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Using MCA to segment new automotive markets, market research journal 7, 360-363. Researcher Google Rossi, Peter E., Robert E. McCulloch and Greg M. Allenby. (1996). The value of procurement history data in targeted marketing, Marketing Science 321-340. Google Shaninger Researcher, Charles M. (1981). Social Class vs. Income Again: Once Again: Study, Journal of Marketing Research 18, 192-208. Google Schwartz researcher, Gideon. (1978). Model Measurement Score, Annals of Statistics 6, 461-464. Google Scholar Sparks, David L. and W.T. Tucker. (1971). Multivariate analysis of personality and use of products, Journal of Marketing Research 8, 67-70. Google researcher Wedel, Michelle and Wagner A. Kamakura. Marketing Segmentation: Conceptual and Methodological Basics. Boston, Massachusetts: Kluwer. Researcher at Google Wells, William D. (1975). Psychiatry: Critical Review, Journal of Marketing Research 12, 196-213. Google researcher Wildt, Albert R. and John M. McCann. Regression Model for Market Segmentation Research, 17, 335-340 Market Research Journal. Google researcher Ian, Sha, Greg M. Allenby and Geraldine Fennell. (2002). Modeling Variations in Brand Preference: Roles of Objective Environment and Motivating Conditions, Marketing Science 21(1), 14-31. Google Scholar Page 2 Citation counts are provided from Web Science and CrossRef. The amount of data can vary depending on the service and depends on the availability of data. The graphs will be updated daily as soon as they are available. [...] This manuscript provides a good opportunity to do so and more, but not in its current form. In general, it needs structure, focus and substantial editing in order to build on its novelty in public health applications, as well as to expand its importance beyond the UMMC or beyond the two countries in which the project is being implemented. In particular:1) The manuscript is very dense and has too much information in the wrong places - too many details where there is no need and not enough details in the mixed approach of the methods used. In addition to the text there are graphs and 8 tables. While covering several issues at the same time, it should not be a novelty approach to market segmentation and its results. Consider either cutting down text and tables for a more focused and concise manuscript, or splitting it into several manuscripts. What is the key message is to identify and focus on that. We thank the reviewers for their advice on sharpening and concentrating the manuscript. We took comments on board, and removed sections detailing regional differences between segments, detailed information on demographic characteristics by segment (but now provide a general overview of demographic and cultural traditions as requested in paragraph 4), the role of devices, and some numbers and tables relating to this information. In particular, we have: Remote: We have identified geographical differences (at the provincial and district level) in the distribution and size of segments in order to provide a sub-national orientation of demand generation strategies. Given the potential role of the devices in generating demand for VMMC (Fram et al., 1999), we have identified segments in which the VMMC strategy can be effective. The section Applying segmentation to VMMC option data has been removed, as this can be divided into a further manuscript. The Demographic Characteristics of Segments section has been removed, as this is not central to our main message, showing the application of the behavioral and psychographic segmental approach. Figure 2-figure supplements 2 and 3 were also reduced. The Regional Segment Analysis section has been removed to further sharpen the focus on our core message. The corresponding number of two-figure addition 4 has also been reduced. The Role of Devices in Targeting Segments section has been removed, which, as recommended, will be part of a separate manuscript. Table 3 was also shortened, as was the table 4 column, which links to devices that target different segments and further links to devices in the text. Remote figure 5 as an example of a tree-making segment in zambia. Instead, we now show only the example of zimbabwe (Figure 4) and questions about the typing tool for both countries (Figure 4 is supplement figure 1). Changed the layout of Figure 3 to fit on one page. Simplified Figure 4, removing the descriptions of the scale from the drawing, and instead describing them in legend. We have retained a detailed description of the segments throughout the Results section, including differences in risk perception, as this is central to understanding the kind of data this method can provide. We have also added more information to the mixed-use approach in accordance with the requested comments below.2) The title suggests greater generalization than what viz actually did in the two African countries. The method we outline should be generalized after this study in two African countries. We changed the name to qualify generalization, and emphasize that this is an example to: An example for psychographic-behavioral segmentation approach for target generation demand in voluntary medical male circumcision.3) More detailed information is needed in the methodology section: Justification for site selection, catchment population and who sample represents, sample calculation, sampling size, differences between study sites - epidemiological or culturally added value of quality data - the role of the quality of the data. Details of where it was conducted, who was included, how it was conducted, with whom it is needed. We appreciate the reviewers' pointer to include more information in the methodology section. These comments have greatly helped us to clarify what needs to be included. Now we've added more information on the request: The rationale for selecting the site: Now we've explained this in response to bullet point differences between research sites - epidemiology or Population catch and who sample sample the table requested for paragraph 6 now contains more information about the catchment population. In the manuscript, we already outline who the sample represents: The samples were distributed by age in proportion to the population for each age group in each district. [...] If the chosen man in the family is not or is not eligible to vote, the next household is contacted. Sample size calculation: We now add our rationale for calculating sample size: Sample sizes at the country level (n2,000 or 2,001 people in each country) have been determined based on experience with cluster segment sizes and the need for a minimum sample size in the smallest segment to be large enough to verify the significance of segment differences. [...] Consequently, if this sample is the smallest segment with a size of 5% of the total sample, the result is a total sample size of n2,000 (n'100 and 20). Differences between the study sites - epidemiological or cultural: In response to a request for information from the Government of zimbabwe and zambia, no information was received on epidemiological differences at the district level. Culturally, we have taken into account that circumcision is already a well-established practice in some districts, and the rates of medical circumcision vary from area to area since the establishment of services in each country. For practical field work, we sought to sell research in the smallest total number of areas, which represented a high proportion (set as 80%) out of the total number of uncircumcised men in each country. We then ranked the districts in each country by population of uncircumcised men, from high to low and calculated a combined % of the total uncircumcised population through the rankings. We then selected the highest-rated areas, which together account for 80% of uncircumcised men in each country surveyed. Now we explain this: For practical field work costs and logistical purposes, the research is focused on the areas with the highest concentration of uncircumcised men in each country, together accounting for 80% of uncircumcised populations in each country. [...] About 50% of the districts were below the 80% cut point, so the study was conducted in 38 of the 72 districts of zambia, and 35 of the 61 districts in zimbabwe. Adding the cost of quality data is a role in the development of questionnaires and the quantitative component: The quality data came from two sources: travel mapping and game of decision-making followed by hot-state interviews. The data were then used to inform the development of survey questions, which in turn formed the basis of key variables in segmentation differentiation. From the travel mapping, we got: - the values in this process to decision-making, and the proportion of men at every mark.- Beliefs and attitudes to and Circumcision, which is relevant to men at every temporary stage.- Roles of influential people in the development of these beliefs among men, including ranging from female partners and male friends to medical professionals or media, such as television billboards or radio. From game decision-making and subsequent hot-state interviews, we received: - Additional information about beliefs and emotions, biases and contextual factors (such as who influenced men).- Triggers for men to act to get circumcised. Now we have explained that qualitative research is added to the Materials and Methods section: The quality data was obtained from two sources: travel mapping, and game decision-making followed by hot interview states. [...] In turn, the Lego study is the basis of key differentiated variables for quantitative segmentation. Details of where it is carried out, who is included, how it is conducted, with whom? In the last paragraph of the Materials and Methods subsection, We specified who was included in the sample and how the survey was conducted (the first paragraph of the above subsection). Now we'll add that: the surveys were conducted by men, local interviewers who were contracted by the research company Ipsos in zambia, and the subcontractors of Ipsos in zimbabwe.4) Consumer Travel mapping and behavioral economics game interesting, but how it helped define the context; how does it take into account the many factors that, within and outside the control of the individual, affect the layers within and between countries? We are now answering these questions in response to paragraph 3, where we will take a detailed look at the qualitative methods used.5) There is no reason to focus on the 15-29 age group. Is it based on epidemiological data on HIV? Were HIV prevalence or incidence rates similar in both countries? We thank the reviewers for emphasizing that this issue needs to be clarified. In the introduction, we provided a rationale for focusing on this age group: This quantitative study was conducted among men 15-29 years old, taking into account previous data that identified this as the most effective and effective age for VMMC programs in both countries, focused on the Awad et al., 2015; Awad et al., 2015b». We now add to this sentence a clearer justification presented in the original documents: In the age mathematical model, Awad et al. Awad et al., 2015b) assessed the impact of prioritization of different age groups for VMMC in zimbabwe (Awad et al., 2015a) and zambia (Awad et al., 2015b). [...] So we focused our research on this age group. HIV prevalence (14.7%) (12.9%) Comparable (: however, there are regional differences that go beyond this article.6) The Results section needs a demographic demographic A table that includes variables by country and combined, which includes average age and range: Employment status, years of study, language or cultural characteristics; Perception of HIV risk, social acceptability of THE WIM; Etc. We thank the reviewers for pointing out the need for this information. We now provide this data as a figure of 1-figure supplement 1 (demographic and cultural background) and 2 (social acceptability of VMMC - perception of GIV/STIs risk). We've collected these variables around the country, and that's why we present them that way. We've added a section of Demographic Characteristics as follows: Figure 1-figure supplement 1 shows the demographic and cultural characteristics of the population sample in zambia and zimbabwe. [...] The biggest difference is that a much larger proportion of the population is employed only at the primary level, and a smaller proportion of the population is employed in the country. As noted in the response to paragraph 1, we removed sections and figures relating to segment demographics and regional segment analysis because one general commentary removed that too much peripheral information had been provided in the document. While the new figures requested at this point add an overall picture of the characteristics of the population studied, the deleted figures delved into the details of these characteristics by segment, and showed how they were distributed geographically.7) Segmentation - more generalized categorizations are needed, for example, based on the theory of diffusion, consumers are divided into four broad categories of viz innovators, early and late adopters and lags, regardless of the geospace location or product. We thank the reviewers for highlighting the segments identified by Diffusia innovation theory. However, we believe that one of the key advantages of the approach presented here is that it does not rely on generalized and therefore unfo gatherable categorization. Instead, if offered a generalized method that would lead to a specific categorization situation that show specific behavior drivers. We added a point to the discussion in which we introduce diffusion of innovation theory and discuss the difference between the two approaches: It is worth comparing this behavioral-psychographic segmentation approach to the popular classification provided by the diffusion of innovation theory (Rogers, 2003). [...] However, the characteristics of some segments that we found to most fit most closely into the Laggards category, such embarrassed refuseniks and high resilience in zimbabwe, suggest that the lack of familiarity is not at their root of resistance to VMMC. 8) More information about the segment input algorithm - How was the accuracy for forecasting determined and for zgt;60% were any differences by type? We thank the reviewers for asking for this important now added the requested detail on the segment input algorithm to the Materials and Methods section, and made changes to the relevant section as follows: The Automatic Interaction Detection Algorithm (CHAID), which builds a tree of merging variable solutions, has been used to identify key questions to ask men in this field. [...] Precision varied for different segments and ranged from 39% to 78% in zambia (average - 61%, standard deviation - 13.1) and from 54% to 84% in zimbabwe (average - 71%, standard deviation - 10.4). In the Discussion section, the authors should mention how self-regulation can be biased towards segmentation. This is indeed an issue that should be addressed, and we have added to the discussion the following point: Any design of self-reporting will also be subject to potential biases, such as prejudice against social desirability. [...] Further research could assess the extent of existing biases by comparing face-to-face self-reporting with self-managed or coercive selection projects. The key recommendation is the need for more individual approaches. The authors should comment on how this can be achieved in under-resourced settings. We thank the reviewers for pointing out this aspect of implementation. Segmentation allows programs to focus on the targets that are most likely to cause impact. Thus, this method is very useful for settings with limited resources. To clarify this point, we added: The priority of these low-hanging fruits is particularly important in under-resourced settings, where mass targeting can be replaced by smaller but focused communications and activities that specifically focus on the factors that determine the action for each target segment. [...] For example, commercial advertising of sports cars and a commercial car will attract the variable attention of those who are more interested in owning and driving each type of vehicle. 10) Authors should comment during the discussion, how the choice of the device affected the differences in what is available across the country? In accordance with the general recommendations, we have now sharpened the focus of our document and removed the section on the choice of device.11) Also under discussion, the authors should emphasize that the segments are only representative of the ages of 15-29 years. We added this qualifier to The Discussion (first paragraph).12) Discussion will benefit from a final paragraph that explains the importance of public health this approach both in reaching men who are absent in the response to HIV prevention in Africa and how segmentation at various levels and the use of tree solutions contribute to risk of HIV infection in men and thus the impact of the current high rates of HV transmission in Africa.We thank the reviewers for this proposal, and now we have added a final paragraph in the paper, addressing these paragraphs: In conclusion, behavioral and psychographic segmentation a viable method of determining the diversity of factors or barriers to behaviour that may exist within the health beneficiary group. [...] In addition to the HIV application introduced here, behavioral and psychographic segmentation is likely to be a valuable tool whenever a group of stakeholders diversify their beliefs, emotions, and attitudes toward targeted behavior. 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