

PD-1304-795

28204

Submitted to:

AID/Office of Population
Family Planning Services Division
Rosslyn, Virginia

Trip Report

GHANA

January 27 - February 12, 1986

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Project No. USAID/DPE-3028-C-00-4079-00

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I. EXECUTIVE SUMMARY

This trip had four primary objectives aimed at further developing the Ghana Contraceptive Social Marketing program: (1) to review the management and marketing structure of the program; (2) to review and develop program research; (3) to schedule training programs for pharmacists and chemical sellers; (4) to prepare and organize the April Ghana National Conference on Population.

The program was found to be essentially on target and without significant difficulties. However, neither the advertising agency nor the distributors was adhering to the previously established program launch date of April 1986. This was due to the fact that two of the three products, the foaming vaginal tablets and the oral contraceptives, had not yet arrived in-country. Since the date of availability of the oral contraceptive was in question, it was determined to structure a phased product launch. The condom launch, scheduled for immediately after the close of the April population conference, would be followed by the foaming tablets, and finally by the oral contraceptives, when the product becomes available.

Research efforts concentrated on three separate studies. First, Lintas' analyses of the Consumer Intercept Study were reviewed and found to be consistent with the separate SOMARC analysis. The results of the name tests were reviewed. Lastly, before finalizing the retail audit instruments, Danafco was consulted, and its recommendations were incorporated.

A schedule was developed to train pharmacists and chemical sellers, and site selections were made. Many retailers were contacted to discuss and provide input to the training program, and to obtain their opinions on two oral contraceptive training poster designs.

Preparations for the conference progressed significantly. After a methodology and a revised agenda were agreed on, new ways of increasing the scope and effect of the conference were proposed. SOMARC coordinated aspects of the conference with the PRB program, IMPACT, thus providing for increasing the potential and results of the conference. In addition, a budget and a subcontract were developed with the Regional Institute of Population Studies (RIPS).

II. OBJECTIVES

A. Program Management

- o To review the existing program management and marketing structure.
- o To incorporate any necessary modification and improvements into the program structure.

B. Research

- o To compare and reconcile separate analyses, conducted by SOMARC and Lintas, of the Consumer Intercept Study.
- o To review results of product name tests.
- o To modify retail audit research instruments.

C. Training Program

- o To finalize a schedule for the training program to begin in the Northern regions of Ghana and to begin to make the necessary arrangements for a conference center, housing, transportation, etc.
- o To design a system for notifying and inviting all chemical sellers and pharmacists to attend the training sessions.
- o To test two oral contraceptive training poster designs.

D. Ghana National Conference on Population

- o Review status of requests for solicited papers.
- o Review draft agenda.
- o Review status of invited guest speakers and preliminary list of invited participants.

- o Meet with principal presenters.
- o Collaborate with Population Reference Bureau on development of graphics, photos, press coverage, and post-conference activities for maintaining awareness on population issues and assistance in implementing conference recommendations.
- o Develop and negotiate scope of work, schedule, and budget for sub-contract with the Regional Institute of Population Studies (RIPS).

III. PROGRAM MANAGEMENT

All major aspects of the program were reviewed: marketing, management, product positioning, distribution, advertising, and public relations. The program was found to be substantially on target, and without major difficulties.

Product Launch

The one exception was the question of the timing of the product launch. It had been previously planned and agreed that the program was scheduled to launch products in April 1986. During this visit, it was found that both the distributor and the advertising agency were substantially behind in achieving this launch date, due to product unavailability. While the condoms were in-country, the vaginal foaming tablets had not yet arrived and, due to lack of availability, the oral contraceptives had not yet been shipped. Both the ad agency and the distributor were simply waiting for these products to arrive before proceeding further with plans for the product launch. They apparently had not given consideration to how long this would delay the program and had not raised the issue.

Due to the uncertainty of the availability of pills in Ghana, it was determined to have a phased launch of the GSMP, starting with the condoms, followed by the foaming vaginal tablets, and finally the pills, when available. It was decided to proceed with the launch of the condoms in mid-April 1986, almost immediately following the close of the SOMARC-sponsored Ghana National Conference on Population.

Additionally, during this trip, the following items were addressed:

Condom Packaging

Having learned from previous visits to numerous pharmacists and chemical sellers in several cities that condoms are being displayed and sold unpackaged, loose in strips or single pieces, it was decided not to package the GSMP Panther condom. Instead, it was decided simply to sell the condoms in their original shipping box (100 units/box), and to print a label to be pasted on both the top of the box and the inside of the top of the box. This way, the retail outlets can display the condoms in

their original shipping container and, whether the box was opened or closed, a Panther packaging label will be visible. Additionally, the retailers can then sell the condoms in strips of four, single units, or in any quantity the consumer wishes to purchase.

Existing Dated Products in the Marketplace

During SOMARC's visit to Ghana in October 1985, SOMARC, Lintas, and Danafco visited a number of pharmacists and chemical sellers in four different cities. A significant number of contraceptive products that were dated, and/or in poor condition, were found in the retail outlets. At that time, there was considerable discussion about whether the social marketing program should attempt to purchase or trade these old products for new products.

Now, with the launch of the program's condoms imminent, this issue was again addressed. After substantial discussion with the AID mission, Lintas, and Danafco, it was determined that to try to replace the existing products in the marketplace was beyond the financial capabilities of the program. The group reasoned that the program's brand advertising should cause consumers to ask for the GSMP brands by name.

Brand Names

There was a review of the proposed brand names, particularly the name "Kamal" for the foaming tablets. Although this name was selected in brand name testing, it was not favored by a very large margin and was not particularly well liked by either SOMARC or Lintas. As pointed out in Section IV, "Research," it was determined that there was insufficient reason to ignore the test results; therefore, Kamal was confirmed as the brand name for the foaming tablet.

Packaging Requirements

SOMARC and Danafco determined the actual needs for packaging production supplies (paper and ink) for packaging the foaming tablets and pills, and relayed the information to SOMARC in Washington. SOMARC will procure these materials and ship them as soon as possible to Danafco.

SOMARC/Danafco Contract

The upcoming SOMARC/Danafco subcontract for handling the distribution and management for the CSM program was reviewed, and further background information was gathered.

Program Computer

SOMARC investigated the possibility of purchasing a CSM program computer in Accra. There were none available for purchase in Accra; however, various major manufacturers have representatives in Accra who can import the computers. Quotations are being solicited from these representatives; these will be compared to the cost of purchasing the equipment in Washington and shipping it to Ghana.

Program Promotion to Physicians

The subject of informing medical doctors about the details of the CSM program and eliciting their support was discussed. It was determined that initially this would be handled in two steps: first, by inviting a number of prominent people from the medical community to the April conference, and second, through a direct mailing to all physicians in the country. A mailing list of physicians is available through the Ministry of Health. Further promotions to physicians will be developed at a later date in the program.

CSM Orientation Trip to Cairo

A final list of attendees for this CSM orientation trip to the Family of the Future in Cairo was confirmed with the AID mission and, while in-country, SOMARC sent out letters of invitation. The trip is planned to take place in mid-March 1986.

IV. RESEARCH

A. Consumer Intercept Study

The SOMARC research staff, having been provided with a copy of the Consumer Intercept Study (CIS) data tape in late November 1985, prepared a summary report of major findings (January 1986). The Lintas research staff, meanwhile, had carried out their own analysis of the CIS data. During the SOMARC team's January-February visit, Bob Porter, Kwasi Bruce, and Opiah Mensah-Kuma together reviewed SOMARC's and Lintas' separate reports and determined that they were in substantial agreement. Lintas presented an overview of CIS findings to Danafco, USAID, and members of the SOMARC team. This presentation is to be followed by a full-length and much more detailed report, to be produced by Lintas, reviewed by SOMARC, and reproduced for wider distribution.

The SOMARC analysis of the CIS data was based on 491 cases. Thirty-three additional interviews were omitted from the analysis because it was not possible, due to inconsistent responses or missing data, to determine the contraceptive status of the respondents in question. By reexamining the original questionnaires, however, it was possible to assign all but a handful of the excluded cases to appropriate groupings. It turned out that the vast majority of the errors in question occurred during keying in of the data. Kwasi Bruce, the researcher at Lintas who served as liaison with Wang (the subcontractor handling data processing), suggested that most of these data entry errors could be avoided in the future by coding questionnaire responses on separate sheets. Data entry personnel would then work from the code sheets and not from the questionnaires, enabling them to key in the data more quickly and with greater accuracy.

In retrospect, it was clear that the questionnaire design could have been improved --the formats for coding responses were unnecessarily complicated. Preparation of separate questionnaires for OC users, tablet users, condom users, etc., to be used along with a screener, would have solved some problems. The screener could have established respondents' contraceptive status early on in the interview and then guided the interviewer to the appropriate questionnaire. Although this approach appears to produce bulkier, more redundant instruments, they would still be easier to use in the field, a more important consideration.

All in all, however, the CIS was a well-conducted study, producing solid results. The few problems encountered in the work led to some important lessons, both for Lintas and SOMARC, and these must be counted as significant by-products of the study.

Preliminary reports of the CIS findings are available under separate cover. The final CIS report is in preparation. A separate paper on methodological issues and lessons learned is also in preparation.

B. Name Tests

The results of the product name tests conducted by Lintas also were reviewed. The names tested were selected because they were already in use in other CSM projects around the world.

Of the names tested for the oral contraceptive, Ovacon received the highest consumer ratings and was consequently chosen to be the brand name for the CSM project's OC. Of the names tested for the foaming tablets, Kamal was the overall winner, but not by a very clear margin. After a series of discussions, however, it was decided that there was no good reason for ignoring the test results, and Kamal was selected as the brand name for the foaming tablet.

C. Retail Audit

Kwasi Bruce and Bob Porter met with Danafco staff to obtain their input before finalizing the retail audit instruments. Danafco was interested in obtaining information on who supplied retailers with antimalarials, cough syrups, and vitamins. Danafco's feeling was that these product categories would give a good picture of the overall pharmaceutical distribution system. A few other additions and modifications were made to the instruments at Danafco's recommendation.

The instruments are to be reviewed again, field tested, and modified, if necessary, before fieldwork begins. Fieldwork is tentatively scheduled for late April or early May.

V. TRAINING PROGRAM

In order to finalize the training program in the Northern regions, James Pearce-Biney, Patricia Foreman, and Bob Porter went to Kumasi, the Ashanti regional capital. Foreman and Pearce-Biney continued on to Tamale (Northern Region) and Bolgatanga (Upper East). Meetings were held in each region with the respective regional representatives of the pharmacists and chemical sellers societies as well as individual retailers and political officials. A list of parties contacted is included in Appendix A.

The responsibility for notifying and inviting retailers was left to the representatives of the area professional societies, with back-up support from Pharmahealth. SOMARC provided a one-page invitational flier that described the program and gave the time, date, and location information. A sample is in Appendix F.

In general, the enthusiasm displayed about the training program, especially by the chemical sellers, was very strong. They were quite anxious to attend the training, and their attitudes toward family planning were positive.

Pharmacists and chemical sellers were met with to discuss the training program and to get input on the oral contraceptive training posters. A box (#100) of Panther condoms (lot #6105137, subplot #16250M) was given to each individual.

A summary of discussions and decisions made in each regional capital follows.

Kumasi - Ashanti Region

At the School of Pharmacy, University of Science and Technology, the team visited Dwgoma-badu, newly appointed Dean of the Pharmacy School, and Professors Ansah-Asamodah and Aiyim. The training program was explained, and questions regarding oral contraceptive safety and over-the-counter status of CSM family planning products were answered. In support of the Pharmacy School, an offer was made to donate training manuals to each of the 160 enrolled pharmacy students, as well as to conduct the one-day seminar for them as part of the school curriculum. The Dean was quite pleased at this offer and accepted.

Next, accompanied by Danafco's Northern distribution station manager, Mr. Frampone, facilities of City Hotel and the Kumasi Technical Institute were visited. The City Hotel was judged most adequate to hold the training and was tentatively booked for April 18-20 to hold the opening ceremony, one seminar for pharmacists and two for chemical sellers. In the Ashanti Region there are 74 pharmacists and 433 chemical sellers. A turnout of approximately 80 percent, or 59, of the pharmacists and 33 percent, or 143, of the chemical sellers is anticipated.

Visits were made to the Ashantihene (King of the Ashanti), Regional Director of Medical Services, Dr. (Mrs.) Hayfron-Benjamin, and the Regional Administrative Officer to invite them to speak at the opening ceremonies. All accepted.

Dr. Hayfron-Benjamin suggested that certificates given to participants should be modified to state that the retailer is entitled to sell or distribute family planning products, rather than that he has received training in family planning. The Ministry of Health has observed that training certificates have often been misused as licenses to practice. To overcome this problem, the MOH has been awarding certificates to health centers, listing the names of all trainees.

A visit to the Planned Parenthood Association of Ghana (PPAG) was most useful in getting feedback on the two draft posters and information about the commodities PPAG distributes.

Tamale - Northern Region

Meetings were arranged with three representatives of the pharmacists' association and 16 chemical sellers. For both groups the program was explained, questions were answered, and opinions requested about the posters. In the Northern Region there are 208 licensed chemical sellers and three pharmacists. The three pharmacists will be invited to attend the Kumasi pharmacists' seminar scheduled for March 18, 1986.

Tentative reservations were made for the conference facilities at the Catering House for April 23, 1986.

Bolagtanga - Upper East Region

There are no pharmacies in the Upper East Region. The team met Gkwaku Adamu, Chairman of the Upper East Chemical Sellers Society, who pledged his full support of the training program and would take responsibility for notifying the 19 chemical sellers in the region to attend the training. In Bolgatanga, there were four possible training sites.

Each of the facilities had advantages and disadvantages; the final selection was left to the Chemical Sellers Society. The tentative date for the training was set for April 25, 1986.

Oral Contraceptive Training Posters

In order to provide visual support and continuing educational information to retailers, two posters containing screening information and answers to commonly asked questions were drafted. The text was modified from a number of informational brochures from family planning programs, and the designs were provided by Needham Porter Novelli. Two poster designs were field tested. Both posters were 8" by 27" and contained exactly the same information but with a different layout format. Both posters tested well and were liked by everyone who saw them. Over 40 people were asked for comments. Minor suggestions were made to change the printed messages. The consumer and retailer preferences were almost split between the two posters, with slight regional preference.

The yellow poster was selected as the final design, primarily because of its readability. Because many of the retail shops are poorly lit, this factor was considered especially important. Moreover, the yellow poster was generally preferred by chemical sellers, the primary target audience.

The posters will be printed on a special "cleanable" paper and monitored as to usefulness and durability over the life of the project. A poster will be given to each retailer as a teaching aid during the training program, and offered to the MOH for use in clinics and hospitals. The bright colors should help ensure that the posters are displayed in the outlets. The poster text is shown in Appendix G.

VI. GHANA NATIONAL CONFERENCE ON POPULATION

Accomplishments

- o Two pre-trip meetings were held with PRB staff, Elaine Murphy, Project Director for the IMPACT project (Innovative Materials for Population Action), and Winthrop Carty, Editorial Director, to discuss potential collaborative activities and how the two projects (SOMARC and IMPACT) can not only enhance the overall outcome of the conference but also extend the effects of the conference. The SOMARC and IMPACT collaboration in the design of the conference proved to be highly beneficial. Their ideas, suggestions, and creativity for enhancing population research data into more popular formats were refreshing and stimulating.

An examination of the preliminary agenda drafted by the Conference Director and his assistant, Dr. Ben Gyepi-Garbrah and John Yaw Owusu, respectively, proved to be quite academic, with one paper after another being presented; that is, participants would be assuming an inactive, passive role. Therefore, the first priority was to discuss and redesign the conference format so that it would more actively involve the participants in discussing the issues and developing recommendations that would be actionable, simple, and attainable.

- o Once concurrence was achieved in the methodology of the conference and on the revised agenda, the next step was to examine ways of pictorially and graphically increasing the awareness and impact of the data to be delivered. Specifically, the following possibilities were explored:

Hiring a professional photographer to take colored slides of everyday Ghanaian life covering all sectors: agriculture, health, education, industry, the environment, etc. The photos to be obtained would consist of color slides to be used either for enhancing the presentation or for a slide show to be shown in the evening during the conference or at coffee breaks. Black-and-white photos of all the speakers will be obtained. The photos will be used in the agenda booklet, and possibly in the post-conference sectoral bulletins.

Although the task appeared to be reasonably easy, it was not; liberal shooting of pictures in Ghana can lead to confiscation of the camera and jailing. Locating a professional photographer also was not easy; a retired gentleman from the Ministry of Information proved to be the most likely candidate; however, his photographic skills were not determined. Obtaining color slide film also proved to be difficult. Despite these and other drawbacks, solutions were created; for example, buy the film in the Ivory Coast or the United States, duplicate slides from other sources, process the film in the United States, develop the draft script in the United States, and purchase a slide projector for RIPS use.

Recruiting a professional interviewer to interview key government and university officials. The taped interviews would serve several purposes:

- To air an edited version on the radio, approximately one every week before the conference
- To obtain written transcripts for articles in the Ghanaian newspapers
- To serve as background information for post-conference activities, for example, sectoral bulletins.

The person identified and who accepted the position was Ms. Hannah Dankwa-Smith, a very well known and popular radio personality. PRB staff provided an interview (taped in Washington) of Dr. Fred Sai, Senior Advisor, Health, Population and Nutrition Division of the World Bank, who will deliver the keynote address at the opening session of the conference. Ms. Dankwa-Smith immediately aired the half-hour interview on her morning talk show Wednesday, February 5. She and Dr. Gyepi-Garbrah then proceeded to interview another three officials.

Agreement was reached from the Executive Director of the Ghana Broadcasting Corporation to nationally record live, the opening session of the conference and possibly the banquet speaker and closing session.

Ms. Dankwa-Smith will act as liaison with the national television station to broadcast the conference.

- o Another major accomplishment once the agenda was confirmed was the development of the budget and subcontract with RIPS. Because the former director of RIPS, Mr. Chukuka Okonjo, had retired, the Acting Director was hesitant to approve the scope of work. It is still unclear if, in fact, RIPS will be the subcontractor or if it should be the University of Ghana. RIPS was to request permission from their United Nations office in Addis-Ababa, Ethiopia, to enter into a contract with The Futures Group.
- o Attached to this report are the following: The invitation to conference organizers (Appendix B), a conference evaluation form (Appendix C), an information questionnaire (Appendix D), and a Discussion Leaders' Suggested Guidelines (Appendix E).

Potential Problems

Due to the lack of adequate working telephones and the further devalued currency, the major problem that could seriously affect the conference is transportation. To avoid the potential problem of participants wanting to attend but unable to do so because of lack of vehicles, the budget has been adjusted to reflect the fact that participants may have to be transported to and from their homes.

Appendix A.
PERSONS CONTACTED

PERSONS CONTACTED

Kwasi Bruce, Lintas Ghana, Ltd.
Jake Obetsebi-Lampitey, Lintas Ghana, Ltd.
Opia Mensah-Kuma, Lintas Ghana, Ltd.
James Pearce-Biney, Pharmahealth, Ltd.
Yaw Berko, Danafco, Ltd.
Nsiah Akuetteh, Danafco, Ltd.
Dr. Joseph Otoo, Director of Medical Services, Ministry of Health
T. C. Corquaye, Registrar, Pharmacy Board
Ben Gyepi-Garbrah, Conference Organizer
John Yaw Owusu, Assistant Conference Organizer
Dr. C. Okoye, Acting Director, Regional Institute for Population Studies
Hannah Dankwa-Smith, Ghana Broadcasting Corporation

Kumasi

Dwgoma-badu, Dean of the School of Pharmacy, University of Science and Technology, Kumasi
Prof. Aiyem
Prof. Ansah-Asamoah, Professor of Pharmacology
Mr. Frimpong, DANAFSCO Kumasi Manager
Dr. (Mrs.) D. Hayfron-Benjamin, Regional Director for Medical Services
Lordina Quansah, Family Planning Nursing Officer, Planned Parenthood Association of Ghana (PPAG)
Nana Asumbdu-Sakyi I, Director, PPAG
Sabina Mensah, Family Planning Nursing Officer
S. Asiedu, Ashanti Pharmacy, Kumasi
Flamingo Pharmacy
Twumco & Sons, Chemical Sellers
Nana Oduru Kwasteng, Chemical Seller
V. C. Asabera, President, Ashanti Chemical Sellers Association
Dr. Kdsane-Selby, President, Medical Society
Iasic Anpah, Chairman of Ashanti Pharmaceutical Society
M. K. Sackitey, Chairman, Proprietary Association
Otumfuo Opoku Ware II, Ashantehene (Ashanti King)
Sampson Yeboah Assiamah, Dosa Pharmacy, Techniman
Liz and Joe Cozens, Salvation Army

Tamale

Pharmacists

Peter Bah Kpabiley, Multinparvum Pharmacy

Joseph Peter Brown Pokee

Joseph Yaw Kusi, Deputy Director of Pharmaceutical Services, Northern Region

Chemical Sellers

Al Hassan Amidu, Chairman of Chemical Sellers, Tamale

J. K. Aborah

Rukari Mahua, Secretary, Chemical Sellers Society, Tamale

Aziz Mashood

Sahidu Abdulai

P. A. Mbanuni

Mohama A. Zalcania

Alhassan Yakubu

Abduali Zakari

Joseph Apprah

Mohammed Amin Yakudu

Kwasi Gyimah Kramo

Hassan Salifom

Abdulai Abdul-Kairm

J. B. Asome

Bolgatanga

Salamatu Salifu, Chemical Seller

Central Chemical Store

Skwaku (George) Adamo, Chairman, Chemical Sellers Society

Fofie Clufe, Pharmacy Student

James A. Baffo, Secretary, C. S. Society

Abu-Bonsrah, Treasurer, C. S. Society

James Amo, Vice Chairman

Appendix B
CONFERENCE INVITATION TO ORGANIZERS

**REGIONAL INSTITUTE FOR POPULATION STUDIES**

at the

UNIVERSITY OF GHANA

Postal Address/Adresse: Postale P.O. Box 96, Legon, Ghana

Cable Address/Adresse Télégraphique: RIPS, Accra

Telephones 74070, 75381 Ext. 8810

Director

Prof. C. Okonjo, B.Sc. (Lond.),

Dip. Math., Dip. Volk. (Ertangen-Nürnberg);

Dr. rer. nat. (Köln); Dip. Ed. (H.C.Y.).

Reference

23rd December, 1985

Dear

I am pleased to invite you to participate as an organizer of a session in a national conference on Population and National Reconstruction: The Role of Family Planning, Maternal-Child Health. This conference is being hosted by the Regional Institute for Population Studies (RIPS), at the University of Ghana, Legon with funds provided by United States Agency for International Development (USAID). The tentative date for the conference is 6-10 April, 1986. Dr. Fred T. Sai of the World Bank has agreed to give the keynote address.

The conference is being organised for senior level public and private officials. Participants will therefore include officials from government ministries and departments, the universities, research institutions, family planning organizations, the trade unions, religious, youth and student organisations; medical, pharmaceutical, nursing and midwifery associations.

The objective of the conference is to discuss emerging issues on Ghana's population and their interrelationship with the country's population policy and national reconstruction program and to rekindle public awareness of these issues.

The conference, which will last for a period of three days, will cover the following five themes:

1. Evaluation of the Status and Role of Family Planning in Ghanaian National Reconstruction.
2. Maternal-Child Health and Adolescent Fertility.
3. Population Growth and the Nation's Resources.

.../2.

4. Gender Roles and Social Perceptions on Population.
5. Family Planning Programme in Ghana: Emerging Trends.

I should be much obliged if you would organize the session on

As session organizer you may write a one or two-page summary of what you intend the session to cover, bearing in mind the general theme and objective of the conference. You will then invite five to six persons to write a paper each for your session with your summary as a guide. The length of each paper should not exceed 16 quarto-sized pages double spacing. All solicited papers may be published in one volume and distributed to all the estimated 175 participants at the time of the conference. You should also request each writer to send you an outline and a half page summary of his/her paper. These should be submitted by mid-January 1986 and will be used as the basis of organizers' meeting which will be held in late January 1986. Please note that the summaries may be used as press releases during the conference. You may also write a paper for your session.

Organizers and authors of solicited papers will be given honoraria, provided with free boarding and lodging facilities at either Volta Hall, University of Ghana or at Ghana Institute for Management and Public Administration (GIMPA). Their travel and transport expenses will also be paid. Please note that because of organizational difficulties those who do not submit their papers two weeks before the conference may not be provided with free lodging.

You may also receive contributed papers from the general public which are related to the theme of your session. The length of such papers should not exceed 11 quarto-sized pages double spacing. Writers of contributed papers will not be given an honoraria. They will be provided with free meals and their travel and transport expenses will be paid. Depending on availability of space some may be provided with free lodging. However all such participants who reside outside Accra-Tema Metropolitan area will be provided with free lodging.

Further details on the conference will be communicated to you in due course. You may also contact me for any clarification.

With best regards.

Yours sincerely,

Dr. Ben Gyepi-Garbrah
CONFERENCE DIRECTOR

Appendix C
CONFERENCE EVALUATION FORM

1986 GHANA NATIONAL CONFERENCE ON POPULATION
AND NATIONAL RECONSTRUCTION

Conference Evaluation

No Names Please! We Do Not Wish to Identify Responders

1. The primary objective of the conference was to increase awareness of the effect of rapid population growth in all sectors of Ghanaian life. In your estimation was the conference :

_____ very successful
_____ successful
_____ partially successful
_____ unsuccessful

Please explain : _____

2. Topics interested you most ?

3. Were the presentations interesting?

very interesting somewhat interesting not interesting

W.L.

4. Were the small group discussions useful?

- very useful somewhat useful not useful

5. What other issues, if any, should have been discussed?

List below:

6. On a scale of 1 - 10 how likely are you to help implement at least some of the conference recommendations:

- _____ 1 not likely at all
_____ 2
_____ 3
_____ 4
_____ 5 may be
_____ 6
_____ 7
_____ 8
_____ 9
_____ 10 will do my best to implement the recommendations in my sector

7. Sex Male Female

8. Age :

Appendix D
POPULATION QUESTIONNAIRE

1986 GHANA CONFERENCE ON POPULATION AND NATIONAL RECONSTRUCTION

Population Questionnaire

1. Name :
2. Title or Occupation :
3. Place of work :
4. Mailing or Delivery Address :

5. What population topics interest you the most? Please list in order of interest to you (eg. 1, 2, 3)
- a. health and family planning (maternal and child)
 - b. population growth and economic well-being
 - c. adolescent fertility
 - d. the status of women and family planning
 - e. the role of men and family planning
 - f. religion and family planning
- other topics (please specify) : _____

6. Would you like to receive population and family planning information on regular basis? Yes No

7. If so, what kinds of materials do you prefer? Please list in order of preference (eg. 1, 2, 3)
- a. Brief booklets summarizing information on various topics, with photos and charts (8 - 12 pages)
 - b. Longer reports with more detail and references (30 - 50 pages)
 - c. Reprints of magazine articles on population
 - d. Books
 - e. Posters; wall charts
 - f. One-page fact sheets on various topics
 - g. Two- to four-page newsletter

8. Which of the above would you be most likely to read in its entirety? Check your answers:

a. b. c. d. e. f. g.

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Appendix E
CONFERENCE DISCUSSION LEADERS SUGGESTED GUIDELINES

1986 GHANA NATIONAL CONFERENCE ON POPULATION
AND NATIONAL RECONSTRUCTION

Discussion Leaders Guidelines: Suggestions

1. Begin by introductions: name, where from, affiliations if any.
2. Elect or ask for volunteer for rapporteur - should be able to take notes rapidly and have clear handwriting.
3. Elect or ask for spokesperson who will report on group's findings to the large session. Someone with clear voice and not afraid of public speaking.
4. a) Ask group to identify problems, obstacles, concerns re success of family planning programs. Brainstorming techniques are recommended (Reminder: Brainstorming participants are asked to generate ideas or recommendations without regard to their worth, practicality, expense or other consideration. All ideas are accepted. Then the group selects among these ideas the ones which are most worthwhile, practical, efficient, do-able etc.)
b) Ask groups to identify solutions and recommendations in the same manner, using brainstorming techniques.
c) Ask spokesperson to read back to group summary of recommendations which later will be presented to entire conference.

Note: Discussion leader's role is to facilitate group discussion rather than to make presentation of his or her own view points or recommendations. Try to encourage the quiet members of the group to express their opinions.

Chairman, Presenters, Director:

1. Before each presentation, ask the group to listen carefully to the presentation and to write down any facts that seemed the most important and at least one area of concern.
2. During the general discussion following each presentation, ask the participants for their opinions regarding important facts and their area of concern.

Appendix F
TRAINING PROGRAM ANNOUNCEMENT

**INVITATION TO ATTEND A TRAINING PROGRAMME
FOR
PHARMACISTS
IN CONTRACEPTIVE SOCIAL MARKETING
AND FAMILY PLANNING**

As a licensed pharmacist in Ghana, you are invited to participate in a nationwide contraceptive social marketing programme to enhance family planning activities and expand the availability and proper use of certain contraceptive products. Contraceptive Social Marketing Programmes are delivery systems that employ marketing, advertising, and distribution techniques to make modern contraceptive methods available, affordable and accessible to those who desire them. The Ghana Social Marketing Programme is part of the national effort to provide men and women choices in family planning and is being conducted with the approval of the Ministry of Health. The family planning programme is also in accord with the goals of primary health care and self-sufficiency.

To facilitate contraceptive availability to the public, the Government of Ghana is considering an expanded retail delivery system which will allow specially trained pharmacists to legally distribute oral contraceptives and vaginal foaming tablets without a prescription. The programme also includes the sale of condoms.

Providing family planning advice and products however, also carries a large responsibility. In order to assure public safety, the demonstration programme will be monitored to determine if participating retailers are responsibly counseling customers in family planning options and distributing oral contraceptives only when appropriate. If the project is a success, then training will be expanded and oral contraceptives will be available to pharmacists to dispense without a prescription. If the monitoring indicates that participants are not properly dispensing contraceptive products and advice, then the expanded retail delivery system will be stopped. The responsibility for the success or failure of the programme lies with the retailers who have completed the course and who ethically practice the principles and concepts they have learned.

WHAT WILL YOU LEARN? THE COURSE WILL TEACH YOU ABOUT:

1. Contraception and Family Planning.
2. Contraceptive Social Marketing Programmes & how they can enhance your business.
3. How retailers can service their communities by providing family planning products and counseling.
4. How oral contraceptives "the pill" works, who can and cannot take it, advantages and disadvantages and answers to commonly asked questions.
5. How to properly use condoms, advantages and disadvantages.
6. Vaginal Foaming tablets, how they work, proper use, advantages and disadvantages.
7. How to properly store and display family planning products to maximize sales.

WHEN WILL THE TRAINING BE AVAILABLE?

Classes for pharmacists will be held in most of the regional capitals beginning in March 1986. The seminars will last approximately 6 to 8 hours. Participants are invited to attend any seminar that is most convenient for them. Exact time, date and location for your region is indicated below:

DATE: _____

TIME: 9:00 a.m. sharp

LOCATION: _____

CITY: _____

LOCAL REPRESENTATIVE: _____

If you plan to attend, please contact either your local representative or PHARMAHEALTH so that a space can be reserved for you at the seminar.

FOR FURTHER INFORMATION:

Contact: James Pearce-Biney, Training Director
Pharmahealth Center, Ltd
P.O. Box 9507
Airport, Accra, Ghana

or: YOUR LOCAL REPRESENTATIVE NAMED ABOVE

Appendix G
ORAL CONTRACEPTIVE POSTER TEXT

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QUESTIONS TO ASK A WOMAN BEFORE PROVIDING ORAL CONTRACEPTIVES

- Are you pregnant?
- Are you breast feeding?
- Are you over 35 years old and do you smoke?
- Do you have high blood pressure or heart problems?
- Do you have diabetes (sugar sickness) or cancer?

If a woman answers "NO" to these questions, then she can safely take the pill, as do millions of other women all around the world.

If she answers "YES" to any of these questions, or has any other known medical problems, she should see a doctor before taking the pill or use another contraceptive method, such as the condom or vaginal foaming tablets.

SOME COMMON QUESTIONS AND ANSWERS ABOUT THE PILL

- How does the pill work? The pill prevents a woman's body from producing eggs. When there are no eggs, a woman cannot become pregnant.
- Suppose a woman taking the pill decides she wants to become pregnant? When a woman wants to become pregnant, she stops taking the pill. In a short time her body starts producing eggs again, and she can become pregnant, with no side effects from the pill.
- How effective is the pill in preventing pregnancy? When taken as directed--one pill every day without stopping--the pill is almost 100 percent effective.
- How do I take the pill? Take the pill at the same time every day. This will make it easier to remember. If nausea is a problem, take the pill at bedtime every night. When you finish one 28-day package, start a new package the next day.
- What happens if I forget to take a pill? If you forget to take one pill at your regular time, take it as soon as you remember and take the next pill at the regular time. (You may be taking two pills on the same day.) If you forget to take your pill for two days, when you remember, take two pills immediately and two more pills on the next day at your regular time. For all the other days, take one. You should also use another form of contraception (condom, vaginal tablets) while finishing that package of pills.
- Can I start on the pill anytime? No, you must wait until the fifth day after you start your period. The first day of bleeding is counted as Day 1. On Day 5, take your first pill.
- Does a woman notice any difference after she starts taking the pill? Some women notice no difference at all. Other women do notice small body changes such as weight changes, breast tenderness, headaches, nausea, changes in menstrual flow and spotting between periods. These changes usually go away within two months as the body adjusts to the pill.
- What are the brown pills in each package? The brown pills contain iron. One reason a woman may feel tired during her period is that her body loses iron during her menstrual bleeding. The brown pills help to replenish this iron. After you finish taking the last brown pill, start a new 28-day pack.

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