

# Social Marketing Increasingly Makes Contraceptive Impact on Africa

Published May 10, 2016 | By [Api Podder](#)

*By Christopher Purdy*

One of the most consequential decisions a couple can make is when and if to have children. This determination reverberates on education, income, health and general well-being for the family, children and community at large.

This is certainly true in sub-Saharan Africa where the percentage of married women using modern contraception is only 25%, compared to 56% in the world as a whole, according to the [Population Reference Bureau](#). This rate is even lower in Middle and [West Africa](#).

The result is that families often do not have the wherewithal to space their children, which translates into unhealthy mothers and babies, and a greater economic burden on already overstretched families.

Social marketing is one tool increasingly being used to change that sad paradigm. Social marketing uses commercial marketing techniques (research, advertising, promotion and existing commercial distribution networks) to achieve a social purpose which, in the case of my organization, is family planning. But social marketing can also be used to provide people with products and services in abortion, safe water and the prevention of HIV, malaria, tuberculosis and any number of other diseases that afflict low-income, rural and/or vulnerable Africans.

In 2014, 84 contraceptive social marketing programs in 62 countries [delivered 69 million couple years of protection](#) (CYPs), according to the [2014 Contraceptive Social Marketing Statistics](#) published by DKT International. (A "couple year of protection" = the amount of contraception needed to protect one couple for one year).

We estimate that these 69 million CYPs represent an estimated 20% of all women using modern contraception in the developing world, excluding China. Increasingly, these programs are reaching significant shares of their target market (defined as 75% of women aged 15-49). For example, social marketing programs in Ethiopia and Kenya are reaching about 35% of their target markets.

More than 35% of those 69 million CYPs (24.4 million) were delivered in Africa, the biggest being Ethiopia, Nigeria, Kenya and Egypt.

The social marketing of reproductive health products and services has several unique advantages:

- **It is fast.** Because social marketing relies to a great extent on existing commercial and health service delivery networks, it can be scaled up quickly, providing contraceptives to tens of thousands



of outlets in just a year or two.

- **It is non-patronizing.** Social marketing contraceptives are not perceived as a “program” by consumers. Rather, they are seen as normal commercial goods that offer consumers a benefit at an affordable price.
- **It is highly cost-effective.** Because social marketing products and services are purchased, they are more likely to be used than those given away for free.

Getting people to change their health behavior, especially their reproductive health behavior, is not always easy. We use a variety of ways to do that, ranging from person-to-person communications to mass media (like TV and radio) and social media (like Facebook, YouTube and Twitter). Sometimes we push the cultural boundaries with daring and creative [condom and contraceptive TV ads](#).

Sometimes there are logistical challenges in getting products to people who need them, such as remote areas of the Democratic Republic of Congo (DRC) where decent roads do not exist. Generally, though, programs find ways to overcome these challenges: In 2014, two different social marketing programs delivered 615,000 CYPs in the DRC.

My organization, DKT International, opened our first African program in [Ethiopia](#) in 1990. Since then, we have launched social marketing programs in Mozambique, DRC, Ghana, Nigeria and Tanzania. Last year, we opened [a West African regional office](#) that seeks to introduce high-quality contraceptives at affordable prices in West Africa, which has long lagged the rest of the world, and rest of Africa, in contraceptive prevalence.

We see a bright future for social marketing in improving African health even as it adapts and re-invents itself to adjust to ever-changing consumer preferences and technology.

*Christopher Purdy is the president and CEO of [DKT International](#). From 1996 to 2011, he served as country director of DKT programs in Turkey, Ethiopia, and Indonesia, where he managed the largest private social marketing family planning program in the world. He served as executive vice president from 2011-2013. His professional interests center on advancing the cause of social marketing for improved health, and socially responsible capitalism.*

