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Enterprise in Zimbabwe:

A Strategic Approach
to Private Sector
Family Planning

The Enterprise
Program

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Foreword

This study represents the first in a series of five country studies published by the Enterprise Program. Countries have been selected on the basis of regional diversity, the variety of socioeconomic and contraceptive prevalence conditions, and the level of private sector development and Enterprise activity. Each country study attempts to offer a thoughtful analysis of the different strategic approaches used to developing private sector interventions in family planning.

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TABLE OF CONTENTS

EXECUTIVE SUMMARY

I.	THE ENTERPRISE STRATEGIC RESPONSE TO THE FAMILY PLANNING ENVIRONMENT OF ZIMBABWE	1
	Enterprise Program Objectives in Zimbabwe	1
	Macroeconomic Conditions Favorable for Privatization	1
	Population Pressures	2
	Supportive Family Planning Policies of the Government of Zimbabwe	2
	Government of Zimbabwe Interest in Private Sector Family Planning	3
	Private Sector Interest in Family Planning	4
II.	ENTERPRISE SUBPROJECTS IN ZIMBABWE	6
	Summary of Enterprise Subprojects	6
	Subproject Selection Criteria	6
	Subproject Descriptions	7
	Subproject Achievements	11
III.	MAJOR FINDINGS AND LESSONS LEARNED	18
IV.	LOOKING FORWARD	21

TABLES

Table 1.	Subproject Characteristics	10
Table 2.	Subproject Impact Data	12

EXECUTIVE SUMMARY

Over the past decade, the Government of Zimbabwe's (GOZ) family planning policies and programs have resulted in one of the highest contraceptive prevalence rates in sub-Saharan Africa. Despite this impressive achievement, Zimbabwe still has one of the fastest growing populations in the world. Moreover, limited public sector resources and the many competing demands for these resources have prevented the Government from further expanding service delivery to meet the family planning needs of its people.

With support from the Enterprise Program, Zimbabwe's dynamic private sector has been mobilized to help fill the gap in family planning service provision.

The Enterprise Strategic Response to the Family Planning Environment of Zimbabwe

Recognizing the important role the private sector could play, Enterprise developed a strategy and program to expand the availability of family planning services in the country.

The strategy has two components:

1. Support high-visibility private sector workplace-based family planning programs in Zimbabwe's key industries and use their positive outcomes to promote "spin-off" replication activities;
2. Develop the technical and managerial capability of the Zimbabwe National Family Planning Council (ZNFPC) to motivate and support the private sector in its new role as a family planning service provider.

The Enterprise Program in Zimbabwe

Enterprise began by establishing workplace-based family planning subprojects with five private companies; the ZNFPC provided technical and other assistance. To further support the workplace-based programs, Enterprise funded the development of IEC materials to motivate male workers and the performance of costs-averted analyses on two of the five subprojects. Finally, with support from Enterprise, the ZNFPC increased its capability to promote and service private sector-based family planning program initiatives.

Achievements. Enterprise Program-sponsored subprojects in Zimbabwe had significant positive impact:

- Workplace-based subprojects were successful in attracting family planning users, particularly former program dropouts and transfer acceptors from the public sector. As a result, contraceptive prevalence and/or couple-years of protection in communities covered by subprojects more than doubled.
- Positive monetary and/or non-monetary benefits accruing from private sector investments in workplace-based family planning services were demonstrated to subproject partners, thus increasing prospects for long-term program sustainability.
- Initial investments by Enterprise led to substantial contributions from subproject partners, particularly after Enterprise funding ended and the private sector assumed funding responsibility. In terms of shifting fiscal responsibility for family planning service provision from the public to the private sector, the impact of resources leveraged beyond the subprojects could be significant. A rough estimate has suggested that the public sector can save as much as US\$1 million per year from private sector family planning service provision.
- Positive outcomes from the first group of Enterprise subprojects have resulted in three "spin-off" replication activities -- one current subproject partner will replicate its family planning program in all of its other company divisions; another partner introduced family planning to its members in a different part of the country; a third initiated workplace-based family planning after observing the impact of a neighboring company's program.
- Enterprise's efforts to establish sustained private sector-based family planning service programs were successful: the four company programs have made family planning a permanent benefit to their employees. With the exception of one subproject partner who continues to receive donated contraceptives, all companies have covered the entire cost of their new family planning programs. In addition, the ZNFPC has made the Enterprise-sponsored Private Sector Support Unit a permanent part of its organizational structure; recurrent costs will be covered by ZNFPC once Enterprise inputs have ended.

Lessons Learned. Numerous lessons were learned from Enterprise Program activities in Zimbabwe:

- Private sector family planning programs can successfully attract and retain large numbers of acceptors from the public sector, if services provided are accessible, affordable and of high quality.

- If resources are leveraged from the right type of private employer, workplace-based programs allow financial responsibility for family planning service provision to be shifted from the public to the private sector.
- Costs-averted or cost-benefit analysis is only one part of a promotion strategy necessary to convince employers to invest in family planning programs; demonstrating potential non-monetary benefits is equally important.
- Risk sharing must continue with new subproject partners to further expand private sector participation in family planning service provision.
- Prospects for the long-term sustainability of private sector family planning service provision are enhanced if specific program elements are included such as developing the capability of a local family planning partner to provide ongoing technical and administrative support, securing the commitment of top management, demonstrating the benefits from investing in family planning, and providing key inputs both during and after family planning program start-up.

I. THE ENTERPRISE STRATEGIC RESPONSE TO THE FAMILY PLANNING ENVIRONMENT OF ZIMBABWE

In late 1986, Enterprise Program staff went to Zimbabwe to assess the needs and opportunities for privatizing family planning services in the country. This reconnaissance led to the development of a strategy and program for Zimbabwe which was then implemented by Enterprise and several local partners.

Enterprise Program Objectives in Zimbabwe

- To mobilize the for-profit private sector to expand the availability of family planning services in the country; and
- To shift part of the financial responsibility for family planning service provision from the public to the private sector.

To achieve these objectives, Enterprise developed a strategy with a two-pronged approach:

- Support high-visibility workplace-based family planning subprojects in Zimbabwe's key economic sectors and industries and use their positive outcomes to promote "spin-off" replication activities; and
- Develop the technical and managerial capability of the Zimbabwe National Family Planning Council to promote and support these new private sector family planning initiatives.

Zimbabwe's Family Planning Environment

There were several factors in the family planning environment which strongly influenced the development of the Enterprise Program's strategy in Zimbabwe.

Macroeconomic Conditions Favorable for Privatization

In 1980, Zimbabwe emerged from a protracted war for independence with its relatively developed economic system and infrastructure largely intact. Although the system inherited from the Rhodesians was inequitable and imbalanced, macroeconomic conditions in the country were ripe for the development of private sector-based family planning programs.

Zimbabwe had a relatively well-developed and growing private sector, which included both subsidiaries of multinational companies (primarily South African and British) and local firms.

In 1987, Zimbabwe was a nation of 9 million people. The major sectors of the economy were agriculture, manufacturing and industry (including mining), each contributing 11.0, 31.0 and 43.0 percent respectively to the GDP. Approximately 19 percent of the population (1.7 million people) was considered to be formally employed in activities outside of communal agriculture.

In an attempt to redress the country's economic and social imbalances, the Government of Zimbabwe invested considerable public sector funds in basic health and education, housing, agricultural support services and land redistribution for the black population. Since the mid-1980's, this high growth in public sector spending, coupled with a sagging economy, put a severe strain on the national budget. As a result, the GOZ's ability to meet the basic needs of its people was hampered, thus forcing it to consider alternative sources of support for social service provision.

Population Pressures

Exacerbating the strain on public sector resources are enormous population pressures, including heavy rural to urban migration, large numbers of unemployed school leavers and high population densities in communal lands areas and in major cities. Despite the impressive gains in contraceptive prevalence and lowered fertility rates realized in recent years, Zimbabwe is still among the fastest growing countries in the world.

In terms of absolute increase, about 2.4 million persons were added to its population from 1969 to 1982. This figure is approximately 47 percent of the 1969 population. The most recent projections suggest that, at its current growth rate, Zimbabwe will double its population in only 19 years.

Moreover, despite the fact that family planning knowledge appears to be high in Zimbabwe -- 95 percent of all women interviewed by the Zimbabwe Demographic and Health Survey (ZDHS) in 1988 reported knowing at least one modern contraceptive method -- unmet demand for family planning goods and services is considerable. The ZDHS indicates that as many as 60 percent of non-practicing married couples are in need of family planning to achieve their stated fertility goals.

Supportive GOZ Family Planning Policies

The GOZ recognized the relation between population growth and economic growth, and the need for family size to be limited within economically manageable numbers. Child spacing activities began in Rhodesia in the early 1960's and led to the formation in 1967 of the National Family Planning Association. After Independence, the Association was reorganized as a parastatal organization and was eventually renamed the Zimbabwe National Family Planning Council (ZNFPC).

The public sector provides most family planning services available in Zimbabwe: in 1988, 91 percent of all non-clinical and 73 percent of all clinical methods were provided by either Ministry

of Health (MOH) facilities, or facilities and community-based distributors (CBDs) of the ZNFPC. Public sector-sponsored family planning policies and programs have resulted in some of the highest contraceptive prevalence rates in sub-Saharan Africa: prevalence for all women using a modern method increased from 15 percent in 1980 (a World Bank estimate) to 27 percent (current use) in 1988 (ZDHS). The oral contraceptive is the modern method of choice, accounting for over 86 percent of all modern methods.

The decline in the annual rate of population growth from 1969 to 1982 (years of the last two censuses) confirmed the change toward lowered fertility; the annual growth rate for the total population from 1962 to 1969 was 3.27 percent versus 2.93 percent from 1969 to 1982. For the Black population alone, the decline was from 3.42 percent to 3.15 percent over the same time periods.

GOZ Interest in Private Sector-based Family Planning

Although the GOZ has made impressive headway with reducing population growth rates in the country, future increases in prevalence and reductions in fertility are unlikely without increased public sector revenues and other inputs. Given limited GOZ resources and the many competing demands for those resources, it is unlikely that significant public sector revenues for expanded family planning service delivery would be forthcoming.

At the same time, the GOZ recognizes the potential role of the private sector in filling the gaps in family planning service provision. Through ZNFPC, the GOZ has demonstrated its willingness to stimulate private sector investment in family planning and support the Enterprise Program's approach of promoting the privatization of family planning services.

Early ZNFPC (pre-Enterprise Program) efforts to stimulate private sector involvement in family planning had met with only limited success:

- Only 42 of approximately 900 commercial firms in Zimbabwe distributed contraceptives offered by ZNFPC;
- Training of private sector nurses by the ZNFPC was hampered by both lack of funds and lack of mechanisms to reach trainees from the private sector;
- Information, education and communications (IEC) materials geared toward male work forces were almost non-existent; and
- There was a need for expanded coverage by community-based distributors (CBDs) in the rapidly growing commercial farming and industrial areas.

Private Sector Interest in Family Planning

The for-profit private sector as a whole provides only a small percentage of family planning services in Zimbabwe; in 1988, only 3 percent of all non-clinical and 18 percent of all clinical methods were provided by the private sector. As part of Enterprise's country assessment, opportunities for family planning program development were explored with private companies and the market-based health service providers.

Private Companies: The involvement of private companies in social service provision is not new to Zimbabwe. Many businesses, particularly the larger industries and commercial farms, provide health services, housing and education for employees and their dependents.

A few companies in Zimbabwe also offer family planning at the workplace; however, services are very limited and of relatively poor quality. Interviews conducted by the Enterprise Program of business leaders and trade association officials in key economic sectors revealed a private sector receptive to, but somewhat skeptical of, workplace-based family planning. Specifically:

- Interest in participating in an Enterprise-type family planning program was not universal -- some managers had reservations (they had competing priorities, did not consider it important, felt it was the government's responsibility to provide, etc.);
- Managers who were interested in supporting workplace-based family planning were motivated by a variety of factors -- potential savings from reduced maternity, child care and turnover costs, political goodwill engendered from the GOZ, and employee welfare considerations; and
- Supportive managers indicated that outside technical and financial start-up assistance from a group like the Enterprise Program would be required if any long-term investments in family planning were to be made by their companies.

Market-Based Providers: This group consists of for-profit providers of health care services in individual and group practices, medical aid societies (health insurance companies) and medical associations.

One of the largest, most accessible, and well organized market-based groups is the medical aid societies. There are several companies of substantial size in the country, some attached to specific industries, such as banking. Another relatively sizeable group consists of for-profit health service providers in individual and group practices. However, being widely dispersed, they are more difficult to access. In addition, the family planning

clients of these providers tend to be the urban-based and more wealthy individuals who can afford to pay higher rates.

The Enterprise Program's first assessment visit to Zimbabwe found macroeconomic, demographic, institutional and other conditions favorable to private sector-based family planning. The Enterprise strategy to mobilize the resources of the private sector to expand family planning service delivery was developed to respond to these factors. In addition, the program which Enterprise developed to achieve these strategic goals was greatly facilitated by supportive public sector population policies and a private sector amenable to playing a larger role in social service provision.

II. ENTERPRISE SUBPROJECTS IN ZIMBABWE

Summary of Enterprise Subprojects

The Enterprise Program identified five private employers, including three multinational companies, and Zimbabwe's leading family planning organization, the ZNFPC, as subproject partners. Workplace-based family planning programs were initiated with the five employers; the ZNFPC provided technical and administrative support. To further support the workplace-based programs, Enterprise provided funds for the development of IEC materials to motivate male workers and for the performance of costs-averted analyses on two companies.

In addition, to increase the institutional capacity in Zimbabwe to support private sector family planning, Enterprise provided funds and technical assistance to the ZNFPC. Enterprise's support focussed on enhancing the ZNFPC's capability to promote, service, and supply private sector-based family planning program initiatives.

Subproject Selection Criteria

Because of their accessibility, their prominent role in the nation's economy and their relatively large populations, private employers were targeted by Enterprise as subproject partners. This choice was endorsed by the USAID Mission in Zimbabwe which asked Enterprise to give priority to workplace-based programs. Market-based service providers were to be covered by two other centrally funded USAID projects, TIPPS (Technical Information on Population for the Private Sector) and SOMARC (Social Marketing for Change). TIPPS would apply its sophisticated cost-benefit model at CIMAS, Zimbabwe's largest medical aid society, and SOMARC would market contraceptives through physicians and other private providers of health services.

The criteria Enterprise used in employer selection for workplace-based family planning included:

- Large numbers of females that were either employed by the company or covered as dependents;
- Family planning services in the company/farm catchment area that were either unavailable or inadequate;
- An employer that was representative of its industry/sector in terms of size, benefits offered to employees and dependents, work force composition and services offered to the surrounding community; and
- A highly visible employer that was a leader in one of Zimbabwe's major agricultural, industrial and/or manufacturing sectors.

Subproject Descriptions

ZNFPC Private Sector Support Unit Subproject

Setting:

Operating under the auspices of the MOH, the parastatal ZNFPC coordinates all family planning activities for the GOZ; two-thirds of its funding came from the Government. Principal activities of the ZNFPC includes family planning commodity logistics, medical and clinical service coordination, a youth outreach program, an IEC unit, community-based distributors (CBDs), and training.

Goals and Activities:

With financial and technical support from Enterprise, a Private Sector Family Planning Support Unit was established within the ZNFPC in 1988. The goal of the Private Sector Support Unit was to coordinate and provide oversight to all private sector family planning initiatives in Zimbabwe, and to act as a liaison between the private sector, ZNFPC management and the MOH. At the outset of the Private Sector Support Unit's establishment, particular attention was given to providing technical, training and commodity logistics support to workplace-based subprojects funded by the Enterprise Program, although, eventually, other private sector support and promotion activities were also undertaken.

Operations support provided by Enterprise covers the period from January 1, 1988 to January 31, 1991 and includes the costs of one full-time staff member, consultants, staff training, equipment, travel and transport, the reproduction of IEC materials and other direct recurrent costs. Enterprise Program funds to ZNFPC total Z\$188,380 (Z\$1.00 = US\$.50) with an additional US\$34,022 to cover non-local (foreign currency) costs.

Constraints:

The Private Sector Support Unit did not encounter any major constraints in servicing Enterprise-sponsored workplace-based programs. Being comprised of one person, however, the Private Sector Support Unit fairly quickly reached its capacity to provide effective oversight and support to Enterprise's ongoing workplace-based programs. Although this did not negatively affect the implementation of Enterprise-sponsored subprojects, new initiatives could not be aggressively pursued. Moreover, the size of the Private Sector Support Unit hampered its ability to coordinate all private sector family planning activities in Zimbabwe, including those of TIPPS and SOMARC.

Workplace-Based Family Planning Subprojects

Settings:

Lonrho Zimbabwe Ltd. -- The eight gold mines of Lonrho Zimbabwe Ltd.'s mining division are the sites of one of Enterprise's earliest workplace-based programs. Headquartered in London, Lonrho International is one of Africa's largest multinational companies; its subsidiary in Zimbabwe is one of the country's largest employers. Although Lonrho's largest operation in Zimbabwe is mining, the company has three other divisions: agriculture (wattle, cotton, ranching), textile manufacturing, and automotive engineering. The company provides a large range of social services (including health, education and housing) not only to its employees, but also to dependents and the surrounding community.

Triangle Ltd. -- Another of Enterprise's first workplace-based subprojects, Triangle is one of Zimbabwe's largest agro-industrial estates, located on 83,000 hectares in a rather remote section of the country. Company profits are derived mainly from the sales of sugar and sugar bi-products. Like Lonrho, Triangle provides a large range of services not only to employees and dependents but to the surrounding community. The total population in the Triangle area community is estimated to be about 60,000.

Commercial Farmers' Union (CFU) -- With about 4,550 members, most of Zimbabwe's largest commercial farmers belong to the CFU. About 27 percent of the total formal sector work force is employed by CFU members; including dependents, about 1.5 million people reside on CFU member farms. Because of its progressive attitude towards family planning, the 92 member Doma Area Farmers Association was chosen by CFU as the first site for introducing workplace-based family planning on commercial farms.

British American Tobacco (BAT) -- Another multinational headquartered in the United Kingdom, BAT is fairly typical of Zimbabwe's medium- to large-scale, urban-based manufacturing operations in terms of size, employee characteristics and benefits offered. Nearly all of BAT's 450 permanent and 850 seasonal workers are male. Benefits (including medical) are only offered to employees; dependents are not covered. No housing is provided to employees by the company.

Hippo Valley Estates -- Owned by the multinational company Anglo-American Ltd., Hippo Valley is an agro-industrial estate engaged in the production of sugar and related bi-products. Located near Triangle, Hippo Valley employs over 5,000 male workers and provides extensive services to a large number of dependent females, children and community members.

Table 1 on the next page describes in more detail the characteristics of Enterprise's workplace-based subproject partners, funding contributions from all sources, and subproject start-up and end dates.

Goals and Activities:

The five Enterprise-sponsored workplace-based family planning programs shared many common features:

- The goals were similar -- to increase the knowledge and practice of family planning using the workplace as a locus to reach reproductive age couples;
- Target populations typically included company or farm employees, their dependents and, if located in a rural area, the surrounding community;
- With ZNFPC assistance, the new programs recruited, trained and deployed CBDs in the workplace and (if applicable) the dependent community. If on-site medical facilities were available and the target population included females, company nurses were trained at ZNFPC in clinical methods (Triangle, Lonrho, Hippo Valley);
- All subprojects utilized the male motivational IEC materials developed for Enterprise by Matthewman, Banks Advertising. Worker education and male motivation campaigns at the workplace were particularly emphasized in three of the five subprojects where males were the only target population (BAT), where sexually transmitted disease (STD) cases were on the upswing (Lonrho), or where changing male attitudes towards family planning was a major focus (Triangle and BAT);
- Family planning commodities were provided by the SOMARC project through ZNFPC. All subprojects, with the exception of the Commercial Farmers' Union (CFU), covered all commodities costs. CFU provided commodity distribution and other logistical support;
- In most cases, only subproject start-up costs were financed by the Enterprise Program, recurrent costs were covered by the companies or farm owners.

In addition, under contract with Enterprise, Price Waterhouse conducted a study which examined costs-averted as a result of investing in family planning at two subproject companies, Triangle and Lonrho. The study ran concurrently with the implementation of the company subprojects. The information provided by the study was used by company management as an input to future program planning.

TABLE 1
SUBPROJECT CHARACTERISTICS

SUBPROJECT PARTNERS (SECTOR)	TYPE OF BUSINESS	LOCATION	SIZE AND COMPOSITION OF WORKFORCE	WRA **	TOTAL POPULATION IN COMMUNITY	ON-SITE BENEFITS PROVIDED	MEDICAL SERVICES PROVIDED TO:		CONTRACT START/END DATES	FUNDING	
							dependents	community		EP (in US\$) (% total)	project partner *** (in Z\$) (% total)
Lonrho Zimbabwe Ltd (manufact.)	large scale mining (MNC)*	rural 8 sites	7,200 (males)	7,400	35,000	medical, housing, education	yes	yes	1/1/88- 9/30/89	60,760 (41%)	173,012 (59%)
Triangle Ltd (agro-indust)	sugar & related bi-products (locally owned)	rural 1 site	7,500 (males)	15,000	60,000	medical, housing, education	yes	yes	10/1/87- 6/30/90	39,043 (43%)	101,826 (57%)
Commercial Farmers' Union (agric.)	commercial farming (locally owned)	rural 92 sites	aprox. 5,600 (male/female)	5,600	28,000	limited medical, housing	limited	limited	10/1/87- 1/31/91	33,988 (59%)	46,654 (41%)
British American Tobacco (manufact.)	tobacco products (MNC)	urban 1 site	450 permanent & 850 seasonal (males)		1,300	medical	no	no	2/1/88- 10/31/89	32,362 (82%)	14,160 (18%)
Hippo Valley Estates	sugar & related bi-products (MNC)	rural 1 site	5,691 (males)	7,700	33,619	medical, housing, education	yes	yes	10/1/89- 9/30/90	35,600 (64%)	124,058 (36%)

* Multinational company

** estimate of women in community of reproductive age

*** Z\$1.00 = US\$ 0.50

ZNFPC can also use the results as a marketing tool to help motivate other companies to start new family planning programs.

Constraints:

No serious constraints were encountered during the implementation of the subprojects. One problem did arise at Lonrho, however, which delayed family planning program start-up at several mines. Lonrho's personnel director at company headquarters in Harare had been given the responsibility for managing the Enterprise Program subcontract. As a result, the eight mine personnel managers were put in charge of overseeing the new family planning program at the mine level. Thus, the personnel managers, not the mine managers were the principal recipients of information, training, and other motivational efforts to ensure their positive participation in the new program; the eight mine managers were not included in the first round of program planning meetings.

Failing to ensure the commitment of mine managers in advance of program start-up and to involve them in implementation resulted in program delays at several mines. Although in most cases delays experienced were not serious, one mine manager opposed to family planning was able to block program start-up at his mine for nearly a year.

Subproject Achievements

The discussion of subproject performance covers a two-year period, from October 1, 1987 to September 30, 1989. At four of the five workplace-based subprojects, service delivery implementation activities were completed (Triangle, Lonrho, CFU, British American Tobacco). At the fifth (Hippo Valley), implementation activities were in their start-up phase; hence, no impact data on this subproject were available. The Enterprise Program assesses subproject activities in terms of:

- Attracting family planning users
- Generating positive non-monetary and monetary returns on the investment
- Sharing the financial risk in family planning service provision
- Leveraging private sector resources
- Achieving sustainability

Attracting Family Planning Users

Enterprise Program subprojects in Zimbabwe have been successful in attracting and retaining family planning users -- see Table 2 on the following page for data on acceptors, contraceptive prevalence rate (CPR), and couple-years of protection (CYP).

TABLE 2
SUBPROJECT IMPACT DATA

SUBPROJECT	PERIOD DATA COLLECTED	NEW ACCEPTORS TO FAMILY PLANNING	% NEW ACCEPTOR TARGETS ACHIEVED	REVISITS	BASELINE CYP OR CPR (1987 DATA)	END OF PROJECT CYP OR CPR	CHANGE IN BIRTHS RECORDED (BASELINE TO PRESENT)	CHANGE IN STD CASES RECORDED (BASELINE TO PRESENT)
Lonrho	1/88-9/89	1610	82	23,030	856 * (CYP)	2,108 * (CYP)	-2% & **	-29 & **
Triangle	10/87-9/89	1110	74	14,597	21.5 (CPR)	56.9 (CPR)	NA	NA
CFU	1/88-9/89	1014	20	21,569	1,224 (CYP)	2,066 (CYP)	NA	NA
BAT	7/88-10/89	361	86	540	71 (CPR)	76 (CPR)	NA	NA

* Data collected in 5 Lonrho sites

** Data collected in 7 Lonrho sites

NA = Not Available

The success of Enterprise Program-sponsored subprojects in Zimbabwe in terms of attracting and retaining users can be attributed to the fact that, in addition to new-to-family planning users, company family planning programs were able to attract and keep former program dropouts and transfer acceptors from the public sector. They were able to do this by providing what was formerly lacking -- excellent counseling and coverage, strong motivational campaigns, and reliable supplies of contraceptives.

The impact of attracting and retaining significant numbers of contraceptive users on each subproject is summarized below:

- At the five Lonrho mines where baseline data were available, CYP increased from 856 to 2,108, a rise of 146 percent over a 21-month period. In addition, recorded births at seven mines decreased by 28 percent, and STD cases dropped by 29 percent over the same time period;
- At Triangle, CPR nearly tripled, increasing from 21.5 to 56.9 percent;
- At participating CFU farms, CYP almost doubled, increasing over an 18-month period from 1,224 to 2,066 couples protected;
- At British American Tobacco (BAT), current and ever-use of condoms increased from 71 to 76 percent. Male attitudes towards family planning also improved -- at the start of the project, 25 percent of all male workers believed preventing pregnancy was important; by the end, 33 percent believed it important. General approval of family planning as a concept grew from 83 to 91 percent.

Positive Non-monetary and Monetary Returns on Private Sector Investment

The Enterprise Program demonstrated to the private sector the benefits of investing in family planning; both non-monetary and monetary benefits were demonstrated. Positive monetary returns on investments did not have to be quantified before subproject start-up in order to convince private sector partners to provide family planning at the workplace. These, along with intangible non-monetary returns, were intuitively understood by business managers.

Prior to, and during subproject implementation, non-monetary and monetary returns on investment were assessed by private sector partners with Enterprise assistance. For example:

Positive benefits for Triangle:

- Triangle is situated in one of the hottest and most malarial areas of Zimbabwe. As a result, the company views its work force as an investment and provides excellent benefits to employees to keep turnover costs down. After meeting with Enterprise and ZNFPC

staff, Triangle management decided to add family planning services to maintain the excellence of its employee benefit package and the welfare of the worker and his family;

- Commissioned by Enterprise and based on data gathered during the first two years of family planning program operation, the cost-averted analysis conducted by Price Waterhouse at Triangle projected a net loss to the company after tax during the first 3 years. However, by the end of the sixth year, the net present value of savings in maternity and child care costs was projected to exceed program costs by Z\$8,905 (assuming a discount rate of 15 percent). By the end of the tenth year, the net present value of savings was projected to be Z\$173,103. Although these favorable numbers were not a factor in influencing Triangle's initial decision to invest in family planning, they did influence Triangle's decision to sustain the program long-term.

Positive benefits for CFU farmers:

Pressures for land reform in Zimbabwe encouraged CFU farmers to provide better benefits, including family planning, to its workers. Based on the success of the project in the Doma area, CFU selected Manicaland as the site to replicate the Enterprise-sponsored family planning program activities. Manicaland, home to some of the largest commercial farms in Zimbabwe, is an area of the country where land reform pressures are among the greatest.

Positive benefits for Lonrho:

- Lonrho's concern over the rising costs of treating STD cases among its employees was one determining factor in its decision to invest in family planning. The drugs used to treat these cases must be imported. Assuming an average per treatment cost of Z\$10 and not counting time lost at the workplace from illness, Lonrho may have saved as much as Z\$8,000 over a one-year period from its Enterprise-sponsored family planning program based on the recorded reduction in STD cases at seven of its eight mines. This, along with other benefits perceived by Lonrho management, influenced its decision to continue funding family planning service delivery and to introduce the program into its non-mining divisions.

Sharing the Financial Risk of Family Planning Service Provision

The promise of positive benefits from family planning program investment was not sufficient to secure the participation of employers in the program. Enterprise also had to share the financial risk of family planning service provision with its private sector partners. The Enterprise Program-private sector "joint venture" was the key to the successful start-up of workplace-based family planning programs.

Enterprise supplied seed capital for both subproject start-up and technical assistance. However, in most cases, more than half of the total project cost was covered by the private sector subproject partner.

Enterprise's efforts to identify subproject partners revealed that the majority of companies in Zimbabwe took a conservative position on family planning. Faced with many competing demands for investing revenue, family planning was not found to be high on a company's list of priorities. Even if convinced that there were financial returns from investing in family planning, business managers hesitated to move forward without, at minimum, substantial training and technical assistance provided by an outside source. For example:

- Lonrho had a rudimentary family planning program before working with Enterprise. Company management has admitted, however, that without Enterprise support the company could not have mobilized the level of resources needed to upgrade its program -- it would have taken Lonrho at least 10 years to achieve alone what was accomplished with Enterprise assistance in 18 months;
- CFU would not have undertaken service provision at all without Enterprise support; and,
- BAT company management committed long-term resources to its program because the Enterprise-supported subproject produced evidence that male motivation at the workplace really does change family planning attitudes.

Leveraging Private Sector Resources

A relatively small investment by Enterprise led to substantial cash and in-kind contributions from workplace-based subproject partners, particularly after Enterprise funding ended and the subproject partners assumed funding responsibility. In terms of shifting fiscal responsibility for family planning service provision from the public to the private sector, the impact of resources leveraged beyond the demonstration subprojects could be significant.

For illustrative purposes, Enterprise performed a very rough calculation of potential savings that could be realized by the GOZ as result of expanding family planning in the private sector. About 36,000 couples of reproductive age live in the catchment areas served by Enterprise subprojects.

Roughly estimating the public sector cost per acceptor to be US\$26.00¹, the GOZ could be saving just under US\$1 million per year as a result of the new private sector family planning programs.

Resources were also leveraged outside these subprojects through "spin-off" replication activities:

- Lonrho Zimbabwe has created a new staff position to manage its family planning program and will replicate the program in its three other divisions -- Textiles, Agriculture and Automotive Engineering. Lonrho will also be holding a workshop to introduce family planning to company affiliates in six other African nations;
- CFU has introduced a new family planning program initiative to its Manicaland member association;
- The Hippo Valley Estates subproject was a spin-off from Triangle's new family planning program. Located near the Triangle estate, Hippo Valley management became aware of the benefits of Triangle's program and contacted Enterprise. The result was a subproject with similar acceptor targets but at less cost for Enterprise;
- Enterprise supported research at BAT in order to document the changes in family planning attitudes among its male workers resulting from the introduction of an effective male motivation campaign at the workplace. BAT presented the positive results of the new program at a meeting of the Confederation of Zimbabwe Industries (CZI) where the focal point was worker education. The CZI was interested in the BAT experience as a model for other industries in Zimbabwe. Subproject results have also been shared with similar companies in two of Zimbabwe's largest cities; these presentations have engendered several responses to ZNFPC from company directors interested in starting-up family planning programs.

Prospects for Sustainability

Enterprise's efforts to foster sustained privatization of family planning service delivery have been successful. Four company subprojects (Lonrho, Triangle, CFU, BAT) have continued or expanded their provision of family planning as a benefit to their employees (Hippo Valley is still too new a project). With the exception of CFU, which will continue to receive donated contraceptives from ZNFPC, all subproject partners are covering the entire cost of their family planning programs (personnel, commodities, transport, training, IEC) and all have made a long-term commitment to continue to do so.

¹ Calculation based on 1985 funding and acceptor data from Family Planning and Child Survival, 100 Developing Countries, John A. Ross, Marjorie Rich, Janet P. Molzan, Michael Pensak, pp. 55 & 138. Figure is in 1985 Dollars, not adjusted upward for inflation.

With regard to ZNFPC, the Private Sector Support Unit has been functioning effectively for nearly two years. Rather than a temporary arrangement to service Enterprise Program subcontracts, the ZNFPC has come to view the Private Sector Support Unit as a permanent part of its organizational structure. As a result, ZNFPC has agreed to cover its recurrent costs once Enterprise inputs have ended. In the long run, this move should prove advantageous to the sustainability prospects of the ZNFPC; the Private Sector Support Unit generates revenue through sales of services to private companies and commercial farms.

III. MAJOR FINDINGS AND LESSONS LEARNED

Private sector family planning programs can successfully attract and retain large numbers of acceptors from the public sector, if services provided are accessible, affordable, and of high quality.

Enterprise Program subprojects successfully attracted and retained large numbers of family planning users. This was due to the fact that in addition to new-to-family planning users, workplace-based programs were able to attract and keep former dropouts and transfer acceptors from the public sector. They were able to do this by providing what was formerly lacking at no or low cost to the user: excellent counseling and coverage, strong motivational campaigns, and reliable supplies of contraceptives.

If resources are leveraged from the right type of private sector partner, workplace-based programs allow financial responsibility for family planning service provision to be shifted from the public to the private sector.

A modest level of start-up capital from Enterprise led to the establishment of workplace-based family planning programs that leveraged substantial recurrent cost contributions from the private sector. Most Enterprise-sponsored private sector programs were able to attract large numbers of family planning acceptors from the public sector. The shift of acceptors from public to private sector service delivery systems represents a lessening of the public sector's financial responsibility for all family planning service provision. Private sector involvement in family planning service delivery allows the public sector to shift its resources to areas of greatest need.

Enterprise's efforts to "privatize" family planning service provision in Zimbabwe were successful because of the type of company selected -- with one exception (BAT), Enterprise chose private sector partners that provided benefits to both male workers and their female dependents. As females are Zimbabwe's major users of contraceptives, whether or not the dependent female population would be served by the subproject partner was a crucial consideration in company selection, and proved to be an important determinant of impact.

Costs-averted or cost-benefit analysis is only one part of a promotion strategy necessary to convince employers to invest in family planning programs.

The promotion strategy used by Enterprise to motivate private employers involved marketing both the prospective non-monetary and monetary benefits that could result from workplace-based family planning program investment. These benefits were explained

during meetings held at individual companies and at an Enterprise-sponsored workshop organized for potential private sector partners from East and Southern Africa.

Positive monetary returns on investment did not have to be quantified in advance of subproject start-up in order to convince prospective subproject partners to provide family planning at the workplace. These, along with intangible non-monetary returns were intuitively understood by business managers. Different employers gave different weight to the myriad of potential benefits to be realized from family planning program investment -- in at least two cases the potential benefits perceived by subproject partners were non-monetary.

The retrospective and predictive information provided by the costs-averted analyses performed at two companies was used by company management to help justify continued funding for the programs once Enterprise support ended. In addition, these costs-averted analyses are also a marketing tool for ZNFPC to help motivate other companies to invest in workplace-based programs.

Risk sharing must continue with new subproject partners to further expand private sector participation in family planning service provision.

Presenting to business managers the benefit of providing family planning at the workplace was not, by itself, sufficient to secure their commitment to participate in the program. Enterprise had to share the risk of family planning service provision with its private sector partners by providing both in-kind and financial assistance.

For the near future, sharing the risk with the private sector to mobilize financial support for family planning must continue. Although enthusiasm is growing, the majority of Zimbabwean companies still take a conservative position on family planning and hesitate to actively support programs at the workplace. Reaching a critical mass of demonstration projects that will result in the "spontaneous" replication of company-based family planning programs is a complex process and an objective that will require additional time and effort to achieve.

Prospects for the long-term sustainability of private sector family planning service provision can be greatly increased if certain elements are built into private sector programs.

The Enterprise Program has established private sector family planning programs in Zimbabwe that are being sustained. This favorable track record was the result of identifying in advance of program implementation the factors necessary to maximize the prospects for long-term program sustainability. These factors include:

- **Developing the capability of a local family planning partner to provide the private sector with technical and administrative support;**
- **Securing top management commitment to provide company-sponsored family planning services in advance of program start-up; and**
- **Making available to the private sector family planning program inputs such as technical assistance, commodities, training, and/or IEC both during and after program start-up. Continued inputs were a particularly important incentive for the employers who only realized non-monetary benefits from investing in family planning.**

IV. LOOKING FORWARD

The Enterprise experience in Zimbabwe has demonstrated that private sector family planning is an idea whose time has come. Through its subprojects, which were largely conceived as demonstration activities, Enterprise has been able to convince even the most reluctant and conservative private sector partners of the merits of providing family planning services.

By strategically targetting its assistance to a diverse range of employers -- from a large multinational company to a national farmers' union -- Enterprise was able to achieve impact which is both broad and significant. These "graduate" subprojects are now credible examples to their communities for family planning in the workplace.

Simultaneous inputs into the national family planning organization, ZNFPC, have ensured the development of an institutional capability which will continue to serve the technical needs of family planning programs in the workplace. Further, ZNFPC will continue to play a major role in the promotion of private sector family planning.

Finally, private sector family planning complements existing public sector efforts to meet the growing demand for contraceptive services in Zimbabwe. Given the success of Enterprise activities over this two-year period, the future holds much promise for solidifying this important partnership.