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**BRAZIL CONTRACEPTIVE SOCIAL
MARKETING PROGRAM**

EVALUATION

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Prepared by:

SOMARC/The Futures Group
1101 Fourteenth Street, NW
Washington, DC 20005

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ATTACHMENTS (1-6)

I. EXECUTIVE SUMMARY

Background

The Brazil Contraceptive Social Marketing Program (BCSMPP) was started in 1988 in order to accomplish the following objectives:

- o To cooperate with oral contraceptive manufacturers in two cities to use CSM interventions to increase sales of their products.
- o To determine which of two models of CSM interventions are more effective at increasing sales and quality of use of oral contraceptives.
- o To evaluate the effectiveness of each intervention in the two cities separately in terms of increasing knowledge and improving correct use of the pill.

The test cities chosen were Recife in the northeast and Belo Horizonte in the southern part of Brazil. In both cities, the correct use of orals has traditionally been low.

Berlimed, a Schering company, designed and implemented the marketing plan for Recife, and Fontoura-Wyeth was responsible for the marketing plan in Belo Horizonte.

O Segundo Brasil (OSB) was appointed as the implementing organization and managed subcontracts with Berlmed, Fontoura-Wyeth, CEPECS (a family planning organization in Belo Horizonte), the advertising agency, and other research firms.

The manufacturers implemented their marketing plans between April 1988 and December 1989. Key activities included medical detailing, training of factory workers and factory social assistants, training of pharmacy shop attendants and public relations.

The television and radio campaigns managed by OSB ran between May/June 1989 and October/November 1989.

Evaluation Overview

OSB completed and analyzed a number of surveys in connection with the evaluation of the BCSMPP. These can be grouped into six major areas which form the base for this evaluation. The areas examined were:

1. Consumer Intercept Studies
2. Manufacturers' Sales Data
3. CEPECS Activities in Recife
4. Mystery Shopper and Shop Attendant Surveys
5. Factory Social Assistant Survey
6. Survey of Factory Workers

Summary Conclusions

The BCSMPP was designed as a cooperative effort between traditional CSM management and private sector manufacturers. Neither of the two test interventions emerges as a clearly superior model. Rather, several of the project elements can be identified as strengths to be used in any continuation of this project or in new projects designed for Brazil. Also, the relative strengths and weaknesses of the participant organizations can be evaluated to enhance further CSM efforts in Brazil.

OSB overall did a good job managing the media campaign, producing the point-of-purchase brochure, and evaluating the success of the program.

The advertising and point-of-purchase brochure were used in both test cities and were well received. The "stork" as a presentation device was well liked and should be useful as a continuity element for future efforts. The media plan for television created a higher impact than radio, which was used as a reminder medium. The radio effort was probably too limited, and a better media plan should be designed in the future.

Overall, the interventions did not produce a significant increase in accurate knowledge about pills in the test cities among the customers surveyed in pharmacies. There was, however, some increase in correct knowledge among those who received the project brochure. The brochure format will be useful in designing a new generation of material for the pill and other methods.

The analysis of manufacturers' sales data was planned as a key project evaluation. No plans were made for the use of retail audits or other data sources such as competitive data from distributors or wholesalers. The sales data submitted by Wyeth for Belo Horizonte were not useful in evaluating the impact of the program because of changes in the manufacturers' distribution system during the test period. The data submitted by Berlimed for Recife show a directional positive impact, but are limited to the CSM brands because data for other orals products were unavailable. Future evaluations should include some measure of competitive activity such as a retail audit.

The CEPECS activities in training and public relations produced good results in Belo Horizonte. The public stands were a good vehicle for the distribution of the brochure and effective in attracting clients to CEPECS posts. The training of factory social assistants and factory workers coordinated by CEPECS was also effective in increasing knowledge of correct pill use.

The training of pharmacy shop attendants by Berlimed in Recife was not effective. A low number of the attendants in the target pharmacies were actually trained and the training was not effective in delivering selling skills to the attendants. A better training program and monitoring effort is required in future CSM programs in Brazil.

Therefore, to some extent the CSM interventions in both cities met the objectives of the project: substantial sales increases in the program's oral contraceptives, increases in new clients at family planning clinics participating in the program, and increases in correct

knowledge and use of oral contraceptives as a method. However, as mentioned earlier, neither model emerged as being substantially more effective in accomplishing the program's objectives. Obviously, combining the successful elements of both models will result in strong, effective future CSM programs in Brazil.

Strengths/Weaknesses of Interventions

	Strengths	Weaknesses
Recife	<ul style="list-style-type: none"> - TV ad campaign seemed more effective - High and measurable impact on sales trends - Better cooperation with the manufacturer; they actually conducted <u>more</u> interventions than originally proposed 	<ul style="list-style-type: none"> - Retailer training not conducted well or as planned
Belo Horizonte	<ul style="list-style-type: none"> - Cooperation w/CEPECS very good - CEPECS achieved goals of more new clients - CEPECS PR and educational efforts excellent - CEPECS factory worker programs good 	<ul style="list-style-type: none"> - Little cooperation with manufacturers - Number of interventions proposed not <u>all</u> conducted - Couldn't analyze sales data provided by manufacturer - No discernable increases in sales

Recommendations for Future CSM Programs

1. Continue with TV advertising using the "stork" theme. Either utilize more radio in the media plan or drop it altogether if media weights cannot be increased.
2. Definitely continue distribution of the educational brochures, with consideration to producing several series, each focusing on specific themes of pill use and contraindications.
3. Contract with a strong family planning organization like CEPECS to provide community/consumer promotion and education, public relations efforts, opinion leader contacts, and all training including retailer training. They are much more effective at this and lend an air of authority to the proceedings. These educational and PR efforts were very effective and should be continued in any future CSM programs in Brazil.

4. Have the manufacturers conduct only detailing efforts and physician contacts, which is their strength. Manufacturers should not be involved in retailer or other consumer promotion/training.
5. Conduct retail audits to monitor consumer sales independently of manufacturers sales data and to obtain data on all orals products on the market. This will determine if increases have occurred in the entire market as a result of the CSM program, and provide a check on manufacturers sales data.

II. BACKGROUND

The BCSMPP was started in 1988 in two pilot cities to accomplish the following objectives:

- o To cooperate with oral contraceptive manufacturers in both cities to use CSM interventions to increase sales of their products.
- o To determine which of two models of CSM interventions are more effective at increasing sales and quality of use of oral contraceptives.
- o To evaluate the effectiveness of each intervention in the two cities separately in terms of increasing knowledge and improving correct use of the pill.

The pilot cities selected were Recife in the northeast and Belo Horizonte in the southern part of the country. The northeastern area of Brazil is a region of traditionally low use of oral contraceptives. This is thought to be due to a lack of knowledge about the proper use of pills and a high level of misconceptions. Belo Horizonte was also found to have low correct use of orals.

The program was designed by SOMARC with a strong operations research component. Given similar budgets, two private manufacturers were asked to develop and implement marketing plans for the pilot cities. Berlimed, a Schering company, designed the program for Recife, and Fontoura-Wyeth developed the marketing plan for Belo Horizonte.

Summaries of the approved marketing plans are as follows:

Recife - Berlimed

Berlimed increased their staff by one project coordinator and two detailers to conduct the following activities:

- o Conduct training of pharmacists and pharmacy employees in up to 40 pharmacies in available contraceptives, their correct use, and communication techniques with potential clients.
- o Educate health professionals from a minimum of 20 factories in correct method use and collaborate with local FPAs to deliver talks to factory workers at the factory site on family planning methods.
- o Identify 100 physicians who are actively interested in family planning. Provide additional detailing visits, free samples, and educational materials for these doctors to pass along to their patients.
- o Increase the number of free samples provided to local physicians, pharmacists, and FPAs by 150,000.

Belo Horizonte - Fontoura-Wyeth

Wyeth agreed to provide free samples and to participate with CEPECS, a family planning and social research organization, in the following activities:

- o Hire five part-time educators to organize and deliver talks, distribute brochures on family planning and oral contraceptives, and refer women who are interested to CEPECS for more information.
- o Train a minimum of 25 social assistants in factories in available contraceptive methods and their correct use, with emphasis on oral contraceptives. Conduct seminars with factory workers at those factory sites.
- o Provide a course on the advances in contraceptive technology to an estimated 10 physicians from factories that will participate in the campaign.
- o Conduct family planning events at a minimum of 14 commercial locations such as supermarkets, shopping centers, and bus stations.
- o CEPECS senior staff will appear on a minimum of two local talk shows and five radio talk shows to discuss topics such as advances in oral contraceptive technology and the types of women who can use oral contraceptives.

In addition to these activities, SOMARC funded television and radio advertising promoting the use of oral contraceptives (not brand specific) and the development of an educational brochure on oral contraceptives for distribution at retail outlets and public relations events. These materials were used in both Recife and Belo Horizonte. Note that in addition to the project materials, both Berlimed and Wyeth distributed their own leaflets and promotional items during the interventions.

O Segundo Brazil (OSB) was appointed as the implementing organization. This private sector social research and management company managed contracts with Berlimed, Wyeth, CEPECS, the advertising agency and other research firms. OSB was also responsible for evaluating the marketing interventions. An overview of their evaluation activities will be discussed in the EVALUATION OVERVIEW section of this analysis.

III. LIST OF INTERVENTIONS

The following interventions and activities were completed by the BCSMPP:

Recife - Berlimed

Physicians. 100 physicians were identified for increased calls by medical detailers. Between April 1988 and September 1989, a total of 1,854 detailing visits were completed. Through these visits, a total of 18,875 cycles of pills and 3,000 project brochures were distributed. During the intervention, 11 roundtable discussions were conducted among 40 physicians, and 20 physicians attended a total of 5 update meetings. One professional article was published.

Pharmacies. Between April 1988 and September 1989, a total of 2,251 visits were made to pharmacies which distributed 15,250 cycles of pills and 77,500 project brochures. Training sessions were conducted among approximately 20 pharmacies.

Factories. A total of 964 visits were made to factories between April 1988 and September 1989, which distributed 18,250 cycles of pills and 15,500 project brochures. One seminar was conducted among 30 factory health professionals, and a total of 41 talks were presented to a total of 1,084 factory workers.

FPA's. 90 visits were made to local family planning organizations which service approximately 1,000 clients. A total of 4,500 cycles were distributed along with 2,000 project brochures.

PR. One radio interview was heard by an estimated 100,000 listeners and four courses were attended by 12 factory social assistants and physicians.

Media. The project television campaign ran from May through October 1989, and the radio campaign was conducted from August to October 1989.

Belo Horizonte - Wyeth

Factories. Talks were presented in 29 factories among 6,000 workers between December 1988 and December 1989; 10,000 project brochures were distributed and 11 training sessions were completed among 11 social assistants.

Public Stands. This exercise was completed in 11 locations from August through December 1989. Approximately 30,000 consumers were reached and given project brochures.

PR. Between March and December 1989, 11 television interviews, 7 radio broadcasts and 1 press interview were conducted. In addition, 4 meetings were completed among 35 community leaders.

Materials Distributed. From April through December 1989, CEPECS posts distributed 13,000 cycles of pills and 10,000 project brochures. Also, 35,000 project brochures were distributed to pharmacies and an additional 5,000 were given to hospitals.

Media. The television campaign was broadcast from June through October 1989, and the radio advertising ran from August through October 1989.

IV. EVALUATION OVERVIEW

OSB conducted and analyzed a number of surveys in connection with the evaluation of the BCSMPP. These can be grouped into six major areas which will form the base for this evaluation. The areas to be examined are:

1. Consumer Intercept Studies
2. Manufacturers' Sales Data
3. CEPECS Product Distribution
4. Mystery Shopper and Shop Attendant Surveys
5. Factory Social Assistant Survey
6. Factory Worker Survey

The key findings, conclusions and recommendations will be noted at the end of each relevant section.

1. Consumer Intercept Studies

Two consumer intercept studies were completed in both test cities. A baseline study was completed in August 1988 prior to the start of intervention activities and a post-intervention study was undertaken in February 1990.

The sampling method was held constant for both studies. In each city a total of 700 respondents were recruited among female patrons of pharmacies. The sample was stratified for 300 nonusers of pills, 300 users of any pill brand and 100 users of the CSM brand for that city: Microvlar in Recife and Nordette in Belo Horizonte.

A key objective of the baseline study was to identify the most important areas of consumer lack of knowledge about pill use. This information was used in developing the advertising messages and brochure.

The post-intervention study analysis centered on three main areas:

- A. Awareness and Attitudes of the Media Campaign
- B. Penetration and Attitudes of the Brochure
- C. Shift in Correct Knowledge and Attitudes toward the Pill

Each of these analyses will be examined in the following sections.

A. Awareness and Attitudes of the Media Campaign

Key Findings:

Awareness of the television campaign was high in both cities: 74.9 percent in Recife and 92.7 percent in Belo Horizonte. Awareness of the radio campaign was much lower at 14.5 percent in Recife and 14.9 percent in Belo Horizonte. The lower recall for radio was

probably a function of the fact that this was used as a secondary medium with shorter flighting starting after the television campaign.

Accurate message recall was also high for both cities. The following summarizes accurate first mention of the main points:

<u>Message</u>	<u>Belo Horizonte</u>	<u>Recife</u>
1. Take the pill to avoid pregnancy	40.1%	42.6%
2. Consult your physician	15.3%	25.4%
3. Use pills or other methods	21.5%	17.0%

Lower advertising awareness levels in Recife are probably due to lower penetration levels of TV sets among the population there, because key message recall was as high if not higher among those aware of the campaign in Recife versus Belo Horizonte.

The respondents were strongly in favor of the continuation of the campaign: 95.2 percent in Belo Horizonte and 97.2 percent in Recife. The respondents also reported discussing the campaign with a friend: 30.4 percent in Belo Horizonte and 22.0 percent in Recife, and knowing someone who started using orals as a result of the campaign: 19.5 percent in Belo Horizonte and 39.5 percent in Recife. Although lower in awareness, the campaign in Recife seems to have been more effective in getting people to use orals than in Belo Horizonte.

The acceptance of the campaign was significant in light of a somewhat high potential for opposition to advertising for oral contraceptives. An Opinion Leader Survey was completed in both Recife and Belo Horizonte prior to the start of advertising. This survey indicated that while 55 percent approved of the concept of television and radio advertising, 45 percent wanted restrictions of some kind.

Reasons for restricting advertising included:

- o Advertising alone is not enough to educate women. The use of schools, associations and other groups was recommended.
- o More methods should be advertised, not just the pill.
- o Consumers need additional incentive for family planning.
- o The pill has too many perceived bad health effects and problems.
- o Overall, 37 percent were against some method of family planning, including abortion, the pill, indiscriminate sterilization, and the IUD.

In addition, a nationwide Gallup survey among the Brazilian urban adult population found about 40 percent to have some level of disapproval of pill TV advertising. However, the nature of the advertising itself probably had a positive influence on the public reception of the campaign and the lack of opposition. The television campaign featured the novel approach of using a live stork with a voice-over. The production and the producer generated a number of general interest press stories about the commercial. In Belo Horizonte, CEPECS did an especially good job with the public relations effort resulting in eight press articles, all of which were favorable to the project. In Recife, three articles were

published, all favorable to the program. The stork device was picked up and reproduced in a number of these articles.

Conclusions:

- o The advertising campaign was successful in achieving the project objectives. The nature of the commercial using a stork as a presentation device as well as effective public relations were successful in avoiding controversy and accomplishing the objectives.
- o The radio campaign was probably too limited to produce a significant impact.

Recommendations:

- o The advertising and stork device are well accepted and effective and can be expanded to other areas and adapted to promote other contraceptives.
- o Minimum flighting and spending levels should be considered for both primary and secondary media. An effective weight and flighting should be developed for radio as a reminder medium or it should not be used at all.

B. Penetration and Attitudes toward the Brochure

Key Findings:

Despite the somewhat limited distribution of the brochure, very good penetration levels were recorded for both cities: 12.0 percent in Recife and 14.3 percent in Belo Horizonte. Notably, of those who received the brochure in Belo Horizonte, 23.0 percent said they had obtained it from one of the public stands.

The brochure prompted discussions with friends among 7.8 percent of the recipients in Belo Horizonte and 13.5 percent of the respondents in Recife. Acceptance of brochures as a means of disseminating information about contraception was high in both cities, with 93.9 percent in Belo Horizonte and 96.4 percent of the respondents in Recife saying that brochures of this type should be distributed about other methods.

Conclusion:

- o The project brochure was effective in reaching many consumers and in generating acceptance for this method of communicating information about contraception.

C. Shift in Correct Knowledge and Attitudes toward the Pill

OSB concentrated their analysis on the shift in attitudes and correct knowledge about the pill by looking at the differences between those women who received the brochure and those who did not in each city.

The post-intervention study questionnaire included the major points covered in the brochure. Specifically, the questions posed and answered by the brochure were:

1. What is the contraceptive pill? - The reply stressed efficacy and knowing how to use it properly.
2. How does the pill work?
3. What is the correct way to take the pill?
4. What should I do if I forget to take the pill? - The reply gave instructions for forgetting one, two, and three or more days.
5. What should I do if I miss my period?
6. What should I do if I have bleeding between periods?
7. And if I want to become pregnant?
8. Which women should not take the pill?
9. Is it true that the pill causes cancer?
10. Can I take any (brand) pill?

A chi-squared analysis was completed for the data and the following comments represent a minimum confidence level of 90 percent.

Key Findings:

For only one of the issues did the brochure fail to increase knowledge about correct use in either city: what to do if three or more days are skipped.

Three issues were better understood by brochure recipients in both cities: which day to take the first pill, frequency of use, and what to do if one day is missed.

On the issue of efficacy the questionnaire asked respondents to either agree or disagree with the statement "the pill is not safe/effective." A significant improvement among those disagreeing with this statement was noted for brochure recipients in Recife, 53.6 percent versus 36.0 percent for respondents who did not receive the brochure, while the difference in Belo Horizonte (45.0 percent versus 39.7 percent) was not significant.

With regard to the issue of the pill offering protection against some forms of cancer, a significant difference in attitudes was seen among those who received the brochure in Belo Horizonte. Of those receiving the brochure, 19.2 percent agreed with the statement versus 6.4% of those who did not see the brochure. In Recife, 17.9 percent of brochure recipients agreed, which did not represent a significant difference from those not receiving the brochure.

A summary of the significant differences in attitudes and knowledge based on the brochure is as follows. A "+" indicates a significant difference in correct replies among those who received the brochure versus those who did not. A "-" indicates no significant difference between the two groups.

<u>Question</u>	<u>Belo Horizonte</u>	<u>Recife</u>
Promotes cancer	+	-
Is an effective method	-	+
Prevents cancer	+	-
Day to start using	+	+
Frequency of use	+	+
One day missed	+	+
Three days missed	-	-
Diabetes (contraindication)	-	+
Varicose veins (contraindication)	-	+

Conclusions:

- o The brochure was well designed making use of the baseline intercept study and effective in increasing correct knowledge about the pill among those who received it.
- o Although the brochure was pretested among the target audience, OSB thought that it contained too much information and that a series of brochures, each containing fewer key points of information, may be easier for consumers to comprehend.

Recommendation:

- o The evaluative research results should be used in fine-tuning the brochure and in developing additional materials. The materials should, of course, be tested among the target audience.

2. Manufacturers' Sales Data

Monthly sales data were submitted by Berlimed and Wyeth for both the test and control cities. Two control cities in which the interventions were not conducted were chosen against which to compare sales increases in the orals market in the test areas. In addition to the highlights generated for this report, a regression analysis was completed by OSB/SOMARC for the data submitted by Berlimed for Recife.

The control cities, Victoria in the South and Salvador in the Northeast, were selected according to the following criteria:

- o Similar percentage growth in oral contraceptive sales as that of the test city over the last five years.
- o Similar contraceptive prevalence level and contraceptive mix (percentage of users by type of contraceptives) as the test city.

- o Absence of outside factors (political movements, strong increase in family planning activities, closing of pharmacies or health posts due to strikes, etc.) that could affect contraceptive use.
- o The lack of spill-in of advertising from the test city.

A simple analysis of the average monthly sales for 1988 versus 1989 shows fairly dramatic increases for the primary CSM brands in Recife. It should be noted that the "primary brand" designation refers to the leading brand of the manufacturer.

Average Monthly Sales (Cycles 000)

<u>Brand</u>	<u>Test City</u>	<u>Control City</u>	<u>Total Brazil</u>
Microvlar - Berlimed	Recife	Salvador	
1988	21,200	8,400	1,914,183
1989	23,600	6,700	1,128,042
% Change	+11.3%	-20.2%	+0.1%

Unfortunately, distribution problems and changes in the distribution systems experienced by Wyeth in 1988 affected sales reporting of all their products. Although the data show gains in sales and very large percentage growth rates, the lack of reliable or representative base data does not permit the conclusion that the project was responsible for the gains noted. The sales data from Wyeth in Belo Horizonte are therefore not analyzed in this report.

The results for Microvlar in Recife are more straightforward. In an overall flat national sales market, sales in the test city increased by over 11 percent, while sales in the control area decreased by 20 percent.

Conclusion:

- o The sales data submitted for Belo Horizonte were not useful in analyzing the effects of the CSM intervention. A better format and data base should have been established for the manufacturers' sales reports.

Recommendation:

- o The format for manufacturers' sales reports should be agreed in advance of any project. The use of manufacturers' sales reports in analyzing projects should be weighed against the more costly but more accurate and complete method involving retail audits.

As noted earlier, a regression analysis was completed only for the Recife sales data submitted by Berlimed. The key findings of this analysis are presented graphically in Attachments 1 through 6.

Before the program from January 1987 to May 1988, 16 data points were adjusted to a curve and projected through November 1989. Graphs 1 and 2 show the actual sales data against the expected values, demonstrating that the real sales are about 10 percent above the projections for the entire period of the program in the test city, but over 16 percent above projected sales during the period of the ad campaign and other heavy PR and educational efforts. Sales in the control city, Salvador, are at or slightly below the projected levels for the entire period.

Graphs 3 and 4 present the actual versus projected sales for the test and control cities as a proportion of total sales for Brazil. It is clear that the participation of Microvlar - Recife in the total for Brazil increases dramatically during the program and less expressively, as it should be expected, for Triquilar - Recife. Again, the primary brand for the program was Microvlar.

Finally, graphs 5 and 6 demonstrate the changes in the level of the averages of the sales before and during the program. The positive changes for Microvlar and Triquilar in Recife are very expressive, while there is a decrease in Microvlar - Salvador, and an almost insignificant increase for Triquilar - Recife.

Conclusion:

- o The intervention activities significantly increased manufacturers' sales in the test areas versus the control cities and the national total.

3. CEPECS Product Distribution

Information about the distribution of products through FPAs is available only for CEPECS - Belo Horizonte. The reports submitted include:

- o Analysis of products distributed through their posts and clients served.
- o Report on the distribution of brochures in public areas.
- o Report on the training sessions for community leaders.

The product distribution data indicate that while the CSM activities increased the number of clients served by CEPECS, the number of new users of pills remained about the same. For first quarter, 1989, the base period before the interventions, a total of 217 pill users were served including 41 new users. Total pill users increased during the third quarter, the period of peak intervention activity, to 267, but only 34 were new users.

The total number of clients served showed a more dramatic increase from 1,530 for the first quarter to 2,781 during the third quarter. Significantly, fully 25 percent of all clients served in the third quarter learned of CEPECS through the radio and television campaigns. The stands in public places were also effective in attracting clients with 13 percent of all clients

served during the fourth quarter reporting to have learned about CEPECS through the stands.

Conclusion:

- o The media campaign and public interventions were effective in attracting new clients to the FPA post. The intervention did not, however, result in an increase in the number of new pill users served by the FPA.

The stands in public places were set up at a total of 11 locations during the intervention period. The stand consisted of panels decorated with the stork theme, kits of educational materials including the project brochure and a video player which was used to show the project television commercial along with videos about family planning. Key chains and stickers with the CEPECS logo were also distributed.

A total of 30,000 consumers were reached through this intervention. Interestingly, a large number of men were reached, 19,000 versus 11,000 women. Other positive results included a high level of support from the managers of the sites selected, supermarkets and train stations, and broad media coverage.

The major impact of this intervention, an increase in client visits to CEPECS posts, has already been noted.

Finally, four training courses were conducted among the leaders of community associations. The topics included basic information about anatomy and sexuality, the concept and importance of family planning, and family planning methods.

The major benefits observed by CEPECS were support by the community leaders for the advertising campaign and the establishment of an ongoing relationship for referrals to CEPECS.

Conclusion:

- o The public relations effort in training community leaders was helpful in avoiding objections to the advertising campaign as well as in recruiting clients for the FPA on an ongoing basis.

4. Mystery Shopper and Shop Attendant Surveys

Two evaluations were conducted among shop attendants in Recife: a Mystery Shopper Survey and a Survey of Shop Attendants.

Although Berlimed was supposed to have conducted training with employees of 40 pharmacies, only 19 pharmacies actually participated in the training effort. A Mystery Shopper study was conducted among 17 of these pharmacies (two of the trained pharmacies had closed by the time of the study). Seventeen control pharmacies were also included in

the study. These pharmacies had not been included in the Berlimed training. The preliminary results indicated a low level of effective training with only eight attendants found to be trained among the 17 pharmacies. A second stage of the study was therefore implemented.

The second phase of the study was a survey of shop attendants and consisted of interviewing as many of the attendants in the 17 pharmacies trained by Berlimed as possible. A total of 58 shop attendants were interviewed. Of this total, 13 were found to be trained and 36 had not received training.

The findings indicate that, overall, the shop attendants responded fairly accurately to the mystery shoppers' questions, but asked few questions themselves. Although the sample consists of only 21 trained respondents, trained attendants appeared more likely to know when to start taking the pill than the sample of 53 untrained attendants. The trained respondents also seemed to know more about the side effects of the pill than those who were not trained.

Conclusions:

- o The Berlimed training program may have had wider coverage among pharmacists than identified by the Mystery Shopper Survey because the survey sample was among shop attendants only.
- o However, Berlimed actually conducted training among less than half of the pharmacies than were in their original plan. In addition, very few trained shop attendants were found in these pharmacies.
- o It is apparent that Berlimed did not provide suitable training for an adequate number of pharmacies or shop attendants in Recife to meet program objectives.
- o Although the trained shop attendants interviewed had retained information about the pill from their training courses, this information was not being used in practical interactions with customers.
- o Provisions were not included in the training program for refresher courses and training for new staff.

Recommendations:

- o Training programs should focus almost exclusively on shop attendants because they deal directly with the public more often than pharmacists. In addition, all shop attendants in each pharmacy should be trained.
- o Future training courses should integrate the use of POP materials and slides, and should give the shop attendants firm guidelines about how to conduct the sale of oral contraceptives and communicate with consumers about correct pill use and pill contraindications.

- o The training team should include a credible authority figure such as a physician.
- o Training programs for shop attendants should include a continuity component to provide refresher courses and to train new staff.
- o Training components should be monitored more closely by program management to make sure all training sessions are conducted appropriately.

5. Factory Social Assistant Survey

This survey was undertaken only in Belo Horizonte where CEPECS conducted training for factory social assistants and assisted with their presentations to factory workers. The CSM program in Belo Horizonte included training for 11 factory social assistants and conducting talks in the 11 factories among factory workers. A formal in-depth interview was completed among 9 of the social assistants immediately following their talks to factory workers.

The reception of the talks was universal among the social assistants:

- o All said that the talk was useful in both their personal and professional lives.
- o All said that they learned much.
- o All said that the talk was useful in facilitating their work and in opening new areas of instruction.
- o The content and presentation were also well liked and were thought to have created interest in family planning among the workers.

The only negative aspect noted was the lack of continuity or the time limitation of the talk.

Conclusion:

- o The training of factory social assistants and talks to workers in Belo Horizonte by CEPECS was well liked and effective and should be continued.

6. Factory Worker Survey

Factory worker surveys were conducted in both Recife and Belo Horizonte although different methodologies were used. This section of the evaluation will consider each of the evaluations separately before summarizing the findings and drawing conclusions.

Recife

Questionnaires were completed in all five factories whose workers were trained by Berlimed, in the Grupo Bom Preco which was trained by their social assistants, and in a control group of two factories which did not receive training. A total of 337 questionnaires were completed among 194 women who attended the training and 143 who did not.

Key Findings:

Several questions did not discriminate between those who did and did not attend the sessions, since a high level of correct knowledge already existed:

<u>Question</u>	<u>% Correct reply (total sample)</u>
Day to start using	90.9%
Nursing mothers (contraindication)	94.1%
Diabetes (contraindication)	94.7%
Heart problems (contraindication)	95.9%
Varicose veins (contraindication)	91.4%

The questions about cancer did show an improvement among those who were trained; 75.3 percent agreed that the pill does not cause cancer among those who were trained versus 55.9 percent of those not trained. Although a significant increase in correct responses was recorded for preventing certain kinds of cancer, the level is still very low at 10.8 percent.

Belo Horizonte

The program conducted by CEPECS in Belo Horizonte included 35 talks in 25 factories for a total of 8,029 workers in attendance. Data were collected from 13 of the factories immediately before and after the talk and again two months after the talk to measure retention.

Key Findings:

Significant improvements (95 percent confidence for chi-squared analysis) were measured in the following areas:

<u>Question</u>	<u>Pre-Talk</u>	<u>Post-Talk</u>
Prevents cancer	10.4%	40.6%
Stop use with nausea, etc.	49.5%	60.4%
Can be used by single women	73.3%	81.7%
35 years old and smoke should not use	77.7%	86.6%
Diabetes (contraindication)	89.1%	98.0%
Heart problems (contraindication)	92.6%	98.0%

The follow-up questionnaire after two months indicated that correct knowledge had been raised and retained in the following areas:

- o Not shown to cause cancer
- o Stop use with side effects
- o Can be used by single women
- o Women 35 years old and older and smoke should not use
- o Women with heart problems should not use

The following table summarizes the significant shifts in correct knowledge in Recife between those who attended training sessions and those who did not, and in Belo Horizonte for pre- and post-talk knowledge and retention after two months:

<u>Question</u>	<u>Recife</u>	<u>Belo Horizonte</u>	
		<u>Pre/Post</u>	<u>Ret</u>
Prevents some cancer	+	+	+
Does not cause cancer	+	-	+
No difficulty becoming pregnant	-	-	-
Day to start using	-	-	-
Stop with side effects	-	+	+
Nursing (contraindication)	-	-	-
Single women can use	-	+	+
Contraindications:			
35 and smoke	-	+	-
Diabetes	-	+	-
Heart problems	-	+	-

Conclusions:

The OSB analysis concluded that the factory program was a greater success in Belo Horizonte than in Recife due to:

- o Involvement of the social assistants in Belo Horizonte who provided continuity and follow-up to the talks.
- o More extensive use of educational materials and interactive presentation style in the Belo Horizonte talks, including a film showing how the various contraceptives function, slides on all the methods, an animated video about family planning, and a display of contraceptives.
- o Use of a strong family planning organization like CEPECS whose strength is in these kinds of consumer educational efforts, and could provide credible authority figures to disseminate this information.

Recommendations:

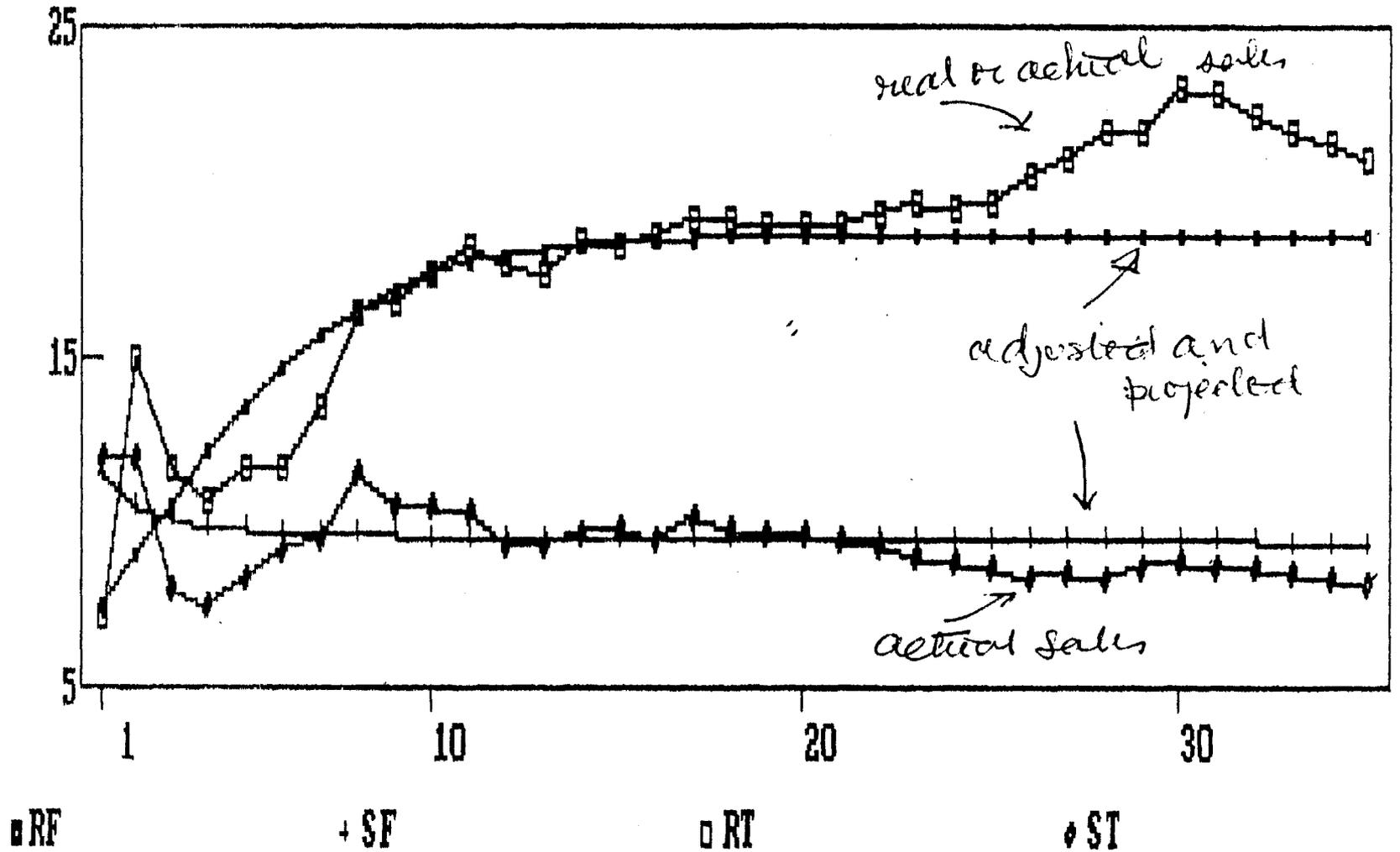
- o The factory training component should be continued by a strong group like CEPECS and designed according to the needs of the workers. The provision for ongoing information and participation by the workers in the training will likely improve the results, as will an interactive style of presentation.

- o This type of detailed training program should also be given to the pharmacy shop attendants by an organization like CEPECS.

ATTACHMENTS

MICROULAR-RECIFE E SALVADOR-PROJETADO X REAL (Thousands)

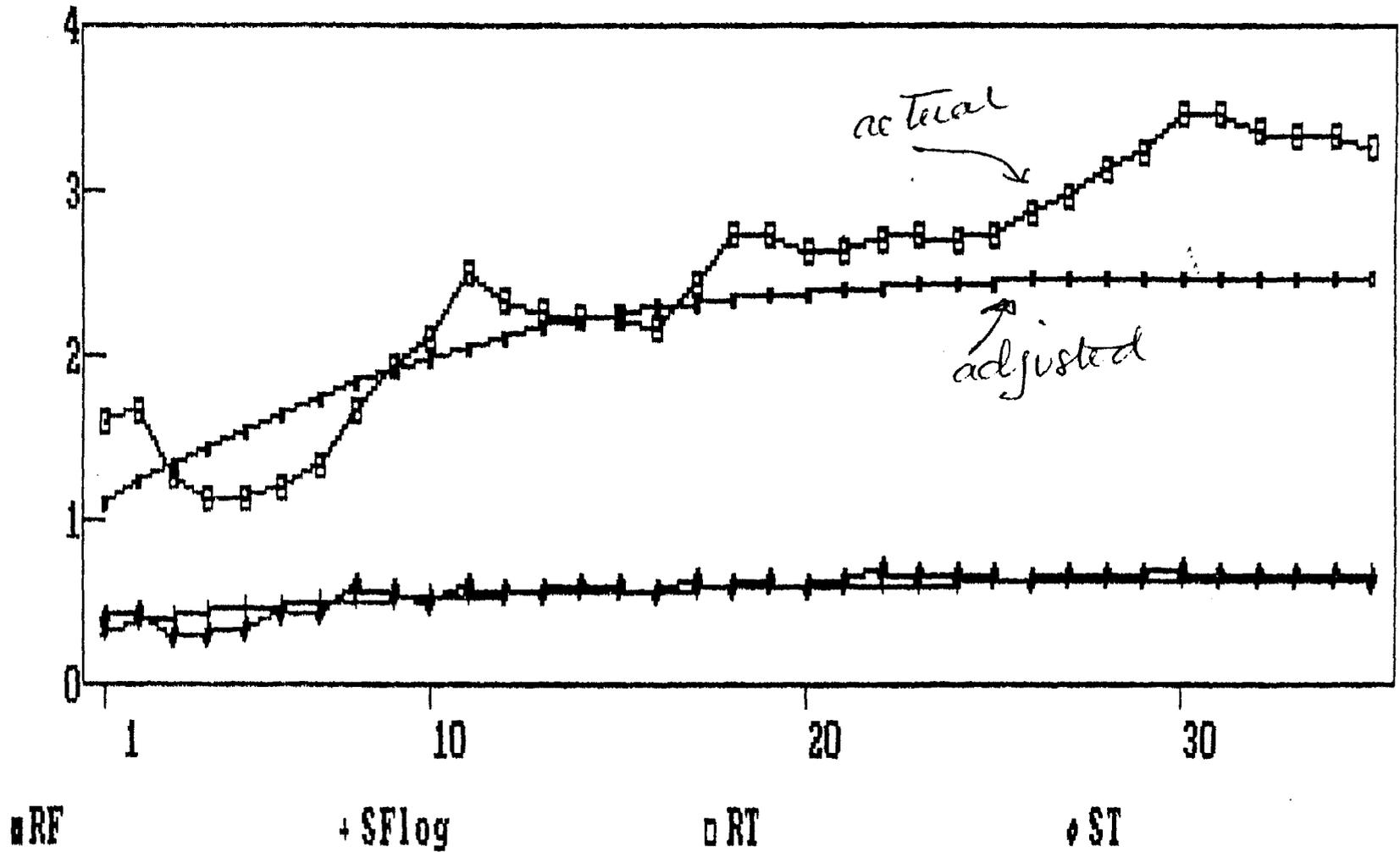
(1)



① Adjusted a function until the beginning of the program.

(2)

TRIQUILAR-RECIFE E SALVADOR-PROJETADO x REAL (Thousands)

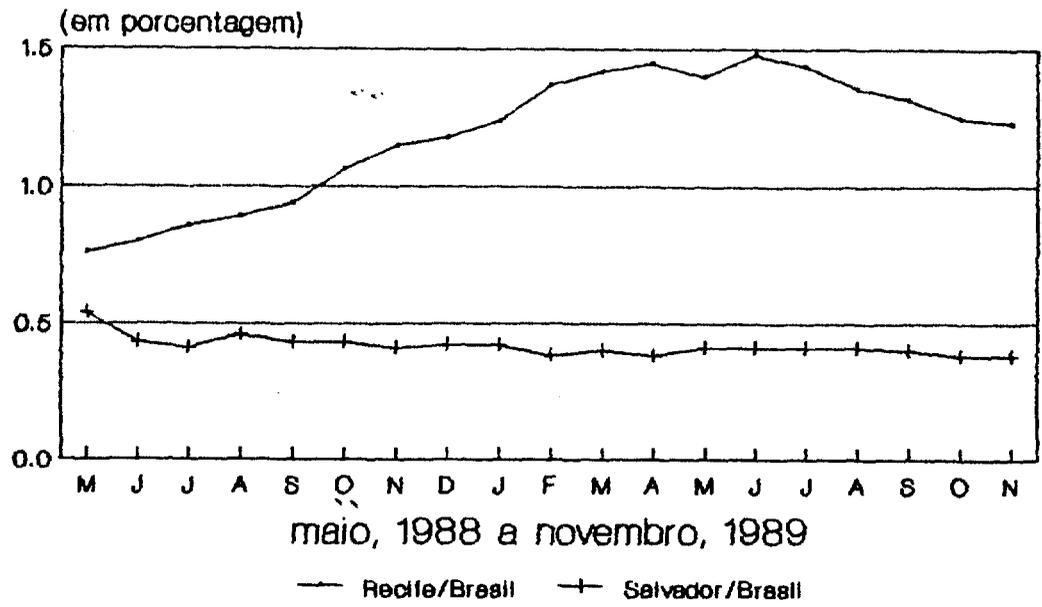


2/2

(3)

MICROVLAR-RECIFE x SALVADOR

Evolucao da Participacao no Brasil

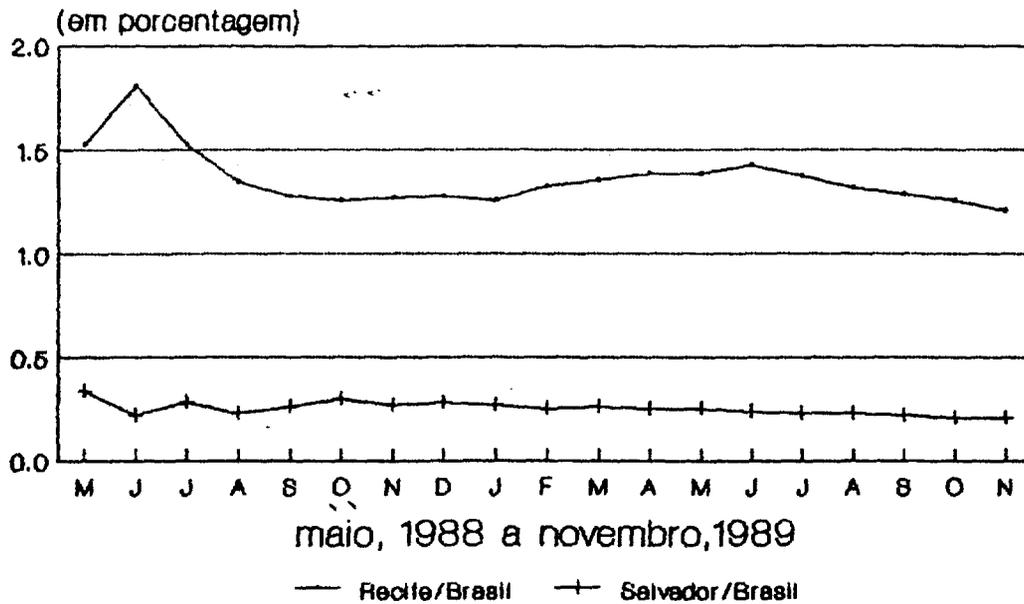


medias historicas de Recife e Salvador
em relacao as medias historicas para
o Brasil

(4)

TRIQUILAR-RECIFE x SALVADOR

Evolucao da Participacao no Brasil



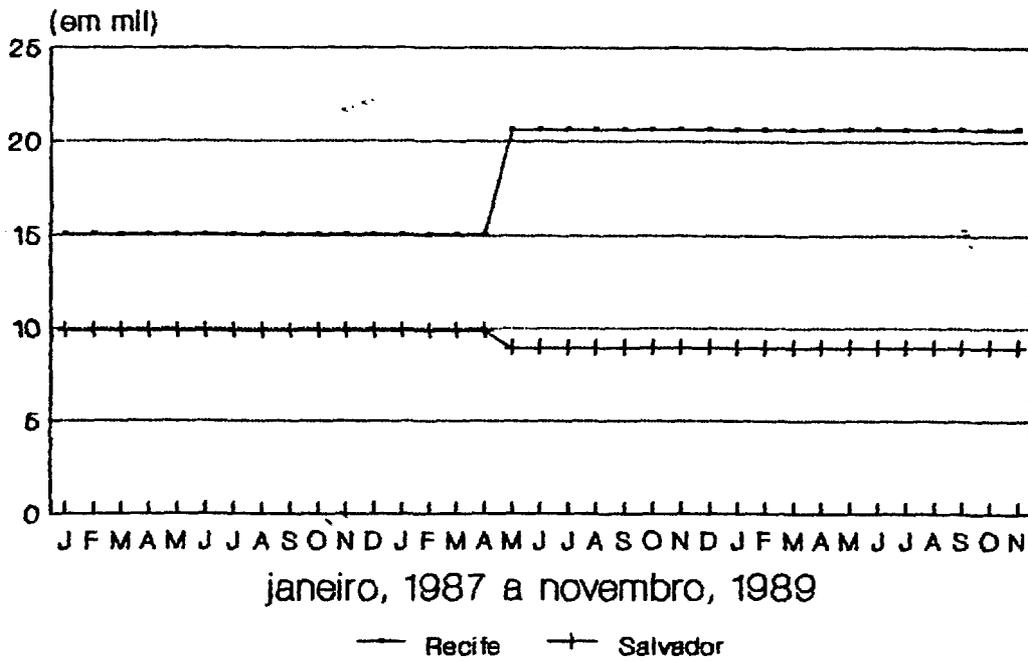
medias historicas de Recife e Salvador
em relacao as medias historicas para
o Brasil

These results are not good.

(5)

MICROVLAR-RECIFE x SALVADOR

Medias Historicas-mudanca de nivel

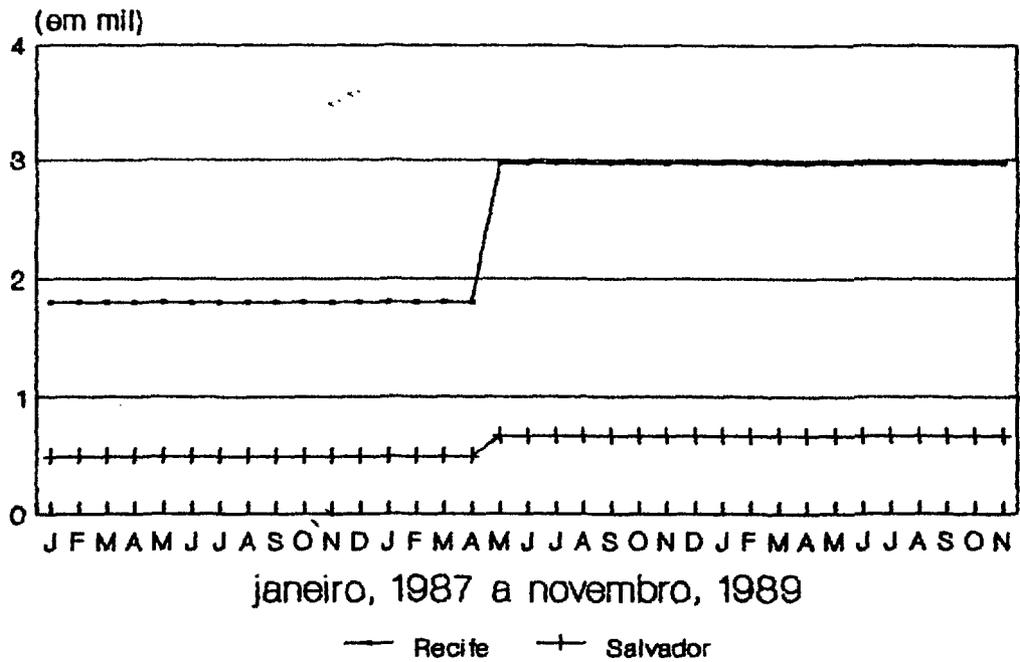


Medias antes e durante o PPMS

(6)

TRIQUILAR-RECIFE x SALVADOR

Medias Historicas - mudanca de nivel



Medias antes e durante o PPMS