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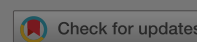
Research Article

# Targeted characteristics and use of socially marketed preventive health goods: evidence from condoms in sub-Saharan Africa

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associated with increased likelihoods of using socially marketed brands. The fact that distribution targets low socioeconomic status groups and relative use remains low suggests that weak demand for condoms among these groups inhibits use. Policymakers should consider mechanisms to increase demand and to further refine targeting efforts.

KEYWORDS:

- HIV/AIDS
- preventive health
- publicly provided goods
- social marketing
- sub-Saharan Africa
- targeting

JEL CLASSIFICATION:

- H40
- I15
- J10

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Disclosures

No potential conflicts of interest were disclosed.

Notes

<sup>1</sup> Social marketing was first used in India in the 1960s to promote the use of condoms. <sup>2</sup> Condoms were first funded by the government in India in the 1960s. Socially marketed condoms were first funded approximately 1.7 billion male condoms (UNFPA (United Nations Population

Fund) [2013](#)) and 136 million ITNs in sub-Saharan Africa ([WHO \(World Health Organization\) 2013. World Malaria Report 2013](#)).

<sup>3</sup> As I discuss in Section 3, the brand data distinguish between socially marketed and non-socially marketed brands, whereas the source data do not explicitly distinguish between socially marketed and private sources.

<sup>4</sup> The main measure of material standard of living in the household survey data that I use to measure condom brands, the Demographic and Health Surveys (DHS), is consumer durables ownership. Young ([2012](#)) demonstrates that this measure may be superior to typical measures of gross domestic product (GDP).

<sup>5</sup> See Elbers et al. ([2007](#)), Dinkelman and Schulhofer-Wohl ([2015](#)), Ravallion and Chen ([2015](#)) and Karlan and Thuysbaert ([2016](#)).

<sup>6</sup> See Alderman ([2002](#)), Stifel and Alderman ([2006](#)), Alatas et al. ([2012](#)), Nose ([2014](#)) and Karlan and Thuysbaert ([2016](#)).

<sup>7</sup> See Stifel and Alderman ([2006](#)), Pradhan, Saadah, and Sparrow ([2007](#)), Alatas et al. ([2012](#)), Ravallion and Chen ([2015](#)) and Karlan and Thuysbaert ([2016](#)).

<sup>8</sup> See Jacoby ([1997](#)), Teklu and Asefa ([1999](#)), Niehaus and Sukhtankar ([2013](#)), Nose ([2014](#)), and

<sup>9</sup> Behrmann et al. (2003) provide what appears to be the first programs.

<sup>10</sup> For example, Klein (2005), and Darroch et al. (2013),



<sup>12</sup> As noted elsewhere (Gersovitz [2005](#)), the DHS do not routinely ask respondents about the price paid for condoms.

<sup>13</sup> Unlike the DHS question for brand, the source question does not include ‘do not know’ as an option.

<sup>14</sup> The DHS do not ask about socially marketed sources and ‘private source’ includes socially marketed sources.

<sup>15</sup> To harmonize education measures across countries, I define primary-school completion as completing 7 or more years of schooling and secondary-school completion as completing 11 or more years of schooling.

<sup>16</sup> Total household consumer durables owned is the sum of indicator variables for each of the following consumer durables: (improved) floor, refrigerator, television, radio, bicycle, motorcycle, and car.

<sup>17</sup> One exception is secondary completion is associated with a roughly 0.6 percentage point reduction ( $p < 0.01$ ) in the likelihood of using a government brand relative to those who have only completed primary school.

<sup>18</sup> One explanation for this association is that total consumer durables owned is associated with this explanation. This explanation is consistent with the likelihood that the

<sup>19</sup> These sources and NGO (ing) organiza



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