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**BOLIVIA**  
**TRIP REPORT**  
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**I. OBJECTIVES OF THIS VISIT**

1. Review and update the quantities of contraceptives requested for the 1991-1994 period by means of the Contraceptive Procurement Tables (CPTs) prepared in August 1991.
2. Coordinate and reach a formal agreement with the local office of the Pan-American Health Organization (PAHO) and the Ministry of Public Health with regard to the procurement and distribution of contraceptives requested by private family planning organizations by means of the CPTs.
3. Review the progress of the programs operated by each organization and evaluate their performance.
4. Estimate the coverage achieved by each organization.
5. Make initial preparations for the First Workshop on Contraceptive Logistics (selection of participants, date and site for the event).

## **II. GENERAL RECOMMENDATIONS**

1. Concentrate efforts and resources on those organizations that have shown the greatest continuity, coverage, and installed capacity to provide family planning services.
2. Formalize the agreement with the Ministry of Social Welfare and Public Health (MPSSP) so as to make official any future transfer from the latter organization to private organizations, as discussed during this visit by JSI/FPLM.
3. Monitor consumption at all organizations, including the MPSSP, in order to determine actual contraceptive needs and inventories and thus determine whether the country will need to order Lo-Femenal and Copper Ts in 1993.
4. Carry out a more detailed analysis of the consumption figures reported by the organizations and compare them to user records, in order to clarify any discrepancies encountered and estimate amounts which more closely approximate the supply capability of the organizations.
5. For the MOTHERCARE Project, call a meeting with the directors of each of the participating organizations with a view toward reaching an agreement with regard to the terms th it will govern the establishment of program consumption goals.
6. Reevaluate the methodology used by the organizations for establishing consumption goals.
7. Coordinate with Pathfinder/Lima the quantities to be sent to PROSALUD-Santa Cruz and cancel any pending shipments, since current stock on hand and inventories as of December 1992 will be sufficient to meet the needs of all organizations. In addition, according to the CPTs, PROSALUD will not require any additional shipments of contraceptives in 1992.
8. Establish a contraceptive sales policy, at below-market prices, in order to determine the actual quantities consumed by the individual programs and thus avoid distortions. In addition, this will serve to ensure that the contraceptives are actually being used by the final consumer.
9. Request that the MPSSP effect the transfers of condoms to private organizations, as agreed to in Annex C, Table 2, under "Deficit 1992".
10. Arrange with the donor agencies (IPPF and Pathfinder) for the participation of a representative of each organization at the Workshop on Logistics to be held from July 7-10, 1992, in Cochabamba.

I wish to thank all those persons contacted during this visit for their time and for their kind cooperation. A complete list of the persons contacted is included in Annex A of this report.

### III. SUMMARY OF ORGANIZATIONS VISITED

#### A. FUNDACION DE ASISTENCIA MEDICO-SOCIAL - FAMES (FOUNDATION FOR MEDICAL-SOCIAL ASSISTANCE):

This organization delivers its family planning services through an agreement signed with 90 private physicians located in the country's nine departments. This agreement calls for FAMES to provide contraceptives free of charge, distribute educational materials on medical subjects, and help identify financing for refresher courses in family planning (IUD insertion technique used in other countries, etc.).

Following the suspension of FPIA assistance (October 1990), USAID/Bolivia is now supplying the contraceptives. In addition, Pathfinder finances educational activities and materials in 20 medical clinics located in Oruro, Tarija, Cochabamba, Santa Cruz, El Alto and La Paz.

As of July 1991, the Foundation began selling Copper Ts to its member physicians. Most of the latter have easily adapted to the new modality and only a few have discontinued their orders. All other physicians continue to provide contraceptives free of charge, although it has been suggested that they should gradually begin to charge a fee for all methods, as these costs can be included in the fee charged for the consultation and would be of considerable help in refining data on actual consumption.

#### B. MOTHERCARE PROJECT IN COCHABAMBA

Financed by USAID/Bolivia through a buy-in with the John Snow, Inc. MotherCare Project, this program was designed and developed over a period of one year by local and international advisors with experience primarily in the field of reproductive health care. It began officially in December 1990 and will conclude approximately June 1993.

The project and its strategies have been implemented through the following organizations:

1. CENTRO DE PREVENCION CONTRA EL CANCER DE LA MUJER  
(CENTER FOR THE PREVENTION OF CANCER IN WOMEN), a nonprofit organization founded in 1965 by a group of physicians from La Paz who were interested in providing services for the detection and treatment of cervical-uterine cancer to low-income women and women from the rural areas.

Ten years ago, the organization moved to Cochabamba, where it has carried out a series of reproductive health programs, largely in rural areas. However, it has also recently begun to provide services in the urban and peri-urban areas of the city, from its the main office as well as through visits to the Cárcel de Mujeres (women's jail) (with some 350 inmates) and home care for complicated deliveries (the latter services are provided in coordination with the Clínica Santa Casa Dos using an ambulance equipped especially for this service.

As regards family planning, there has been a shortage of contraceptive methods as this organization is not included in the general orders submitted to

USAID. The Center has purchased Copper Ts in local pharmacies (with funds provided by MOTHERCARE) in order to meet demand. User control is kept in a notebook in which the staff record the date, users seen and method prescribed. According to this record, an average of five Copper Ts are inserted per month, a figure which has been affected by the shortage of supplies.

Beginning on April 1, 1992, the Center will offer daily consultations in family planning for a period of three hours every day. These new hours for the public will be announced over two radio stations which will also be used to broadcast a daily one-hour program of questions and answers on family planning as well as subjects related to cervical-uterine cancer and pediatrics.

Consumption goals for 1992 are as follows:

AREA	TCU380A	CONDOMS	PILLS	VAGINAL TABLETS
RURAL	850			
URBAN	750			
HOME DELIVERIES	200			
<b>TOTAL</b>	<b>1,800</b>	<b>3,000</b>	<b>300</b>	<b>1,000</b>

An average of 12 home deliveries are performed every month.

In addition, plans have been made to begin a project in the High Valley, in coordination with the MPSSP, to provide coverage to District II, which has a population of approximately 160,453. For this purpose, the Center estimates that it will need 3,000 Copper Ts, as an effort will be made to stress the use of the most effective methods, owing to the remoteness of the location. The MPSSP has indicated that no contraceptives are received from the Health Unit to cover this population.

2. COMISION BOLIVIANA DE ACCION SOCIAL EVANGELICA COMBASE (BOLIVIAN COMMISSION FOR EVANGELICAN SOCIAL ACTION), an evangelical social service organization which forms a part of the Evangelical Churches of Cochabamba. It was founded in 1964 with the objective of targeting all of its services toward the community, with emphasis on families from low socio-economic levels.

Following a crisis period, a functional restructuring process was instituted in 1986 which led to some degree of self-financing, which in turn assisted the organization substantially in improving its activities.

It currently operates two programs:

- Hogar Casita Blanca, which houses 120 orphaned children.
- "El Buen Pastor" Polyclinic, created to provide health care to the general public and especially to the low-income stratum located in the southern and eastern sectors of the city (population unknown). This is a preventive, curative and social medical center that provides pediatric, dental, laboratory, pharmacy, family practice-internal medicine, general

surgery, ob-gyn and maternity services. It has 17 beds and assists in an average of 70-80 deliveries per month. In 1991, assistance was provided for a total of 720 deliveries.

COMBASE provides family planning services but does not disseminate them actively or widely, owing principally to its ideology, which restricts the promotion and delivery of family planning methods and services.

In January 1992, a total of 15 Copper Ts were inserted and the goal is to reach a level of an average of 2 Copper T insertions per day. The program is currently limited by the fact that it has only two insertion teams, only one physician trained in the proper technique, and restrictive hours for providing family planning services. Consumption reported between November 1991 and February 1992 totaled 37 Copper Ts, 100 condoms and 16 cycles of oral contraceptives. Goals for 1992-1993 are as follows:

PRODUCT	1992	1993
TCU380A	200	260
CONDOMS	6,000	6,000
LO-FEMENAL	100	100

With regard to forms, a daily record is kept of the number of users seen, although the quantities of contraceptives delivered are not recorded. It has been suggested that this daily record be modified by adding a diagonal line across the boxes which will make it possible to record both users seen and quantities delivered.

3. PROGRAMA MEDICO FAMILIAR - PROMEFA (FAMILY MEDICAL PROGRAM), founded by a group of physicians for the primary purpose of providing health services to mothers and children from low-income families. The program has eight physicians working part time, rotating in three-hour shifts in order to provide care to the public 24 hours a day in the Clínica Rosbén and Clínica La Cancha.

The clinic programs have been carried out in close coordination with the Unidad Sanitaria (Health Unit) through the latter's vaccination campaigns, oral rehydration therapy programs, etc.

With regard to family planning programs, service delivery is still in an incipient stage. During this visit, it was found that consumption reported between August 1991 and February 1992 totaled 38 Copper Ts, 42 oral cycles, 1,120 condoms and 1,120 vaginal tablets. The latter two methods are delivered together, generally to factory workers.

In December 1991, a family census was taken in order to obtain more current data on the population to be covered. The census included visits to 3,495 families located within a radius of one kilometer from the Clínica Rosbén. Most of the questions dealt with family planning.

With regard to forms, the clinic keeps a record of the number of users seen. It was observed that, in the case of vaginal tablets and condoms, the record in effect doubles the number of users, as these methods are delivered together. It was suggested that users be divided by two or that a 0 be placed in the users column for either of these two methods.

In the follow-up form designed for oral tablets, it has been suggested that staff record the number of cycles delivered, instead of the "X" currently used, to record the number of months being covered and the number of cycles distributed.

The daily record will be used to record amounts delivered instead of the number of users, as each line corresponds to a clinical history. Staff plan to record, in the same box containing the clinical history number, the date care was provided, merely by adding a diagonal line.

The consumption goals proposed for 1992-1993 are as follows:

PRODUCT	1992	1993
TCU380A	240	250
CONDOMS	3,000	3,000
LO-FEMENAL	200	200
VAG. TAB.	2,400	2,400

4. MEDICINA DIRIGIDA A LA COMUNIDAD - ME.DI.CO. (MEDICINE DIRECTED TOWARD THE COMMUNITY) was founded in 1991 to provide primary health care to the poor communities in the peri-urban areas of Cochabamba. Its primary objective has always been focused on community health promotion and education.

The organization operates five health units in the peri-urban area where service is provided to members of the general public seeking primary health care at the clinic. Each clinic has three health promoters trained by ME.DI.CO. to carry out activities in the areas of promotion, home visits, new patient recruiting, etc.

The program began to offer family planning services in 1989 with a donation of contraceptives from Family Planning International Assistance (FPIA). The only methods offered are oral contraceptives and condoms. The program does not offer Copper T insertion since, according to the director of ME.DI.CO., only one physician on the entire staff (consisting of five physicians and three promoters per unit) is trained in the proper technique.

In October 1991, new forms were designed and implemented which allow personnel to keep both a daily and monthly record of all activities. The health units fill out the form on a daily basis and data is taken from a notebook kept by each physician. At the end of the month, this data is consolidated into the monthly report and sent to the central office, whence it is sent to the offices of MOTHERCARE in Cochabamba. There is still a need to establish a kardex system in both the central office as well as in the health units, as data on stock on hand is not available in either location.

Consumption reported from October 1991 through February 1992 is as follows:

METHOD	USERS		QUANTITIES OF CONTRACEPTIVES			TOTAL
	NEW	OLD	BY:	NEW	OLD	
LO-FEMENAL	92	40		144	102	246
CONDOMS	65	42		371	172	543
TCU380A	42	22		42	---	42
VAG. TAB.	83	44		392	185	580
	282	148				

Consumption of contraceptives is still quite low and stock on hand observed in the warehouse located in the central office was as follows:

METHOD	AMOUNT	MANUF. DATE	EXP. DATE
TCU380A	5		10/93
CONDOMS	17,300	04/89	04/94
LO-FEMENAL	1,200	03/89	03/94
VAG. TAB.	4,100	04/89	04/94

In addition, projected consumption for 1992-1993 is as follows:

METHOD	1992	1993
TCU380A	190	200
CONDOMS	1,500	2,000
LO-FEMENAL	700	900
VAG. TAB.	1,500	2,000

Based on this data, Annex B (Tables 1-4) includes the quantities required by the four organizations of the MOTHERCARE program, together with sources of supply, transfers that ME.DI.CO. may make to the organizations, and inventories expressed in terms of the number of months of stock that ME.DI.CO. would have available after making the transfer. In the case of condoms and vaginal tablets, even after the transfers are made a portion of the stock on hand will expire prior to use if actual consumption behaves as projected. If there were an increase in that consumption, stock in danger of expiring would be less.

For further information on the MOTHERCARE Project and its support organizations, please refer to the report entitled "Review of NGO Proposals and Clinic Assessments", MOTHERCARE-Cochabamba, Reproductive Health Project, January 18-February 14, 1991, Pamela J. Putney, RN, MS, CNM, John Snow, Inc.

### C. PROSALUD

Located in Santa Cruz de la Sierra, PROSALUD is an organization engaged in providing integrated health services in the areas of pediatrics,

general medicine, gynecology, prenatal control, childbirth, child health (preventive), dentistry, laboratory services and pharmacy (handling more than 120 different medicines).

The organization has a staff of 160 employees who operate out of a building housing the central offices (administrative), ten peri-urban health centers and five rural health centers. Each health center has between four and five beds, one director and one chief nurse charged with coordinating health activities at the center, as well as coordinating the work of the paid Promotional Assistants (a total of eleven, which are equivalent to health promoters) who are charged with making house calls, giving talks and recruiting users.

In October 1990, Pathfinder assumed the cost of the Promotional Assistant program in order to prevent a decline in the community and user recruitment programs.

The project with IPPF/WHR concluded in October 1991 and PROSALUD was not financially able to continue to pay for the Promotional Assistants that supported these clinics. The associated physicians showed no interest in assuming these costs. This fact directly affects projected contraceptive consumption for 1992-1994, since much of the total consumption reported by PROSALUD came from supplies distributed to these associated physicians.

In 1990, PROSALUD provided services in 2,116 normal deliveries, 51,216 new consultations (in all areas of specialization), and 3,148 new family planning consultations. However, the family planning program continues to operate at an incipient level, as the primary emphasis of the organization is on health. Data for 1991 was not reported on a timely bases by JSI/FPLM. All contraceptives are sold to users.

Immediate Plans: With support from USAID/Bolivia in the form of a US\$6,000,000 investment:

- Four centers (of a total of 11 projected to be in operation by the end of 1992) and one central office are already in operation in La Paz; seven centers are currently operating in the city of El Alto (of a total of eight projected). Under an agreement signed with the Ministry of Public Health, Districts I in El Alto and VII and VIII in La Paz have been assigned to PROSALUD. Some of the health centers which will operate in these districts will be supplied by the Ministry, through an agreement signed with the World Bank.

Although there are no formal estimates of contraceptive needs to cover the health centers in La Paz and El Alto, USAID/La Paz will provide small quantities of supplies so that the centers can begin to promote and provide this service. Once consumption data becomes available, goals will be set in accordance with the supply capacity of the centers and the estimated population to be covered.

- In Santa Cruz: build or buy a building that can be converted into a clinic or small hospital where minor surgery, such as caesarean sections, could be performed. With regard to family planning, services will not include

voluntary surgical sterilization, as this procedure is legally prohibited by the Government and only the Ministry of Public Health is allowed to perform it in those cases where the woman runs a high obstetric risk.

**SOMARC PROJECT:** As a part of PROSALUD, the Social Marketing Project has continued to market, through pharmacies, the Sultan brand condoms received from the Ministry of Public Health and the Noriday contraceptive pills received from USAID/Bolivia. Amounts reported as consumption are shown in Annex C of this report.

Plans for the immediate future include introducing Protektor brand condoms into the market (beginning in June 1992) to replace the Sultan brand product. With regard to oral contraceptives, in addition to continuing to market Noriday, beginning in the second half of 1991 the program will introduce the MINIGYNON brand (the same as Microgynon but with a social marketing brand name). The initial quantities projected and the estimated annual sales are shown in Annex E of this report.

**D. CENTRO DE INVESTIGACION, EDUCACION Y SERVICIOS - CIES  
(CENTER FOR RESEARCH, EDUCATION AND SERVICE)**

This organization provides its family planning services through:

- 2 clinics located in Oruro and Potosí
- 1 clinic located in the city of El Alto
- 2 clinics located in La Paz
- 30 paid promoters and 114 volunteer promoters (based in the same cities in which the clinics are located) who make house calls, give talks, refer users to clinics when the need for medical attention is observed, and sell contraceptives directly to users.
- 1 clinic in Viacha, the continued operation of which after April 1992 is uncertain.

The organization is currently in a period of restructuring and analysis of its short- and medium-term procedures, strategies and plans, as it is exploring new financing alternatives to replace the assistance which through October 1990 had been provided by FPIA. Pathfinder has undertaken to provide part of the financing and support. USAID/Bolivia is providing the contraceptives.

The project signed with IPPF/WHO was suspended in October 1991, but the clinic to which it provided financial support was transferred to the Pathfinder project.

The new strategies contain plans to increase the hours for providing health care to the general public at the clinics, with two physicians to be hired for La Paz. The idea is for the clinic to be self-financing to the extent of covering salaries without increasing institutional costs. No external assistance is provided for this activity.

Another strategy consists of increasing the selling price for community distribution products in order to enable project staff to more realistically quantify the consumption generated through the network of promoters. In addition, community distribution of oral contraceptives will begin in May 1992 for the organization's existing users.

Also, there is a possibility that a project will be begun with the Population Council, with a view toward seeking self-financing and income generating alternatives. Three project strategies are being contemplated; the objective will be to determine which strategy will be most feasible for generating the greatest increase in income:

- by installing a laboratory providing analytical services of all types,
- by hiring nurses instead of physicians to provide certain services and consultations,
- by establishing a clinic for the medium- to high-income classes in which it will be possible to charge higher fees than those currently in effect.

In order to determine the best alternative, plans call for a feasibility study to be initiated in May 1992.

#### E. FUNDACION SAN GABRIEL (SAN GABRIEL FOUNDATION)

Founded in 1970, this organization provides its health services through a hospital (the only one in the area) and nine peripheral clinics to the population pertaining to District VI (approximately 124,000 inhabitants in the city of La Paz).

The San Gabriel Hospital has 110 beds (106 in operation) and during 1991 ob-gyn consultations increased 14.7% over 1990 (13,122 consultations). All of the hospital's activities (consultations, admissions), deliveries, etc.) increased 23.7% in 1991 over the levels recorded in 1990.

Due to the number of teenagers arriving at this hospital (almost all of which seek family planning services) and the fact that of all women seeking gynecological consultations, approximately 30% (the actual number was not specified during this visit) seek family planning services, PATHFINDER has identified the Foundation as an organization having considerable potential for providing family planning services and methods.

It currently has 10 clinics for providing general and ob-gyn consultations, including family planning services, distributed as follows: 5 clinics open during morning hours, 4 clinics open during afternoon hours and 1 clinic open at night (from 5:00 to 8:00 p.m.). The latter opened in February 1992 and sees an average of four gynecology patients a session.

In June 1991 the Foundation, with support provided by Pathfinder, began a program of post-partum and post-caesarean IUD insertions which recorded a consumption of 577 Copper Ts; between January and February 1992, a total of

113 units were recorded. This project will terminate in May 1992 but will probably be extended for an additional three months pending approval of a new agreement designed to extend the program for an additional year. If the new agreement is not signed, the Foundation will continue to provide family planning services but will require a continuous supply of contraceptive products.

The director of medical services has indicated that acceptance of post-partum Copper T insertion has been approximately 45%, as compared to the projected figure of 30%, as a result of which a sustained increase in the consumption of this method is forecast. The program has seven physicians trained in IUD insertion.

Oral pills, on the other hand, have a low level of acceptance and barrier methods are used only as a temporary method or for teenage users.

Current plans call for working with the nine area clinics within the area of influence of San Gabriel, as well as with eight additional clinics under the administration of the Health Unit. This implies a greater volume of care and, accordingly, a greater demand for contraceptive methods.

F. CAIA NACIONAL DE SALUD - CNS: This is the Social Security organization in Bolivia, whose primary center of operations is located in the Hospital Obrero No. 1 and the Maternológico in the city of La Paz.

Although original plans called for initiating the Reproductive Health Project between October 1991 and March 1992 in seven major cities, only the Hospital Obrero has been providing regular services, with one physician working one afternoon per week. For further information, please refer to the report on the CNS, included elsewhere in this document.

#### IV. GENERAL CONCLUSIONS FROM THIS VISIT

##### 1. Total consumption of contraceptives in 1990:

TABLE A

## QUANTITIES

ORGANIZATION	OCs	CONDOMS	TCU380A	VAG. TAB.	CYPs * GENERATED	% CYPs TOTAL
CIES	1,600	277,700	2,257	98,000	10,510	28.4%
FAMES	23,100	199,800	4,100	158,000	18,275	49.3%
PROSALUD	6,968	2,942	438	1,484	2,028	5.5%
SOPACOF	2,100	5,600	500	700	1,932	5.2%
MOTHERCARE	200	5,000	0	1,400	55	0.1%
SOMARC	51,800	118,300	0	0	4,242	11.5%
<b>TOTAL</b>	<b>85,768</b>	<b>609,342</b>	<b>7,295</b>	<b>259,584</b>	<b>37,042</b>	<b>100.0%</b>

##### Total consumption of contraceptives in 1991:

TABLE B

## QUANTITIES

ORGANIZATION	OCs	CONDOMS	TCU380A	VAG. TAB.	CYPs * GENERATED	% CYPs TOTAL
CIES	1,900	348,000	2,600	24,900	11,713	23.2%
FAMES	10,100	243,900	4,600	87,600	18,983	37.5%
PROSALUD	13,600	6,900	1,600	4,500	6,583	13.0%
CAJA NAC.	200	11,300	300	0	1,138	2.3%
MOTHERCARE	3,400	19,800	300	4,100	1,436	2.7%
SOPACOF	8,900	61,400	500	17,000	2,865	5.7%
SOMARC	81,400	376,700	0	0	7,938	15.6%
<b>TOTAL</b>	<b>119,500</b>	<b>1,068,000</b>	<b>9,900</b>	<b>138,100</b>	<b>50,656</b>	<b>100.0%</b>

\* CONVERSION FACTORS USED:

OCs . . . . .	15 CYCLES/USER/YEAR
CONDOMS . . . . .	150 UNITS/USER/YEAR
TCU380A . . . . .	3.5 YEARS/UNIT
VAGINAL TABLETS . . . . .	150 UNITS/USER/YEAR

Tables A and B include only those organizations that receive contraceptives from USAID/Bolivia. Since there were no figures available for the public sector, the latter is not included in this table.

2. Estimated coverage achieved:

Of the total number of women of reproductive age (Bolivia-1991):

WRA .....	1,694,400
CIES .....	0.69%
FAMES .....	1.12%
PROSALUD .....	0.38%
CAJA NACIONAL DE SALUD .....	0.06%
MOTHERCARE .....	0.08%
SOPACOF .....	0.17%
SOMARC .....	<u>0.47%</u>
TOTAL .....	2.97%

Of the total number of WRA, married or in union (1,186,100):

CIES .....	0.99%
FAMES .....	1.60%
PROSALUD .....	0.56%
CAJA NACIONAL DE SALUD .....	0.09%
MOTHERCARE .....	0.12%
SOPACOF .....	0.24%
SOMARC .....	<u>0.67%</u>
TOTAL .....	4.27%

Of the total number of WRA, married or in union, using any contraceptive method (prevalence: 32.1% = 380,738 women):

CIES .....	3.08%
FAMES .....	4.99%
PROSALUD .....	1.73%
CAJA NACIONAL DE SALUD .....	0.30%
MOTHERCARE .....	0.38%
SOPACOF .....	0.75%
SOMARC .....	<u>2.08%</u>
TOTAL .....	13.31%

Total coverage achieved in 1990 of the total number of WRA married or in union using any contraceptive method (360,604 women) was 10.27%. In 1991, total coverage increased to 13.31%, primarily as a result of the Social Marketing Program.

3. Establishment of future consumption and coverage goals:

As mentioned on the occasion of the preceding visit, most organizations establish their goals on the basis of what is suggested to them by the donor agencies from which they receive support.

The record of new and existing users used by all of the organizations is not an indicator of the coverage achieved by the programs nor a reliable tool for evaluating them, since when comparing users recorded to contraceptives distributed, consumption per user is extremely low, which leads us to doubt the reliability of these records. Accordingly, it is important for these consumption and user records to be validated periodically.

There is still considerable confusion among numerous organizations with regard to the proper way to record users by category as a result of the multiplicity of definitions and demands imposed by the cooperating agencies (new, existing, continuous, subsequent, etc.).

In addition, there is no uniformity between organizations with regard to which factors or indicators are to be taken into account in evaluating their programs, what data could be recorded that would be relevant for that purpose, how to detect discrepancies when high levels of "unexpected consumption" are observed, and how to estimate future contraceptive needs that will be congruent with the population to be served.

The following data substantiate the above:

PROSALUD:

TABLE C

METHOD	CONSUMPTION 1991	USERS 1991*	CONSUMPTION PER USER
LO-FEMENAL	13,600	12,500	1.1 CYCLES
CONDOMS	6,900	552	12.5 UNITS
TCU380A	1,600	537	2.9 UNITS
VAG. TAB.	4,500	309	14.5 UNITS

Includes new and repeat users.

In the case of the Copper Ts, the table includes all units distributed to private physicians under the IPPF project who did not report users, as a result of which consumption per user is greater than one. For the remaining methods, the above figures may indicate HIGH DROPOUT RATES and/or inadequate user follow-up or over-recording, as promoters are pushed to reach their goals in accordance with a pre-established number of new users. This analysis is not conducted by PROSALUD, largely because the organization is unaware of the factors that should be taken into consideration in evaluating program performance. This data also indicates a very low level of coverage and a wide dispersion of resources.

CIES:

TABLE D

METHOD	CONSUMPTION 1991	USERS 1991*	CONSUMPTION PER USER
LO-FEMENAL	1,967	960	2.08 CYCLES
CONDOMS	348,060	20,426	17.04 UNITS
TCU380A	2,662	2,674	0.99 UNITS
VAG. TAB.	24,907	2,155	11.55 UNITS

The data from CIES also seem to indicate a low level of protection to both new and continuous users. Again, the above data may be an indication of HIGH DROPOUT LEVELS and/or inadequate follow-up or over-recording of users. In addition, it should be mentioned that a dramatic decrease was observed in the consumption of vaginal tablets in 1991 (24,907 units) over 1990 (98,000), which was the result of the fact that the goals established in 1990 were prepared on the basis of the level of CYPs, which distorted consumption and lead to a massive distribution of tablets in order to comply with the recommended goals. In 1991, the strategy was changed and demand was quantified more realistically, as reflected in the consumption figures for 1991.

FAMES:

In 1990, FAMES showed much more consistency and coherence in its consumption data and users recorded, with the result that it provides a fairly high level of protection with pills, adequate protection with Copper Ts and fair protection with condoms and vaginal tablets. Data for 1991 was not provided on a timely basis, as a result of which it was not possible to perform this analysis.

SOMARC, since it is exclusively a social marketing program working through commercial channels, does not record users but rather sales. Accordingly, this type of analysis is not applicable.

4. Records and distribution system

All of the organizations visited, with the exception of San Gabriel, MOTHERCARE and SOPACOF, have in place adequate recording systems which make it possible to duly record quantities of contraceptive distributed. Within each organization, supply of contraceptives to the lower levels is performed on a timely basis and without major difficulties, except when the central level experiences a shortage. Likewise, the lower levels report data reflecting stock on hand and consumption both promptly and accurately, either monthly or quarterly.

The difference reflected between consumption and users recorded is not the result of the absence of an information and distribution system in the organizations, as most have such a system in place, but rather of the establishment of goals in terms of numbers of new users. These goals do not take into account the supply capacity of the organizations or the target population to be covered,

which in turn leads to distortions which are reflected in the low level of coverage provided to all users, when consumption is compared to users.

### 5. Expired contraceptives

Between January and December 1991, the following supplies expired:

TABLE E

ORGANIZATION	LO-FEMENAL	CONCEPTROL VAG. TAB.	ROSETEX CONDOMS	TCU380A
CIES	20,600			
FAMES	17,900			
PROSALUD	8,834	8,500		418
CAJA NACIONAL			19,500	
<b>TOTAL</b>	<b>47,334</b>	<b>8,500</b>	<b>19,500</b>	<b>418</b>

TOTAL APPROXIMATE COST: US\$8,275.00. These contraceptives should be destroyed.

In previous trip reports, it was mentioned that in 1987 both CIES and FAMES received (from Pathfinder and FPIA) shipments of Lo-Femenal which greatly exceeded the consumption capacity of both organizations. As a result, the quantities indicated in Table E expired before they could be used. In the case of PROSALUD, both the Lo-Femenal and the Conceptrol were transferred from CIES and represent consumption for eight months and two years, respectively. In the case of Copper Ts, the expired quantity represents approximately 11 months' consumption.

### 6. Estimated contraceptives for 1992-1994 (Annex E)

Based on the consumption observed during 1991, stock on hand, and expansion plans for each organization, an estimate has been made of the needs for the 1992-1994 period, as depicted in summary form in Annexes C and E.

Based on stock on hand, shipments not yet received, and estimated consumption, private organizations will have available sufficient supplies to meet their needs for Lo-Femenal and Conceptrol vaginal tablets for 1992 and 1993. With regard to condoms, they will require approximately 354,000 more in 1992 than the quantities ordered, and a total of 606,000 units more for 1993. With regard to Copper Ts, they will require new shipments for 1993 (4,560 units). These Copper Ts could be obtained from the stock on hand at the MPSSP, as it is estimated that consumption of this method may total approximately 4,000 units per year. Also, with respect to pending shipments, a plan has been prepared for distributing this method to the organizations so that the latter can be supplied as soon as the shipment arrives in country (see Annex D).

One of the short-term goals of the Bolivian organizations should be to achieve a solid and gradual increase in the use of contraceptives among the target population by means of more aggressive and more broadly targeted service delivery programs. The low level of coverage provided by Bolivian organizations suggests the need for further analysis of program performance and the concrete goals and/or strategies designed by the organizations for ensuring that their programs achieve greater impact.

This suggests to both USAID/Bolivia as well as the appropriate public and private organizations that now is the time to begin to analyze the consumption figures reported by each organization (by comparing them to the current prevalence of users and other indicators), to reevaluate the strategy employed for delivering contraceptives (regardless of whether these are sold or distributed free of charge), to analyze the family planning service delivery program, to restate the implementation strategies for these programs, to establish short- and medium-term program goals, and to consolidate those programs which have a stronger infrastructure and have demonstrated the ability to achieve major, sustained coverage by concentrating both efforts and resources in such programs.

**B. PAN-AMERICAN HEALTH ORGANIZATION (PAHO) - MINISTRY OF SOCIAL WELFARE AND PUBLIC HEALTH**

Through the various meetings held during previous trips with the PAHO representative, the PAHO advisor and the director of the Reproductive Health Program of the Ministry of Public Health (MPSSP), it has been verbally agreed that UNFPA PAHO/WHO Project No. BOL/91/PO1, under which all MPSSP reproductive health activities are financed, should purchase the necessary contraceptives for both public and private organizations (NGOs).

Of the first shipment of contraceptives received by the MPSSP in 1990, only a small number of the Copper Ts were transferred to the NGOs. With regard to condoms, although relatively large quantities were transferred to FAMES (240,000 units in 1990), the rest of the NGOs received amounts equal to approximately two months of consumption.

As a result of the uncertainty as to whether the contraceptives required by the NGOs were going to be provided by the MPSSP on a timely basis and in the amounts requested, USAID/Bolivia decided to order and purchase the contraceptives required to satisfy needs for 1992 and 1993. Also, the MPSSP has already ordered additional quantities of contraceptives under the assumption that they will be used to supply the NGOs and the Ministry. Thus, the country was able to finish 1991 with sufficient availability to cover both public and private sector consumption for the years indicated, as described in Tables 1-3 of Annex C.

At present, the MPSSP has available the contraceptives described in Table 3 of Annex C, which it is estimated will satisfy its needs for the next 2-3 years. The annual consumption of oral contraceptives for the Ministry has been estimated at approximately 45,000 units. Likewise, consumption of condoms has been estimated at approximately 150,000 units and Copper Ts at 4,000 units.

## **V. FUTURE TECHNICAL ASSISTANCE**

With regard to the problems described in this report, mention was made during the preceding visit of the need to avoid future waste of contraceptives, strengthen the various programs, analyze their consumption data, and fine-tune the information systems which allow them to comply with the reporting requirements of donor agencies and at the same time provide them with useful information for evaluating and estimating future supply needs.

As a part of the recommended solutions, a Workshop on Contraceptive Logistics has been planned for July 7-10, 1992 that will cover the areas of programming, logistics administration, evaluation, short- and medium-term goal establishment and design of forms (among other topics), which will allow the various organizations to keep a record and appropriate follow-up of their users and supplies and ensure improved logistics administration on all levels of their programs.

In the area of programming, these organizations require a knowledge of the methodology required to properly program their needs, based on established parameters (WRA, prevalence, etc.) for preparing projections which more nearly approximate reality.

The tentative agenda for the Workshop will be submitted toward the end of May, 1992. The list of organizations and participants will also be determined at that time.

**ANNEX A:**

**LIST OF PERSONS AND ORGANIZATIONS CONTACTED**

ANNEX A

LIST OF PERSONS AND ORGANIZATIONS CONTACTED

In La Paz:

USAID/Bolivia:

- Dr. Sigrid Anderson, Assistant Chief, Health and Human Resources Division (HHR)
- Dr. Elba Mercado, Project Coordinator, HHR
- Lic. Jennifer Macías, Project Coordinator, HHR
- Lic. Isabel Stout, Coordinator of the AIDS Prevention Program

FUNDACION DE ASISTENCIA MEDICO-SOCIAL (FAMES):

- Dr. Ruth Maldonado Ballón, Representative, Board of Directors
- Dr. Mariel Loaiza, Supervisor of the Pathfinder Project
- Dr. Winston Uzín, Administrative Advisor
- Dr. Luis Rodríguez, Director of the FPIA Project
- Ing. Edwin Gery Maldonado S., Executive Director
- Ing. Luis Alberto Taja Maldonado, General Administrator

CENTRO DE INVESTIGACION, EDUCACION Y SERVICIOS (CIES):

- Lic. Luisa Rada, Acting Executive Director
- Lic. Elia Pérez de Soriano, Director of the El Alto Project
- Lic. Carlos Salazar, MSH Advisor

FUNDACION SAN GABRIEL:

- Lic. José V. Barragán, Administrative and Financial Director
- Dr. Oscar Viscarra, Chief of the Gynecology and Obstetrics Service

CAJA NACIONAL DE SALUD (CNS):

- Dr. Cristina Rentería, Director of the "Lucha contra el Aborto" (Struggle against Abortion) Program
- Lic. Rosario Calasich, Administrator of the Reproductive Health Project

MINISTRY OF SOCIAL WELFARE AND PUBLIC HEALTH:

- Dr. Miguel Angel Ugalde, National Director of the Reproductive Health Program
- Dr. Virginia Camacho
- Dr. María Luisa Melgar, Chief of the AIDS Prevention Program
- Dr. Fidel Navarro, PAHO Consultant to the AIDS Program

PANAMERICAN HEALTH ORGANIZATION (PHO):

- Lic. Bertha Pooley, Advisor

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JOHN SNOW, INC. -- MOTHERCARE PROJECT:

- Mrs. Lisa Howard-Grabman, Coordinator

THE FUTURES GROUP - SOMARC:

- Mr. Darío Mejía, Consultant

In Cochabamba:

PROMEFA:

- Dr. Oscar Niño de Guzmán, Director
- Dr. Elizabeth De La Fuente, Personnel Director

CENTER FOR THE PREVENTION OF CANCER IN WOMEN:

- Dr. Ramiro Becerra, Director
- Dr. Daysi Cárdenas, Coordinator of the MotherCare Project

COMBASE:

- Dr. José Velásquez, Director
- Dr. Hugo Castrillo, Coordinator of the MotherCare Project
- Lic. Cristina Chacón, Chief of Personnel and Head of Finances for the Project

ME.DI.CO.:

- Dr. Jorge Quiroga, Director

FEPADE:

- Lic. Wilfram Hinojosa, Executive Director

In Santa Cruz:

PROSALUD:

- Dr. Luis Santa Cruz, Director of Medical Services
- Dr. Zulema Gutiérrez, Director of the Laboratory and Pharmacy
- Mr. Walter Soriano, Director of the Social Marketing Project

**ANNEX B**

**MOTHECARE PROJECT: ESTIMATE OF NEEDS  
STOCK ON HAND AT ME.DI.CO.**

## ANNEX B

TABLE 1

ESTIMATED CONSUMPTION FOR 1992 AND 1993, MOTHERCARE PROJECT-COCHABAMBA

ORGANIZATION	TCU380A		CONDOMS		PILLS		VAG. TAB.	
	1992	1993	1992	1993	1992	1993	1992	1993
PROMEFA	240	250	3,000	3,000	200	200	2,400	2,400
CANCER CTR.	900	900	2,500	2,500	150	150	1,000	1,000
COMBASE	200	260	3,000	3,000	100	100	0	0
FEPADE	100	100	0	0	800	400	0	0
ME.DI.CO.	190	200	1,500	1,500	700	700	1,500	1,500
TOTALS	1,630	1,710	10,000	10,000	1,950	1,550	4,900	4,900

TABLE 2

SHIPMENTS NECESSARY FOR 1992: POSSIBLE SOURCES OF SUPPLY (THESE AMOUNTS INCLUDE CONSUMPTION FOR 1992 PLUS 6 MONTHS OF CONSUMPTION FOR 1993. THE STOCK ON HAND AVAILABLE IN EACH ORGANIZATION HAS BEEN DEDUCTED)

ORGANIZATION	SOURCE: USAID/LA PAZ				SOURCE: ME.DI.CO.			
	TCU	CONDOMS	PILLS	VAG. TAB.	TCU	CONDOMS	PILLS	VAG. TAB.
PROMEFA	360	0	300	3,000	3,500			
CANCER CTR.	1,300	0	200	1,500	2,500			
COMBASE	320	0	200	0	4,000			
FEPADE	200	0	1,000	0				
ME.DI.CO.	280	0	0	0				
TOTALS	2,460	0	1,700	4,500	10,000			

ANNEX B

TABLE 3

STOCK ON HAND IN ME.DI.CO. AS OF MARCH 12, 1992:

	TCU	CONDOMS	PILLS	VAG. TAB.
	5	17,200	1,200	4,100
LESS: TRANSFERS		10,000		
BALANCE EXPIRING IN:	5	7,200 04/94	1,200 03/94	4,100 04/94
AVERAGE ANNUAL CONSUMPTION	190	1,500	700	1,500
MONTHS AVAILABLE	0	58	21	33

TABLE 4

ORDERED FROM AID/S&T/POP/CPSD VIA A.P.O.

TCU	CONDOMS	PILLS	VAG. TAB.
2,400	18,000	3,600	24,000 (CANCEL VAG. TAB.)

DISTRIBUTION:

PROMEFA	360		300	3,000
CANCER CTR.	1,300		200	1,500
COMBASE	320		200	0
FEPADE	200		1,000	0
ME.DI.CO.	280		0	0
	2,460	0	1,700	4,500
SURPLUS/ DEFICIT	-60	18,000	1,900	19,500 *

\* IT HAS BEEN REQUESTED THAT THIS SHIPMENT OF VAGINAL TABLETS BE CANCELED BECAUSE THERE IS ALREADY SUFFICIENT INVENTORY ON HAND IN THE COUNTRY. IF NOT CANCELED, THERE WILL BE A SURPLUS OF 24,000 UNITS AS A RESULT OF THIS SHIPMENT.

**ANNEX C**

**ESTIMATE OF NEEDS 1992-1993: NGOs**

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## ANNEX C

CONTRACEPTIVES REQUIRED FOR 1992 AND 1993: PRIVATE SECTOR  
(FOR EACH YEAR, THE AMOUNTS INCLUDE CONSUMPTION FOR THAT YEAR PLUS 8 MONTHS  
CONSUMPTION FOR THE FOLLOWING YEAR):

TABLE 1

ORGANIZATION	PILLS		TCU380A		CONDOMS		VAG. TAB.	
	1992	1993	1992	1993	1992	1993	1992	1993
FAMES	28,800	24,400	5,400	5,600	426,000	276,000	67,200	105,600
CIES	0	0	0	600	138,000	306,000	57,600	0
CAJA NAC.	0	0	0	0	24,000	18,000	14,400	19,200
MOTHERCARE	1,700	1,200	2,460	1,800	0	10,000	4,500	4,800
PROSALUD-SC	0	16,800	0	600	0	0	0	0
PROSALUD-LPZ	2,600	1,200	400	200	6,000	6,000	4,800	4,800
F. SAN GAB.	0	600	1,200	1,500	12,000	12,000	9,600	9,600
SOPACOF	3,600	9,600	2,400	1,800	96,000	78,000	14,400	19,200
TOTALS	37,700	53,800	11,860	12,100	702,000	706,000	172,500	163,200

TABLE 2

CONTRACEPTIVES ALREADY PROCURED BY USAID/LA PAZ: (NEWVERN INFO)

ESTIMATED DATE OF ARRIVAL	PILLS	TCU380A	CONDOMS	VAG. TAB.
MAY/92	38,400	8,800	264,000	480,000
DEC/92	52,800	8,200	84,000	0
MOTHERCARE	3,600	2,400	0	0
TOTAL	94,800	19,400	348,000	480,000

DEFICIT  
FOR 1992:                   0                   0                   (354,000)                   0

DEFICIT  
FOR 1993:                   0                   (4,560)                   (706,000)                   0

THE DEFICIT REPRESENTS THE ADDITIONAL QUANTITY WHICH MUST COME FROM ANY SOURCE  
IN ORDER TO MEET NEEDS FOR 1992 AND/OR 1993.

## ANNEX C

TABLE 3

## INVENTORY OF CONTRACEPTIVES FROM OTHER ORGANIZATIONS:

DINAP-CEASS: INFORMATION PROVIDED BY DR. MIGUEL A. UGALDE, VIA TELEPHONE, ON MARCH 18, 1992

	METHOD	AMOUNT	EXPIRY DATE
	TCU380A	12,950	1996
PILLS	OVIDON	56,800	08/85
	RIGEVIDON	11,800	09/95
	MICROGYNON	49,800	?
CONDOMS	DONKUK	540,000	1995
	ROSETEX ?	166,896	01/92

## CAJA NACIONAL:

7 000 TCU380A EXP.: 01/94

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**ANNEX D**

**DISTRIBUTION OF CONTRACEPTIVES TO NGOs: 1992**

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## ANNEX D

## DISTRIBUTION OF CONTRACEPTIVES BY ORGANIZATION: 1992

VAGINAL TABLETS: SAME AS DESCRIBED IN TABLE 1

CONDOMS: SHIPMENT OF 264,000 UNITS

ORGANIZATION	QUANTITY TO BE DELIVERED	QUANTITY PENDING
CAJA NAC.	12,000	12,000
F. SAN GAB.	6,000	6,000
FAMES	138,000	288,000
CIES	84,000	54,000
PROSALUD-LPZ	6,000	0
SOPACOF	18,000	78,000
TOTALS	264,000	438,000

COPPER Ts: SHIPMENT OF 8,800 UNITS

ORGANIZATION	QUANTITY TO BE DELIVERED	QUANTITY PENDING
F. SAN GAB.	1,000	200
FAMES	3,600	2,000
PROSALUD-LPZ	200	200
SOPACOF	1,600	800
MOTHERCARE	2,400	0
TOTALS	8,800	3,200

LO-FEMENAL: SHIPMENT OF 38,400 UNITS

ORGANIZATION	QUANTITY TO BE DELIVERED	QUANTITY PENDING
FAMES	28,800	0
PROSALUD-LPZ	3,600	0
SOPACOF	3,600	0
MOTHERCARE	1,700	0
TOTALS	37,700	0 SURPLUS OF 700 CYCLES

**ANNEX E:**  
**CONTRACEPTIVE PROCUREMENT TABLES (CPTs)**  
**FOR THE 1992-1994 PERIOD, BY ORGANIZATION**

## Fiscal Year 1992 Operating Year Budget Needs

Product Name	Quantity	Cost	Freight	Total
Fundacion Asistencia Medico Social				
52mm Colored Sultan	0	\$0	\$0	\$0
52mm Non Colored, No Logo	564,000	\$30,174	\$7,544	\$37,718
Lo-Femenal, Blue Lady	0	\$0	\$0	\$0
Conceptrol Foaming Tablet	0	\$0	\$0	\$0
Copper T, 380	1,800	\$1,737	\$434	\$2,171
Totals for this recipient		\$31,911	\$7,978	\$39,889
Centro de Investigacion, Educac. Y Serv.				
52mm Colored Sultan	0	\$0	\$0	\$0
Lo-Femenal, Blue Lady	0	\$0	\$0	\$0
Conceptrol Foaming Tablet	0	\$0	\$0	\$0
52mm Non Colored, No Logo	444,000	\$23,754	\$5,939	\$29,693
Copper T, 380	600	\$579	\$145	\$724
Totals for this recipient		\$24,333	\$6,083	\$30,416
Caja Nacional de Salud				
Conceptrol Foaming Tablet	0	\$0	\$0	\$0
Copper T, 380	0	\$0	\$0	\$0
52mm Non Colored, No Logo	42,000	\$2,247	\$562	\$2,809
Lo-Femenal, Blue Lady	0	\$0	\$0	\$0
Totals for this recipient		\$2,247	\$562	\$2,809
Cobreh-Sopacof, La Paz				
52mm Colored Sultan	0	\$0	\$0	\$0
Lo-Femenal, Blue Lady	13,200	\$1,980	\$495	\$2,475
52mm Non Colored, No Logo	174,000	\$9,309	\$2,327	\$11,636
Conceptrol Foaming Tablet	0	\$0	\$0	\$0
Copper T, 380	4,200	\$4,053	\$1,013	\$5,066
Totals for this recipient		\$15,342	\$3,836	\$19,178
ABENDROTH INTERNATIONAL				
52mm Colored Sultan	0	\$0	\$0	\$0
Noriday 1+50, CSM	0	\$0	\$0	\$0
Totals for this recipient		\$0	\$0	\$0
Proyecto Mothercare-Cochabamba				
52mm Non Colored, No Logo	6,000	\$321	\$80	\$401
Lo-Femenal, Blue Lady	3,600	\$540	\$135	\$675
Copper T, 380	4,200	\$4,053	\$1,013	\$5,066

## Fiscal Year 1993 Congressional Presentation Projections

Product Name	Quantity	Cost	Freight	Total
Fundacion Asistencia Medico Social				
52mm Non Colored, No Logo	287,004	\$16,122	\$4,031	\$20,153
Conceptrol Foaming Tablet	0	\$0	\$0	\$0
Lo-Femenal, Blue Lady	0	\$0	\$0	\$0
52mm Colored Sultan	0	\$0	\$0	\$0
Copper T, 380	3,204	\$3,246	\$812	\$4,058
Totals for this recipient		\$19,368	\$4,842	\$24,210
Centro de Investigacion, Educac. Y Serv.				
52mm Non Colored, No Logo	465,996	\$26,177	\$6,544	\$32,721
52mm Colored Sultan	0	\$0	\$0	\$0
Conceptrol Foaming Tablet	0	\$0	\$0	\$0
Lo-Femenal, Blue Lady	2,700	\$405	\$101	\$506
Copper T, 380	3,672	\$3,721	\$930	\$4,651
Totals for this recipient		\$30,303	\$7,576	\$37,879
Caja Nacional de Salud				
Conceptrol Foaming Tablet	21,648	\$2,125	\$531	\$2,656
Lo-Femenal, Blue Lady	0	\$0	\$0	\$0
52mm Non Colored, No Logo	22,248	\$1,250	\$313	\$1,563
Copper T, 380	3,276	\$3,319	\$830	\$4,149
Totals for this recipient		\$6,694	\$1,674	\$8,368
Cobreh-Sopacof, La Paz				
52mm Colored Sultan	0	\$0	\$0	\$0
52mm Non Colored, No Logo	97,032	\$5,451	\$1,363	\$6,814
Copper T, 380	1,896	\$1,921	\$480	\$2,401
Lo-Femenal, Blue Lady	10,836	\$1,625	\$406	\$2,031
Conceptrol Foaming Tablet	18,996	\$1,865	\$466	\$2,331
Totals for this recipient		\$10,862	\$2,716	\$13,578
ABENDROTH INTERNATIONAL				
Noriday 1+50, CSM	0	\$0	\$0	\$0
52mm Colored Sultan	204,000	\$11,460	\$2,865	\$14,325
Totals for this recipient		\$11,460	\$2,865	\$14,325
Proyecto Mothercare-Cochabamba				
Conceptrol Foaming Tablet	3,756	\$369	\$92	\$461
Lo-Femenal, Blue Lady	756	\$113	\$28	\$141
Copper T, 380	1,752	\$1,775	\$444	\$2,219

Fiscal Year 1994 Annual Budget Submission Projections

Product Name	Quantity	Cost	Freight	Total
Fundacion Asistencia Medico Social				
Copper T, 380	6,012	\$6,396	\$1,599	\$7,995
Conceptrol Foaming Tablet	7,452	\$768	\$192	\$960
52mm Colored Sultan	0	\$0	\$0	\$0
52mm Non Colored, No Logo	299,172	\$17,646	\$4,412	\$22,058
Lo-Femenal, Blue Lady	22,032	\$3,305	\$826	\$4,131
Totals for this recipient		\$28,115	\$7,029	\$35,144
Centro de Investigacion, Educac. Y Serv.				
52mm Non Colored, No Logo	641,664	\$37,848	\$9,462	\$47,310
Lo-Femenal, Blue Lady	2,604	\$391	\$98	\$489
Copper T, 380	3,828	\$4,073	\$1,018	\$5,091
Conceptrol Foaming Tablet	20,604	\$2,124	\$531	\$2,655
52mm Colored Sultan	0	\$0	\$0	\$0
Totals for this recipient		\$44,436	\$11,109	\$55,545
Caja Nacional de Salud				
Conceptrol Foaming Tablet	23,748	\$2,448	\$612	\$3,060
Lo-Femenal, Blue Lady	2,700	\$405	\$101	\$506
Copper T, 380	4,128	\$4,392	\$1,098	\$5,490
52mm Non Colored, No Logo	23,748	\$1,401	\$350	\$1,751
Totals for this recipient		\$8,646	\$2,162	\$10,808
Cobreh-Sopacof, La Paz				
52mm Non Colored, No Logo	114,012	\$6,725	\$1,681	\$8,406
Conceptrol Foaming Tablet	19,656	\$2,026	\$507	\$2,533
Copper T, 380	2,052	\$2,183	\$546	\$2,729
52mm Colored Sultan	0	\$0	\$0	\$0
Lo-Femenal, Blue Lady	10,536	\$1,580	\$395	\$1,975
Totals for this recipient		\$12,514	\$3,129	\$15,643
ABENDROTH INTERNATIONAL				
Noriday 1+50, CSM	0	\$0	\$0	\$0
52mm Colored Sultan	171,000	\$10,086	\$2,522	\$12,608
Totals for this recipient		\$10,086	\$2,522	\$12,608
Proyecto Mothercare-Cochabamba				
Conceptrol Foaming Tablet	4,896	\$505	\$126	\$631
Lo-Femenal, Blue Lady	1,200	\$180	\$45	\$225
Copper T, 380	1,956	\$2,081	\$520	\$2,601

## Parameters Used in the Financial Requirements Analysis

Method	OYB Period		CP Period		ABS Period	
	Start Date	End Date	Start Date	End Date	Start Date	End Date
CONDOM	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95
IUD	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95
ORAL-P	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95
ORAL-S	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95
ORAL-X	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95
VFT	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95
IMPLNT	01/01/92	12/31/93	01/01/94	12/31/94	01/01/95	12/31/95

Method	OYB Unit Price	CP Unit Price	ABS Unit Price
CONDOM	.054	.056	.059
IUD	.965	1.013	1.064
ORAL-P	.150	.150	.150
ORAL-S	.270	.270	.270
ORAL-X	.205	.205	.205
VFT	.094	.098	.103
IMPLNT	23.120	24.276	25.490

NB. These prices are for the 1992 CPT's and are based on the current contract price plus 5% for inflation.

\*\*\*\*\* Operating Year Budget Needs Footnote \*\*\*\*\*

The CPT AID Shipping Schedule lists shipments only for CY's 1992 and 1993 . If a contract period extends into 1994 the CPT program estimates the shipments required for the portion of the year covered by the contract period, based on estimated consumption, desired end of year stock and estimated loss, and includes that figure in the OYB financial projection. Similar calculations are performed for CP and ABS projections.

Missions pay only for what they receive. If for some reason (shipment cancellation, etc.) you should receive less than you have paid for, you will be given a credit for the following financial year.

Proposed Shipping Schedule for Bolivia  
Based on 1992 CPT's

Source: AID

Product	Approx. Ship Date	Receipt Date	Quantity
<b>Caja Nacional de Salud</b>			
52mm Non Colored, No Logo	02/01/92	06/30/92	24,000
52mm Non Colored, No Logo	09/18/92	02/15/93	18,000
<b>Centro de Investigacion, Educac. Y Serv.</b>			
52mm Non Colored, No Logo	05/18/92	10/15/92	138,000
52mm Non Colored, No Logo	10/31/92	03/30/93	306,000
Copper T, 380	09/02/92	01/30/93	600
<b>Cobreh-Sopacof, La Paz</b>			
52mm Non Colored, No Logo	02/16/92	07/15/92	96,000
52mm Non Colored, No Logo	09/18/92	02/15/93	78,000
Copper T, 380	03/18/92	08/15/92	2,400
Copper T, 380	09/18/92	02/15/93	1,800
Lo-Femenal, Blue Lady	03/18/92	08/15/92	3,600
Lo-Femenal, Blue Lady	09/18/92	02/15/93	9,600
<b>Fundacion Asistencia Medico Social</b>			
52mm Non Colored, No Logo	03/18/92	08/15/92	294,000
52mm Non Colored, No Logo	09/18/92	02/15/93	270,000
Copper T, 380	03/18/92	08/15/92	1,800
<b>PROSALUD</b>			
52mm Non-Colored Blue-Gold	01/17/92	06/15/92	150,000
52mm Non-Colored Blue-Gold	09/18/92	02/15/93	204,000
52mm Non-Colored Blue-Gold	08/02/93	12/30/93	132,000
Noriday 1+50, CSM	08/02/93	12/30/93	68,400
<b>Proyecto Mothercare-Cochabamba</b>			
52mm Non Colored, No Logo	09/18/92	02/15/93	6,000

Proposed Shipping Schedule for Bolivia  
Based on 1992 CPT's

Source: Local Manufacturer

Product	Approx. Ship Date	Receipt Date	Quantity
ABENDROTH INTERNATIONAL			
52mm Colored Sultan	01/17/92	06/15/92	90,000
52mm Colored Sultan	09/02/92	01/30/93	240,000
PROSALUD			
Microgynon	01/17/92	06/15/92	56,400
Microgynon	08/18/92	01/15/93	68,400

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Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:13  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	37.0	17.2	7.2	3.2
2. Estimated Consumption					
(a) Use/Sales/ Distribution	5.0	19.8	10.0	10.0	12.0
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	42.0				NA
4. End of Yr Stock	37.0	17.2	7.2	-2.8	NA
5. Desired End of Year Stock	NA	NA	5.0	6.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		6.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA		6.0	NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:13  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	6.0	09/18/92	02/15/93

Total to order: 6,000

Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:16  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.1	0.9	1.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution		0.3	1.6	1.7	1.8
(b) Transfer/Loss/ Disposal	1.8	-0.4			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	1.8				NA
4. End of Yr Stock	0.0	0.1	-1.5	-0.8	NA
5. Desired End of Year Stock	NA	NA	0.9	0.9	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	2.4	1.8	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	2.4	1.8	NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:16  
Prepared on: 03/17/92  
Modified on: 03/17/92

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY FAMES IN 08/91.

7. ORDERS Year: 1992

THIS QUANTITY HAS ALREADY BEEN ORDERED AND IT'S EXPECTED TO ARRIVE IN COUNTRY BY MAY/91.

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:16  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
FPIA	1.8	03/15/90

Total non AID shipments: 1,800

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:17  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 03/90.

2a. ESTIMATED USE Year: 1990

ESTIMATED DISTRIBUTION THROUGH 5 HEALTH POSTS FROM ME.DI.CO.

2a. ESTIMATED USE Year: 1991

THIS FIGURE INCLUDES QUANTITIES TRANSFERRED TO OTHER NGOs WITHIN THE MOTHERCARE PROJECT (300) AND DISTRIBUTION TO ME.DI.CO'S USERS.

2a. ESTIMATED USE Year: 1992

ESTIMATED CONSUMPTION BY 4 INSTITUTIONS BASED ON EXPECTED NUMBER OF USERS. THIS FIGURE IS PROVISIONAL UNTIL CONSUMPTION DATA IS AVAILABLE.

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:18  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	1.2	01/17/92	06/15/92
CPSD	2.4	09/18/92	02/15/93

Total to order: 3,600

Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:18  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	8.2	4.1	3.7	3.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution	1.4	4.1	4.9	4.9	4.9
(b) Transfer/Loss/ Disposal			-4.5	-4.8	
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	9.6				NA
4. End of Yr Stock	8.2	4.1	3.7	3.6	NA
5. Desired End of Year Stock	NA	NA	2.4	2.4	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:19

Prepared on: 03/17/92

Modified on: 03/17/92

2b. ESTIMATED LOSS Year: 1992

TO BE TRANSFERRED BY FAMES IN 05/92.

2b. ESTIMATED LOSS Year: 1993

TO BE TRANSFERRED BY FAMES IN 02/93.

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Country: Bolivia  
 Recipient: Caja Nacional de Salud  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 16:05  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.2	7.4	4.3	1.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution		0.3	1.5	2.7	3.0
(b) Transfer/Loss/ Disposal	-0.2	-0.5	1.6		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources		7.0			NA
4. End of Yr Stock	0.2	7.4	4.3	1.6	NA
5. Desired End of Year Stock	NA	NA	1.4	1.5	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	3.0	0.2	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Caja Nacional de Salud  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 16:05

Prepared on: 03/16/92

Modified on: 03/16/92

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY FAMES (300 UNITS ON 08/02/91) AND THE MOH (200 UNITS ON 07/31/91).

2b. ESTIMATED LOSS Year: 1992

TO BE TRANSFERRED AS LOANS TO LOCAL NGOs. RECIPIENTS TO BE DEFINED.

3c. SHIPMENTS FROM OTHER SOURCES Year: 1991

THIS LOT OF 7,000 UNITS EXPIRES IN 01/94.

Country: Bolivia  
 Recipient: Caja Nacional de Salud  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 16:07  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	9.0	8.4	9.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution			15.0	18.0	20.0
(b) Transfer/Loss/ Disposal		-9.0	-14.4	-19.2	
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	9.0	8.4	9.6	NA
5. Desired End of Year Stock	NA	NA	9.0	10.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Caja Nacional de Salud  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 16:08

Prepared on: 03/16/92

Modified on: 03/16/92

2b. ESTIMATED LOSS Year: 1992

TO BE TRANSFERRED BY FAMES IN 04/92.

2b. ESTIMATED LOSS Year: 1993

TO BE TRANSFERRED BY FAMES IN 04/93.

Country: Bolivia  
Recipient: Caja Nacional de Salud  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 16:06  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 12/90.

2a. ESTIMATED USE Year: 1991

TOTAL CONSUMPTION REPORTED BY THE ONLY CLINIC (HOSPITAL OBRERO) OFFERING SERVICES UP TO NOW. IT IS EXPECTED THAT AT LEAST A TOTAL OF 11 CLINICS WILL BE FULLY WORKING IN 1992.

2a. ESTIMATED USE Year: 1992

ESTIMATION BASED ON EXPECTED NUMBER OF USERS TO BE CONTACTED, MAINLY IN SANTA CRUZ AND COCHABAMBA. THIS FIGURE IS TOTALLY PROVISIONAL AND SHOULD BE REVIEWED/ADJUSTED ONCE INFO SYSTEM IS UP AND RUNNING, AND CONSUMPTION DATA IS AVAILABLE.

2a. ESTIMATED USE Year: 1993

THE CNS WILL PROMOTE ITS SERVICES THROUGH APPROXIMATELY 15 CLINICS LOCATED IN LA PAZ, SANTA CRUZ, COCHABAMBA, SUCRE, ORURO, TARIJA, AND POTOSI. THIS FIGURE IS PROVISIONAL. SEE FOOTNOTE FOR 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY THE MINISTRY OF H. ON 12/14/90. BRANDS ARE RIGEVIDON (MICROGYNON: 10,000 CYCLES) AND OVIDON (NEOGYNON: 10,000). BOTH ARE HUNGARIN PILLS. EXPIRY DATES: 08/95 AND 09/95 RESPECTIVELY.

Country: Bolivia  
Recipient: Caja Nacional de Salud  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:54  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 12/90.

2a. ESTIMATED USE Year: 1991

CONSUMPTION REPORTED BY THE ONLY CLINIC OFFERING SERVICES (HOSPITAL OBRERO). PART OF THIS FIGURE REPRESENTS CONSUMPTION FROM SEP/91 THRU FEB/92 (500 UNITS. NUMBER OF NEW USERS REPORTED: 15). THE REMAINING 10,800 UNITS APPARENTLY WERE DISTRIBUTED BETWEEN JAN-AUG/91.

2a. ESTIMATED USE Year: 1992

IT IS EXPECTED THAT AT LEAST 11 CLINICS WILL BE FULLY WORKING IN 1992. THIS FIGURE IS PROVISIONAL AND SHOULD BE REVIEWED/ADJUSTED ONCE CONSUMPTION DATA IS AVAILABLE. THE CNS IS ENCOURAGED TO SET UP THE INVENTORY AND RECORDING SYSTEM ASAP.

2a. ESTIMATED USE Year: 1993

CONSUMPTION OF THIS METHOD HAS BEEN ESTIMATED SIMILAR TO THAT OF THE VAGINAL FOAMING TABLETS. HOWEVER, THIS FIGURE IS PROVISIONAL. SEE CPT FOR CONCEPTROL FOAMING TABLETS AND FOOTNOTE FOR 1992 (NO LOGO CONDOMS)

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY THE MOH ON 12/22/90. BRAND: SULTAN.

91

Country: Bolivia  
Recipient: Caja Nacional de Salud  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:54  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	24.0	02/01/92	06/30/92
CPSD	18.0	09/18/92	02/15/93

Total to order: 42,000

Country: Bolivia  
 Recipient: Cobreh-Sopacof, La Paz  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:07  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	1.4	0.2	1.2	1.2
2. Estimated Consumption					
(a) Use/Sales/ Distribution	0.3	0.5	1.5	1.8	1.8
(b) Transfer/Loss/ Disposal	-1.7	0.7	-0.1		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	1.4	0.2	-1.2	-0.6	NA
5. Desired End of Year Stock	NA	NA	1.2	1.2	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	2.4	1.8	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	2.4	1.8	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:07  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL JULY/90.

2a. ESTIMATED USE Year: 1990

NUMBER OF INSERTIONS REPORTED FOR THE PERIOD JULY-DEC/90 ONLY, AS PRODUCT WAS NOT AVAILABLE UNTIL 07/90. 310 UNITS WERE DISTRIBUTED TO DOCTORS ALONG THE RAILROAD NETWORK. THE OTHER 16 UNITS WERE USED BY DOCTORS IN THE RAILROAD-WAGON CLINIC.

2a. ESTIMATED USE Year: 1991

TOTAL NUMBER OF INSERTIONS REPORTED BY DOCTORS FROM THE CLINICS OF EL ALTO AND VILLA FATIMA. IUDs ARE NOT GIVEN TO RESIDENT DOCTORS ALONG THE RAILROAD NETWORK ANYMORE. INSERTIONS JAN-AUG: 423, SEP-DEC: 140. TOTAL: 563.

2a. ESTIMATED USE Year: 1992

TOTAL NUMBER OF INSERTIONS ESTIMATED, BASED ON NUMBER OF USERS, EXPANSION OF SERVICES (3 NEW CLINICS AND A MOBILE CLINIC BETWEEN LA PAZ AND ORURO). 4 MORE DOCTORS, TRAINED IN IUD INSERTION, WILL JOIN THE PROGRAM BY JULY/92.

2a. ESTIMATED USE Year: 1993

A 20% INCREASE HAS BEEN ESTIMATED. THIS FIGURE IS PROVISIONAL UNTIL REAL CONSUMPTION DATA IS COLLECTED.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:08

Prepared on: 03/17/92

Modified on: 03/17/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY EMPRESA NACIONAL DE FERROCARRILS IN JULY/90 (FORMER ENTERPRISE PROJECT RECIPIENT). TOTAL: 1,755 UNITS.

2b. ESTIMATED LOSS Year: 1991

200 UNITS WERE RECEIVED FROM FAMES IN 05/91. SOPACOF DISTRIBUTED 800 UNITS TO ORURO AND 100 UNITS TO YUNGAS. THERE'S NO PROJECT IN THESE 2 REGIONS, SO THESE UNITS ARE CONSIDERED DISTRIBUTION/DONATION ONLY.

2b. ESTIMATED LOSS Year: 1992

TRANSFERRED BY CIES IN 01/92.

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:08  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	2.4	03/18/92	08/15/92
CPSD	1.8	09/18/92	02/15/93

Total to order: 4,200

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Country: Bolivia  
 Recipient: Cobreh-Sopacof, La Paz  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:11  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	13.7	11.3	12.5	12.8
2. Estimated Consumption					
(a) Use/Sales/ Distribution	0.7	17.0	18.0	18.9	18.9
(b) Transfer/Loss/ Disposal	-14.4	-5.0	-19.2	-19.2	
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources		9.6			NA
4. End of Yr Stock	13.7	11.3	12.5	12.8	NA
5. Desired End of Year Stock	NA	NA	12.6	12.6	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:11  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 07/90.

2a. ESTIMATED USE Year: 1990

DISTRIBUTION REPORTED BY DOCTORS (RAILROAD WAGON-CLINIC) FOR THE PERIOD JULY-DEC/90.

2a. ESTIMATED USE Year: 1991

TOTAL DISTRIBUTION REPORTED BY DOCTORS AND PROMOTERS FROM 6 PROJECTS. JAN-JUL: 8,988, AUG: 108, SEP-DEC: 7,978. NO CONSUMPTION RECORDS ARE KEPT, THOUGH.

2a. ESTIMATED USE Year: 1992

A 5% INCREASE HAS BEEN ESTIMATED, BASED ON THE FACT THAT THIS PRODUCT IS NOT VERY WELL ACCEPTED. NUMBER OF USERS WHO LIKE THIS METHOD IS VERY LIMITED.

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:12  
Prepared on: 03/17/92  
Modified on: 03/17/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY EMPRESA NACIONAL DE FERROCARRILS IN 07/90 (FORMER ENTERPRISE PROJECT RECIPIENT).

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY FAMES IN 05/91.

2b. ESTIMATED LOSS Year: 1992

TRANSFERRED BY FAMES IN 01/92: 4,800 TABLETS. TO BE TRANSFERRED BY FAMES IN 05/92: 14,400 TABLETS. EXP. DATE: 07/95.

2b. ESTIMATED LOSS Year: 1993

TO BE TRANSFERRED FROM FAMES IN 02/93.

3c. SHIPMENTS FROM OTHER SOURCES Year: 1991

THIS LOT IS NEO SAMPOON. THIS QUANTITY REPRESENTS UNITS, NOT TUBES.

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:12  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
IPPF/W	9.6	12/02/91

Total non AID shipments: 9,600

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Country: Bolivia  
 Recipient: Cobreh-Sopacof, La Paz  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:09  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	7.5	3.1	6.9	6.3
2. Estimated Consumption					
(a) Use/Sales/ Distribution	2.1	8.9	9.8	10.2	10.2
(b) Transfer/Loss/ Disposal	-9.6	-4.5			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources			10.0		NA
4. End of Yr Stock	7.5	3.1	3.3	-3.3	NA
5. Desired End of Year Stock	NA	NA	6.8	6.8	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	3.6	9.6	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	3.6	9.6	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:09  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL JULY/90.

2a. ESTIMATED USE Year: 1990

QUANTITIES REPORTED BY DOCTORS AS GIVEN TO USERS, FOR THE PERIOD  
JULY-DEC/90.

2a. ESTIMATED USE Year: 1991

TOTAL DISTRIBUTION REPORTED BY PROMOTERS, AND DOCTORS, FROM 6  
PROJECTS: JAN-JUL: 7,014 CYCLES, AUGUST: 63, SEP-DEC: 1,918 CYCLES.  
BETTER CONTROLS WERE ESTABLISHED BEGINNING SEPT. IN ORDER TO  
ESTABLISH MORE REALISTIC GOALS. NO CONSUMPTION RECORDS ARE AVAILABLE.

2a. ESTIMATED USE Year: 1992

A 10% INCREASE HAS BEEN ESTIMATED, BASED ON NUMBER OF USERS TO BE  
SERVED THROUGH 3 NEW CLINICS. HOWEVER, THERE ARE NO CONSUMPTION  
RECORDS AVAILABLE YET, SO THIS FIGURE IS PROVISIONAL UNTIL REAL  
CONSUMPTION DATA IS COLLECTED.

2a. ESTIMATED USE Year: 1993

A 5% INCREASE HAS BEEN ESTIMATED. SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

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Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:10  
Prepared on: 03/17/92  
Modified on: 03/17/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY EMPRESA NACIONAL DE FERROCARRILS IN JULY/90 (FORMER ENTERPRISE PROJECT RECIPIENT).

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY FAMES: 500 CYCLES (LO-FEMENAL)  
BY MOH : 2,000 CYCLES OF OVIDON (NEOGYNON)  
2,000 CYCLES OF RIGEVIDON (MICROGYNON). BOTH  
ARE HUNGARIAN BRANDS.

3c. SHIPMENTS FROM OTHER SOURCES Year: 1992

THIS LOT OF 10,000 CYCLES EXPIRES IN 03/96. BRAND: MICROGYNON.

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:10  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	3.6	03/18/92	08/15/92
CPSD	9.6	09/18/92	02/15/93

Total to order: 13,200

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:10  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
IPPF/W	10.0	03/15/92

Total non AID shipments: 10,000

Country: Bolivia  
 Recipient: Cobreh-Sopacof, La Paz  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:07  
 Prepared on: 03/18/92  
 Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.0	54.4	51.3
2. Estimated Consumption					
(a) Use/Sales/ Distribution			41.6	81.1	81.1
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	0.0	-41.6	-26.7	NA
5. Desired End of Year Stock	NA	NA	54.1	54.1	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	96.0	78.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	96.0	78.0	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:07  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 1992. SEE CPT FOR COLORED SULTAN.

2a. ESTIMATED USE Year: 1992

A 20% INCREASE HAS BEEN ESTIMATED. TOTAL CONSUMPTION HAS BEEN PROJECTED AT 73,789 UNITS, OF WHICH 32,100 WILL BE COLORED SULTAN. SEE CPT FOR COLORED SULTAN.

2a. ESTIMATED USE Year: 1993

A 10% INCREASE HAS BEEN ESTIMATED. SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:07  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	96.0	02/16/92	07/15/92
CPSD	78.0	09/18/92	02/15/93

Total to order: 174,000

Country: Bolivia  
 Recipient: Cobreh-Sopacof, La Paz  
 Product: 52mm Colored Sultan  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:00  
 Prepared on: 03/17/92  
 Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	71.6	32.1	0.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	5.6	61.4	32.1		
(b) Transfer/Loss/ Disposal	-77.2	-9.9			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources		12.0			NA
4. End of Yr Stock	71.6	32.1	0.0	0.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:00  
Prepared on: 03/17/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 07/90.

2a. ESTIMATED USE Year: 1990

DISTRIBUTION FIGURE BASED ON REPORT FROM 5 PROJECTS. IT INCLUDES DISTRIBUTION FROM JULY-DEC/91 ONLY, AS PRODUCT WAS NOT AVAILABLE UNTIL 07/91.

2a. ESTIMATED USE Year: 1991

TOTAL DISTRIBUTION REPORTED BY 6 PROJECTS. JAN-AUG/91: 36,116 UNITS, AND SEP-DEC/91: 25,375 UNITS. CONDOMS ARE SOLD AT Bs\$0.10 PER UNIT (US\$0.026)

2a. ESTIMATED USE Year: 1992

A 20% INCREASE HAS BEEN ESTIMATED, BASED ON THE FACT THAT 3 NEW CLINICS WILL START OPERATING AROUND JULY/92. HOWEVER, THIS FIGURE IS PROVISIONAL UNTIL REAL CONSUMPTION DATA IS AVAILABLE, AND FIGURES CAN BE REVIEWED/ADJUSTED ACCORDINGLY. SEE CPT FOR NO LOGO NO COLOR CONDOMS

2a. ESTIMATED USE Year: 1993

SEE CPT FOR NO LOGO NON COLORED CONDOMS.

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY EMPRESA NACIONAL DE FERROCARRILS IN JULY/90 (NEWVERN RECIPIENT AND FORMER ENTERPRISE PROJECT ORGANIZATION).

Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:00

Prepared on: 03/17/92

Modified on: 03/18/92

2b. ESTIMATED LOSS

Year: 1991

TRANSFERRED BY THE MINISTRY OF HEALTH IN 11/91. BRAND ROSETEX, EXP.  
DATE: 01/92.

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Country: Bolivia  
Recipient: Cobreh-Sopacof, La Paz  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:07  
Prepared on: 03/17/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
IPPF/W	12.0	10/22/91

Total non AID shipments: 12,000

Country: Bolivia  
 Recipient: Centro de Investigacion, Educac. Y Serv.  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:43  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	167.9	19.9	47.8	78.1	50.1
2. Estimated Consumption					
(a) Use/Sales/ Distribution	98.0	24.9	27.3	28.0	28.0
(b) Transfer/Loss/ Disposal	50.0	-52.8	-57.6		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	19.9	47.8	78.1	50.1	NA
5. Desired End of Year Stock	NA	NA	14.0	14.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	62.4	38.4	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:43  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND ASSOCIATED DOCTORS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL DISTRIBUTION REPORTED BY ASSOCIATED DOCTORS AND PROMOTERS (INCLUDING EL ALTO). IT IS UNCERTAIN WHETHER THIS FIGURE REPRESENTS SALES OR NOT. CIES DID NOT HAVE A RELIABLE INVENTORY CONTROL SYSTEM AT THE TIME.

2a. ESTIMATED USE Year: 1991

TOTAL SALES REPORTED BY ASSOCIATED DOCTORS AND PROMOTERS. THIS FIGURE REFLECTS THE LOW ACCEPTANCE OF THIS PRODUCT. THIS CAN BE SEEN CLEARER NOW THAT CIES HAS BETTER INFO SYSTEM AND CAN ASSESS DEMAND MORE ACCURATELY. TOTAL USERS (NEW AND CONTINUING): 2,155.

2a. ESTIMATED USE Year: 1992

A 10% INCREASE HAS BEEN ESTIMATED, BASED ON THE FACT THAT ACCEPTANCE OF THIS METHOD IS LOW. CIES WILL TRY TO INCREASE USE OF THIS METHOD BY PROMOTING IT THROUGH THE PROMOTERS NETWORK. NO MAJOR INCREASE IN ACCEPTANCE IS EXPECTED.

2a. ESTIMATED USE Year: 1993

A 2.5% INCREASE HAS BEEN ESTIMATED. THIS FIGURE IS PROVISIONAL UNTIL REAL DEMAND AND CONSUMPTION DATA IS AVAILABLE FROM 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 15:44

Prepared on: 03/16/92

Modified on: 03/16/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED TO FAMES (48,000 UNITS). GIVEN OUT AS SAMPLES IN TALKS (16,400), AND RECEIVED FROM SERVIFAM-COCHABAMBA (14,400).

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY FAMES ON 08/01/91.

2b. ESTIMATED LOSS Year: 1992

TO BE TRANSFERRED BY FAMES IN 04/92.

Country: Bolivia  
 Recipient: Centro de Investigacion, Educac. Y Serv.  
 Product: 52mm Colored Sultan  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:08  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	351.1	282.1	35.1	140.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	246.9	348.0	326.1	140.0	
(b) Transfer/Loss/ Disposal	96.9	-59.0	-5.0		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	274.8	42.0	426.0		NA
4. End of Yr Stock	282.1	35.1	140.0	0.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	138.0		NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 0 Maximum stock (months): 0  
 1993 Minimum stock (months): 0 Maximum stock (months): 0

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:08  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND ASSOCIATED DOCTORS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL UNITS SOLD REPORTED BY PROMOTERS AND CLINICS.

2a. ESTIMATED USE Year: 1991

TOTAL NUMBER OF UNITS SOLD REPORTED BY 4 PROJECTS:  
PATHFINDER : 217,646 UNITS IPPF: 124,956 UNITS  
SHARED RISK: 288 UNITS  
FPIA : 5,170 UNITS TOTAL USERS (NEW AND CONT.): 20,426

2a. ESTIMATED USE Year: 1992

BASED ON THE CONSUMPTION FIGURE OF 1990, A 32% INCREASE HAS BEEN ESTIMATED, BASED ON THE ASSUMPTION THAT THE PROMOTERS AND THE "CONSULTORIO" SUPPORTED BY THE IPPF PROJECT WILL CONTINUE UNDER PATHFINDER. SEE TRIP REPORT FOR DETAILS ON CONSUMPTION FOR 1991.

2a. ESTIMATED USE Year: 1993

SEE CPT FOR NO LOGO CONDOMS.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:08  
Prepared on: 03/16/92  
Modified on: 03/16/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED TO FAMES (84,000 UNITS) AND SAMPLES USED IN TALKS (12,900 UNITS).

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY: PROSALUD (19,400 ON 09/09/91), MOH (12,000 ON 07/04/91), MOH (7,656 ON 07/18/91), MOH (20,000 BRAND ROSETEX ON 08/30/91).

2b. ESTIMATED LOSS Year: 1992

TRANSFERRED BY THE MINISTRY OF HEALTH ON 02/17/92 (KOREAN BRAND).

3c. SHIPMENTS FROM OTHER SOURCES Year: 1990

SHIPMENT OF 274,800 UNITS RECEIVED FROM FPIA ON 12/12/90.

3c. SHIPMENTS FROM OTHER SOURCES Year: 1992

A LETTER OF DONATION FROM PATHFINDER/BOSTON WAS SENT TO CIES ON 12/12/91. THE STATUS OF THIS SHIPMENT IS UNKNOWN, SO IT'S BEEN RECOMMENDED TO CIES AND USAID TO FOLLOW-UP ON THIS.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:39  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
FPIA	274.8	12/12/90
IPPF/W	42.0	10/29/91
PATH	426.0	05/30/92

Total non AID shipments: 742,800

Country: Bolivia  
 Recipient: Centro de Investigacion, Educac. Y Serv.  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:39  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.0	138.0	234.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution				210.0	350.0
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	0.0	0.0	-72.0	NA
5. Desired End of Year Stock	NA	NA	140.0	233.3	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	138.0	306.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	138.0	306.0	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:39  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 1993.

2a. ESTIMATED USE Year: 1993

TOTAL ESTIMATED CONSUMPTION FOR 1993 IS 350,000 UNITS. SINCE CIES WOULD HAVE 140,000 UNITS OF SULTAN CONDOMS, IT IS ESTIMATED THAT THE REMAINING 210,000 UNITS WILL BE COVERED WITH NO LOGO CONDOMS. TOTAL CONSUMPTION REPRESENTS A 10% INCREASE FROM 1992 TO 1993.

2a. ESTIMATED USE Year: 1994

SAME AS 1992. SEE CPT FOR COLORED SULTAN.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:39  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	138.0	05/18/92	10/15/92
CPSD	306.0	10/31/92	03/30/93

Total to order: 444,000

82

Country: Bolivia  
 Recipient: Centro de Investigacion, Educac. Y Serv.  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:41  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	21.5	22.2	5.2	3.8	1.2
2. Estimated Consumption					
(a) Use/Sales/ Distribution	2.1	1.9	2.6	2.6	2.6
(b) Transfer/Loss/ Disposal	-2.8	15.1			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources			1.2		NA
4. End of Yr Stock	22.2	5.2	3.8	1.2	NA
5. Desired End of Year Stock	NA	NA	1.3	1.3	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	2.4		NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:41  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND ASSOCIATED CLINICS (DOCTORS),  
ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL SALES REPORTED BY CLINICS AND ASSOCIATED DOCTORS. PILLS WERE NOT  
SOLD THROUGH PROMOTERS NETWORK UNTIL 1992.

2a. ESTIMATED USE Year: 1991

TOTAL CONSUMPTION REPORTED BY 4 PROJECTS:  
PATHFINDER : 833 CYCLES IPPF: 172 CYCLES  
SHARED RISK : 22 CYCLES  
FPIA : 940 CYCLES TOTAL USERS (NEW AND CONTINUING):960

2a. ESTIMATED USE Year: 1992

A 31% INCREASE HAS BEEN ESTIMATED, EXPECTING THAT THE CBD PROGRAMME  
WILL START SELLING PILLS TO SOME OF THE CONTINUING USERS. CIES PLANS  
TO INCREASE PROMOTION OF THIS METHOD AMONG THE ASSOCIATED DOCTORS.  
THIS FIGURE SHOULD BE REVIEWED ONCE REAL CONSUMPTION DATA IS AVAILABLE

2a. ESTIMATED USE Year: 1993

NO INCREASE HAS BEEN ESTIMATED UNTIL CONSUMPTION DATA IS AVAILABLE FOR  
1992. CIES HAS ALWAYS BEEN LOW IN PILLS.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:42  
Prepared on: 03/16/92  
Modified on: 03/16/92

2b. ESTIMATED LOSS Year: 1990

RECEIVED FROM FAMES: 4,000 CYCLES. TRANSFERRED TO FEPADÉ-COCHABAMBA:  
1,200 CYCLES. TOTAL TO BE ADDED TO PIPELINE: 2,800 CYCLES.

2b. ESTIMATED LOSS Year: 1991

20,600 CYCLES EXPIRED IN 03/91 (THESE CYCLES WERE SHIPPED BY FPIA IN  
1988) AND WILL BE DISPOSED OF. CIES RECEIVED 3,500 CYCLES FROM FAMES  
ON 08/01/91, AND 2,000 CYCLES FROM THE MOH ON 07/04/91 (1,000 OF  
RIGEVIDON AND 1,000 OF OVIDON).

3c. SHIPMENTS FROM OTHER SOURCES Year: 1992

A LETTER OF DONATION FROM PATHFINDER/BOSTON WAS RECEIVED ON 12/12/91.  
THE STATUS OF THIS SHIPMENT IS UNKNOWN.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:42  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
PATH	1.2	05/30/92

Total non AID shipments: 1,200

Country: Bolivia  
 Recipient: Centro de Investigacion, Educac. Y Serv.  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:39  
 Prepared on: 03/16/92  
 Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	1.5	3.8	3.7	5.2	2.3
2. Estimated Consumption					
(a) Use/Sales/ Distribution	2.3	2.6	3.1	3.5	3.5
(b) Transfer/Loss/ Disposal		-2.5			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	5.2		4.6		NA
4. End of Yr Stock	3.8	3.7	5.2	1.7	NA
5. Desired End of Year Stock	NA	NA	2.3	2.3	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		0.6	NA
(b) Surplus	NA	NA	3.0		NA
7. Amount to Schedule	NA	NA		0.6	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:39  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND ASSOCIATED DOCTORS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL NUMBER OF INSERTIONS REPORTED BY HEALTH CENTERS AND ASSOCIATED DOCTORS (TOTAL: 41)

2a. ESTIMATED USE Year: 1991

TOTAL NUMBER OF INSERTIONS REPORTED BY DOCTORS FROM 4 PROJECTS:  
PATHFINDER : 1,417 UNITS IPPF : 461 UNITS  
FPIA : 707 UNITS SHARED RISK: 77 UNITS.

2a. ESTIMATED USE Year: 1992

A 20% INCREASE HAS BEEN ESTIMATED, BASED ON PLANS TO EXPAND/EXTEND THE SERVICES/WORKING HOURS OF 5 CLINICS SPECIFICALLY, AND INCREASE PROMOTION OF THE METHOD THROUGH THE PROMOTERS. THIS FIGURE SHOULD BE MONITORED CLOSELY AND REVIEWED ACCORDING TO REAL CONSUMPTION COLLECTED

2a. ESTIMATED USE Year: 1993

A 12% HAS BEEN ESTIMATED, EXPECTING THAT EXPANSION OF CLINICS WILL TAKE PLACE IN 1992. THIS FIGURE IS PROVISIONAL AND SHOULD BE REVIEWED WHEN DATA ON CONSUMPTION FOR 1992 IS COLLECTED.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 15:40

Prepared on: 03/16/92

Modified on: 03/16/92

2b. ESTIMATED LOSS

Year: 1991

TRANSFERENCES RECEIVE FROM FAMES (2,000 UNITS ON 08/08/91) AND THE MOH (500 UNITS ON 01/91).

3c. SHIPMENTS FROM OTHER SOURCES

Year: 1992

APPROXIMATE DATE TO ARRIVE IN-COUNTRY: 05/30/92.

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:40  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	0.6	09/02/92	01/30/93

Total to order: 600

Country: Bolivia  
Recipient: Centro de Investigacion, Educac. Y Serv.  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:40  
Prepared on: 03/16/92  
Modified on: 03/16/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
FPIA	3.8	02/20/90
FPIA	1.4	12/12/90
PATH	4.6	05/15/92

Total non AID shipments: 9,800

Country: Bolivia  
 Recipient: Fundacion Asistencia Medico Social  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:25  
 Prepared on: 03/24/92  
 Modified on: 03/26/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	185.8	75.8	103.4	415.0	289.1
2. Estimated Consumption					
(a) Use/Sales/ Distribution	158.0	87.6	96.4	106.7	106.7
(b) Transfer/Loss/ Disposal	-48.0	105.6	72.0	19.2	
3. New Supply					
(a) AID Shipments Received			168.0	NA	NA
(b) Future AID Shipments	NA	220.8	312.0		NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	75.8	103.4	415.0	289.1	NA
5. Desired End of Year Stock	NA	NA	90.3	71.1	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	326.4	216.0	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

*92*

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:25  
Prepared on: 03/24/92  
Modified on: 03/26/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND PERIPHERY, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL DISTRIBUTION REPORTED BY ASSOCIATED DOCTORS. THIS FIGURE DOES NOT REFLECT REAL USAGE, AS THIS METHOD WAS WIDELY DISTRIBUTED AMONG DIFFERENT INSTITUTIONS (POLICE, ARMED FORCES, ETC.).

2a. ESTIMATED USE Year: 1991

TOTAL DISTRIBUTION REPORTED BY ASSOCIATED DOCTORS.

2a. ESTIMATED USE Year: 1992

A 10% INCREASE IN CONSUMPTION HAS BEEN ESTIMATED, BASED ON THE NEW PROMOTION CAMPAIGNS TO BE INITIATED AROUND MAY/92. ACCEPTANCE OF THIS METHOD IS LOW.

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:25  
Prepared on: 03/24/92  
Modified on: 03/26/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED FROM CIES IN 05/90.

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED TO THE FOLLOWING INSTITUTIONS: CAJA NAC.(9,000), CIES (52,800), FUND. SAN GABRIEL (28,800), MATERNITY URQUIDI (5,000), CIASE (5,000), COBREH-SOPACOF (5,000).

2b. ESTIMATED LOSS Year: 1992

14,400 UNITS WILL BE TRANSFERRED TO CAJA NACIONAL, AND 57,600 UNITS TO CIES, BOTH IN 04/92.

2b. ESTIMATED LOSS Year: 1993

TO BE TRANSFERRED TO CAJA NACIONAL DE SALUD BY 04/93.

3a. AID SHIPMENTS RECEIVED Year: 1991

THE SHIPMENT OF 220,800 TABLETS WAS RECEIVED ON 07/23/91.

Country: Bolivia  
 Recipient: Fundacion Asistencia Medico Social  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:05  
 Prepared on: 03/24/92  
 Modified on: 03/24/92

CY1992 Contraceptive Requirements Estimate  
 Known AID Shipments

NewVern ID	PO	Bill of Lading	Approximate Date Shipped	Quantity Shipped	Date Received	Quant Recei
3698/1.	MWHS-0416.2	00111484082	06/03/91	220,800		
4075/1	QA599	05110004396	12/06/91	168,000	01/06/92	168,
4075/2	NV059	NONE	01/31/92	312,000		

Total known AID shipments : 700,800.0

NB Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

95

Country: Bolivia  
 Recipient: Fundacion Asistencia Medico Social  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 15:02  
 Prepared on: 03/18/92  
 Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	50.7	32.8	9.9	17.2	45.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution	23.1	10.1	22.2	24.4	24.4
(b) Transfer/Loss/ Disposal	-5.2	18.8	8.9		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA	6.0	38.4	52.8	NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	32.8	9.9	17.2	45.6	NA
5. Desired End of Year Stock	NA	NA	16.3	16.3	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	1.2	28.8	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:02  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND PERIPHERY, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL CONSUMPTION REPORTED BY ASSOCIATED DOCTORS. NUMBER OF USERS (NEW AND CONTINUING): 2,118.

2a. ESTIMATED USE Year: 1992

A 10% INCREASE HAS BEEN ESTIMATED, BASED ON GOALS SET BY THE DIRECTOR OF THE PROGRAM. FIGURE SHOULD BE REVIEWED/ADJUSTED ONCE CONSUMPTION DATA IS AVAILABLE.

2a. ESTIMATED USE Year: 1993

A 10% INCREASE HAS BEEN ESTIMATED. SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

2b. ESTIMATED LOSS Year: 1990

RECEIVED FROM CIES (4,000) AND FEPADE (1,200).

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 15:02

Prepared on: 03/18/92

Modified on: 03/18/92

2b. ESTIMATED LOSS

Year: 1991

32,800 UNITS WERE DISTRIBUTED TO OTHER INSTITUTIONS, BEFORE THEY EXPIRED. THE SHIPM. OF 6,000 WAS DISTRIBUTED TO CIES (3,500), FSGAB.(500), PROSALUD (1,000), CIASE(500), COBREH(500). FAMES RECEIVED 10,000 OF RIGEVIDON (MICROGYNON) AND 10,000 OVIDON (NEO) FROM MOH.

2b. ESTIMATED LOSS

Year: 1992

THIS QUANTITY WILL BE DISTRIBUTED AS FOLLOWS: MOTHERCARE-COCHABAMBA (1,700), PROSALUD-LA PAZ (3,600), SOPACOF (3,600). APPROXIMATE DATES: 05/92.

2b. ESTIMATED LOSS

Year: 1993

THIS QUANTITY WILL BE TRANSFERRED TO OTHER NGOs. DISTRIBUTION CHART HAS NOT BEEN DEFINED.

3a. AID SHIPMENTS RECEIVED

Year: 1991

THE SHIPMENT OF 6,000 CYCLES WAS RECEIVED ON 08/01/91.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:03  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Known AID Shipments

NewVern ID	PO	Bill of Lading	Approximate Date Shipped	Quantity Shipped	Date Received	Quant Recei
3696/1	MWHS-0418.2	00111484082	06/03/91	6,000		
4282/1	MWHS-0578	COTRANS	01/09/92	38,400		
4282/2	?		12/31/92	52,800		

Total known AID shipments : 97,200.0

NB Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

Country: Bolivia  
 Recipient: Fundacion Asistencia Medico Social  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 15:00  
 Prepared on: 03/18/92  
 Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	1.8	3.0	3.4	3.7	6.3
2. Estimated Consumption					
(a) Use/Sales/ Distribution	4.1	4.6	5.1	5.6	5.6
(b) Transfer/Loss/ Disposal	-0.5	2.0	5.2		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA	7.0	8.8	8.2	NA
(c) Shipments from Other Sources	4.8				NA
4. End of Yr Stock	3.0	3.4	1.9	6.3	NA
5. Desired End of Year Stock	NA	NA	3.7	3.7	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	1.8		NA
(b) Surplus	NA	NA		2.6	NA
7. Amount to Schedule	NA	NA	1.8		NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:00  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND PERIPHERY, ACCORDING TO REPORTS RECEIVED FROM ASSOCIATED DOCTORS.

2a. ESTIMATED USE Year: 1990

TOTAL NUMBER OF INSERTIONS REPORTED BY ASSOCIATED DOCTORS (85 IN THE COUNTRY), ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE. NEW USERS REPORTED IN 1990: 3,860.

2a. ESTIMATED USE Year: 1991

TOTAL NUMBER OF INSERTIONS REPORTED BY ASSOCIATED DOCTORS. COST OF COPPER T TO DOCTORS IS US\$1.00.

2a. ESTIMATED USE Year: 1992

A 10% INCREASE HAS BEEN ESTIMATED BASED ON EXPECTED NUMBER OF NEW USERS. THE STRATEGY OF SELLING THE IUDS TO ASSOCIATED DOCTORS HAS BEEN BENEFICIAL TO FAMES, AND DEMAND HAS NOT DECREASED DUE TO IT.

2a. ESTIMATED USE Year: 1993

A 10% INCREASE HAS BEEN ESTIMATED, BASED ON PREVIOUS CONSUMPTION. THIS FIGURE SHOULD BE REVIEWED ONCE DATA ON CONSUMPTION IS AVAILABLE FOR 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:00  
Prepared on: 03/18/92  
Modified on: 03/18/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY THE MINISTRY OF HEALTH ON 07/18/90.

2b. ESTIMATED LOSS Year: 1991

RECEIVED FROM THE MOH: 942 UNITS (04/09/91). PART OF THE 7,000 UNITS WERE DISTRIBUTED AS FOLLOWS: CIES (2,000), CAJA NAC.(300), MOH (500), MATERNITY URQUIDI (300), PROSALUD (200), CIASE (100), SOPACOF (200), AND ME.DI.CO (400). ADDED BACK TO PIPELINE AFTER INVENT. ADJ.:1,000 U.

2b. ESTIMATED LOSS Year: 1992

OF THE SHIPMENT OF 8,800 UNITS, 5,200 UNITS WILL BE DISTRIBUTED AS FOLLOWS: FUND. SAN GABRIEL (1,000), PROSALUD LA PAZ (200), SOPACOF (1,600), AND MOTHERCARE-COCHABAMBA (2,400).

2b. ESTIMATED LOSS Year: 1993

THIS QUANTITY OF 8,200 UNITS (SHIPMENT SCHEDULED) WILL BE DISTRIBUTED AMONG ALL NGOs. SCHEDULE HAS NOT BEEN DEFINED YET.

3a. AID SHIPMENTS RECEIVED Year: 1991

SHIPMENT OF 7,000 UNITS WAS RECEIVED ON 07/23/91.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:01  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Known AID Shipments

NewVern ID	PO	Bill of Lading	Approximate Date Shipped	Quantity Shipped	Date Received	Quant Recei
3697/1	MWHS-0417.2	00111484082	06/03/91	7,000		
4284/1	MWHS-0577	COTRANS	01/09/92	8,800		
4284/2	?		12/31/92	8,200		

Total known AID shipments : 24,000.0

NB Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 15:01

Prepared on: 03/18/92

Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	1.8	03/18/92	08/15/92

Total to order: 1,800

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 15:01  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
-----	-----	-----
FPIA	4.8	05/20/90

Total non AID shipments: 4,800

Country: Bolivia  
 Recipient: Fundacion Asistencia Medico Social  
 Product: 52mm Colored Sultan  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 14:55  
 Prepared on: 03/18/92  
 Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	182.4	306.6	69.9	0.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	199.8	243.9	4.0		
(b) Transfer/Loss/ Disposal	-324.0	-7.2	65.9		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	306.6	69.9	0.0	0.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 14:55  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE. PERIPHERY WAS ESTIMATED.

2a. ESTIMATED USE Year: 1990

TOTAL DISTRIBUTION REPORTED BY ASSOCIATED DOCTORS. NUMBER OF USERS REPORTED: 4,848.

2a. ESTIMATED USE Year: 1991

243,963 UNITS WERE REPORTED AS DISTRIBUTED BY ASSOCIATED DOCTORS. CONDOMS ARE NOT SOLD.

2a. ESTIMATED USE Year: 1992

A 3% INCREASE HAS BEEN ESTIMATED, TAKING INTO ACCOUNT THAT ENOUGH SUPPLIES OF CONDOMS ARE IN COUNTRY FROM OTHER SOURCES. FAMES WILL CONCENTRATE MORE ON ITS OWN TARGET POPULATION, WHICH IS THE CLIENTELE AT THE ASSOCIATED DOCTORS' OFFICES. SEE CPT FOR NO LOGO NON COLORED.

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY CIES (84,000) AND MOH (240,000 - BRAND ROSETEX, EXP. DATE: 01/92).

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED FROM THE MOH IN 05/91.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 14:55

Prepared on: 03/18/92

Modified on: 03/18/92

2b. ESTIMATED LOSS

Year: 1992

65,800 UNITS OF ROSETEX CONDOMS, TRANSFERRED FROM THE MOH, EXPIRED IN 01/92. THIS QUANTITY WILL HAVE TO BE DISPOSED OF.

108

Country: Bolivia  
 Recipient: Fundacion Asistencia Medico Social  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
 Time: 14:59  
 Prepared on: 03/18/92  
 Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	<u>CY1990 Actual</u>	<u>CY1991 Actual</u>	<u>CY1992 Est</u>	<u>CY1993 Est</u>	<u>CY1994 Est</u>
1. Beginning Stock	0.0	0.0	0.0	186.0	181.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution			246.0	275.0	275.0
(b) Transfer/Loss/ Disposal			126.0	84.0	
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA		264.0	84.0	NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	0.0	-108.0	-89.0	NA
5. Desired End of Year Stock	NA	NA	267.3	183.3	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	378.0	270.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	294.0	270.0	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92  
Time: 14:59  
Prepared on: 03/18/92  
Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 1992.

2a. ESTIMATED USE Year: 1992

A 3% INCREASE HAS BEEN ESTIMATED. SEE CPT FOR COLORED SULTAN.

2a. ESTIMATED USE Year: 1993

A 10% INCREASE HAS BEEN ESTIMATED. THIS FIGURE IS PROVISIONAL UNTIL CONSUMPTION DATA IS AVAILABLE AND NEW SALES STRATEGIES ARE ESTABLISHED IN ORDER TO ASSESS REAL DEMAND.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

2b. ESTIMATED LOSS Year: 1992

A TOTAL OF 126,000 UNITS WILL BE DISTRIBUTED TO CAJA NACIONAL DE SALUD (12,000), FUND. SAN GABRIEL (6,000), CIES (84,000), PROSALUD IN LA PAZ (6,000), SOPACOF (18,000). APPROXIMATE DATE: 05/92.

2b. ESTIMATED LOSS Year: 1993

TO BE TRANSFERRED TO OTHER NGOS. DISTRIBUTION CHART NOT DESIGNED YET.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/25/92

Time: 14:59

Prepared on: 03/18/92

Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
Known AID Shipments

NewVern ID	PO	Bill of Lading	Approximate Date Shipped	Quantity Shipped	Date Received	Quar Rece
4285/1	MWHS-0576	COTRANS	01/09/92	264,000		
4285/2	?		12/31/92	34,000		

Total known AID shipments : 348,000.0

NB Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

Country: Bolivia  
Recipient: Fundacion Asistencia Medico Social  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Ncra Quesada, FPLM II Project

Date: 03/25/92

Time: 14:59

Prepared on: 03/18/92

Modified on: 03/18/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	294.0	03/18/92	08/15/92
CPSD	270.0	09/18/92	02/15/93

Total to order: 564,000

Country: Bolivia  
 Recipient: PROSALUD  
 Product: 52mm Non-Colored Blue-Gold  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:10  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.0	24.6	96.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution			114.0	240.0	276.0
(b) Transfer/Loss/ Disposal			11.4	24.0	27.0
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	0.0	-125.4	-239.4	NA
5. Desired End of Year Stock	NA	NA	24.0	96.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	150.0	336.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	150.0	336.0	NA

1992 Minimum stock (months): 0 Maximum stock (months): 0  
 1993 Minimum stock (months): 0 Maximum stock (months): 3

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this product is not registered in country. Before ordering this product, USAID should cable S&T/POP/CPSD indicating that registration is either complete or not required. \*\*\*\*

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

113

Country: Bolivia  
Recipient: PROSALUD  
Product: 52mm Non-Colored Blue-Gold  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:11  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 06/92

2a. ESTIMATED USE Year: 1992

PROJECTED SALES PROVIDED BY MR. WALTER SORIANO AND MR. DARIO MEJIA, IN CHARGE OF THE SOCIAL MARKETING PROJECT IN BOLIVIA. THIS PRODUCT WILL BE INTRODUCED UNDER THE BRAND "PROTECTOR".

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

2b. ESTIMATED LOSS Year: 1992

FREE SAMPLES TO BE DISTRIBUTED AS PART OF THE PROMOTION CAMPAIGN.

2b. ESTIMATED LOSS Year: 1993

SAME AS 1992.

114

Country: Bolivia  
Recipient: PROSALUD  
Product: 52mm Non-Colored Blue-Gold  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:12  
Prepared on: 03/14/92  
Modified on: 03/14/92

2b. ESTIMATED LOSS Year: 1994

SAME AS 1992.

115

Country: Bolivia  
Recipient: PROSALUD  
Product: 52mm Non-Colored Blue-Gold  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:12  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Known AID Shipments

Total known AID shipments : 0.0

!B Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

Country: Bolivia  
Recipient: PROSALUD  
Product: 52mm Non-Colored Blue-Gold  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:13  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx.	
		Ship Date	Date Needed
CPSD	150.0	01/17/92	06/15/92
CPSD	204.0	09/18/92	02/15/93
CPSD	132.0	08/02/93	12/30/93

Total to order: 486,000

Country: Bolivia  
 Recipient: PROSALUD  
 Product: 52mm Colored Sultan  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:07  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	57.0	54.1	26.3	20.3	13.3
2. Estimated Consumption					
(a) Use/Sales/ Distribution	2.9	6.9	6.0	7.0	7.0
(b) Transfer/Loss/ Disposal		20.9			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	54.1	26.3	20.3	13.3	NA
5. Desired End of Year Stock	NA	NA	4.7	4.7	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	18.0	6.0	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

1/8

Country: Bolivia  
Recipient: PROSALUD  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:07  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND 15 HEALTH CENTERS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

CONSUMPTION REPORTED BY 15 HEALTH CENTERS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1991

TOTAL CONSUMPTION REPORTED BY 15 HEALTH CENTERS AND 11 PROMOTERS: 4,480 UNITS (TOTAL USERS: NEW: 206, CONTINUING: 346). DISTRIBUTED TO 10 PRIVATE PHYSICIANS, UNDER THE IPPF PROJECT: 2,420 UNITS.

2a. ESTIMATED USE Year: 1992

THE IPPF PROJECT WAS DISCONTINUED IN 10/91. ESTIMATIONS FOR 1992 HAVE BEEN DONE BASED ON PAST CONSUMPTION REPORTED BY HEALTH CENTERS AND PROMOTERS. A 35% INCREASE HAS BEEN ESTIMATED BASED ON THIS FIGURE (SEE FOOTNOTE FOR 1991).

2a. ESTIMATED USE Year: 1993

A 16% INCREASE HAS BEEN ESTIMATED. THIS FIGURE IS PROVISIONAL UNTIL DEMAND IS ASSESSED IN 1992, UNDER THE NEW SERVICES EXPANSION PLANS.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

119

Country: Bolivia  
Recipient: PROSALUD  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:08  
Prepared on: 03/14/92  
Modified on: 03/14/92

2b. ESTIMATED LOSS

Year: 1991

20,000 UNITS WERE TRANSFERRED TO CIES ON 09/09/91, AND 900 UNITS WERE GIVEN OUT AS SAMPLES DURING TALKS.

120

Country: Bolivia  
 Recipient: PROSALUD  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:14  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.7	2.0	1.5	0.8	0.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution	0.4	1.6	0.7	0.8	0.8
(b) Transfer/Loss/ Disposal	-0.5	-0.5			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	1.2	0.6			NA
4. End of Yr Stock	2.0	1.5	0.8	0.0	NA
5. Desired End of Year Stock	NA	NA	0.5	0.5	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		0.6	NA
(b) Surplus	NA	NA	0.4		NA
7. Amount to Schedule	NA	NA		0.6	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8

1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

121

Country: Bolivia  
Recipient: PROSALUD  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:15  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND PERIPHERY (15 HEALTH CENTERS).

2a. ESTIMATED USE Year: 1990

TOTAL NUMBER OF INSERTIONS REPORTED BY 15 HEALTH CENTERS. NUMBER OF DOCTORS TRAINED IN IUD INSERTION: 26.

2a. ESTIMATED USE Year: 1991

INSERTIONS REPORTED BY 15 HEALTH CENTERS: 571. DISTRIBUTED TO PRIVATE PHYSICIANS UNDER IPPF PROJECT: 985 UNITS. GIVEN OUT AS SAMPLES FOR TALKS AND TRAINING: 49.

2a. ESTIMATED USE Year: 1992

A 22.5% INCREASE HAS BEEN ESTIMATED, BASED ON THE TOTAL # OF INSERTIONS REPORTED BY 15 HEALTH CENTERS IN 1991 (571 INSERTIONS). SINCE THE IPPF PROJECT FINISHED IN 10/91, THE CONSUMPTION FIGURE REPORTED UNDER IT (985 UNITS) WAS NOT TAKEN INTO ACCOUNT.

2a. ESTIMATED USE Year: 1993

A 14% INCREASE HAS BEEN ESTIMATED. THIS FIGURE IS PROVISIONAL AND SHOULD BE ADJUSTED ONCE DEMAND IN 1992 HAS BEEN ASSESSED.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

122

Country: Bolivia  
Recipient: PROSALUD  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:16  
Prepared on: 03/14/92  
Modified on: 03/14/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY THE MOH ON 03/09/90. EXPIRY DATE: 01/01/91.

2b. ESTIMATED LOSS Year: 1991

TRANSFERRED BY: COF: 1,000 UNITS (ON 05/15/91),  
FAMES: 200 UNITS (08/08/91), BOTH ADDED TO PIPELINE.  
EXPIRED IUDS: 418 UNITS (FROM PROSALUD, 04/90)  
278 UNITS (FROM QUANTITY TRANSFERRED BY MOH- 01/01/90)

3c. SHIPMENTS FROM OTHER SOURCES Year: 1990

EXPIRY DATE: 01/93

3c. SHIPMENTS FROM OTHER SOURCES Year: 1991

EXPIRY DATE: 10/93.

122

Country: Bolivia  
Recipient: PROSALUD  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:18  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
FPIA	0.4	07/04/90
FPIA	0.8	11/11/90
PATH	0.6	10/16/91
PATH	0.6	01/30/93

Total non AID shipments: 2,400

Country: Bolivia  
Recipient: PROSALUD  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:18  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Other Sources Shipping Schedule

Source	Quantity	Receive Received Date
PATH	0.6	01/30/93

Total to order: 600

Country: Bolivia  
 Recipient: PROSALUD  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:19  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	15.7	18.4	25.7	10.7	11.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	6.9	13.6	15.0	16.5	16.5
(b) Transfer/Loss/ Disposal		6.7			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	9.6	27.6			NA
4. End of Yr Stock	18.4	25.7	10.7	-5.8	NA
5. Desired End of Year Stock	NA	NA	11.0	11.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		16.8	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA		16.8	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

126

Country: Bolivia  
Recipient: PROSALUD  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:20  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND 15 HEALTH CENTERS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL CONSUMPTION (SALES) REPORTED BY 15 HEALTH CENTERS.

2a. ESTIMATED USE Year: 1991

TOTAL DISTRIBUTED TO PRIVATE PHYSICIANS UNDER IPPF PROJECT: 1,020 CYCLES. TOTAL SALES REPORTED BY 15 HEALTH CENTERS: 12,615 CYCLES. TOTAL NUMBER OF USERS REPORTED: NEW: 2,436, CONTINUING: 10,114.

2a. ESTIMATED USE Year: 1992

A 25% INCREASE HAS BEEN ESTIMATED, TAKING INTO ACCOUNT THE HIGH GROWTH PROJECTED BY PROSALUD (IN TERMS OF # OF NEW USERS). SINCE THE IPPF PROJECT WAS DISCONTINUED IN 10/91, THE CYCLES CONSUMED BY IPPF HAVE TO BE DEDUCTED FOR 1992. SEE FOOTNOTE FOR 1991.

2a. ESTIMATED USE Year: 1993

A 10% INCREASE HAS BEEN ESTIMATED. THIS FIGURE IS PROVISIONAL UNTIL MORE RELIABLE DATE IS AVAILABLE, ONCE THE PROJECT WITH PATHFINDER IS DEFINED, AND DEMAND IS BETTER ASSESSED.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

127

Country: Bolivia  
Recipient: PROSALUD  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:21  
Prepared on: 03/14/92  
Modified on: 03/14/92

2b. ESTIMATED LOSS Year: 1991

TRANSFERENCES RECEIVED: COF: 1,200 CYCLES (05/15/91), FAMES: 1,000 ON 08/08/91. 100 CYCLES WERE USED FOR SAMPLES DURING TRAINING SESSIONS, AND 8,834 UNITS EXPIRED IN 12/90, AND WERE DISPOSED OF.

3c. SHIPMENTS FROM OTHER SOURCES Year: 1991

THIS LOT OF 27,600 CYCLES EXPIRE IN 11/95.

Country: Bolivia  
Recipient: PROSALUD  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:22  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Date	
	Received/ Desired	Received/ Desired
FPIA	9.6	11/11/90
PATH	27.6	10/16/91
PATH	16.8	01/30/93

Total non AID shipments: 54,000

Country: Bolivia  
Recipient: PROSALUD  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:23  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Other Sources Shipping Schedule

Source	Quantity	Received	Date
PATH	16.8	01/30/93	

Total to order: 16,800

120

Country: Bolivia  
 Recipient: PROSALUD  
 Product: Ovrette  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:31  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.8	3.7	2.9	2.0	1.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	0.7	0.8	0.9	1.0	1.0
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	3.6				NA
4. End of Yr Stock	3.7	2.9	2.0	1.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	2.4	1.2	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 0 Maximum stock (months): 0  
 1993 Minimum stock (months): 0 Maximum stock (months): 0

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this product is not registered in country. Before ordering this product, USAID should cable S&T/POP/CPSD indicating that registration is either complete or not required. \*\*\*\*

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: PROSALUD  
Product: Ovrette  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:33  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND 15 HEALTH CENTERS.

2a. ESTIMATED USE

Year: 1990

REPORTED CONSUMPTION BY 15 HEALTH CENTERS AND 10 PROMOTERS.

2a. ESTIMATED USE

Year: 1991

TOTAL SALES REPORTED BY 15 HEALTH CENTERS AND 10 PROMOTERS, ACCORDING TO RECORDS KEPT AT CENTRAL WAREHOUSE.

2a. ESTIMATED USE

Year: 1992

HIGH INCREASE IN CONSUMPTION IS NOT EXPECTED, AS NO FUTURE OFFER OF THIS PRODUCT WILL BE AVAILABLE, AND ONLY A FEW/SELECTED LACTATING MOTHERS RECEIVE THIS PRODUCT.

2a. ESTIMATED USE

Year: 1993

SAME AS 1992.

2a. ESTIMATED USE

Year: 1994

SAME AS 1992

Country: Bolivia  
Recipient: PROSALUD  
Product: Ovrette

Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92

Time: 18:33  
Prepared on: 03/14/92  
Modified on: 03/14/92

3c. SHIPMENTS FROM OTHER SOURCES            Year: 1990

EXPIRY DATE: 08/94.

Country: Bolivia  
Recipient: PROSALUD  
Product: Ovrette  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:35  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Date	
	Received/ Desired	Received/ Desired
FPIA	3.6	11/22/90

Total non AID shipments: 3,600

136

Country: Bolivia  
 Recipient: PROSALUD  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:36  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	8.2	15.4	15.7	4.7	1.7
2. Estimated Consumption					
(a) Use/Sales/ Distribution	1.4	4.5	2.5	3.0	3.0
(b) Transfer/Loss/ Disposal	-3.8		8.5		
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	4.8	4.8			NA
4. End of Yr Stock	15.4	15.7	4.7	1.7	NA
5. Desired End of Year Stock	NA	NA	2.0	2.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	4.8		NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

135

Country: Bolivia  
Recipient: PROSALUD  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:37  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BALANCE ON HAND AT CENTRAL WAREHOUSE AND 15 HEALTH CENTERS, ACCORDING TO RECORDS KEPT AT CENTRAL OFFICE.

2a. ESTIMATED USE Year: 1990

TOTAL SALES REPORTED BY 15 HEALTH CENTERS AND 10 PROMOTERS.

2a. ESTIMATED USE Year: 1991

SALES REPORTED BY CENTERS AND PROMOTERS : 2,022 UNITS  
DISTRIBUTED BY PRIVATE PHYSICIANS (IPPF PROJECT): 2,510 UNITS  
-----

2a. ESTIMATED USE Year: 1992

A 25% INCREASE HAS BEEN ESTIMATED, BASED ON THE TOTAL CONSUMPTION REPORTED BY THE CENTERS AND PROMOTERS DURING 1991 (2,022 UNITS). THE QUANTITY DISTRIBUTED BY THE IPPF PROJECT WAS NOT INCLUDED FOR THE PROJECTIONS, AS THE PROJECT ENDED IN 10/91.

2a. ESTIMATED USE Year: 1993

A 20% INCREASE HAS BEEN ESTIMATED BASED ON PROSALUD'S EXPANSION PLANS. THIS FIGURE IS PROVISIONAL AND SHOULD BE REVIEWED ONCE DEMAND HAS BEEN ASSESSED MORE ACCURATELY.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

136

Country: Bolivia  
Recipient: PROSALUD  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:38  
Prepared on: 03/14/92  
Modified on: 03/14/92

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED BY COF (09/90) : 4,800 UNITS  
EXPIRED IN 09/90 : 1,000 UNITS

-----  
NET AMOUNT ADDED TO PIPELINE: 3,800 UNITS

2b. ESTIMATED LOSS Year: 1992

7,545 TABLETS EXPIRED AT THE CENTRAL WAREHOUSE AND 966 UNITS AT THE  
CENTERS. EXPIRY DATE: 12/91. BOTH QUANTITIES WILL BE DISPOSED OF.

Country: Bolivia  
Recipient: PROSALUD  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:39  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Date	
	Received/ Desired	Received/ Desired
FPIA	4.8	09/05/90
PATH	4.8	10/16/91

Total non AID shipments: 9,600

Country: Bolivia  
 Recipient: PROSALUD  
 Product: Noriday 1+50, CSM  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:27  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.0	49.3	46.2
2. Estimated Consumption					
(a) Use/Sales/ Distribution			60.1	65.0	60.0
(b) Transfer/Loss/ Disposal			7.0	6.5	6.0
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA		116.4		NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	0.0	49.3	-22.2	NA
5. Desired End of Year Stock	NA	NA	49.8	46.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		68.4	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA		68.4	NA

1992 Minimum stock (months): 4 Maximum stock (months): 8  
 1993 Minimum stock (months): 4 Maximum stock (months): 8

Lead time (months): 5

Country: Bolivia  
Recipient: PROSALUD  
Product: Noriday 1+50, CSM  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:28  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1990

UP TO 1992, ABENDROTH HAD ALL STOCKS OF NORIDAY. THIS PRODUCT WAS AVAILABLE TO PROSALUD BEGINNING 1992.

2a. ESTIMATED USE

Year: 1992

TOTAL ESTIMATED SALES PROJECTED BY PROSALUD'S SOCIAL MARKETING DIRECTOR (W. SORIANO) AND MR. DARIO MEJIA, REGIONAL CONSULTANT FOR SOMARC: 70,000 CYCLES. 9,900 CYCLES WILL BE SOLD DIRECTLY BY ABENDROTH. THE REMAINING 60,100 CYCLES WILL BE DISTRIBUTED BY PROSALUD

2a. ESTIMATED USE

Year: 1993

SAME AS 1992.

2a. ESTIMATED USE

Year: 1994

SAME AS 1992.

2b. ESTIMATED LOSS

Year: 1992

SAMPLES FOR PRIVATE PHYSICIANS, AS PART OF THE PROMOTION CAMPAIGN FOR THE PRODUCT.

2b. ESTIMATED LOSS

Year: 1993

SAME AS 1992.

Country: Bolivia

Recipient: PROSALUD

Product: Noriday 1+50, CSM

Prepared by: Nora Quesada, FPLM II Project

Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92

Time: 18:29

Prepared on: 03/14/92

Modified on: 03/14/92

2b. ESTIMATED LOSS

Year: 1994

SAME AS 1992.

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Country: Bolivia  
Recipient: PROSALUD  
Product: Noriday 1+50, CSM  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:29  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Known AID Shipments

NewVern ID	PO	Bill of Lading	Approximate Date Shipped	Quantity Shipped	Date Received	Quantity Received
4330/1	MWHS-0595	COTRANS	01/09/92	75,600		0
4331/1	MWHS-0596	COTRANS	01/09/92	40,800		0

Total known AID shipments : 116,400.0

NB Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

Country: Bolivia  
Recipient: PROSALUD  
Product: Noriday 1+50, CSM  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:30  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

		Approx.	
Source	Quantity Desired	Ship Date	Date Needed
CPSD	68.4	09/18/92	<del>12/30/93</del>
Total to order:	68,400		

Country: Bolivia  
 Recipient: PROSALUD  
 Product: Microgynon  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:23  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.0	16.4	19.8
2. Estimated Consumption					
(a) Use/Sales/ Distribution			40.0	65.0	80.0
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	0.0	-40.0	-48.6	NA
5. Desired End of Year Stock	NA	NA	16.3	20.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	56.4	68.4	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	56.4	68.4	NA

1992 Minimum stock (months): 0 Maximum stock (months): 3  
 1993 Minimum stock (months): 0 Maximum stock (months): 3

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this product is not registered in country. Before ordering this product, USAID should cable S&T/POP/CPSD indicating that registration is either complete or not required. \*\*\*\*

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: PROSALUD  
Product: Microgynon  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:25  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1990

THIS PRODUCT WAS AVAILABLE BY 12/91. AN AGREEMENT BETWEEN SCHERING-BOLIVIA AND PROSALUD STATED THAT SCHERING WILL BUY, IMPORT, AND DISTRIBUTE THE MICROGYNON UNDER THE BRAND NAME "MINIGYNON". PROSALUD-SOMARC WOULD DO THE PROMOTION, PACKING, AND PRICING.

2a. ESTIMATED USE

Year: 1992

PROJECTED SALES PROVIDED BY MR. WALTER SORIANO, SOMARC REPRESENTATIVE IN SANTA CRUZ. IT IS UNDERSTOOD THAT 20,000 UNITS THAT WERE DISTRIBUTED TO PHARMACIES BETWEEN JAN-MARCH/92 WERE SOLD DURING THAT PERIOD. STOCKOUTS ARE REPORTED BY PHARMACIES. NO REPORTS ARE AVAILABLE

2a. ESTIMATED USE

Year: 1993

SAME AS 1992.

2a. ESTIMATED USE

Year: 1994

SAME AS 1992.

145

Country: Bolivia  
Recipient: PROSALUD  
Product: Microgynon  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:26  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
LOCAL	56.4	06/15/92
LOCAL	68.4	01/15/93

Total non AID shipments: 124,800

10/10

Country: Bolivia  
Recipient: PROSALUD  
Product: Microgynon  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:27  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Other Sources Shipping Schedule

Source	Quantity Received	Receive Date
LOCAL	56.4	06/15/92
LOCAL	68.4	01/15/93

Total to order: 124,800

147

Country: Bolivia  
 Recipient: ABENDROTH INTERNATIONAL  
 Product: 52mm Colored Sultan  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:40  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	281.7	178.0	0.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	118.3	376.7	270.0	240.0	204.0
(b) Transfer/Loss/ Disposal	-400.0	-273.0			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	281.7	178.0	-92.0	-240.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA	90.0	240.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	90.0	240.0	NA

1992 Minimum stock (months): 0 Maximum stock (months): 0  
 1993 Minimum stock (months): 0 Maximum stock (months): 0

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

148

Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:41  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

CONDOMS ARE TRANSFERRED DIRECTLY FROM THE MINISTRY OF HEALTH FOR REPACKING AND DISTRIBUTION TO PHARMACIES. ABENDROTH'S INVENTORY WAS UNKNOWN AS OF 01/01/90.

2a. ESTIMATED USE Year: 1990

TOTAL SALES REPORTED BY ABENDROTH TO PROSALUD-SOMARC.

2a. ESTIMATED USE Year: 1991

TOTAL SALES REPORTED BY ABENDROTH TO PROSALUD-SOMARC.

2a. ESTIMATED USE Year: 1992

GOAL SET BY THE DIRECTOR OF SOCIAL MARKETING AT PROSALUD (W. SORIANO) AND MR. DARIO MEJIA, REGIONAL CONSULTANT FOR SOMARC. PLANS ARE THAT IN 1992, THE MOH WILL TRANSFER THE CONDOMS DIRECTLY TO PROSALUD FOR REPACKING AND MARKETING. CONTRACT WITH ABENDROTH TO BE CANCELLED.

2a. ESTIMATED USE Year: 1993

SAME AS 1992. SALES WILL TEND TO DECLINE AS THE SOCIAL MARKETING PROJECT WILL INTRODUCE THE BRAND PROTEKTOR (BLUE GOLD). IT IS EXPECTED THAT AVAILABILITY OF SULTAN CONDOMS WILL BE REDUCED AND THAT PROTEKTOR CONDOMS WILL REPLACE ITS MARKET SHARE.

2a. ESTIMATED USE Year: 1994

SAME AS 1992 AND 1993.

149-

Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL,  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:42  
Prepared on: 03/14/92  
Modified on: 03/14/92

2b. ESTIMATED LOSS Year: 1990

TOTAL TRANSFERRED BY MOH: 400,000 UNITS. THESE UNITS WERE KEPT BY  
ABENDROTH AND SOLD THROUGH PHARMACIES AND DRUGSTORES.

2b. ESTIMATED LOSS Year: 1991

127,000 UNITS WERE REPACKED AND RETURNED TO THE MINISTRY. THE  
REMAINING 273,000 UNITS WERE KEPT BY ABENDROTH.

7. ORDERS Year: 1992

LOCAL TRANSFERS BY THE MOH.

7. ORDERS Year: 1993

LOCAL TRANSFERS BY THE MOH.

Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:44  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity		Date
	Received/ Desired	Received/ Desired	Received/ Desired
LOCAL	90.0	90.0	06/15/92
LOCAL	240.0	240.0	01/30/93

Total non AID shipments: 330,000

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Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL  
Product: 52mm Colored Sultan  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:44  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Other Sources Shipping Schedule

Source	Quantity	Received	Date
LOCAL	90.0	06/15/92	
LOCAL	240.0	01/30/93	

Total to order: 330,000

DRAFT      DRAFT      DRAFT      Page - 7      DRAFT      DRAFT      DRAFT

Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL

Date: 03/14/92

152

Country: Bolivia  
 Recipient: ABENDROTH INTERNATIONAL  
 Product: Noriday 1+50, CSM  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
 Time: 18:47  
 Prepared on: 03/14/92  
 Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	35.8	77.6	9.1	0.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	51.8	81.4	9.1		
(b) Transfer/Loss/ Disposal	6.1	7.5			
3. New Supply					
(a) AID Shipments Received	99.7	20.4		NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	77.6	9.1	0.0	0.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 0 Maximum stock (months): 0  
 1993 Minimum stock (months): 0 Maximum stock (months): 0

Lead time (months): 5

159

Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL  
Product: Noriday 1+50, CSM  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:47  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

ESTIMATED FIGURE, BASED ON SHIPMENTS RECEIVED IN 1989. BEGINNING 1992, PROSALUD WILL BECOME THE DIRECT DISTRIBUTOR OF THIS PRODUCT. IF SO, THERE WOULD BE A BETTER INVENTORY CONTROL.

2a. ESTIMATED USE Year: 1990

TOTAL SALES REPORTED BY ABENDROTH DURING 1990.

2a. ESTIMATED USE Year: 1991

TOTAL SALES REPORTED BY ABENDROTH, ACCORDING TO SOCIAL MARKETING'S RECORDS AT PROSALUD.

2a. ESTIMATED USE Year: 1992

REMAINING STOCK STILL IN ABENDROTH'S HANDS, BUT ITS REPORTS SHOULD A TOTAL STOCK OF ZERO UNITS. PROSALUD WILL TAKE DIRECT CONTROL OF THE MARKETING OF NORIDAY.

2b. ESTIMATED LOSS Year: 1990

SAMPLES GIVEN TO PRIVATE PHYSICIANS AS PART OF THE PROMOTION CAMPAIGN FOR THE PRODUCT.

2b. ESTIMATED LOSS Year: 1991

SAMPLES. SAME AS 1990.

154

Country: Bolivia  
Recipient: ABENDROTH INTERNATIONAL  
Product: Noriday 1+50, CSM  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/14/92  
Time: 18:48  
Prepared on: 03/14/92  
Modified on: 03/14/92

CY1992 Contraceptive Requirements Estimate  
Known AID Shipments

NewVern ID	PO	Bill of Lading	Approximate Date Shipped	Quantity Shipped	Date Received	Quantity Received
3432/1	MWHS-0234	00111415180	08/14/90	100,800	09/21/90	99,700
3675/1	MWHS-0363	00111483861	04/25/91	20,400	06/15/91	20,370

Total known AID shipments : 120,070.0

NB Any shipment with a BL number of NEW is a shipment entered in the field that CPSD does not know about.

155

Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:13  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	37.0	17.2	7.2	3.2
2. Estimated Consumption					
(a) Use/Sales/ Distribution	5.0	19.8	10.0	10.0	12.0
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	42.0				NA
4. End of Yr Stock	37.0	17.2	7.2	-2.8	NA
5. Desired End of Year Stock	NA	NA	5.0	6.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		6.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA		6.0	NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:13  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 03/90.

2a. ESTIMATED USE Year: 1990

DISTRIBUTION FIGURE REPORTED BY DR. QUIROGA, ME.DI.CO.'S DIRECTOR.

2a. ESTIMATED USE Year: 1991

THIS FIGURE INCLUDES TRANSFERS TO OTHER MOTHERCARE INSTITUTIONS (3,600 UNITS) AND FREE DISTRIBUTION AT TALKS.

2a. ESTIMATED USE Year: 1992

ESTIMATED FIGURE BASED ON NUMBER OF USERS TO BE CONTACTED. NO CONSUMPTION RECORDS ARE AVAILABLE.

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:13

Prepared on: 03/17/92

Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	6.0	09/18/92	02/15/93

Total to order: 6,000

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: 52mm Non Colored, No Logo  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:16  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
-----	-----	-----
FPIA	42.0	03/15/90

Total non AID shipments: 42,000

Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: Copper T, 380  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:16  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.1	0.9	1.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution		0.3	1.6	1.7	1.8
(b) Transfer/Loss/ Disposal	1.8	-0.4			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	1.8				NA
4. End of Yr Stock	0.0	0.1	-1.5	-0.8	NA
5. Desired End of Year Stock	NA	NA	0.9	0.9	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	2.4	1.8	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	2.4	1.8	NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:16  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 03/90.

2a. ESTIMATED USE Year: 1991

QUANTITY DISTRIBUTED TO OTHER NGOs WITHIN THE MOTHERCARE PROJECT. NO CONSUMPTION RECORDS ARE AVAILABLE. THIS IS ONLY AN ESTIMATE.

2a. ESTIMATED USE Year: 1992

BASED ON ESTIMATED NUMBER OF USERS TO BE SERVED BY THE FOUR INSTITUTIONS WITHIN THE MOTHERCARE PROJECT. THIS FIGURE SHOULD BE REVIEWED ONCE CONSUMPTION DATA IS AVAILABLE FROM EACH INSTITUTION.

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

THIS IS ONLY AN ESTIMATE. BEFORE TAKING THIS FIGURE INTO ACCOUNT, IT SHOULD BE DECIDED IF THE MOTHERCARE PROJECT WILL CONTINUE UNDER A NEW CONTRACT.

2b. ESTIMATED LOSS Year: 1990

TRANSFERRED TO LOCAL HEALTH CENTERS AND PRIVATE DOCTORS: 1,750 UNITS. USED BY ME.DI.CO.(ONE OF THE FOUR ORGANIZATIONS WITHIN THE MOTHERCARE PROJECT): 50 UNITS, FROM MAY/90 THRU MAY/91.

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:16

Prepared on: 03/17/92

Modified on: 03/17/92

2b. ESTIMATED LOSS

Year: 1991

TRANSFERRED BY FAMES IN 08/91.

7. ORDERS

Year: 1992

THIS QUANTITY HAS ALREADY BEEN ORDERED AND IT'S EXPECTED TO ARRIVE IN COUNTRY BY MAY/91.

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:16  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	2.4	01/17/92	06/15/92
CPSD	1.8	09/18/92	02/15/93

Total to order: 4,200

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Copper T, 380  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:16  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
FPIA	1.8	03/15/90

Total non AID shipments: 1,800

Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:17  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	4.6	1.2	0.5	1.4
2. Estimated Consumption					
(a) Use/Sales/ Distribution	0.2	3.4	1.9	1.5	1.5
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	4.8				NA
4. End of Yr Stock	4.6	1.2	-0.7	-1.0	NA
5. Desired End of Year Stock	NA	NA	0.8	0.8	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	1.2	2.4	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	1.2	2.4	NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:17  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 03/90.

2a. ESTIMATED USE Year: 1990

ESTIMATED DISTRIBUTION THROUGH 5 HEALTH POSTS FROM ME.DI.CO.

2a. ESTIMATED USE Year: 1991

THIS FIGURE INCLUDES QUANTITIES TRANSFERRED TO OTHER NGOs WITHIN THE MOTHERCARE PROJECT (300) AND DISTRIBUTION TO ME.DI.CO'S USERS.

2a. ESTIMATED USE Year: 1992

ESTIMATED CONSUMPTION BY 4 INSTITUTIONS BASED ON EXPECTED NUMBER OF USERS. THIS FIGURE IS PROVISIONAL UNTIL CONSUMPTION DATA IS AVAILABLE.

2a. ESTIMATED USE Year: 1993

SAME AS 1992.

2a. ESTIMATED USE Year: 1994

SAME AS 1992.

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:17

Prepared on: 03/17/92

Modified on: 03/17/92

7. ORDERS

Year: 1992

USAID/LA PAZ WILL TRANSFER 1,700 UNITS TO COVER NEEDS FOR 1992-93.

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:18  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
AID Shipping Schedule

Source	Quantity Desired	Approx. Ship Date	Date Needed
CPSD	1.2	01/17/92	06/15/92
CPSD	2.4	09/18/92	02/15/93

Total to order: 3,600

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Lo-Femenal, Blue Lady  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:18  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
-----	-----	-----
FPIA	4.8	03/15/90

Total non AID shipments: 4,800

Country: Bolivia  
 Recipient: Proyecto Mothercare-Cochabamba  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Nora Quesada, FPLM II Project  
 Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
 Time: 10:18  
 Prepared on: 03/17/92  
 Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	8.2	4.1	3.7	3.6
2. Estimated Consumption					
(a) Use/Sales/ Distribution	1.4	4.1	4.9	4.9	4.9
(b) Transfer/Loss/ Disposal			-4.5	-4.8	
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	9.6				NA
4. End of Yr Stock	8.2	4.1	3.7	3.6	NA
5. Desired End of Year Stock	NA	NA	2.4	2.4	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 6  
 1993 Minimum stock (months): 3 Maximum stock (months): 6

Lead time (months): 5

\*\*\*\* S&T/POP/CPSD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPSD to confirm product availability before ordering. \*\*\*\*

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:19  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

THIS PRODUCT WAS NOT AVAILABLE FOR THIS RECIPIENT UNTIL 03/90.

2a. ESTIMATED USE Year: 1990

DISTRIBUTION FIGURES ONLY. NO CONSUMPTION RECORDS ARE AVAILABLE.

2a. ESTIMATED USE Year: 1991

THIS FIGURES INCLUDES DISTRIBUTION TO USERS (ME.DI.CO), AND QUANTITIES TRANSFERRED TO THE OTHER MOTHERCARE PROJECT ORGANIZATIONS. NO RECORDS ON CONSUMPTION ARE AVAILABLE.

2a. ESTIMATED USE Year: 1992

ESTIMATED CONSUMPTION THROUGH 4 INSTITUTIONS: COMBASE (0), ME.DI.CO (1,500), PROMEFA (2,400), CENTRO CANCER (1,000).

2a. ESTIMATED USE Year: 1993

ACCEPTANCE OF THIS METHOD IS LOW, ACCORDING TO THE DIRECTORS OF EACH INSTITUTION. NO INCREASE HAS BEEN ESTIMATED.

2a. ESTIMATED USE Year: 1994

SAME AS 1993.

Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92

Time: 10:19

Prepared on: 03/17/92

Modified on: 03/17/92

2b. ESTIMATED LOSS Year: 1992

TO BE TRANSFERRED BY FAMES IN 05/92.

2b. ESTIMATED LOSS Year: 1993

TO BE TRANSFERRED BY FAMES IN 02/93.

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Country: Bolivia  
Recipient: Proyecto Mothercare-Cochabamba  
Product: Conceptrol Foaming Tablet  
Prepared by: Nora Quesada, FPLM II Project  
Modified by: Nora Quesada, FPLM II Project

Date: 03/26/92  
Time: 10:20  
Prepared on: 03/17/92  
Modified on: 03/17/92

CY1992 Contraceptive Requirements Estimate  
Shipments from Other Sources

Source	Quantity Received/ Desired	Date Received/ Desired
-----	-----	-----
FPIA	9.6	03/15/90

Total non AID shipments: 9,600

**ANNEX F:**  
**REPORT ON FAMES**

**FUNDACION DE ASISTENCIA MEDICO-SOCIAL -- FAMES**

(Foundation for Medical-Social Assistance)

March 10-19, 1992

La Paz, Bolivia

Nora C. Quesada

Regional Consultant in Logistics

John Snow, Inc.

**I. OBJECTIVES OF THIS VISIT. GENERAL RECOMMENDATIONS**

The primary objectives of this visit were as follows:

- A. To review and update the Contraceptive Procurement Tables (CPTs) for the 1992-1994 period.
- B. To select participants for the Workshop on Contraceptive Logistics to be held in July 1992.

**RECOMMENDATIONS**

The principal recommendations submitted for the consideration of executive management were as follows:

1. Review with the departmental coordinators and supervisors of each project the methodology used for gathering data (stock on hand, shipments received and consumption) in order to detect and reconcile any differences occurring with regard to dates (reporting periods), amounts reported in each period, quantities received and final balances of stock on hand for each period. All of these figures should agree with records maintained at the central level.
2. Monitor the prices charged by the associated physicians for inserting Copper Ts to ensure that they are the same as those agreed upon with executive management, in order to ensure compliance with the institutional objective, which is to provide women of the lowest income levels with access to modern contraceptive methods. This is particularly important in Cochabamba, where Copper Ts supplied by the private sector are found in pharmacies.
3. Continuously monitor the use of Copper Ts and pills through frequent supervisory visits to physicians and to users themselves in order to verify actual consumption of both methods.
4. In reports on inventory movement at the central level, provide a detailed breakdown of transfers made to other organizations, with an indication of the name of the organization and the quantity of contraceptives transferred.
5. It is important for FAMES to begin thinking about establishing selling prices for condoms and tablets, in order to quantify actual consumption. These prices should be somewhat below those established for social

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marketing purposes, since in the case of condoms the product to be sold would not carry a brand name. Only through sales can the actual demand for these methods be quantified.

I would like to take this opportunity to express my thanks to all those persons contacted during this visit for their kind cooperation and time dedicated to facilitating the completion of my assignment. A complete list of all these persons is included in Annex A of this report.

## II. CURRENT STATUS OF FAMES

Beginning in May 1991, Pathfinder assumed a portion of the project financed by FPIA, which covers 20 medical clinics located in Oruro, Tarija, Cochabamba, Santa Cruz, El Alto and La Paz. The project runs through April 30, 1992 and is renewable yearly for a total of four years. Amount: US\$35,000 per year.

These funds are aimed at developing teaching materials, educational activities and workshops in the area of IEC and other aspects of family planning. In addition, they include payment of salaries for one project director, one project supervisor, one administrator, one coordinator for the cities of La Paz and El Alto, and a portion of the administrative expenses of the central office. The physicians in charge of the clinics work under a social assistance agreement with FAMES and receive no salaries or remuneration of any kind.

In addition, FPIA continues to provide small amounts of financing for certain areas of FAMES, including:

- Indirect support for IEC activities.
- Payment of rent for the central office (1/3 is paid by FPIA, 1/3 by Pathfinder and 1/3 by FAMES).
- A portion of stationery and supplies used.
- Salaries of central level staff:
  - 1 executive director
  - 1 program supervisor
  - 1 administrator
  - 1 secretary
  - 1 coordinator per department (La Paz-El Alto, Oruro and Cochabamba).
- Supervisory visits
- Administrative support

In addition, through these projects, FAMES has signed community support and social assistance agreements with 70 physicians (in addition to the 20 already mentioned) located in the nine departments of the country. These physicians receive educational and refresher materials in modern family planning methods and other population-related subjects. In addition, the physicians offer family planning services and methods through their private practice at low prices, based on donated contraceptives, except for the Copper

Ts, for which a charge of Bs10 is made, including insertion. This sales policy has been implemented to provide the community with greater access to these services. It is through this network of private physicians that FAMES reaches its target population.

The total number of paid personnel charged with supervising and coordinating all field work (physicians) with the central office is summarized below (the Pathfinder, FPIA and FAMES columns indicate the number of individuals and clinics financed by those particular projects/organizations):

	PATHFINDER	FPIA	FAMES	TOTAL
Supervisors	1	1	0	2
Departmental Coordinators	1	3	0	4
Clinics	20	32	38	90

### III. ACTIVITIES AND FINDINGS

#### A. Control system for inventories, reporting and data recording. Programming

In theory, there are three levels of distribution, although they vary in accordance with the particular city:

- For supplying centers located in La Paz, distribution is made directly from the central warehouse to the clinics.
- For centers located in other departments, supplies are sent to the departmental coordinators, who in turn distribute them to the clinics. The coordinators take the place of the regional or intermediary warehouse between the central warehouse and the clinics.
- In cities where there is no coordinator, supplies are sent directly to each individual physician.

The departmental coordinators are charged with the primary task of visiting the associated physicians and gathering data on consumption and stock on hand as of the cutoff date. This occurs every two months for physicians affiliated with the FPIA and FAMES project and once a month for those affiliated with Pathfinder.

In most cases, the coordinators verify that the data concerning stock on hand, shipments received and consumption (amounts dispatched) agree with the amounts sent from the central warehouse and with the balance shown by the physical inventory carried out during each of these visits.

All of the physicians in the network use the same form for sending data to the central level. It is generally the departmental coordinator who forwards this data either monthly or every two months (in accordance with the

particular project). At the central level, this data is processed with a view toward updating stock on hand at all levels, reviewing consumption for the period, and preparing shipments to resupply physicians for the following six-months period.

For locations having a cold or moderate climate, the frequency of shipment is every four months, with each shipment including sufficient quantities to cover consumption for a six-month period. For locations having a warm climate, shipments are made every two months in quantities sufficient to cover consumption for four months. This calculation is based on average monthly consumption, stock on hand (both at the clinics as at well as at the central warehouse) and the distance each clinic is located from the central warehouse).

In this way, reports are available every two months on new and continuous users, up-to-date balances for stock on hand at each clinic and at the central level, shipments made, number of educational activities conducted, financial movement, progress report for all activities, and consumption (both by individual clinic and overall) for each family planning method. Depending on the project, a three- or four-month evaluation is performed, which includes the previously mentioned subject areas.

#### Policies concerning contraceptive distribution

During the preceding visit (September 1991), both the executive director as well the FAMES coordinators and supervisors at the central indicated their desire to gradually discontinue providing barrier methods (condoms and vaginal tablets), precisely because they felt that the organization should channel its efforts toward achieving greater impact and coverage among its target population by offering more effective family planning methods at lower prices, since according to the cost analysis performed by the executive director, condoms and tablets were 13 and 28 times more expensive respectively than the Copper T over a period of three years (the average time that a woman uses the Copper T).

In addition, as a result of the distortion generally present in distribution data reported as consumption for both condoms and vaginal tablets, it is costly to attempt to estimate data on actual consumption, especially when the programs have no basis for estimating this figure, since they begin with quantities distributed to users but with no assurance as to eventual use. This is what has happened in the past, as FAMES does not sell contraceptives to the user (with the exception of Copper Ts) but rather distributes them free of charge.

As FAMES delivers its services through physicians (generally gynecologists) in private practice, it is logical and appropriate to think that it is women who seek health care at these clinics and accordingly the program should promote the use of methods which are more effective, clinic-based, and more oriented toward women.

For these reasons, as well as the fact that there were already sufficient sources of supply for vaginal tablets and condoms on the market

(through pharmacies and others NGOs), FAMES has decided to discontinue supplying these two methods beginning in 1993.

However, during this visit FAMES indicated that the policies identified during the preceding visit have been reconsidered and the organization still wishes to continue to provide barrier methods although in the case of vaginal tablets, it will promote their use less vigorously than in the past. Accordingly, consumption figures have been projected once again for these two methods in the 1992 CPTs.

#### Pricing policy

As of August 1991, Copper Ts are being sold at US\$0.79 to associated physicians. Pills continue to be delivered free of charge (included in the price of the consultation) and condoms and vaginal tablets will also be distributed without charge. However, during this visit the consultant recommended to FAMES that it begin to think in terms of establishing a pricing policy for pills and barrier methods in order to be able to quantify actual consumption.

#### B. ESTIMATED COVERAGE ACHIEVED BY THE PROGRAM: 1991

During 1991, FAMES reported the following consumption data by method:

TABLE A

METHOD	AMOUNT (UNITS)	COUPLE YEARS PROTECTION GENERATED
PILLS	10,100	673
CONDOMS	243,900	1,626
TCU380A	4,600	16,100
VAG. TAB.	87,000	584
	<b>TOTAL</b>	<b>18,983</b>

The conversion factors used were as follows (as approved in September 1991 by AID/Washington):

Pills . . . . .	15 cycles/user/year
Condoms . . . . .	150 units/user/year
TCU380A . . . . .	3.5 years/unit
Vaginal tablets . . . . .	150 units/user/year

Thus, estimated coverage will be as follows:

1. For Women of Reproductive Age (WRA: 1,694,000) . . . . . 1.12%
2. For WRA who are married or in union (WRAM: 1,186,100) . . . . . 1.60%
3. For WRAM using any method (32.1%) . . . . . 4.98%

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In order to compare coverage achieved in 1990 with that achieved in 1991, we have converted 1990 consumption to current factors, with the following results:

METHOD	CONSUMPTION	CYPs GENERATED
PILLS	23,100	1,540
CONDOMS	199,800	1,332
TCU380A	4,100	14,350
VAG. TAB.	158,000	<u>1,053</u>
	TOTAL	18,275

1. For Women of Reproductive Age (WRA: 1,656,400) . . . . . 1.10%
2. For WRA who are married or in union (WRAM: 1,159,500) . . . . . 1.58%
3. For WRAM using any method (31.1%) . . . . . 5.07%

At this time, the number of women of reproductive age for 1990 has been adjusted, taking as a source the "U.S. Bureau of the Census International Data Base" and projections prepared by FPLM.

When coverage figures for both years are compared, the following results are obtained:

YEAR	COVERAGE ATTAINED		
	WRA	WRAM	ANY METHOD
1990	1.10%	1.58%	5.07%
1991	1.12%	1.60%	4.98%

This indicates that for women of reproductive age and sexually active women (married/in union), FAMES achieved a slight increase in coverage, but for the total number of women using any contraceptive method (either traditional or modern), coverage attained decreased by 0.09%. Although the difference is not significant, some of the reasons for the decrease are described in Section C (below) of this report.

### C. ESTIMATE OF FUTURE CONTRACEPTIVE NEEDS

Taking into account the institutional policies and plans for stepping up IEC campaigns, the CPTs for the 1992-1994 period, which were prepared in August 1991, have been reviewed and updated. In order to calculate the consumption levels estimated in these tables, consideration has been given to stock on hand at all levels in FAMES, consumption reported during 1990 and 1991, and activities carried out by other organizations providing family planning services and delivery of family planning methods.

#### Lo-Femenal pills:

Based on data on new and continuous users reported by the clinics, it has been estimated that of all users joining the program (new users in 1990: 2,265), some 46% return to the program to receive new supplies (continuous users in 1991: 1,058). User records have apparently improved substantially, as data reported in 1990 showed that only about 10% of new users returned to the program.

During 1991, FAMES was forced to distribute some 32,800 cycles of oral contraceptives to organizations and physicians not associated with the organization, in an attempt to ensure that the product would be used before it expired (May 1991).

The physicians associated with the organization did not make much use of these products, precisely because of the proximity of the expiration date.

In addition, on May 30, 1991 FAMES received from the Ministry of Public Health 10,000 cycles of Rigevidon (Microgynon) and 10,000 cycles of Ovidon (Neogynon), although they were not distributed to physicians until after June and it is possible that consumption did not begin until July in the hope that the Lo-Femenal on hand would be totally consumed.

It is for this reason that 1991 consumption reflects only six months usage (July-December). This explains in part the decrease in the coverage provided by the organization, as mentioned in Section B.

During the preceding visit (September 1991), a total consumption of 8,400 cycles was projected for the six-month period. Actual consumption reported was 10,100 cycles, or 20% greater than projected.

Based on the consumption data for this six-month period, amounts to be distributed for 1992-1994 have been estimated, assuming an increase of 10% from one year to the next. All of these figures will be reviewed and adjusted once consumption data becomes available.

#### Copper Ts:

Since this is the second most prevalent method (after female sterilization), it is felt that there will continue to be an increased and sustained demand for Copper Ts.

During the visit made in September 1991, a total consumption of 5,000 units was projected for 1991. Actual figures reported during this visit total 4,600 units inserted, or 8.6% below projections. This is explained to a large extent by the decision to begin selling this product to the associated physicians, since although most of them accepted the new policy and continued to order the product, others (two of the 90 physicians associated with FAMES) opted not to request it anymore.

In addition, a review was made of the records of inventory movement in each of the clinics and, based on this review, duplications were detected in amounts reported as consumption, which makes the figure for actual stock on hand go down. After making the appropriate adjustments, it was concluded that

there was an "excess" of 1,000 units which had not been included as available inventory and which during the current visit was once again included in total stock on hand for the program.

Based on consumption reported in 1991 and following the upward trend observed in the organization, an increase of 10% has been estimated for each year (with the exception of 1994).

Sultan brand and No Logo condoms (beginning in 1992)

As previously mentioned, the organization decided to continue to provide this method to its users. During the preceding visit, a total consumption of 222,700 units had been projected for 1991. The figure reported as consumption was 243,900, or 6.18% greater than projected. On previous occasions, mention has been made of the fact that FAMES distributes these methods free of charge, both through the clinics as well as at talks given to groups from a number of different organizations (Police Force, Armed Forces, etc.), as a result of which the figure reported is considered to be distribution and not consumption. Also, most of the stock of condoms on hand expired in January 1992, as a result of which FAMES recommended that the associated physicians distribute a greater than normal amount in order to avoid accumulating expired inventories of condoms.

The preceding partially explains the increase of 22% in the figures reported for 1991 with respect to those reported for 1990 (199,800 units).

Estimated consumption for 1992 is based on an increase of 3% over 1991, for the above-mentioned reasons. At the same time, it is expected that FAMES will attempt to coordinate educational activities with the AIDS prevention program, which has sufficient stock on hand to cover the educational and informational campaigns which FAMES plans to implement.

For 1993, a 10% increase has been estimated. This figure must be reviewed once more reliable data on consumption becomes available. For 1994, the 1993 figure has been used, pending a review at the end of 1992.

Vaginal tablets:

Although FAMES will gradually discontinue supply of this method, it was agreed during this visit that at least until 1994 the organization should continue to provide this product on a regular basis.

Projected consumption for 1991 was 113,400 units. The figure reported as consumption for 1991 was 86,600 units, or 29.45% less than projections. If we compare 1991 to 1990 (158,000 units), we find that the difference represents a decrease of 80%. It also shows that as a result of all of the controls that the organization has incorporated into its system for controlling information, inventories and contraceptive movement, the program has gradually acquired a capability to measure demand in a more realistic fashion. Accordingly, acceptance and use of this method are low, as shown in the ENDSA-1989.

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The preceding has major implications with regard to shipments requested and, accordingly, for final available stock on hand in the country. By the end of 1992, there will be sufficient vaginal tablets to meet the demand of all organizations through 1994 and part of 1995, assuming a manufacturing date of 1992. Much emphasis has been placed on the importance of establishing a pricing policy to allow both tablets as well as condoms to be sold to users; since this is one of the most accurate forms of quantifying the demand for these methods and avoiding overestimates of consumption, which in turn leads to an overestimation of orders and the existence of high levels of inventory.

Taking as a basis the figure of 87,600 units, an increase of 10% has been estimated for the 1992-1994 period. These are preliminary figures, until such time as FAMES decides what mechanisms it will use to quantify demand (sales vs. distribution) and until more realistic consumption data become available.

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**ANNEX G:  
REPORT ON CIES**

**CENTRO DE INVESTIGACION, EDUCACION Y SERVICIOS -- CIES**

(Center for Research, Education and Service)

March 10-19, 1992

La Paz, Bolivia

Nora C. Quesada

Regional Consultant in Logistics

John Snow, Inc.

**I. OBJECTIVES OF THIS VISIT. GENERAL RECOMMENDATIONS**

- A. To review and update the Contraceptive Procurement Tables (CPTs) for the 1992-1994 period.
- B. To select participants for the Workshop on Contraceptive Logistics to be held in July 1992.

**RECOMMENDATIONS**

The principal recommendations submitted for the consideration of management were as follows:

1. Emphasize the more effective methods (Copper Ts) through the Pathfinder Project and the Population Council Project (when it begins) in order to provide greater protection to the population in remote rural areas, achieve greater coverage and provide more effective methods.
2. Establish consumption goals based on amounts requested/purchased by users and on the supply capacity of the organization, rather than on new users, for which there is no follow-up to verify continuation in the program. Goals based on new users distort the actual service delivery capacity and coverage of the program, which leads to overestimates in orders for contraceptives submitted to USAID.
3. User goals should be established in accordance with the supply capacity of the organization and the estimated target population, taking into account additional sources of service delivery in the area. In addition, goals based on new users should provide for user follow-up, once the latter have been incorporated into the program, in order to evaluate impact, coverage and continuity of contraceptive use. This aspect should be negotiated with project funders.
4. Compare new users reported to quantities distributed in 1991 in order to analyze the causes for the apparent low levels of protection (by user and method) provided by the program. Discuss this point with financing agencies with a view toward negotiating the methodology to be used for establishing goals.
5. Establish a better defined strategy for encouraging promoters to refer users to clinics in order to promote an increase in the number of users seeking services at the clinic and thus achieve an increase in the use of more effective and lower cost methods (Copper Ts). The purpose of

these incentives will be to decrease community distribution while continuing to offer the promoter the same level of income.

I wish to take this opportunity to express my thanks to all those persons contacted during this visit for their kind cooperation and time dedicated to facilitating the completion of my assignment. A complete list of all the persons contacted is included in Annex A of this report.

## II. CURRENT STATUS OF CIES

### A. Projects

PROJECT WITH IPPF/WHR: This project involved equipping and maintaining a medical clinic under an agreement signed with the Central Obrera Boliviana (COB) in the city of La Paz to provide its members and the general public with primary health care and family planning services.

The project began operating in November 1990 and was terminated in October 1991 by mutual agreement between the organizations. No reasons were given.

Upon the termination of the project, plans to open a clinic in Sucre and initiate work in campesino communities in La Paz were suspended. However, the estimate of contraceptive needs prepared in September 1991 assumed that these plans would crystalize and be implemented. The implications are discussed below.

PROJECT WITH FPIA: This project finances the operation of two clinics: one in El Alto and another in Viacha.

PROJECT WITH PATHFINDER: Financing for the CBD-IEC component (six promoters and one supervisor) previously supported by Family Planning International Assistance (FPIA) in the city of El Alto was assumed by Pathfinder beginning in May 1991. Likewise, beginning in April 1992, Pathfinder assumed financing for the clinic and two promoters under the CIES-COB project previously financed by IPPF/WHR.

Other clinics: Pathfinder also finances one clinic in La Paz, one clinic in Oruro and one in Potosí, which provide primary health care and family planning services. They are staffed with the following support personnel:

LOCATION	**	Auxiliary		Promoters		Adjunct
	Physicians	Nurses	Paid	Voluntary	Physicians @	
EL ALTO*	2	2	6	20	6	
LA PAZ	2	2	3	26	8	
ORURO	2	2	2	10	10	
POTOSI	2	2	2	10	14	
VIACHA***	2	2	1	5	?	
<b>TOTAL</b>	<b>5</b>	<b>5</b>	<b>14</b>	<b>71</b>	<b>38</b>	

- \* The six paid promoters in El Alto work only part time.
- \*\* The physicians and nurses work part time, as a result of which two are necessary to provide full-time services at a single clinic.
- \*\*\* The Viacha clinic may suspend operations beginning in April 1992.
- @ Adjunct physicians at the El Alto clinic provide family planning services based exclusively on barrier methods.

In addition, there are three instructors (one in each city: Viacha, La Paz and El Alto apparently share one instructor) for providing promoter supervision and training and two supervisors to provide general project supervision.

B. INVENTORY CONTROL, REPORTING AND DATA RECORDING. PROGRAMMING OF FAMILY PLANNING SERVICES

In accordance with information provided by Lic. Pérez de Soriano, both the project-financed clinics and the promoters report on a monthly basis the number of new users, beginning balance, quantities received, contraceptives delivered or sold to users, and stock on hand. The adjunct physicians, who are eight times greater in number than the paid physicians, also report in the same manner and with the same frequency. Inventory in the central warehouse and stock on hand in peripheral facilities is reported and updated monthly, which enables staff to provide efficient follow-up of project inventory movement. The same is true for quantities received and dispatched at the various levels, as well as for distribution to users.

With this data, the individual in charge of logistics at the central level prepares a monthly consolidated statement, by project and type of service (clinic, promoters), for each method, which reflects quantities received, amounts dispatched (or consumed, depending on the level), and current stock on hand. In this way, up-to-date information is generated for all inventory movements by level of service.

CIES has recently begun the process of adapting its entire preexisting system (which is operating well) to the QUIPUS model in order to generate service statistics and contraceptive movement at each level of storage. It is not yet possible to provide an objective opinion with regard to the effectiveness of the program until such time as all necessary adjustments have been made to render the system both operable and manageable and until it is able to meet the information needs of CIES.

Programming of family planning services:

CIES uses forms which allow all necessary data, as previously described, to be gathered for purposes of ensuring appropriate management of program logistics, programming of future contraceptive requirements, planning for distribution of stock on hand, and preparation of an evaluation of project performance. First-hand observations indicate that the forms are easily

filled out by the clinic staff and promoters, who are charged with preparing them on a monthly basis.

The policy with regard to service delivery programming and coverage, as suggested by donor agencies and which through August 1991 consisted of establishing goals based on Couple Years Protection (CYPs), was modified during the final quarter of 1991, thus achieving a better rationalization of quantities delivered to/consumed by promoters and users. As a result of the change in contraceptive delivery policy, certain unknowns have been cleared up as regards the actual amount consumed by method, which will be explained in greater detail in the section of this report dealing with Estimating Needs.

C. ESTIMATED COVERAGE OF THE PROGRAM. During 1991, the following consumption data was reported:

TABLE A

METHOD	AMOUNT (UNITS)	CYPs GENERATED
OCs	1,900	127
CONDOMS	348,000	2,320
TCU380A	2,600	9,100
VAG. TAB.	24,900	166
	TOTAL	11,713

Conversion factors used for calculating CYPs:

OCs . . . . .	15 cycles/user/year
CONDOMS . . . . .	150 units/user/year
TCU380A . . . . .	3.5 years/unit
VAGINAL TABLETS . . . . .	150 units/user/year

These factors were approved by AID/Washington in September 1991.

The above data was used for estimating the coverage achieved in 1991 under the program, which was calculated for the following groups:

- For total Women of Reproductive Age : 0.69%  
(WRA: 1,694,400)
- For WRA married or in union : 0.99%  
(WRAMU: 1,186,100)
- For WRAMU using any contraceptive method : 3.08%  
(32.1% = 383,738 women)

To compare coverage achieved in 1990 with that achieved in 1991, we have converted 1990 consumption figures, using the currently approved factors, to obtain the following figures:

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METHOD	CONSUMPTION	CYPs GENERATED
PILLS	2,100	140
CONDOMS	246,900	1,646
TCU380A	2,900	10,150
VAG. TAB.	98,000	653
	TOTAL	12,589

Thus, coverage for 1990 will be as follows:

1.	For Women of Reproductive Age (WRA: 1,656,400)	0.76%
2.	For WRA married or in union (WRAM: 1,159,500)	1.09%
3.	For WRA using any method (prevalence 31.1% = 360,604)	3.49%

When coverage for both years is compared, the following situation is observed:

#### COVERAGE ACHIEVED

YEAR	WRA	WRAM	WOMEN USING ANY METHOD
1990	0.76%	1.09%	3.49%
1991	0.69%	0.99%	3.08%

The preceding figures illustrate that the organization decreased its coverage by an insignificant amount from 1990 to 1991. The explanation may lie in the fact that figures reported in 1990, particularly as regards condoms, were distorting the programmed consumption of the organization, since a massive distribution was made of this method as a result of the need to comply with the CYP goals suggested by the donor agencies. This situation was analyzed and in 1991 the necessary corrective steps were taken to modify the final figure.

When the data is viewed from this standpoint, we might say that the upward trend in coverage has been sustained by the organization and that the consumption figures reported for 1991 are more realistic than those reported for 1990.

In addition, a comparison was made between the number of new users and the number of continuous users recorded in 1991, on the one hand, and consumption reported, on the other. The results have been included in the table at the of this report. That analysis illustrates the distortion existing in the record of new and continuous users and the lack of follow-up in this regard, as the level of protection provided yearly to each user, with the exception of Copper Ts, is extremely low (two cycles, 17 condoms, 12 tablets, one tube of foam -- 20 applications).

This observation has been made in previous reports, with a view toward criticizing not the organization but rather the donor agencies that require the organizations to which they provide financing to establish their goals based on numbers of new users. This leads to a situation whereby

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organizations that are strongly based on community distribution programs inadvertently encourage their promoters to overrecord the number of users in order to comply with such unrealistic goals. Accordingly, it is extremely important that this situation be discussed with the donor agencies who finance the programs in order to establish goals which are more in line with the supply capacity of CIES.

D. ESTIMATE OF CONTRACEPTIVE NEEDS  
PREPARATION OF THE CPTs FOR 1990-1994

Condoms:

As a result of the way in which distribution was carried out between October 1990 and April 1991 and the fact that in 1990 most of the condoms used under the IPPF project (124,956 units) represented distribution, it would be unrealistic to consider the amounts reported as consumption during the last three months of 1990 and most of 1991 in projecting needs for the 1992-1994 period. Between January and June 1991, a total of 268,699 units were reported as having been distributed to users, as compared to 246,956 units for all of 1990. For this reason, the 1990 figure has been selected as most closely approximating actual consumption under the program.

The IPPF project concluded in October 1991 although the La Paz clinic has been taken over by the Pathfinder project. The organization is reevaluating the prices applied to condoms sold through the promoter network so as to make adjustments based on the prices of social marketing brands, and plans call for increasing prices from Bs\$0.05 to BS\$0.10 per unit (selling price to the promoters), so that the volume of distribution more realistically reflects product demand/consumption.

In addition, in order to estimate consumption figures for 1992-1994, consideration has been given to the fact that the Ministry of Public Health and other private organizations (including the Social Marketing Program) will have available large quantities of condoms and will be working in most of the areas of influence of CIES.

Based on all of the above-listed factors, an increase of 32% has been estimated for 1992 with respect to the total figure recorded for 1990 (246,900 units) and a 7% annual increase has been estimated for 1993-1994. This data must be considered to be PRELIMINARY until such time as CIES once again is able to "clear" its service statistics and differentiate between consumption and distribution.

The total quantity required by CIES is 444,000 units for 1992, of which 426,000 units have been shipped by Pathfinder (date of arrival in country: March 9, 1992). The remaining 18,000 units will be supplied by USAID/Bolivia.

Consumption of other methods:

In the case of Lo-Femenal contraceptive pills, the figure for "consumption" or distribution reported for the years 1990-1991 has been used, as it is felt that this is the least accepted method among CIES users.

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Estimated consumption for 1991 (prepared during the August 1991 visit) agrees with the figure actually reported as consumption (1,900 units, rounded off). The trend observed since 1989 indicates an annual consumption of approximately 2,000 cycles.

For 1992, CIES plans to introduce the sale of oral contraceptives through its network of promoters, since in the past this method was distributed exclusively through its seven clinics. However, distribution will be limited to the program's oldest promoters and users who are being regularly monitored by the clinics.

In principle, the increase which has been estimated is greater than the increase for the previous year (23% in 1992 with respect to 1990, but 36% with respect to 1991), and an evaluation will be made of the results of selling this method through the CBD. No increase has been estimated for 1993-1994, as project personnel will await the results of the community efforts to adjust these figures.

With regard to Copper Ts, consumption reported in 1990 was 2,600 units, or 42% less than estimated (3,700). The trend observed since 1989 has been one which reflects a consumption of 3,000 units per year. Among the strategies planned for 1992-1994, CIES plans to expand the office hours at the clinics in order to achieve a maximum supply capability, which currently look like this:

Office hours at the clinics in the following locations:

El Alto . . . . .	8 hours, 2 shifts
La Paz (2) . . . . .	6 hours in the morning, 2 hours in the afternoon
Viacha . . . . .	2 1/2 hours per day
(this clinic may possibly cease to operate)	
Oruro . . . . .	4 hours in the morning, 2 hours in the afternoon
Potosí . . . . .	2 hours in the morning, 4 hours in the afternoon

The idea is for all of the clinics to provide service 8 hours a day.

For 1992-1993, increases of 19% and 13% respectively have been estimated, based on the 1991 figure. For 1994, the same figure has been used as was used for 1993 and this figure will be adjusted once 1992 consumption data become available. As this is the most prevalently used method in Bolivia (following female sterilization), CIES should take advantage of this opportunity to increase its use through greater emphasis and promotion.

Conceptrol vaginal tablets is a method with a very low prevalence of use. The goal proposed by CIES for 1991 (90,800 units) was way above the figure reported as consumption (24,900), despite the fact that that goal was less than the figure reported in 1990 (98,000 units). In addition, as with condoms, vaginal tablets are sold at prices which are so low that they did not allow the program to evaluate actual acceptance. In addition, CIES modified its policy with regard to goals based on the number of CYPs generated, which resulted in a considerable drop in the number of tablets distributed because

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there was no longer any pressure on the promoters to comply with high goals based on that particular parameter.

This difference between the proposed goal and consumption reported has given rise to an oversupply of vaginal tablets at the national level (not only at CIES but in all private organizations, which overestimated consumption and underreported actual historic use), as the quantities acquired by USAID were based on consumption reports submitted by the organizations.

All figures must be taken as being strictly PRELIMINARY, until such time as actual consumption data become available, once CIES implements the new strategies for reviewing selling prices and establishes goals based on its supply capacity.

E. SELECTION OF PARTICIPANTS FOR THE WORKSHOP ON LOGISTICS. TENTATIVE DATE: JULY 7-10, 1992, COCHABAMBA

Precisely as a result of the detected need to discuss and define guidelines that will lead to improvement in the establishment of achievable goals, to define the concepts of new user and continuous user, and to estimate needs based on the supply capacity of the various programs, taking into account the target population and other sources of service delivery (among other factors), a Workshop on Contraceptive Logistics has been planned in which all of these subjects, together with several others, all dealing with the subject of logistics, will be included on the agenda.

CIES has selected Mrs. Elia Pérez de Soriano, Director of the El Alto Project and Mrs. Patricia Saenz, in charge of Accounting and Finance. We await confirmation of the selection of these individuals and of their availability to attend the Workshop on the dates indicated.

**COMPARISON BETWEEN NEW AND CONTINUOUS USERS, CONTRACEPTIVES DISTRIBUTED AND CYPs GENERATED: CIES, JANUARY-DECEMBER 1991**

METHOD	NEW USERS	CONTINUOUS USERS	TOTAL CONSUMPTION USERS RECORDED	UNITS PER USER 1991	CYPs GENERATED	% DIFFERENCE USERS vs. CYPs	
PILLS	449	511	960	1,967	2	131	732.08%
CONDOMS	5,310	15,116	20,426	348,060	17	2,320	880.28%
COPPER T	2,674	5,809	8,483	2,662	1	9,317	317.24%
VAG. TAB.	720	1,435	2,155	24,907	12	166	1297.83%
FOAMS	436	657	1,093	916	1	115	954.59%
<b>TOTALS</b>	<b>9,589</b>	<b>23,528</b>	<b>33,117</b>			<b>12,049</b>	<b>274.85%</b>

**METHOD MIX:**

PILLS	2.90%
CONDOMS	61.68%
COPPER T	25.62%
VAG. TAB.	6.51%
FOAMS	<u>3.30%</u>
	100.00%

**CONVERSION FACTORS USED:**

PILLS . . . . .	15 CYCLES/USER/YEAR
CONDOMS . . . . .	150 UNITS/USER/YEAR
TCU380A . . . . .	3.5 YEARS/INSERTION
VAGINAL TABLETS . . . . .	150 UNITS/USER/YEAR

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**ANNEX H:**  
**REPORT ON CNS**

**CAJA NACIONAL DE SALUD -- CNS**  
 (National Social Security Organization)  
 March 10, 1992  
 La Paz, Bolivia

Nora C. Quesada  
 Regional Consultant in Logistics  
 John Snow, Inc.

I. OBJECTIVES OF THIS VISIT. GENERAL RECOMMENDATIONS

The primary objectives of this visit were as follows:

- A. To prepare the Contraceptive Procurement Tables (CPTs) for the 1992-1994 period.
- B. To become familiarized with the system for inventory control, reporting and data recording, and programming of services for the Reproductive Health Project.
- C. To select participants for the Workshop on Contraceptive Logistics to be held in July 1992.

RECOMMENDATIONS

The principal recommendations submitted for the consideration of management were as follows:

- 1. Establish an inventory control system for stock dispatched based on a policy of maximum and minimum levels, which would allow shipments to be made on the basis of average monthly consumption, current stock on hand and the time it takes supplies to reach each center or polyclinic.
- 2. Establish a fixed frequency for resupplying polyclinics (preferably either bimonthly or quarterly), in order to facilitate the handling of shipments at the central level and inventory control in each center. In addition, this will serve to ensure that the centers will have no more than they should have and no less than they need.
- 3. Organize the kardex system and standardize it at the central level as well as in each of the polyclinics and the Hospital Obrero. It is important that a control over stock on hand be kept at all levels of the project.
- 4. Transfer, on a loan basis, 1,600 Copper Ts to other organizations that are in urgent need of this method. USAID/Bolivia will coordinate this transfer.
- 5. Keep clear and accurate statistics on services and contraceptive consumption to facilitate preparing an estimate of contraceptive needs that is in accord with the realities of the program. The projection of contraceptives required, prepared during this visit on the basis of the

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CPTs, is PRELIMINARY until such time as actual consumption figures are submitted by the CNS.

I wish to take this opportunity to express my thanks to all those persons contacted during my visit for their kind cooperation and time dedicated to facilitating the completion of my assignment. A complete list of all of the persons contacted is included in Annex A of this report.

## II. CURRENT STATUS OF THE CAJA NACIONAL DE SALUD (CNS)

### A. New projects

With contributions provided by USAID/Bolivia and The Pathfinder Fund, the Maternal Child Health Project was officially inaugurated on July 15, 1991 with the Reproductive Health Program, which will include, in addition to four other components, a component for family planning.

This project calls for the establishment of a family planning service in approximately 41 polyclinics located throughout the nine departments of the country, which would be phased into the program over a period of two years (through July 1993). The project is scheduled to have an overall duration of five years (estimated duration: May 1, 1991-April 30, 1996). The polyclinics are outpatient centers, as a result of which they have no beds and no childbirth care is provided.

According to the information provided by Lic. Calasich during the visit made in August 1991, the number of centers per department was as follows:

TO BE PHASED INTO THE PROGRAM BETWEEN SEPTEMBER AND NOVEMBER 1991:

DEPARTMENT	# OF CENTERS	TARGET POPULATION (ESTIMATED)
LA PAZ	8	242,154
COCHABAMBA	4	75,605
SANTA CRUZ	4	118,264

TO BE PHASED INTO THE PROGRAM BETWEEN JANUARY AND JULY 1992:

DEPARTMENT	# OF CENTERS	TARGET PCPULATION (ESTIMATED)
SUCRE	4	46,684
ORURO	6	108,922
TARIJA	3	40,015
POTOSI	3	155,222

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TO BE PHASED INTO THE PROGRAM BETWEEN JULY AND DECEMBER 1992:

DEPARTMENT	# OF CENTERS	TARGET POPULATION (ESTIMATED)
BENI	3	35,621
PANDO	1	4,919

Between January and July 1993, four mining provinces and six oil producing/border provinces (in the Eastern region of the country) with small populations were to be phased into the program, although precise data was not available in this regard.

In spite of the plans described during the preceding visit, during this visit it was learned that only the Hospital Obrero in the city of La Paz began providing services, with one physician (Dr. Rentería) working one day a week for four hours. However, plans call for the start-up of service delivery in the various cities during 1992 in accordance with the following schedule:

- La Paz and Cochabamba, in June
- Santa Cruz, in July
- Sucre, in August
- Potosí, in September
- Oruro, in October
- Tarija, in November

The polyclinics have not yet begun to provide services as a result of internal and administrative factors which have hindered the phasing in of the scheduled centers, as well as the provision of training to the physicians during the period specified. In addition, there is a shortage of IUD insertion kits which were not requested from Pathfinder on a timely basis because it was thought that the CNS had a sufficient number in stock. The number of insertion kits currently available totals five (all in the Hospital Obrero) although the total need is for an additional 200. There exist possibilities for acquiring them through the local office of the Pan-American Health Organization (PAHO), although this process would take at least an additional six months.

Training for family physicians has been planned based on seminars focusing primarily on the subjects of reproductive health, modern family planning methods, IUD insertion, diagnosis of sexually transmitted diseases, filling out forms for keeping statistics on health care and services, etc., all related to reproductive and maternal-child health. Once the family physicians have been trained, they will provide services during their normal working hours (from 8:00 to 12:00 and from 14:00 to 20:00).

Of the six or seven training seminars programmed, the following have already been held:

- 2 in La Paz: one on training (theoretical) and another on motivation.
- 1 in Cochabamba: from November 25 to November 29, 1991.
- 1 in Santa Cruz: from December 2 to December 6, 1991.

From the above it can be concluded that the projected consumption figures were not met because they had been estimated on the basis of the number of potential users, polyclinics and physicians that would be providing family planning services. In addition, the fact that the polyclinics have not been brought on line as scheduled affects all estimates of consumption and stock on hand for 1992-1994. This situation is explained in greater detail, in the "Estimate of Needs" section.

With regard to personnel, the system is staffed, in addition to the gynecologists, by family physicians, who are general practitioners in charge of providing health care to patients. These physicians represent the initial contact with the users of CNS services. During the initial phase of the program, the family physicians will provide reproductive health care (consultations) and the gynecologist-obstetricians will be in charge of the family planning component (supply of contraceptive methods).

#### Stock on hand at the central warehouse

As of March 16, 1992, stock observed to be on hand was as follows:

PRODUCT	AMOUNT	MANUFACTURING DATE	EXPIRATION DATE
TCU380A	7,000	-----	01/94
CONDOMS	19,437	-----	01/92
OVIDON OCs	9,699	09/90	09/95
RIGEVIDON OCs	9,799	08/90	08/95

The condoms in storage have expired and will have to be disposed of. With regard to Copper Ts, it is estimated that some 1,600 units may expire prior to consumption, as a result of which it has been suggested that they be transferred on a loan basis to other NGOs. Such a transfer will ensure that those Copper Ts with short expiration dates will be consumed and at the same time that the CNS will have available Copper Ts from lots having more recent manufacturing dates to meet needs for the duration of the project, as USAID/Bolivia will replace, if necessary, the amount loaned.

Pills, according to projections, will be sufficient in number to last for the duration of the project without risk of expiration.

The kardex in operation at the central level is well-organized and products are recorded by manufacturing dates. It has been suggested that this mechanism be instituted in all sites where contraceptives are stored.

### Program coverage goals

Program goals have not yet been clearly established. It was hoped that with the data on the 3-4 months of services provided during 1991 it would be possible to quantify to a certain extent the demand for contraceptive services and methods and thus set goals in accordance with observations regarding target population and acceptance and use of modern methods.

Consumption data (in units) as reported by the Hospital Obrero was as follows:

PRODUCT	Consumption Sep-Dec 1991	Consumption Jan-Feb 1992
TCU380A	392	47
OCs*	181	
CONDOMS*	482	

\* Represents consumption from September 1991 to February 1992.

Since only the Hospital Obrero provided family planning services, it is difficult to determine consumption for the CNS on the basis of this individual facility. This means that the consumption figures projected for 1992-1994 continue to be based on the parameters used during the preceding visit, taking into account the rate at which polyclinics are incorporated into the program as well as the number of physicians in service and the hours during which service is provided. Once the consumption data for 1992 has been collected, more realistic estimates, reflecting the actual situation prevailing at the CNS, can be made.

### III. ACTIVITIES AND FINDINGS

#### A. System for controlling inventories, reporting and data recording. Programming

The Duties Manual pertaining to the Project Administrator specifies that she is in charge of the management, control, storage, kardex recording and preparation of shipments and reports on movement, stock on hand and overall contraceptive consumption statistics.

For purposes of administrative management, both with respect to supplies as well as to the program itself, the central level is staffed with the previously mentioned project administrator plus one secretary and one messenger. At the operating level, the project is staffed by Dr. Cristina Rentería, general coordinator of all medical and operating aspects (training, education of physicians, etc.), the project director (Dr. Fernando Rengel), a technical-medical advisor (Dr. César Peredo), and a general supervisor (Dr. Alfredo Guzmán), of Pathfinder-Lima.

For purposes of storage at the central level, one warehouse was assigned to store program equipment and commodities and another to store equipment

(tables, typewriters, stretchers, etc.), most of which have fallen into disuse although they belong to the CNS.

At the local level (polyclinics), the administrative support staff consists of one administrator (who is also in charge of the warehouse at the smaller polyclinics), one warehouse attendant (only in the larger polyclinics), and one chief of medical services. Each polyclinic has two individuals in charge of contraceptive control, one of whom works the morning shift with the other working the afternoon shift. This led to losses of contraceptives and disorganization in record keeping as a result of which it was decided that contraceptives would be handled through the pharmacies. In this way, it is expected that the user herself, based on her medical prescription, will withdraw contraceptives directly. In the case of Copper Ts, this will be done by the nurse or physician prior to the consultation in order to avoid creating delays for both users as well as physicians.

The system for supplying and dispatching contraceptives will be implemented, in general terms, by means of the request submitted by the chief of medical services and the project administrator, in accordance with the order submitted by the family physicians. This order will be sent, together with consumption statistics, to the central level administrator, who will proceed to effect the corresponding shipment. The CNS has designed a request form for this purpose which is currently being reviewed prior to final approval (a sample is shown at the end of this report).

In addition, during the preceding visit it was brought to the administrator's attention that none of the forms which the CNS had planned to use in the program called for gathering data on stock on hand available in the polyclinics, which is useful in determining whether the amount requested is appropriate, taking into account both consumption and stock on hand, as well as for determining the total amount of inventory on hand at all levels in a given period. During the current visit, the CNS presented a draft form which does include this data and it is hoped that review and final approval of this form will occur prior to June 1992.

The family physician will write down on his control sheet, on a daily basis, the quantities of contraceptives delivered and the number of users seen (with both to be broken down by method). From this data, he will calculate the quantities to be ordered through the chief of services and the administrator.

The frequency with which reports are to be submitted, orders are to be filed and shipments are to be made has been established as monthly. However, once the reporting system begins to function, this frequency will be reevaluated since it will depend on the time available to the physicians for filling out the forms.

B. ESTIMATE OF FUTURE CONTRACEPTIVE NEEDS-Contraceptive Procurement Tables (CPTs) for 1992-1994

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During the previous visit (August 1991), the general coordinator of the project mentioned a series of changes within the CNS that might affect the implementation of the family planning program.

These changes involve modifying the office hours for services provided by family physicians from eight hours a day to six hours a day. In fact, the office hours scheduled for providing services to family planning users will be limited to two hours a day. If the CNS wanted these physicians to provide family planning services, it would have to add back these two hours, obviously with the corresponding salary adjustment.

In addition, it had been mentioned that, in view of the situation, the family physicians would not provide care directly to users but rather only information, education and communication (IEC) and that the task of providing family planning services would fall to the gynecologists.

The number of physicians who will actually be providing services under the program is yet to be confirmed.

The preceding, together with the target population, are key elements for estimating the quantities of contraceptives required. Within the above mentioned limitations, Dr. Rentería mentioned that the goal for new users proposed by the project is 6,000. Based on this figure, as well as on the target population to be covered by the number of polyclinics to be phased into the program between 1992 and 1994, an initial and PRELIMINARY projection has been made of what might be the population subject to programming under the project and for estimating the amount of contraceptives required to meet their needs. (Source of data: Statistical Yearbook, 1990, Volume I, National Statistical Section, Caja Nacional de Salud.) The results of this projection are contained in FPLM report dated August 1991.

Due to the lack of complete information on the characteristics and concrete strategies of the project, it should be noted that the projections are affected by the following limitations:

- It is assumed that the insured population, by department, will not increase from one year to the next (during the three years projected).
- The target population has been estimated on the basis of a percentage resulting from the number of centers to be covered divided by the total number of centers, as a result of which that population could be greater or lesser depending on the size of the centers involved.
- The insured population is assumed to be the general public (men, women and children of all ages), and based on this figure an estimate has been made of the number of Women of Reproductive Age.
- The same target population has been used for 1993 as for 1994, as no data is available with regard to population in the provinces. However, this is not so important for the moment, because these estimates can be adjusted during the next review of the CPTs, by which time it is hoped

that actual data on consumption will be available and a target population will have been defined.

- For all years, an increase of one percentage point has been projected in the overall prevalence per year and, on this basis, the specific prevalence by method and distribution of users by method has been estimated, with the assumption that the prevalence of use and the preference of contraceptive methods of CNS users is the same as for the rest of the country.
- For 1991, consumption has been estimated for only three months, as the program will cease to train physicians in October 1991, as a result of which it is assumed that service delivery will begin in November.
- For 1992, it is being assumed that La Paz, Cochabamba and Santa Cruz will be totally phased in but that Sucre, Oruro, Tarija and Potosí will be incorporated only after July, which is when the physician training stage is scheduled to conclude.
- For 1993-1994, it is assumed that all departments will have been incorporated into the program. The only provinces missing will be the mining provinces and the oil-producing border provinces.
- It is assumed that all of the centers located in Sucre, Oruro, Tarija, Potosí, Beni and Pando will join the program, but if this should not be the case, the target population would be overestimated.
- It has been assumed that the method mix for CNS users is the same as for the rest of the country.

It should be mentioned that the amounts projected in this analysis do not agree with the estimates made in the CPTs. The projection serves solely as a point of reference for the supply potential of the CNS.

#### Estimated consumption of all methods

##### Lo-Femenal

As previously mentioned, consumption reported between September 1991 and February 1992 was 181 cycles with 18 new users. An annual consumption of 4,000 cycles has been estimated for 1992, assuming that the centers located in La Paz, Cochabamba and Santa Cruz will be providing service beginning in June 1992. It is expected that in Sant Cruz the demand for oral contraceptives will be greater than in other cities, since this is the most prevalent method in that region.

If consumption in 1992 should turn out to be greater than estimated, the CNS has available 19,800 cycles with a manufacturing date of September 1990. In addition, the inventory of oral contraceptives available in the county is sufficient to meet the needs of all public and private organizations during 1992 and 1993.

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For 1993 and 1994, an annual consumption of 5,000 cycles has been estimated for each year. These amounts are preliminary and subject to review once the consumption data recorded in 1992 become available.

#### Condoms

Consumption reported by the Hospital Obrero, as mentioned previously, was 482 units between September 1991 and February 1992. Since no definitive information is available with respect to the potential total distribution of this method, estimates have been prepared based on what the project coordinator feels to be a reasonable figure.

For 1992, 1993 and 1994, a consumption of 15,000, 18,000 and 20,000 units, respectively, has been estimated. These figures are preliminary and will be reviewed/adjusted once consumption data for 1992 become available.

#### TCU380A

Estimation of the consumption of this method is very inaccurate, as it depends to a large extent on the number of insertion kits available to the project over the short and medium term.

Assuming that the necessary insertion kits are obtained during the course of 1992 and that the polyclinics scheduled for 1992-1993 are incorporated on the recommended dates, a consumption of 1,500, 2,700 and 3,000 units has been estimated for 1992, 1993 and 1994, respectively. These figures will be reviewed and adjusted once consumption data for 1992 becomes available.

Another factor to be taken into account is the expiration date of the Copper Ts: January 1994. If consumption behaves as projected, 1,600 would be left over and would expire prior to being utilized. For this reason, it has been suggested that the CNS loan this stock to other organizations with urgent needs and that USAID/Bolivia replace these amounts with lots having more recent manufacturing dates in order to allow the CNS to meet its needs for the duration of the project.

The 7,000 Copper Ts were donated by Pathfinder. The other methods were donated by USAID/Bolivia.

#### Vaginal tablets

All of the organizations have experienced the same low level of acceptance of this method among the users of their programs. However, the CNS plans to deliver this method in combination with condoms. Accordingly, the quantities estimated for tablets are the same as those estimated for condoms.

All consumption figures for 1992, 1993 and 1994 (for all methods) are PRELIMINARY and should be reviewed once the program has defined its target population and has available data on user preference and use of contraceptive method.

It is hoped that this data will be available by the end of 1992, once the forms are in operation and the service supply capacity of the CNS has been analyzed.

C. SELECTION OF PARTICIPANTS FOR THE WORKSHOP ON LOGISTICS

Four individuals have been selected to attend the Workshop scheduled to be held during the week of July 7-10, 1992 in the Hotel Cochabamba: one coordinator from Cochabamba and one from Santa Cruz, together with the project coordinator and the project administrator, both from La Paz.

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REPRODUCTIVE HEALTH PROJECT  
CNS AID 511-0568

No. ....

FORM FOR REQUESTING SUPPLIES AND COMMODITIES

AMOUNT ORDERED	AMOUNT SHIPPED	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
-------------------	-------------------	------	-------------	---------------	--------

TOTAL

APPROVED BY

SHIPPED BY

RECEIVED BY

205

REPRODUCTIVE HEALTH PROJECT  
CNS AID 511-0568

## COMMODITY DELIVERY KARDEX

HEALTH CENTER: .....

CARD No. ....

METHOD	INITIAL BALANCE	RECEIVED	CONSUMED	FINAL BALANCE	ORDERED	SHIPPED
NORMAL DOSE PILLS						
LOW DOSE PILLS						
CONDOMS						
VAGINAL TABLETS						
TCU						
IUD						

**NOTE:** These cards will be filled out by the employee in charge of warehouses for the Reproductive Health Project.

Column No. 1 will be filled out upon delivery of the various commodities to the health center.

Column No. 2 will be filled out in accordance with the form for requesting supplies and commodities.

Column No. 3 will be filled out in accordance with the prescriptions filled for commodities consumed at each health center.

Column No. 4 will be obtained by subtracting column No. 2 from column No. 3.

Column No. 5 will be filled out in accordance with the Form for Requesting Supplies and Commodities, submitted by the health center.

Column No. 6 will be filled out in accordance with consumption observed at the center.

**ANNEX: I**  
**REPORT ON SOPACOF**

**SOCIEDAD PRIVADA DE AYUDA A LA COMUNIDAD Y A LA FAMILIA -- SOPACOF**  
(Private Community and Family Aid Society)

March 10-19, 1992

La Paz, Bolivia

Nora C. Quesada

Regional Consultant in Logistics

John Snow, Inc.

I. **OBJECTIVES OF THIS VISIT. GENERAL RECOMMENDATIONS**

The primary objectives of this visit were as follows:

A. To review the system for controlling inventories, reporting and data recording and the programming of services for the family planning program.

B. To prepare the Contraceptive Procurement Tables (CPTs) for the 1992-1994 period.

C. To select the participants for the Workshop on Contraceptive Logistics to be held from July 6-10, 1992, in Cochabamba.

**RECOMMENDATIONS**

The principal recommendations submitted for the consideration of management were as follows:

1. Stress more effective methods (Copper Ts), through the railroad car-clinic project in order to provide greater protection to the remote and highly dispersed population group served and achieve greater coverage by providing a more effective method.
2. Establish consumption goals based on quantities dispensed directly to users rather than using those suggested by the program. In order to determine use, it is suggested that project staff begin to gather data on quantities delivered directly to users by using forms which should be designed specifically for that purpose. The Workshop on Logistics could contribute to a preliminary design in this regard.
3. Establish as soon is possible an information system that will enable the project to gather data on consumption and stock on hand at the various levels. Consumption data should consist of those quantities directly delivered to users and recorded by the service provider.
4. Users goals should be established in accordance with the supply capacity of the organization, as well as by taking into account other sources of service delivery in the area. In addition, if the goals are based on new users, the program should consider providing follow-up to those users in order to evaluate impact, coverage and continuity of use of the various contraceptive methods. This should be negotiated with the agencies financing the project.

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5. Include the railroad network physicians in the supervisory visits effected under the project in order to evaluate the advisability of continuing to operate that network based on the coverage provided to the target population by these physicians.

I would like to take this opportunity to express my thanks to the persons contacted during my visit for their kind and valuable cooperation and time dedicated to facilitating the completion of my assignment. A complete list of all of the persons contacted is included in Annex A of this report.

## II. CURRENT STATUS OF SOPACOF

### A. Current projects

**RAILROAD CAR-CLINIC:** SOPACOF was created one year ago as a nonprofit entity to assume the management and operation of the project begun approximately two years ago by The Enterprise Program through the National Railroad Enterprise (Empresa Nacional de Ferrocarriles -- ENFE). This project has also received financing from MotherCare, although that financing terminates in May 1992.

This project involves providing family planning services to all of the villages and hamlets located along the railroad tracks in the Western region of the country. A railroad car belonging to ENFE has been equipped with all of the basic medical equipment necessary for providing primary health care and family planning services (including Copper T insertions).

The railroad car is designed to be propelled by a freight train, as a result of its weight and the slow speed at which it must proceed. The departure or "hooking up" of the railroad car-clinic to the national rail system is generally performed on Mondays and Thursdays, which are the days that it is scheduled to depart to travel the previously mentioned route. These medical sweeps generally last for a period of 15 days during which time the clinic car remains parked for one or two days in each village or train station along the route. The proposed user goal for 1992 is 5,800.

The medical team consists of two groups, each of which is made up of one physician, one social worker, and one nurse-promoter, who change shifts every 15 days. This is the same staff that works at the Villa Fátima Clinic (IPPF Project).

Coverage of all of the villages would be complete if both teams worked in a coordinated fashion with each covering a total of 15 days per month. However, the car receives monthly maintenance and, taking into account other inconveniences, it is estimated that it operates a total of 22 days a month.

Promotional staff consists of 4-5 health promoters in each of the three sections of the route covered who are trained to provide information and sell condoms and vaginal tablets to users in each location. Each promoter receives (free of charge) an additional kit or supply of these contraceptives and other

basic medicines (aspirins, etc.), with which he or she initiates his or her promotional and sales activities.

In addition, within the area covered by the railroad, there is a network of physicians (about 13) located in the towns near the various train stations who as a rule are posted to work temporarily in locations while performing their year of social service prior to graduation. They work in Ministry of Health agencies and the project provides them with contraceptives free of charge (except for Copper Ts) so that they can provide services to the users when the car is no longer in town. However, so far there is no follow-up element with regard to the level of service delivery provided by these physicians or the quantities of contraceptives used.

As a result of the conditions under which it operates, the railroad car has gradually been converted into a medium for primary health care delivery rather than family planning services. Since the MotherCare project concludes in May 1992, it is hoped that Pathfinder will assume financing of this project beginning July 31, 1992.

SOPACOF has also availed itself of financial and technical support provided by independent contractors for carrying out a number of different studies and research projects related to reproductive health.

Current projects with IPPF/WHR: These involve the delivery of primary health care and family planning services through:

- a clinic located in La Ceja in the city of El Alto. Staff consists of one physician and two promoters; the latter make home visits to refer users to the clinic. In order to avoid problems of an ethical nature with the government, the promoters do not distribute or sell contraceptives.

For this clinic, the new user goal for 1991, as suggested by IPPF, is 1,000.

- The Villa Fátima Clinic in La Paz, which stresses reproductive health information and education programs, as well as family planning methods and services for adolescents. In this case, the new user goal for 1992 has been set at 1,000.

The project concludes in May 1992 but will be extended for one additional year for both clinics.

Plans with IPPF/WHR:

- To create a mobile clinic, using a jeep or camper, which would travel the highway between La Paz and Oruro.
- To open another clinic in the neighborhood of El Cementerio in La Paz.
- With financing provided from a California foundation, current plans call for installing a mobile surgical clinic in La Paz, equipped with a

voluntary surgical contraceptive component, and an outpatient family planning clinic for reversible methods. The first year goal is for 500 new users during the period between April 1, 1992 and March 31, 1993.

The exact dates for the implementations of these plans were not specified.

In addition, there is one rural clinic in Inquisivi where, under an agreement signed with Save the Children (STCH), service is provided to the population of four small villages. In addition to Inquisivi, coverage includes the areas of Quime, Licoma and Sircuata, with a total estimated population in 1986 of 76,154.

Under an agreement signed with the Health Unit of the Ministry of Social Welfare and Public Health (MPSSP), STCH uses the health centers located in the town to provide primary health services. Although the MPSSP has such centers, it does not offer family planning services. The idea is that through SOPACOF, with financing provided by IPPF, these services can be provided. Toward this end, SOPACOF is already negotiating an agreement with the MPSSP.

To serve the four above-mentioned regions, SOPACOF will have one physician and one nurse who will provide reproductive health (family planning) and prenatal control services (initially), including subsequent pediatric care.

This staff will rotate among the four cities: every four weeks they will return to the same city and will remain for a period of 48 hours in each. It is not clear how this personnel will coordinate the various tasks: whether it will be the same physician and nurse that work in the urban clinic at La Ceja and, if so, how they will divide up their time to provide services in the clinic as well as in the regions.

To conclude, SOPACOF provides family planning services through:

MotherCare project

- Railroad car-clinic
- Physicians in the railroad car-clinic network
- Promoters

IPPF/WHR project

- Clinic at La Ceja in El Alto
- Rural clinic in Inquisivi
- Promoters

**B. CONTROL OF INVENTORIES, REPORTING AND DATA RECORDING. PROGRAMMING OF FAMILY PLANNING SERVICES**

According to the information provided by Dr. Monasterios, so far all of the clinics, including the railroad car, continue to report only the number of new users, since the projects establish their goals and evaluate their impact

based on this figure. However, it is important to note that using this statistic for evaluating the success or failure of the project leads to considerable distortion of actual program impact, as the primary goal is to enroll new users, with no plans for follow-up activities to ascertain whether they continue to participate in the program. In addition, neither the physicians from the railroad car-clinic network nor the promoters report the number of users. The promoters report quantities sold but because of the low selling price, these figures are more representative of distribution than consumption.

The program has established a Guide for the Delivery of Contraceptives to each user: generally, the promoters and physicians deliver or sell to users the quantities of contraceptives which they feel the users will require in accordance with latter's indications as to the frequency with which they engage in sexual relations. This could lead to distortion with regard to the usage figure, since the user receives the quantities that the physician feels she requires and not the quantity that she herself requests.

None of the various components (railroad car, promoters, etc.) record user data. At the central level, the number of users that each component has served during the month is estimated on the basis of the distribution or delivery of contraceptives which the central warehouse dispatches in each period. Thus, the central level, by using the Delivery Guide (attached), assumes that all quantities delivered to each component are in turn distributed to users and, on the basis of these quantities, estimates the number of users who were probably served.

No review was made during this visit of the forms used or reports submitted by the clinics, physicians and promoters, but according to statements made by the project coordinator, the forms for recording data on amounts delivered to users have not yet been created. It is felt that the Workshop on Logistics scheduled for July 1992 will assist in designing instruments that can be adapted to the needs of the project.

C. ESTIMATION OF FUTURE CONTRACEPTIVE NEEDS. PREPARATION OF THE CONTRACEPTIVE PROCUREMENT TABLES (CPTs) (Annex C)

During the first year of operation of the MotherCare project (July 1990-July 1991) and the first three months of the IPPF/WHR project (May-July 1991), the following consumption data was reported:

PERIOD: JULY-DECEMBER 1990

PROJECT	TCU380A	PILLS	CONDOMS	VAGINAL TABLETS
Railroad car-clinic	16	1,908	2,520	720
Promoters	-----	-----	-----	-----
Eloy Salmón clinic	-----	-----	-----	-----
Network physicians*	310	252	3,688	-----
IPPF/WHR	-----	-----	-----	-----
<b>TOTAL</b>	<b>326</b>	<b>2,160</b>	<b>5,688</b>	<b>720</b>

PERIOD: JANUARY-JULY 1991

PROJECT	TCU380A	PILLS	CONDOMS	VAGINAL TABLETS
Railroad car-clinic	192	6,696	29,832	8,640
Promoters	---	-----	404	204
Eloy Salmón clinic	76	90	2,700	72
Network physicians*	1,008	162	2,016	-----
IPPF/WHR	16	66	48	72
<b>TOTAL</b>	<b>1,292</b>	<b>7,014</b>	<b>35,000</b>	<b>8,988</b>

\* Distribution figures. No data is available on consumption of these amounts. Also included are 800 Copper Ts distributed in Oruro and 100 units distributed in Yungas. These regions are not included in the railroad network and future supply to them has not yet been defined.

As can be seen from the preceding tables, the increase in consumption reported ranges from 324% (for Copper Ts) to 1,248% (for vaginal tablets).

However, as previously mentioned, these figures have been estimated on the basis on the number of users reported by each project, since none of them keep statistics on the quantities of contraceptives delivered to users. In other words, an estimate is made of the quantity delivered to users, based on the Guide used by the program.

Condoms

As a result of the way in which programming of the delivery of supplies to users has been conceived, the process of estimating consumption is made difficult as none of the various project components gather data on users or quantities distributed, as indicated above.

For purposes of calculating future needs for condoms, a number of factors have been taken into account which could affect the consumption of this method, especially in projects other than the railroad car-clinic, network physicians and promoters in the region. These factors are as follows:

- other sources of supply in the area;
- a large supply of condoms on the market, from both the MPSSP as well as from other NGOs, including the Social Marketing Program.
- low prevalence of use of this method.

Although the sales of condoms reported through the PROSALUD Social Marketing Program (whose coverage includes the country's principal cities) could provide an indication of an increase in the acceptance and use of this method, it would be premature to state that the same situation is occurring in the rural areas where information about family planning methods is almost nonexistent and where cultural barriers are much greater. In addition, the

fear of AIDS is not yet a problem in Bolivia, where the general public has not even received direct, concrete information in this regard.

At this time, it is not known what the maximum market for condom consumption is in the country and only a market study focused specifically on this product could provide a convincing answer.

For now, one of the few indicators available is the prevalence of the use of this method as obtained through the 1989 National Population and Health Survey, and it is this indicator, together with those already mentioned and consumption reported during the second semester of 1991 and during January and February 1992, that have been used in preparing a PRELIMINARY ESTIMATE of what the potential consumption of condoms might be for SOPACOF.

Distribution reported in 1991 was 61,400 units. For 1992, an increase of 20% has been assumed, taking into consideration the existence of new projects and the expansion of old projects, as well as the incorporation of new promoters and the intensification of education campaigns. For 1993-1994, an increase of 10% has been calculated. These figures will be reviewed and adjusted once consumption data for 1992 becomes available.

#### Consumption of other methods

In the case of contraceptive pills, distribution reported during 1991 (8,900 cycles) has been used, based on the fact that each patient of the railroad car-clinic is given six cycles and that it is this project that reported the greatest level of consumption. For 1992, an increase of 10% has been calculated, assuming that the MotherCare project focuses on adolescents and will place greater emphasis on family planning information and education by encouraging the target audience to adopt effective methods such as contraceptive pills. For 1993-1994, an increase of only 4% has been estimated, although these figures will be reviewed and adjusted once consumption data become available.

With regard to Copper Ts, a total consumption of 1,500 units has been estimated for 1992, as data reported during 1991 indicated a total of 500 units inserted. This is the method enjoying the greatest prevalence of use (following female sterilization) at the national level. In addition, SOPACOF plans to train four additional physicians in its clinics (two old clinics and three new clinics) in the technique of IUD insertion so that they can provide services to remote population groups requiring more effective methods.

For the 1992-1993 period, an average increase of 20% has been estimated, although the figures will be reviewed once consumption data becomes available.

Vaginal tablets represent a contraceptive method with a very low prevalence of use. Consumption reported in 1991 was 700 units. The goals proposed by the director and the program coordinator are very modest and in agreement with the consumption (distribution) observed. These goals are reflected in the CPTs. An increase of 5% has been estimated for 1992-1994, which for the time being should be considered to be strictly PRELIMINARY, until actual consumption data becomes available.

D. Selection of participants for the Workshop on Logistics

SOPACOF, through its director, has suggested Ms. María Gómez (in charge of the warehouse) and Dr. Carmen Monasterios (general coordinator) as Workshop participants. The Workshop is scheduled to be held from July 6 to July 10, 1992 in the Hotel Cochabamba.

The agenda will be distributed during the month of May for comments and suggestions. Confirmation of the participation of these individuals will be made through USAID.

Sociedad Privada de Ayuda a la Comunidad y a la Familia  
"SOPACOF"- "COBREHS"

GUIDE

CONDOMS V.C.	Bs. 0.05 3 relations x week = 12/month HIGHLANDS 5 REL X WEEK = 20/MONTH VALLEY 3 RELATIONS X WEEK = 12/MONTH
CLINIC	3 relations x week = 12/month
OCs V.C.	Bs. 1 6 cycles x patient
CLINIC	3 cycles x patient (control every 3 months)
OVULES V.C.	Bs. 0.10 3 relations x week = 12/month HIGHLAND 5 X 4 = 20/month VALLEY 3 X 4 + 12/month
CLINIC	3 relations/week = 12/month
IUD	Control week = 3 m-6 m (ideal) Bs. 10 Control each trip ----> 2 outside La Paz From La Paz they come to the clinic  ----> One foaming tablet is inserted in place of the IUD if menstruation is absent  First, a clinical history and physical exam to determine whether the patient is pregnant.
Insertion of IUD	Bs. 10.00-Bs. 5.00

Removal of IUD Bs. 5

**ANNEX J:**  
**REPORT ON PROSALUD**

PROSALUD - SANTA CRUZ

March 13, 1992

Bolivia

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I. OBJECTIVES OF THIS VISIT. GENERAL RECOMMENDATIONS

The primary objectives of this visit were as follows:

- A. To become familiar with the system for controlling inventories, reporting and data recording and with the programming of services for the family planning program.
- B. To estimate the coverage achieved by the organization with regard to family planning services.
- C. To prepare the Contraceptive Procurement Tables (CPTs) for the 1992-1994 period.
- D. To select the participants for the Workshop on Contraceptive Logistics, July 7-10, 1992.

RECOMMENDATIONS

Due to the short duration of the visit made to this organization, rather than recommendations, the consultant submitted suggestions for improving certain aspects of the program, as summarized below:

1. Strengthen the salary and training system for Promotional Assistants in order to ensure that they remain with the program for longer periods. Perhaps the appropriate strategy would be to include incentives based on providing greater training to users.
2. Encourage implementation of a post-partum insertion program. With the number of physicians already trained in this technique and the number of normal deliveries recorded each year at the health centers, training of users in modern contraceptive methods can be increased.
3. Determine the reasons for the low level of family planning protection provided, as reflected in the number of new users joining the program, continuous users and quantities of contraceptives distributed to both groups (see page 6, Table 1, column E).
4. Coordinate with USAID/Bolivia and Pathfinder/Lima to obtain contraceptives from the former, as it has available sufficient supplies to satisfy the needs of PROSALUD during 1992 and 1993. Coordinate with Pathfinder to cancel the scheduled shipments.

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I would like to take this opportunity to express my thanks to all those persons contacted during my visit for their kind cooperation and time dedicated to facilitating the completion of my assignment. The complete list of these persons is included in Annex A of this report.

## II. CURRENT STATUS OF PROSALUD

There are currently 15 health centers in Santa Cruz: five in the rural areas and ten in the urban sector.

In La Paz, there will be a total of four active health centers by June 1992 and an additional seven in the city of El Alto, of a total of 19 (8 in El Alto and 11 in La Paz) which will gradually be phased into the network of health centers over the course of the current year.

These centers form a part of a project financed by USAID/Bolivia, Health and Human Resource Division, HHR-AID 511-0607, consisting of a US\$6 million investment for reequipping/constructing a central administrative office as well as the 19 previously mentioned health centers, thus replicating in this section of the country the health model used by PROSALUD in Santa Cruz.

Some of the centers will be provided by the Ministry of Health through its agreement with the World Bank and will be remodeled by PROSALUD in accordance with the services which it plans to offer.

In addition, the USAID/Bolivia project calls for the purchase of a clinic or small hospital in Santa Cruz to perform surgical interventions of all types (appendectomies, caesarean sections, etc.) as the current health centers are limited to providing primary health care, reproductive health care (family planning), gynecological services, pediatrics and normal deliveries, among others.

The medical and service promotion staff for the 15 existing centers consists of the following:

- 13 general practice physicians who work 8 hours a day and are paid directly by PROSALUD.
- 13 gynecologists who work 2 hours a day and receive a percentage of the fees charged in this area of specialization.

These 26 physicians are trained to insert Copper Ts and receive as an incentive 50% of the total value of the fees charged for this service, as part of PROSALUD's strategy for promoting the use of this method.

- 9 pediatricians.
- 15 nurses to man the centers (in addition to the medical director), 30 nurse auxiliaries, 11 Promotional Assistants and 11 receptionists.

As a rule, all of the above staff are charged with the task of informing the public about the various services provided by the centers and, in the case of reproductive health, all (including the receptionist) are trained to provide the necessary information about the various contraceptive methods available. However, it is the Promotional Assistants that are charged with contacting users through home visits and getting them together for talks on a variety of topics involving general and reproductive health and to refer them to the health centers.

The hours during which services are provided at the centers are from Monday through Friday, during normal business hours, as well as Saturday mornings. In addition, emergency services are provided 24 hours a day. Each center has four beds.

The number of new users reported by the reproductive health program in 1991 was 3,281. The goal had been 3,820, in accordance with data provided during a preceding visit (August 1991).

The new family planning user goal for 1992 is estimated to be 4,744.

It is estimated that the total population in the sites where health centers are located in Santa Cruz totals approximately 106,800 (source: PROSALUD) and that the approximate population of Santa Cruz (the capital) is 700,000 inhabitants. In La Paz, the estimated total population is 80,000 inhabitants in El Alto (District I and Villa Bolívar) and 75,000 in La Paz (Districts V and VII).

### III. ACTIVITIES AND FINDINGS

#### A. PROSALUD PROJECTS. SOURCES OF FINANCING

1. Pathfinder-Lima: The project scheduled to expire in March 1992 has been extended until May. It is hoped that the project will start up again in July 1992, although there will be a lapse of one month which will have to be covered by PROSALUD. Pathfinder assumed the costs of the Promotional Assistant program, which involves training new Promotional Assistants at the beginning of each year (in order to replace the outgoing employees, as a Promotional Assistant typically remains, in the program for an average of one year) and paying the salaries of this personnel. In addition, this financing includes payment of salaries for two supervisors, part of the laboratory reagents for the cytology test (Pap smear) and contraceptive supplies.

Under this new financing stage, the Promotional Assistants have initiated community distribution activities, since in the past their duties were limited to contacting new users through home visits and referring them to the health centers. They were authorized to sell contraceptives only to those continuous users who were unable to go to the health centers to obtain new supplies and who were under regular medical care.

Now, the Promotional Assistants carry with them their stock of contraceptives in order to supply the users. In addition, by using the clinical histories available in the health centers, they have begun to carry

out follow-up activities on those users who do not return to the health centers for new supplies or fail to keep their control appointment. The reason for this is to determine why the user has not returned as well as to take advantage of the opportunity to sell her contraceptives.

2. Project with IPPF/WHR: This was conceived with the idea of taking advantage of the installed capacity of 20 private physicians (clinics) which were operating in peri-urban areas or zones which the PROSALUD health centers could not reach. IPPF financing concluded in October 1991. PROSALUD was not able to continue paying the Promotional Assistants, and the associate physicians did not wish to assume these costs.

3. New health centers in the cities of La Paz and El Alto: As mentioned at the beginning of this report, a total of 19 health centers will eventually be operating between the cities of La Paz and El Alto, thus replicating the Santa Cruz health model. Service programming will be performed under the direction and supervision of Dr. Luis Santacruz from PROSALUD-Santa Cruz, while the personnel hired in La Paz learns (following an exhaustive training process), assimilates and implements the programmed health model.

4. Social Marketing Program (PMS): In accordance with an agreement signed with Laboratories Abendroth, which expired on July 17, 1991, the Social Marketing Program marketed the following products through a network of pharmacies:

1. Sultan brand condoms, which were supplied by the AIDS Prevention Program of the Ministry of Social Welfare and Public Health (MPSSP). The agreement with the MPSSP called for delivering a total 1,200,000 units to Abendroth for repackaging; of these, 540,000 would be returned to the MPSSP for distribution free of charge to its Health Units.

The remainder (660,000) were to be sold through pharmacies in eight of the country's nine departments. To date (March 1992), only 400,000 units are left to be repackaged (180,000 of these were to be earmarked for free distribution), but the MPSSP will be unable to deliver the 400,000 units because it no longer has these quantities on hand in its central warehouse.

2. Noriday oral cycles, purchased from R&D/POP/CPSD by means of a buy-in between SOMARC and USAID/Bolivia. This product has already established itself in the market and accordingly the promotional support which it has been receiving will gradually be reduced. With the introduction of Minigynon (to be called Microgynon beginning in October 1991), the sales of Noriday have gradually decreased, and the program will not make any promotional efforts to recover the sales levels of prior years.

In both cases, the agreement with Abendroth called for the PMS to cover the salaries and travel and other expenses of a detail person based in Abendroth-La Paz, in addition to the product promotional campaigns and design of the packaging. Abendroth provided the logistics and handling of the products up to the point of delivery to the pharmacies.

This agreement, which terminated on July 17, 1991, will not be renewed, due in part to a series of difficulties and disagreements between the parties to the agreement. For the time being, both Sultan and Noriday continue to be marketed normally, and beginning in May 1992 PROSALUD will itself assume responsibility for distributing these products directly to the pharmacies, through distributors who will provide greater coverage by reaching areas not previously covered by Abendroth.

Introduction of new brands into the market

- Microgynon, which was launched in October 1991 under the name Minigynon for social marketing purposes. Under an agreement signed with Schering-Bolivia, the latter imports this product directly from Germany and uses its distribution networks to market it. In addition, the PMS provides all product promotion and advertising. Minigynon shows considerable potential for achieving success in the market, due to the fact that it is widely known and because of its selling price (Bs.\$3.00 versus BS\$20.00 for the Microgynon currently being marketed). Although Schering has already placed this product on the market, promotional activities have been virtually nonexistent, as a result of which the product has not generated the sales level expected. Through the promotional efforts of the PMS, an upward swing in sales is expected.
- Protector condoms, as a strategy of the PMS for introducing a brand name at the Latin American level which will identify the program and be widely known throughout Latin America, as is already the case in Ecuador, Mexico and the Dominican Republic. Launch date: July 1992. The selling price to the public will be set at BS\$2.50 (US\$1 = BS\$3.50), which is 2.5 times greater than the price charged for Sultan brand condoms.

B. SYSTEM FOR CONTROLLING INVENTORIES, REPORTING AND DATA RECORDING. PROGRAMMING OF FAMILY PLANNING SERVICES

With regard to the recording of data on consumption, stock on hand and services provided, PROSALUD has in place a computerized system which enables it to record on a monthly basis all amounts received, amounts dispatched and stock on hand reported by each of its centers, as well as these same transactions for the central warehouse, with the difference that at the health centers the "amounts dispatched" represent contraceptives sold to users whereas in the central warehouse they represent only amounts distributed or dispatched to the health centers.

For the time being, the QUIPUS, (a service statistics and inventory control computerized system) program is being used on a pilot or experimental basis to determine what adjustments can be made to the existing system, since PROSALUD already has in operation a good computerized information system.

Each health center forwards to the central office a detailed monthly report of all services provided, supplies received during the period, medicine and contraceptives sold, and stock on hand as of the end of the month.

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Based on this report, the central office restocks each center with new supplies, based on average monthly consumption and stock on hand. The Promotional Assistants, in turn, supply the health center where they are based and report to that center exactly the same data that the health center reports to the central office. The health center prepares a consolidated report which is forwarded to the central office. In this way, PROSALUD has available up-to-date information, broken down by health center, on all of the monthly movements and inventories of supplies.

Each physician prepares a quarterly evaluation, using these reports, of the performance of the health center, broken down by individual services, by comparing actual performance with the goals established for each, in coordination with the Department of Programming and Medical Services.

#### Programming of family planning services

During the preceding visit (August 1991), it was observed that the establishment of coverage goals is based on the number of new users, as determined by the levels attained in the preceding year. This programming responds to the expectations of the donor agencies which finance the projects.

During the same visit, the consultant discussed with the Director of Medical Services the minimum parameters to be considered when programming the coverage goals to be established by PROSALUD, as well as the quantity of contraceptives to be requested, based on their installed service capability, available personnel trained in providing such services, service fees, population to be covered in accordance with available population data, such as Women of Reproductive Age (WRA), WRA who are married or in union (sexually active), prevalence (specific by method) of the use of contraceptive methods (both modern and traditional), other service supply sources in the region, and availability (present and future) of contraceptives within the program.

On the basis of this discussion, it was concluded that this would be the most appropriate way for PROSALUD to gauge its family planning services, which would be continuously compared against actual program performance.

However, the goals and the performance/impact evaluation of the project continues to be based on the number of new users which, when compared to the quantities of contraceptives distributed, reflects a low level of protection (average consumption per user), as described in Section C.

#### C. ESTIMATED COVERAGE

According to data reported for the period January-December 1991, the total consumption of contraceptives (in units), number of new users, and number of repeat users by method were as follows:

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TABLE 1

METHOD	CONSUMPTION REPORTED (A)	NEW USERS (B)	REPEAT USERS (C)	TOTAL USERS (D)	CONSUMPTION PER USER (E)	CYPs* (F)
LO-FEMENAL	13,600	2,436	10,114	12,550	1.1	907
CONDOMS	6,900	206	346	552	12.5	46
TCU380A**	571	537	248	785	1.1	1,998
VAG. TAB.	4,500	121	188	<u>309</u>	14.6	<u>30</u>
			TOTAL	14,196		2,981

\* CYP: Couple Years Protection generated based on consumption reported. The conversion factors used were as follows:

Pills . . . . .	15 cycles/user/year
Condoms . . . . .	150 units/user/year
TCU380A . . . . .	3.5 years/unit
Vaginal Tablets . . . . .	150 units/user/year

\*\* Total reported consumption was 1,556 units, plus 49 which were used for training. Of the 1,556, a total of 985 were delivered to the physicians at the IPPF project, who do not report either users or consumption. These amounts are not included here.

As can be seen, the difference between users reported and CYPs generated is significant. In addition, the protection provided by method to each user (average consumption per user per year) illustrates the distortion caused by user records and the subsequent planning of goals and programming based on new users, as the Promotional Assistants are faced with the need to achieve their goals, which can lead to an overrecording of the number of new users recruited into the project.

Program coverage has been estimated on the basis of the CYPs generated, and is summarized below:

ESTIMATED PARAMETERS (1991 FIGURES)		ESTIMATED COVERAGE
For WRA	: 1,694,400	0.17%
For WRA married/in union	: 1,186,100	0.25%
For WRA using any contraceptive method (32.1% of WRAM)	: 380,738	0.78%

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Consumption in 1991 was as follows:

METHOD	CONSUMPTION	CYPs
LO-FEMENAL	6,900	460
CONDOMS	2,900	19
TCU380A	400	1,400
VAG. TAB.	1,400	9
	TOTAL	1,888

ESTIMATED PARAMETERS (1990 FIGURES)		ESTIMATED COVERAGE
For WRA	: 1,656,400	0.11%
For WRA married/in union	: 1,159,500	0.16%
For WRA using any contraceptive method (32.1% of WRAM)	: 360,604	0.52%

By comparing both years, the following conclusions can be reached:

#### COVERAGE ATTAINED

YEAR	WRA	WRAM	WRA USING ANY METHOD
1990	0.11%	0.16%	0.52%
1991	0.17%	0.25%	0.78%

It is noted that the coverage achieved in 1991 is greater than that achieved in 1990, taking into account only the CYPs generated, which indicates that the program has promoted the use of modern methods. This suggests that PROSALUD should continue programming its goals and coverage based on these parameters in order to establish and more realistically evaluate the goals and achievements of the program.

#### D. ESTIMATE OF CONTRACEPTIVE NEEDS FOR 1992-1994 (CONTRACEPTIVE PROCUREMENT TABLES - CPTs)

To prepare the estimate of needs for each of the methods, a review was made of the beginning inventory at all levels, for each method, from January 1990 through January 1991, in order to obtain the total amount available in each prior year. Although there were some differences between the January 1991 inventories reported during the August 1991 visit and those reported during the March 1992 visit, the necessary adjustments were made in order to obtain the amounts which appear as current stock on hand as of January 1, 1992 (see Annex B).

In addition, the projection of needs was based on consumption during 1990 and 1991 and on the program's expansion plans. As can be seen in the

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Contraceptive Procurement Tables, the amounts estimated for the 1992-1994 period do not reflect a significant increase over 1990 and 1991.

These projections do not include consumption data for the 19 new health centers in El Alto and La Paz, as no infrastructure is currently available for providing family planning services in the existing centers. As a result, small quantities have been estimated for the centers located in La Paz and El Alto so that project staff can begin promoting these services, which will subsequently be introduced gradually. The amounts are shown in Annex C. Once these new centers are fully operational, it will be possible to determine with greater accuracy the actual needs for contraceptive methods. At that time, it will be appropriate to review once again the goals established during this visit.

The following table summarizes projections both by year and by method:

PRODUCT	CONSUMPTION 1991*	GOAL 1992	GOAL 1993	GOAL 1994
SULTAN CONDOMS	4,480	6,000	7,000	7,000
TCU380A	571	700	800	800
LO-FEMENAL	12,615	15,000	16,500	16,500
VAG. TAB.	2,022	2,500	3,000	3,000

Includes only quantities sold through the health centers and Promotional Assistants. Does not include quantities distributed by the IPPF project, as the latter expired in October 1991.

It is estimated that projected consumption is in agreement with the supply capacity of PROSALUD as well as with its expansion plans. As indicated previously, the health centers in La Paz and El Alto ARE NOT INCLUDED, as they receive their supplies directly from USAID/La Paz.

In addition, in accordance with projected consumption and stock on hand as of January 1, 1992, PROSALUD will not require new shipments in 1992. Accordingly, it will be important to coordinate activities with Pathfinder in order to ensure that no more shipments will be sent. If at some time actual consumption were to exceed the suggested goals, USAID/La Paz has available sufficient supplies of contraceptives to satisfy PROSALUD's needs.

#### Social Marketing Program

All figures for actual total sales during 1990 and 1991, as well as the projection of sales for the 1992-1994 period, were provided by the Program Administrator in Santa Cruz and by Mr. Darío Mejía.

Two new products will be introduced between October 1991 and July 1992:

1. Protektor brand condoms (July 1992)
2. Minigynon oral contraceptives, which are imported from Germany by Schering-Bolivia and are identical to Microgynon, although they

will be introduced into the Bolivian market under the social marketing brand name of Minigynon.

The sales goals (in units) provided by the Program Administrator for the 1992-1994 period are as follows:

PRODUCT	GOAL 1992	GOAL 1993	GOAL 1994
PROTEKTOR	114,000	240,000	276,000
MINIGYNON	40,000	65,000	80,000

In order to provide an approximation of total sales for each year, the Program Administrator conducted a series of polls among the pharmacies that make up the distribution network for these products. The acceptance of these products, as manifested by the pharmacies, will be quite high (especially for Minigynon), owing particularly to their price, which will be well below market (Minigynon will be introduced at Bs\$3.00 per cycle, as compared to Bs\$5.00 for the Peruvian Microgynon, Bs\$12.00 for the Argentinean version and Bs\$20.000 for the German product. Exchange rate used: Bs\$3.63 per dollar).

This is apparently the strategy used for establishing these goals, with the caveat that they are adjusted in accordance with actual sales recorded each quarter and each semester.

It has been estimated that sales of both Noriday and Sultan brand condoms will tend to decrease once the Protektor brand condoms and Minigynon oral contraceptives are introduced and consolidated in the market, since the strategy of the Social Marketing Program is to position Protektor as the brand of condom used at the Latin American level. In the case of Minigynon, its price and the already well-known brand Microgynon will be promoted under this new social marketing brand, but with reference in the advertising campaigns to the fact that it is merely a new name for the previously marketed Microgynon, which is already widely known in the market.

This increase in the sales of new brands and decrease in the sale of old brands is clearly reflected in the CPTs prepared for the Social Marketing Program.

E. Participants in the Workshop on Logistics: The names of the individuals selected to participate in the Workshop to be held in the Hotel Cochabamba from July 6-10, 1992 (two from Santa Cruz and two from La Paz) are still pending. These individuals should be totally involved in the logistics process of the program, as well as in the management of supplies, programming and evaluation. The names should be confirmed as soon as possible to Miss Jennifer Macías, of USAID. The agenda will be sent out subsequently.