand of condoms**

Now I would like to ask you some more questions about your thoughts on condoms…

- Which condom brands can you recall (remember)? *(Do not prompt!)*
- *(If they haven’t mentioned them) Are you familiar with the following brands? (Salama, Salama Studs, Salama 3 Bomba, Familia, Dume, Rough Rider, Durex, MSD)*
- Of the brands already discussed - which advertisements for them have you seen or heard? Describe the advertisements for each brand.
- What types/brands of condoms are your friends using?
- What kind of a condom do you use? *(Moderator probe for specific brands that they use)*
- Which condom brand(s) do you like? Why? *(Ask for specific reasons for brand preference i.e. availability, less rubber/latex smell, scented, studded, etc.)*
- Which condom brand(s) do you not like? Why?
- Who has the condom on? Do you talk about this beforehand? How is it brought forth?
- For what kind of moments/needs brings up the discussion on condoms? What is different every time? *(Moderator probe here)*
- What are all the positive attributes of condoms/using condoms? What about the less positive ones/negative?
- Under what circumstances do you use condoms? *(The moderator shall probe each and every situation to make sure to understand the differences.)*
  - a. How do you use the condom?
  - b. What kind of condom do you use under such circumstance? How come?
c. Are there any differences in using the condom according to the partner? If yes, where do they come from/what kind of needs make us use a certain type of condom instead of another?

- What kind of persons use condoms (age, lifestyle, etc.? what makes you say that?

- In general, what is the role of the condom in our life?

- Can you describe what these brands of condoms mean to you? Moderator probe: What meaning do they attach to each of the brands?
  - Dume
  - Rough Rider
  - Durex
  - Familia
  - MSD?
  - Other

- What do Salama condoms mean to you? What meaning do they attach to each of the 3 brands?
  - Salama Regular
  - Salama Studs?
  - Salama 3 Bomba?

- What do you think other people think about Salama condoms? (Explore each Salama brand)

- Do you think there are other brands that are similar to Salama? (Explore each Salama brand). If so which ones?

- What do you think of the quality of Salama condoms? (Explore each Salama brand). Explain.

- Is Salama a good value for the price? Better, worse or the same as compared to other brands?
  - As compared to Dume?
  - As compared to Rough Rider?
  - As compared to Durex?
  - As compared to Familia?
  - As compared to the MSD?
  - As compared to other?

- What brand do you use most frequently? Why? (If Salama is mentioned ask which brand)

- Do you ever switch brands? What were the reasons for switching? Which brands do you switch to?

- Is it easy to find Salama brand condoms? (Explore each Salama brand) (Moderator probe: where do they buy Salama?)
• Is it easy to find:
  - Dume?
  - Rough Rider?
  - Durex?
  - Familia?
  - MSD?

• What do you consider in choosing a condom – ask for reasons for choosing one condom brand over the other (quality assurance? Easily visible at outlets? Pictures on the pack, attractive colors etc.).

• Do you see these reasons for choosing condoms being applicable to your friends as well? Why do you say so?

• When do you buy a condom (ask if it is planned or impulse purchase)

• Do you see these reasons for purchase of condoms being applicable to your friends as well?

 Acquisition behavior

• How often do you buy condoms? Where from? Why from there?

• Do you buy it from anywhere else? When does this happen?

• How do you proceed? When and how do you make your choice? Alone or with the partner?

• You told me that you prefer ……..? (Moderator mention the condom that they use most often) What makes you prefer them?

• Do you always buy them? Is there any chance that you buy other brand/type? When does this happen? What is different now?

• How do you choose the condoms that you buy? What do you think when you choose the brand the quantity or type of condom? (Moderator probe which pack they normally buy)

• Which are all the criteria that you consider when you make your choice? (The moderator probes for):
  - Availability in the shops you usually go to
  - Partner requests/likes/dislikes certain brand/s
  - Opportunities to use (special occasions, moments when a very safe protection is needed)
  - Frequent usage
  - Price (how much do you pay for condoms per month?)
  - Brand (name, company, quality)
  - Package design, package size/number of condoms inside
- Producer (name, origin – international vs. local; a certain country vs. another one)
- Commercials (on different channels)
- Characteristics of product (smell, color, flavor)
- Usage (heavy duty/lubrication etc)
- Previous experiences (positive or negative)
- Recommendations
- The wide range of products offered
- Promotions in shops, sampling, etc.

- From all the elements that you have mentioned, which are the most important for you? And why?
- In your opinion can you stop having sex if there is no condom? Why?
- In your own views can you stop having sex if your partner doesn’t want to use condoms? Why?
- What do you do when your friends encourage you to have sex and there are no condoms? Explain?
- What are your views about people who have sex without using a condom?

SECTION 3: Brand Personality

- How would you describe the personality of Salama brand users? (Ask these questions for each Salama brand: Regular, 3 Bomba, Studs)
  o What type of person is he/she? (Please describe his/her personality age, SES, location, education, occupation)
  o What is his family like? What is his life like? What is his relationship like? Probe for lifestyle, age, education, occupation, location, priorities, challenges
  o What kinds of things does he/she like to do for recreation or entertainment?

- How would you describe a user of Dume condom brand?
  o What type of person is he/she? (Please describe his/her personality age, SES, location, education, occupation)
  o What is his family like? What is his life like? What sorts of relationships does he have? Probe for lifestyle, age, education, occupation, location, priorities, challenges
  o What kinds of things does he/she like to do for recreation or entertainment?

- How would you describe a user of Familia condom brand?
  o What type of person is he/she? (Please describe his/her personality age, SES, location, education, occupation)
  o What is his family like? What is his life like? What sorts of relationships does he have? Probe for lifestyle, age, education, occupation, location, priorities, challenges
  o What kinds of things does he/she like to do for recreation or entertainment?
• How would you describe a user of the commercially distributed condoms like *Rough Rider*?
  o What type of person is he/she? (Please describe his/her personality age, SES, location, education, occupation)
  o What is his family like? What is his life like? What is his relationship like?
  o Probe for lifestyle, age, education, occupation, location, priorities, challenges
  o What kinds of things does he/she like to do for recreation or entertainment?

• How would you describe a user of the commercially distributed condoms like *Durex*?
  o What type of person is he/she? (Please describe his/her personality age, SES, location, education, occupation)
  o What is his family like? What is his life like? What is his relationship like?
  o Probe for lifestyle, age, education, occupation, location, priorities, challenges
  o What kinds of things does he/she like to do for recreation or entertainment?

• How would you describe users of the freely distributed condoms by the government (MSD)?
  o What type of person is he/she? (Please describe his/her personality age, SES, location, education, occupation)
  o What is his family like? What is his life like? What is his relationship like?
  o Probe for lifestyle, age, education, occupation, location, priorities, challenges
  o What kinds of things does he/she like to do for recreation or entertainment?

**Evaluation of Brands**

• Suppose *Salama Regular* condom was to be a mobile phone company what company would it be? *(Moderator repeats for all the brands. Salama 3 Bomba, Salama Studs, Dume, Familia, Rough Rider, Durex, and free condoms from Government (MSD))*

**SECTION 4: Information Sources**

“Now, I’d like to ask you a few more questions about you and your community…”

• Who do you talk to when you need advice or guidance
• Who do you talk to about topics such as sex and condoms?
• Where do you get important information about health?
• Is this information easily accessible?
• What source of information do you trust most? Why?
• Who do you go to for advice?
• Who do you admire in your community? Why?
• Who are the most respected members of your community?

*If you think this has been an informative and rich interview and that the informant is a good candidate to do a photo narrative, please ask them to participate in the photo narrative and explain the instructions.*
Appendix D – Photo narrative Guide

Supplies Needed:

- Disposable camera
- Approximately 2 sets of 15-25 developed photographs
- Audio recorder

Instructions:

The photo narrative will occur in two stages. In stage one; the interviewers will select informants to complete the photo narratives. The interviewer will provide the informant with instructions on how to conduct a photo narrative and will give him/her a disposable camera. He/she will complete his/her photo narrative within the specified time frame. In stage two, the interviewer will conduct a structured interview with the informant, during which the informant will describe and explain the photographs he/she has taken.

Stage 1: Instructions for Photo narratives

After the initial in-depth interview, interviewers should judge if the informant would be a good candidate to complete a photo narrative; this judgment should be made based on the quality of the data provided by said informant and his/her willingness to participate. If appropriate, the interviewer should ask the informant after the interview if he/she would be willing to participate in a photo narrative.

Explain to him/her that this would involve her taking around 15-25 photographs and doing a follow up interview once the photographs have been developed. Please let him/her know that:

- He/she has complete control over the photos that he/she will take
- The photos will only be used for research purposes and will not be shared with anyone outside of PSI
- He/she may retain a set of the photographs after the follow up interview (ensure that a second copy of the photographs is developed so that there is an extra copy that can be kept by the participant)

If he/she agrees to participate, explain how to use the camera, and give him/her an explanation of the sorts of photographs he/she should take:

We are interested in learning about your perception about users of Salama condoms compared to other condoms. Please take at least 15 and no more than 25 photos of the following: (Moderator provide respondents with a one page instruction which will guide them when taking photos.)

- The place where you think Salama condom users hang out most
- Places you mostly buy Salama condoms
- Things that motivate/remind you to buy Salama condoms
- Things that you wish you had
- People who you think uses Salama condom
-
Once you have completed taking the pictures, we will develop the photographs and bring them back to you. Then we will ask you to explain to us why you took each photograph, what the photograph represents, and what it means to you.

Make arrangements to retrieve the camera for developing after 3-5 days, and set a date and time for a follow up interview to discuss the photographs after they have been developed.

**Stage 2: Follow-up Photo narrative Interview**

Return for the follow up interview with the developed photographs.

**Be sure to number the photographs in order in which they were taken, and to refer to them by their number during the interview so that it is clear which photo is being discussed in the transcript.**

Begin the follow-up interview:

For each photograph, I would like you to tell me about what is in the image, why you took it, and what it means to you.

Use the following discussion probes for each photo:

- What or who is in the image
- When it was taken (the circumstances or the time of day)
- Why did you choose to take that picture
- What it means to him/her
- Why it is important

Additionally, follow any other lines of probing that arise from the discussion of the photograph, particularly if they somehow relate to multiple concurrent partnerships, relationships, sex-seeking, or condom use.

Follow a similar line of questioning for all of the photographs until they are all complete. Leave the extra copy of the photographs with the informant and thank him/her for his/her participation.

**Collage**

Moderator once the participant agrees to participate, handover a bunch of pictures and instruct the respondent to sort out the picture and group them into two. Group one should indicate their views and perception about users of Salama condom and group two should show perception towards users of other brands apart from Salama condoms.