

Burkina Faso: PROMACO I

Ex-post evaluation

OECD sector	Prevention of Sexually Transmitted Diseases including HIV/AIDS / 13040	
BMZ project ID	1993 66 006 (investment)	
Project-executing agency	Ministry of Health / AIDS Prevention Council (PROMACO, Projet de Marketing Social des Condoms)	
Consultant	Population Services International (PSI)	
Year of ex-post evaluation	2003	
	Project appraisal (scheduled)	Ex-post evaluation (actual)
Start of implementation	7/1994	7/1994
Period of implementation	6/1998 (4 years)	2/1999 (4.5 years)
Investment cost	EUR 7.67 million*	EUR 7.50 million
Counterpart contribution	EUR 0.51 million*	EUR 0.34 million
Financing from FC funds	EUR 7.16 million*	EUR 7.16 million
Other institutions/donors involved	-	-
Performance rating	2	
• Significance/relevance	2	
• Effectiveness	1	
• Efficiency	3	

* in accordance with supplementary agreement (1995)

Brief Description, Overall Objective and Project Purposes with Indicators

The project measures comprise the supply of condoms and equipment, construction measures for logistical support, establishing a reliable sale of condoms through private wholesalers and retailers, and sales promotion to spread the use of condoms, as well as short-term expert assignments. The measures involved both the urban and the rural population.

The overall objective of the project was to contribute to lowering the birth rate and the rate of HIV infection. Given the complex relationships of cause and effect and for lack of reliable statistical material, no indicators were defined at the level of the overall objective.

The project objective was to improve the supply of the population with condoms. The following indicators were used to measure the achievement of the project objective:

- In the 4th year of the project 5-6 million condoms were sold (increase to 8 million as a result of the 1995 funding increase);
- the measures were to be expanded to 30 provinces;

- distribution was to be ensured through a network of approximately 3000 wholesalers and retailers;
- sales promotion and education campaigns as well as supervision were to be taking place as scheduled.

Project Conception / Major Deviations from the original Project Planning and their main Causes

The project follows the concept of "Contraceptive Social Marketing", in which products are sold for social purposes and at subsidized prices but with commercial marketing methods. The marketing of condoms with the goal of preventing AIDS on the basis of prevention awareness is one of the most widespread variants of Social Marketing. Usually, and in Burkina Faso as well, these projects are carried out with local personnel and with the support of an international NGO (here: US consultant PSI). They operate in many areas such as small businesses; they purchase condoms on the world market with financial support from donors and sell them at subsidized prices through private sales channels in the target country. The marketing activities are being supported by brand advertisement and product-unspecific awareness campaigns on HIV and are being supported by market studies and other complementary research. Under PROMACO I a storage house was also built to enable proper storage of condoms in the capital, and it is still being maintained and utilized by the project.

No major changes to the project conception were made. However, because of the unexpectedly high success in the sale of condoms, financing for the project was increased by EUR 1.53 million from EUR 5.63 million to EUR 7.16 million in the first year to be able to maintain the scheduled project term of four years. Thus, around 36 million condoms were acquired instead of the originally planned 22 million. Thanks to savings achieved in other procurements and in the construction costs, the project could ultimately be financed over a period of 4.5 years.

Key Results of the Impact Analysis and Performance Rating

The main impact of the project is at the level of the overall objective, namely a reduction in the HIV infection rate and a lower birth rate. HIV prevalence in Burkina Faso declined from the beginning of the project from an estimated 7-8% (1993) to around 6.5% (2002). The birth rate continued to rise from 6.5 births per woman in 1991 to 6.8 in 1998. Both indicators reflect long-term developments on which the project has a rather indirect impact given the complex relations of cause and effect. Supposing there is an impact from the project, it can be observed that the impact on HIV prevalence has been positive while no major impact on family planning has occurred. This result corresponds with the actual conception of the project, which is designed to market condoms and advertises them for the sole purpose of preventing HIV. Family planning in this context is more of a by-product of the use of condoms. Young people who have no access to regular family planning services use condoms not in intercourse with their spouse or steady partners but only in other relations. However, there is a strong divide between urban and rural behaviour: in an urban environment, 13.7% of men use condoms while in the countryside it is 7.3% (1999). Family planning is therefore not actively incorporated into the marketing conception. In this sense "lowering the birth rate" as part of the overall objective was not an appropriate choice for a project with this orientation and range of products.

Apart from the direct contribution of condoms use, the behavioural changes induced by advertising messages, of which abstinence and faithfulness form an integral part, need

to be emphasized as well. Studies have found that the number of adolescents who mention condoms as protection against HIV infection has risen strongly to 66% (young women) and 77% (young men). Likewise, abstinence was mentioned as a means of prevention by 70% (against 30% before) of those interviewed, although the actual choice of this method is preferred by much fewer, only 2%.

No specific measures to promote women were scheduled under PROMACO I; women and men are equally protected by the use of condoms. Nevertheless, the prevention of new infection reduces the strain on women, whose role is to care for the ailing and for children orphaned by AIDS. Preventing unwanted pregnancy is first and foremost a concern of the women as well. We therefore classify the project into the gender category G1 (no need for action). Burkina is one of the world's poorest countries (HDI rank 169 of 172); 80% of the population is considered to be living in absolute poverty. Because it has had a country-wide outreach as described below, the project also reached poor people in rural areas. The consumer price per couple year of protection (CYP) was the equivalent of USD 2.56, which corresponds to around 1% of per-capita income (USD 250 in 1999). This means the pricing is in line with the Chapman index for the target group's financial capabilities. It is a project for direct poverty reduction.

PROMACO is an integral part of Burkina's AIDS reduction policy and is aligned with the prevention instruments of Burkina's AIDS prevention plan. Up to more than 95% of the condoms for the country are being supplied by PROMACO, which is a national institution in this area. Other donors and NGOs also turn to PROMACO to purchase the condoms for distribution in their projects. Given the high unmet demand for condoms which the enormous sales increases in the early years of PROMACO suggest, we attribute high relevance and significance to PROMACO in terms of HIV prevention. This very positive trend is being clouded by the fact that in the year 2000 only 30% of adolescents interviewed were actually able to correctly demonstrate the use of condoms. However, this demonstration also included the proper disposal of condoms after use, which has no influence on their protective function, so that without detailed knowledge of the study it is not possible to establish whether this weakness clearly has an adverse impact on the reduction of HIV infection. Given this restriction the significance/relevance was rated altogether satisfactory (rating 2).

Measured by the agreed indicators, the project objectives were achieved and in some regards even over-fulfilled. In the 4th year of the project term 5-6 million condoms were to be sold. This figure was corrected upwards to 8 million in 1995. Sales figures actually reached 9.5 million in 1997 - also thanks to declining unit costs - and rose to 10.2 million condoms in 1998. The average annual sales increase rate was 25%. This unusually dynamic development shows how large the unmet demand for condoms which could be covered by the project in Burkina was. As expected, the rates of increase were more moderate in subsequent years, but the annual sales increase rate of 14% for the follow-up project PROMACO II (3/99-10/2003) is still a very good result compared with other results in the region.

The goal of covering the whole country with marketing campaigns and sales outlets was achieved. The process of building up the distribution network was significantly more dynamic than planned. Instead of the planned 3000 wholesalers and retailers the project was working with around 90 wholesalers and 14,900 retailers in 1998. In subsequent years the distribution network was further consolidated and expanded so that the condom PRUDENCE was being sold by around 20,000-25,000 retailers in the

year 2003. Thus, market penetration reached around 60% of all potential sales outlets in urban areas and 43% in rural areas in 2003. Sales promotion and education campaigns as well as complementary studies were taking place largely as scheduled. Because of disputes between the project-executing agency and the technically responsible CNLS (Centre National de Lutte contre le SIDA) the project activities in the meantime were reduced to the sale of condoms from 1997. The main reasons for this were staffing constellations and unclear procedures in the coordination process. The tension eased after some positions were re-staffed, a short-term expert assignment and a working meeting with KfW and has not re-occurred since. As a result, however, some of the scheduled studies no longer could be carried out within the framework of PROMACO I (price study, user profile, intensification of sensitization campaigns). But most of these studies were carried out during PROMACO II.

For one thing, conclusions can usually be drawn on the use of condoms on the basis of plausibility considerations when condoms are sold and not distributed free. For another, information on the use of condoms is also obtained in so-called CAP studies (Connaissances, Attitudes, Pratiques). They revealed that the use of condoms by young men (in the last sexual intercourse) rose from 57% in 1998 to 72% in 2002 while for women it rose from 42% to 74%. All indicators show that PROMACO has succeeded in making condoms available throughout the country and known to the public through appropriate communication channels, and in substantially increasing sales targets thanks to increased demand. We therefore classify the effectiveness of the project as good (rating 1).

The total cost per couple year of protection (CYP) was EUR 22.82 for PROMACO I, which is above the West African average but roughly reflects the estimate at the time of appraisal (EUR 21.30). This can be attributed to various factors: the start-up phase with a still relatively low level of sales and a complex distribution system that had to rely on the establishment of relationships to retailers, and, ultimately, the very rural settlement structure of Burkina. As a result of the management recommendations we made on the occasion of the final inspection the distribution system was gradually modified and is today based entirely on wholesalers, which has enabled cost savings of 30% in the distribution system. This modification, a concomitant personnel reduction from 50 to 40 staff and increased sales figures have permitted to reduce the total cost of the project by around one fourth (PROMACO II EUR 17.58/CYP). Because efficiency and effectiveness can be contradictory goals in some respects, as they are when rural areas are to be covered, and since the purpose of PROMACO I was to establish a countrywide distribution network and the cost development has improved, we have rated the project as having a still adequate efficiency (rating 3) despite the high costs per CYP.

A social marketing programme in one of the world's poorest countries cannot be expected to yield financial sustainability over the short or medium term. After all, an improvement in the cost recovery ratio (sales revenues/total cost) from 4.5% to 7.6% did occur. In this case sustainability also requires that the financing of the central element of AIDS prevention be secured for the next years, which for the time being is guaranteed by FC (Phase IV in preparation).

After weighing the above mentioned key criteria we classify the programme as having generally satisfactory effectiveness (rating 2).

Recommendations for the Management of Operations and General Conclusions for all Projects

Most of the recommendations for the management of operations made on the occasion of the final inspection were taken into consideration in PROMACO II. These include putting increased emphasis on main risk groups, improving the monitoring of impacts, efficiency improvements in the distribution system and the establishment of a legally independent Burkinan social-marketing NGO. It was also possible to make the project implementation more independent from the Burkinan administration. Owing to the resistance of the CNLS, the price increase for condoms, which we have included as a recommendation for PROMACO III, could not be put into effect.

We consider the following conclusion to be relevant for all projects:

As soon as they have received a certain degree of maturity (sales figures of 1 condom/capita/year and widespread knowledge on AIDS and condoms for protection), social marketing projects will also have to direct their education messages on personal risk perception, the proper handling of condoms and communication techniques for negotiating their use. As in the introductory phase, this education should be imparted through communication channels with a broad outreach, but with different contents and messages. (This new generation of behaviour-change messages was started at the end of PROMACO II but constitutes the greatest challenge of PROMACO III). In a further step, interpersonal communication forms (peer-group approaches) directed at risk groups will have to be practised which are more complicated and will have to be conceived and carried out for instance in cooperation with NGOs.

Abbreviations

AIDS / SIDA	Acquired Immune Deficiency Syndrome
CAP	Connaissances, Attitudes et Pratiques
CNLS	Centre National de Lutte contre le SIDA
CYP	Couple Year of Protection
EDS	Enquête Démographique et de Santé
HIV/VIH	Human Immune-Deficiency Virus
NGO/ONG	Non-governmental organization
PROMACO	Projet de Marketing Social des Condoms
PSI	Population Services International (Consultant)

Legend

Developmentally successful: Ratings 1 to 3	
Rating 1	Very high or high degree of developmental effectiveness
Rating 2	Satisfactory degree of developmental effectiveness
Rating 3	Overall sufficient degree of developmental effectiveness
Developmental failures: Ratings 4 to 6	
Rating 4	Overall slightly insufficient degree of developmental effectiveness
Rating 5	Clearly insufficient degree of developmental effectiveness
Rating 6	The project is a total failure

Criteria for the Evaluation of Project Success

The evaluation of a project's "developmental effectiveness" and its classification during the final evaluation into one of the various levels of success described below in more detail concentrate on the following fundamental questions:

- **Are the project objectives reached to a sufficient degree (aspect of project effectiveness)?**
- **Does the project generate sufficient significant developmental effects (project relevance and significance measured by the achievement of the overall development-policy objective defined beforehand and its effects in political, institutional, socio-economic and socio-cultural as well as ecological terms)?**
- **Are the funds/expenses that were and are being employed/incurred to reach the objectives appropriate and how can the project's microeconomic and macroeconomic impact be measured (aspect of efficiency of the project conception)?**
- **To the extent that undesired (side) effects occur, are these tolerable?**

We do not treat **sustainability**, which is a key aspect of project evaluation, as a separate category (as the World Bank does) but instead consider it as a cross-cutting element that concerns all four fundamental questions of project success. A project is sustainable if the project-executing agency and/or the target group are able to continue to use the project facilities that have been built for a period of time that is, overall, adequate in economic terms or to carry on with the project activities on their own and generate positive results after the financial, organizational and/or technical support has come to an end.