

**Let every child be wanted:  
How social marketing is revolutionizing contraceptive use around the world**

*Author: Philip D. Harvey*

**Book Review by Dominique Meekers**

In *Let Every Child be Wanted*, Harvey describes the remarkable story of the growth and impact of contraceptive social marketing programs. As the co-founder of two organizations that popularized contraceptive social marketing (CSM), the author is in a unique position to recount the development of today's CSM programs. And while the author is partially singing his own praise, the story is a very compelling one. By 1997, CSM programs were serving an estimated 16 million couples in 55 countries.

The first chapter describes the efforts of the pioneers, who - in the 1960s - came up with the ingenious idea to promote and distribute condoms through commercial networks rather than medical networks. Most contemporary CSM programs create local brands, establish heavily subsidized prices that are affordable to the poor, advertise branded products, and provide information on correct use of the product and advantages of birth control. CSM programs use market research to make decisions about branding, pricing, and "positioning" of the product. They take advantage of existing national distributors, and they use professional mass media advertising campaigns to educate people about the benefits of family planning and to create brand awareness.

CSM programs charge a small fee for products because this allows them to take advantage of existing commercial infrastructures. Allowing retailers and distributors to make a profit ensures that they remain interested in participating in the program. In addition, products that are sold tend to have lower wastage than free products and are perceived to be of better quality.

The second chapter explains in detail how social marketing works. It also describes two main approaches to CSM. The distinction between these approaches is a key theme throughout the book. Traditional CSM programs aim to reach the largest possible number of low-income consumers, as they believe it is their obligation to help the poor. To do so, contraceptives are heavily subsidized. This is the approach that the author advocates with substantial supportive evidence throughout the book, as well as the approach used by companies such as Population Services International (PSI) and DKT International.

The opposing view is that CSM programs should aim to develop the private (for-profit) sector, by improving marketing and distribution skills. As international financial assistance is limited, it is argued that CSM programs must be temporary and have a clear exit strategy. This approach to CSM uses experts to provide temporary technical assistance to existing private sector companies (e.g., manufacturers or distributors). After foreign assistance ends, the local companies continue to market and sell contraceptives without subsidies. This type of CSM is referred to as the "manufacturer's model" or as "third/fourth generation" social marketing, and it has been implemented most notably by the SOMARC (Social Marketing for Change) organization.

The author points out that the manufacturer's model is appealing because it implies that foreign aid is temporary, but that programs based on it have not succeeded in helping large numbers of poor people. He argues that the desire to limit the amount of financial support should never be allowed to take precedence over the need to assist the poor. At present, most major donors support the traditional model of contraceptive social marketing.

Drawing on over three decades of personal experience, the author outlines how donors, governments, and implementing organizations can strengthen social marketing programs (Chapter 4). The suggestions are simple and practical (e.g., donors should have clear objectives and hold implementing organizations accountable, and implementing organizations should measure and publish their results), and sometimes very blunt. For example, implementing organizations are warned to avoid becoming proposal factories that consider winning a contract, rather than program impact, a measure of success. At the same time, it is pointed out that donors and governments sometimes bully social marketing managers. Although some compromises may be necessary, implementing organizations are advised to stand by their principles.

Chapters 5 and 6 provide detailed case studies of social marketing programs in Sri Lanka and Bangladesh (shorter case studies on Columbia and Egypt are provided in Appendix 2). These chapters illustrate the many challenges that these programs encountered (including honest descriptions of initial mistakes by both the implementing organization and the donors) and explain what was done to successfully overcome them.

Unlike many other social marketing programs, CSM programs specifically promote branded products. Chapter 7 illustrates the advantages of brand advertising. For example, brand advertising gives the product an image of high quality. It also enables consumers to ask for the product by name, which is less embarrassing than asking for condoms. Brand names often describe the product's purpose (e.g., Protector brand condoms), which can be exploited in advertising campaigns. Nevertheless, the evidence suggests that the advertising campaign matters more than the name itself. In other words, there is no need to agonize over a name, as long as it does not have negative connotations.

Chapter 8 describes pricing for socially marketed contraceptives. Since consumers in poor countries have limited income, consumer prices must be affordable. The author's main rule of thumb is that a year's supply of contraceptives should cost a maximum of 1% of the per capita gross national product (GNP). Roughly half of this price will consist of margin for the trade, which will keep suppliers motivated. The author further illustrates that cost recovery is only feasible in countries with a per capita GNP over \$1,000, which implies that the "manufacturer's model" of social marketing can only be implemented in higher income countries.

In Chapter 9, the author makes a strong case for the need for nonprofit organizations to be held accountable for achieving their objectives. In CSM programs, the objective is to provide affordable contraceptives to the largest possible number of low-income people, which implies maximizing sales. Successful CSM programs have achieved sales exceeding 1.0 condom per capita, which typically corresponds with 5 to 6% prevalence. This prevalence, measured through both survey and sales data, is the program's bottom line.

Somewhat controversially, the author argues that resources should be allocated to programs with per capita sales that are satisfactory and that resources should be shifted to those programs that will have the largest health impact for the budget. Crude procedures for estimating the number of Human Immunodeficiency Virus (HIV) transmissions prevented by condoms and the number of lives saved by contraception are presented in Appendix 4.

Chapter 9 also recommends calculating couple-years of protection (CYP) and cost per CYP to measure program efficiency. One CYP equals a supply of contraceptives sufficient to protect one couple for one year. Since CYPs consist of a simple conversion of sales data (and hence do not yield additional information), their value is probably somewhat overstated by the author. Nevertheless, it is likely that use of CYPs will continue, if only for the simple fact that their interpretation is intuitive. The author notes that prevalence surveys can provide additional information, such as data on contraceptive prevalence, quality of services, or knowledge about correct use, but cautions that such surveys, although generally reliable, are also subject to errors.

Chapter 10, entitled "Running a Program," describes the components and characteristics of successful CSM programs. Specifically, it discusses the required start-up budget, the characteristics of good social marketing managers, procurement costs of contraceptives, factors to consider when selecting an advertising agency, possible variations in the distribution system, the need for at least minimal market research, and the need for a supportive institutional environment.

The role of advertising is described in detail in Chapter 11. Advertising in CSM programs differs from commercial advertising because CSM programs must increase the market by convincing people to start using family planning. The author emphasizes that ads should convey the benefits of the product and be protested on ordinary people. Social marketing managers are advised not to be skeptical about generic family planning or AIDS prevention campaigns, as these are likely to increase sales among low-income consumers.

The final chapter discusses the relationship between economic development and population growth, a topic that has been hotly debated for several decades. The author argues that although population growth has not been as detrimental as had been initially predicted, this does not make CSM any less of a priority. Although this latter view makes the chapter largely redundant, there is little doubt that family planning will always be valuable because it enhances women's freedom to avoid unwanted or frequent pregnancy, makes human life better, and most importantly saves lives.

Let Every Child Be Wanted provides an excellent introduction to contraceptive social marketing. While the author assertively favors the traditional model of CSM, his positions are well argued, documented with numerous facts, and contrasted with opposing views. This book is a valuable resource for those interested in learning more about contraceptive social marketing, as well as for those who are already involved in it.

## **ABOUT THE AUTHOR**

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