

Approaches to Understanding the End User for Microbicide Introduction

Creating Desire for Microbicides Meeting May 2014

Bottleneck analysis: assess introduction challenges, even at early stages of product development



CENTER FOR ACCELERATING INNOVATION AND IMPACT

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TPP/ MANUFACTURING

Efficacy and effectiveness

- Ease of use
 - Side effects
 - Reactions with other treatment
- Ease of administration
 - Toxicity risks
- Cost effectiveness

PROCUREMENT

- Public/donor purchaser's awareness, willingness to pay
- Inclusion in, and specificity of, WHO guidelines
- Inclusion in and clarity of national EML and guidelines
- Recency of guidelines update
- Effectiveness of inventory tracking, quantification and procurement

DISTRIBUTION

Geographic access

- Public channel
 - Private channel
 - Nonprofit and faith-based organization channel

DELIVERY / ADOPTION

- End users' awareness, acceptance, willingness to pay and adherence
- Awareness and acceptance of influencers:
 - Family
 - Opinion leaders, cultural norms
- Referral system and practices, including attrition
- Use and clarity of communitybased case management

Ease and quality of production

- Required accessory products
- Availability of inputs
- Production cost (COGS)
- Manufacturing profit opportunity
- Availability of suppliers
 - Current and potential
 - Opportunity for local production

Demand characteristics

- Fragmentation
- Consistency vs Fluctuation
- Clarity/Certainty
- Registration process for new suppliers
- Intellectual property landscape
- Quality of available products
- Adequate procurement of accessory products (e.g., syringes)
- Purchaser reliability (e.g., payment timeliness)
- Contracting terms (e.g., timelines for delivery)

- Profit opportunity for supply chain actors, such as:
 - Distributor
 - Retailer
- Availability (vs stockouts)
 - Public channels
 - Private channels
 - Variation by facility level
 - Availability of required accessories
 - Supply chain performance

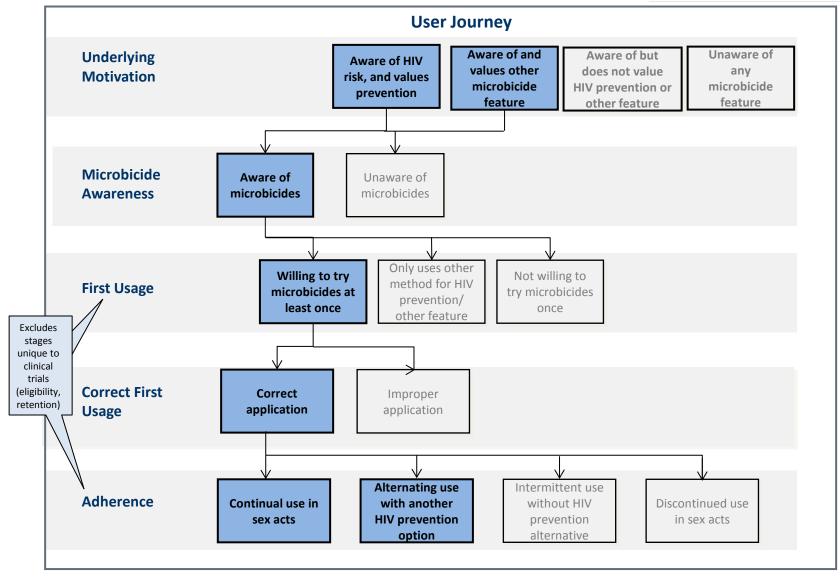
- Permitted level of facility to stock
- Permitted level of health care provider to administer
- Health care providers' (and professional associations') awareness, acceptance and confidence to administer
- Proportion of providers with adequate training (by cadre as applicable)

Supply

Demand

User journey allows mapping of dropoff points and barriers, drivers, and influencers at each stage





Who are influencers at each stage? Which stage has the largest user dropoff?

Knowledge from vaginal microbicide research points to potential barriers and drivers to uptake



Illustrative Sources for End User Understanding

- Previous microbicide trials (e.g., MDP 301)
- Ongoing efficacy and open label trials (e.g., Caprisa 106)
- Surveys with potential users (e.g., FHI360 study)
- Discrete choice experiment (e.g., LSHTM study)
- Family planning, ART (e.g., female condom rollout)

Potential Barriers to Uptake/Adherence

- HIV risk perception
- Pleasure marketing may backfire
- Partial efficacy
- Stigma, violence
- Myths
- Limited privacy
- Need for practice
- Inconvenient for travel or menses
- Forgetting
- Usage fatigue

Potential Drivers for Uptake/Adherence

- Obligation to family
- Vaginal cleanliness
- Preference for pleasure
- Partner views, disclosure
- Social support
- Belief in medicines
- Traditions of vaginal insertions
- Use of vaginal contraception

Limitations: Reliance on clinical trial environment, analogous products, or stated responses to hypotheticals (and some research is several years old)

Mapping vaginal microbicide knowledge against the user journey can point to key questions (1/2)



	Potential Barriers	Potential Drivers	Understanding the User	
Underlying Motivation	 Low HIV risk perception Sexual pleasure marketing may backfire 	 Obligation to family and parenthood Vaginal cleanliness preferences Preference for sexual pleasure 	 What are assumptions about HIV risk? What are motivating non-HIV features (cleanliness, lubrication, pleasure)? What other attributes are associated with sex? 	
Microbicide Awareness	 Misunderstanding of partial efficacy Risk of stigma with product use Myths that microbicide is harmful 	 Community acceptance High provider awareness 	 What is the perception of microbicides by target users? Perception by community leaders? How informed are providers at different levels? 	
First Usage	 Difficulty accessing microbicide Risk of interpartner violence Limited privacy at home 	 Partner views and disclosure of use Some traditions of vaginal insertions 	 What access hurdles exist (availability, privacy, etc)? How do partners view microbicides? How willing are users to disclose to partners? 	

Mapping vaginal microbicide knowledge against the user journey can point to key questions (2/2)



	Potential Barriers	Potential Drivers	Understanding the User
Correct First Usage	 Confusion about application timing Less use during menses Misbelief about partner protection Misbelief that microbicide is contraceptive Possible need for practice 	- Use of vaginal contraceptive method like diaphragm	 What is potential users' understanding of how microbicides work? How easy is it for users to apply microbicides correctly?
Adherence	 Inconvenience of consistent usage, especially when traveling Alcohol use and other reasons for forgetting Usage fatigue Side effects may hamper usage 	 Belief in importance of medicines and usage of medical system Use of modern contraception Social support 	 How do potential users interpret partial efficacy? How inconvenient is it to consistently use microbicides? How do other prevention options affect need and usage? How are side effects understood? What social support options exist?

Other user-focused, private sector approaches offer additional ways of answering key questions (1/2)



Goals

To understand the underlying themes -- user experiences, perceptions, and underlying motivations – relevant for a new product

Types of Firms

User-centered private sector design and marketing advisories/consultancies

IDEO





Methodology

Qualitative, open-ended, in-depth, and in context study of a wide range of users (both typical users and extremes in the target group)

Sample themes related to microbicides:

- Perceptions of microbicides, HIV and sex more broadly
 - Connections with contraception
 - Connections with beauty and wellness
 - Variation in perceptions across demographic groups
- User routines and how microbicides could build on existing routines to enhance adherence
- Physical environments (user's home, work, and socializing locations), and how a microbicide product could fit into these

Other user-focused, private sector approaches offer additional ways of answering key questions (2/2)



Method	Description	Utility	Limitations
Tag along/ shadowing	Follow users through their habits and routines	Reveals potential cues or habits. Illuminates distinctions in reported and actual behaviors.	Not appropriate for all behaviors. Requires users' trust and sufficient resources/time
Self-documentation (Photo/video diaries)	User journaling, documented by photo or video	Enables user feedback over a period of time. Gives user agency and privacy.	Reliance on user for consistency; logistics, such as reviewing all video materials, can be time- consuming
Stakeholder ecology analysis	Interviewing gatekeepers about their motivations and constraints	Identifies barriers in the user's environment to product uptake	Perspective of gatekeepers needs to be triangulated with other inputs, such as users' experiences

Key Takeaways



- In-depth understanding of the user is fundamental to planning for introduction of microbicide
- User journey as an organizing framework can identify key questions around dropoff points, barriers, drivers and influencers
- Other user-focused, private sector approaches offer additional ways of answering key questions about end users