

AGENCY FOR INTERNATIONAL DEVELOPMENT  
WASHINGTON, D. C. 20548  
BIBLIOGRAPHIC INPUT SHEET

FOR AID USE ONLY  
*Batch 98*

1. SUBJECT CLASSIFICATION: Population  
2. PRIMARY: Population  
3. SECONDARY: Family planning--Jamaica  
4. AID NUMBER: PC00-0000-G326

5. TITLE AND SUBJECT: Contraceptive retail sales program, Jamaica

6. AUTHOR: (101) Westinghouse Health Systems, Columbia, Md.

7. DOCUMENT DATE: 1977  
8. NUMBER OF PAGES: 74p.  
9. AID NUMBER: AID/PC

10. REFERENCE ORGANIZATION NAME AND ADDRESS: Westinghouse

11. SUPPLEMENTARY NOTES (Sponsoring Organization, Publisher, Availability):

12. ABSTRACT:

13. CONTROL NUMBER: PN-AAG-387

14. PRICE OF DOCUMENT:

15. DESCRIPTORS: Contraceptives  
Contraceptives, oral  
Family planning  
Jamaica

16. PROJECT NUMBER: 932061200

17. CONTRACT NUMBER: AID/pha-C-1063

18. TYPE OF DOCUMENT:



# ACKNOWLEDGEMENTS

Development Health Systems would like to express its appreciation to all those who assisted in implementing the various Development Health Unit Programs, especially to the following individuals and organizations that played particularly important roles. Their dedication to the program and their country contributed to securing the program's success.

## NATIONAL FAMILY PLANNING BOARD

### CEO PROGRAM

Mr. Morris Jamaroff  
Marketing Officer

Mr. Gerald Smith  
Marketing Consultant

Mrs. Grace Ann Gray  
Secretary

### ADMINISTRATION

Mr. C. H. Allison  
Executive Director  
1974-75

Mr. E. M. P. Owen  
Executive Director, Acting  
1976-present

Dr. Phyllis Macpherson-Russell  
Chairman  
1974-75

## MINISTRY OF HEALTH

Honorable Dr. Kenneth Mahood  
Minister of Health and Environmental Control  
1975-76

Honorable Dr. Euzel Marley  
Minister of Health and Environmental Control  
(1976-77)

Dr. Thomas Robinson  
Principal Medical Officer

Mr. Peter Christensen  
Public Relations Officer

Dr. John Hill  
Director of Pharmaceutical Services

## DUNLOP CORBIN COMPTON LTD.

Mr. Terryson Levy  
Managing Director

## CECIL BACCARDI, LTD.

Mr. Simon Souler  
General Manager  
1974-75

Mr. Raymond Evans  
General Manager  
1975-76

Mr. Reginald Webb-Harris  
General Manager  
1977

Mr. O. M. Gerrick  
General Manager  
1977-present

Mr. Tony Wright  
Sales Manager

## PHARMACEUTICAL SOCIETY OF JAMAICA

Mr. Vernon Rubinson  
President

## MEDICAL ASSOCIATION OF JAMAICA

Dr. Keith Binnie  
President

## JAMAICA TEACHERS ASSOCIATION

## JAMAICA FAMILY PLANNING ASSOCIATION

## JAMAICA ASSOCIATION OF JAMAICA

## JAMAICA COUNCIL OF CHILDREN

## JAMAICA LEAGUE OF WOMEN

## FAMILY PLANNING MANAGEMENT SCHOOL UNIT

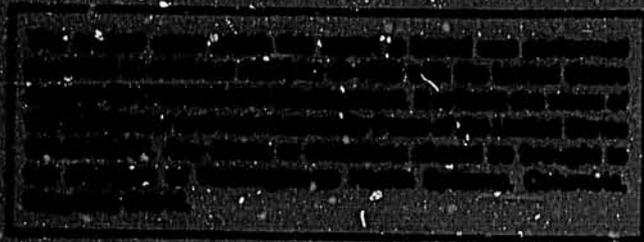
## MINISTRY OF SOCIAL SERVICES

██████████  
██████████  
██████████  
██████████

██████████  
██████████  
██████████  
██████████

# CONTENTS

SUMMARY	v
PROGRAM PERSPECTIVE	1
PROGRAM DEVELOPMENT	7
PRODUCT LAUNCH	33
PROGRAM MAINTENANCE	37
MANAGEMENT TRANSITION	49
RESULTS	51
RECOMMENDATIONS	65



# SUMMARY

In July 1974, Westinghouse Health Systems began the process of establishing a contraceptive retail sales program (CRS) to market condoms and oral contraceptives in Jamaica. The program was designed to utilize existing retail distribution systems. The major focus was on developing indigenous resources to augment the clinic activities of the Jamaica National Family Planning Board. Developmental activities centered on the following areas:

- Advertising and promotion
- Product pricing and packaging
- Consumer and retailer education
- Distribution
- Program evaluation and monitoring.

Extensive research and testing was carried out to ascertain public attitudes, develop suitable advertising and packaging materials, and to determine the most effective distribution channels. The initial phase of the program was directed toward educating the general public, distributors, and retailers in the availability, usage and potential side effects of oral contraceptives.

A major program component was an advertising campaign aimed at men and women residing in both urban and rural areas. Radio, television and the press were utilized extensively to advertise the two brands — Perle oral contraceptives and Panther condoms. In addition, large billboards, metal signs, bus shelters and market signs were

used to reinforce the program's image. A wide variety of point-of-sale material, such as posters, metal signs, dispensers and brochures were also developed and distributed to participating retailers. Other promotional materials included T-shirts, a Panther and Perle Reggae record and vinyl decals.

As a result of this program, Panther and Perle have become household words in Jamaica and have become almost synonymous for all brands of condoms and oral contraceptives.

In September 1977, some three years after implementation, management of the program was turned over to the Jamaica National Family Planning Board. Annualized program sales had reached 184,000 cycles of oral pills and 880,000 condoms through 267 Perle outlets and 1108 Panther outlets. Statistics through 1976 show that the introduction of the Panther and Perle brands had no effect on the sales of competitive brands (approximately 125,000 cycles of pills and 480,000 condoms per year). Therefore, as a result of the program, the commercial sale of pills has more than doubled, while the sale of condoms has nearly tripled. Likewise, there has been no negative impact on the distribution of condoms and oral contraceptives through the public clinic sector. In addition, the cost per acceptor in the CRS program has been less when compared to costs per acceptor in the public sector clinics. By 1978, the projected costs per acceptor will be \$2.62 in the CRS program versus \$32.73 in the public sector program.

## PROGRAM PERSPECTIVE

Previous work by Westinghouse Health Systems has documented the potential of the commercial sector as a method of making contraceptive programs more readily available to the general public. While traditional family planning clinic services and out-reach programs are making important contributions to reducing population growth, limitations in human and financial resources inevitably restrict their effectiveness. This is especially true in developing countries.

All countries, regardless of size, location, or system of government, have a distribution system through which goods and/or services are distributed. These distribution systems provide an established channel through which contraceptive products can be marketed. To be successful, however, several conditions must exist to help guarantee the success of a commercially based program. Such conditions include:

- Host government recognition of the need for family planning and its support for efforts in the private sector
- An intensive consumer oriented distribution system
- Participation by a majority of the people in the cash economy.

## Country Selection

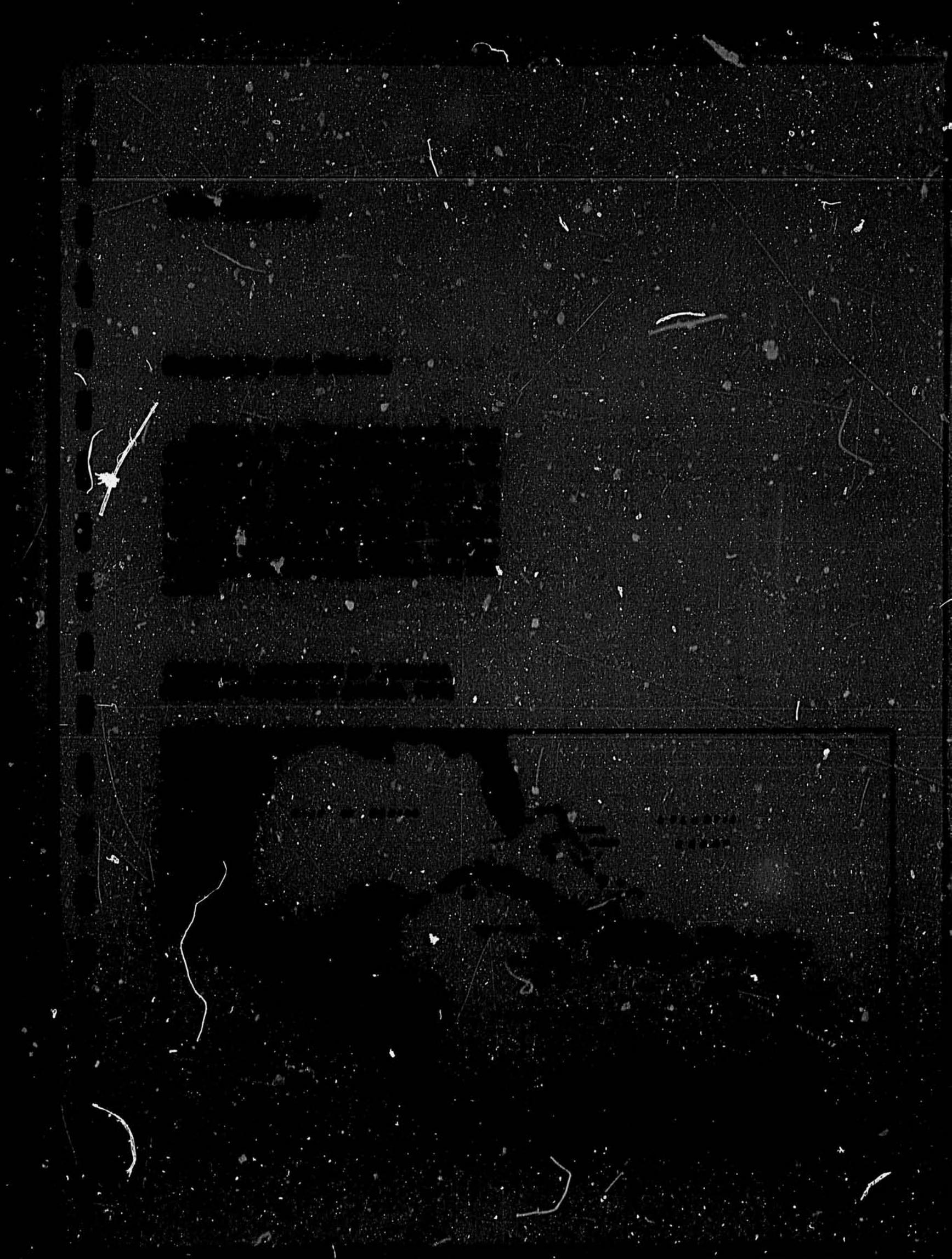
Westinghouse Health Systems under AID/Contract ord/2019 conducted a review of the current and potential role of commercial channels in the distribution of contraceptives in eight countries, including Jamaica. The data revealed that Jamaica had all of the necessary prerequisite conditions for implementing a commercially based contraceptive distribution program.\* In addition, Jamaica had several other advantages which made it a prime candidate for implementing a successful program, including:

- A strong on-going public sector family planning program
- A relatively high literacy rate
- A high level of consumer familiarity with contraceptives
- A large number of educated and aware retailers
- A number of highly qualified, full-service advertising agencies
- Adequate in-country printing facilities
- A number of firms with national distribution systems
- A well-developed communication/media system.

There were also several factors serving to restrict widespread acceptance and use of contraceptives that could easily be overcome with government cooperation and good marketing techniques.

- Prohibition against advertising contraceptives, except in professional journals
- High duties and taxes on imported contraceptives
- Oral pills available only by prescription
- Concentration of pharmacies in urban areas
- High price of existing commercial contraceptive brands
- The association of the condom with disease and prostitution
- Retailers uninformed on side effects of the pill and reluctant to actively promote contraceptives.

The above considerations resulted in Jamaica being selected as the site for a retail contraceptive sales program which began in July 1974.



## Government

Upon gaining independence from Britain in 1962, Jamaica adopted a parliamentary system of government, with a strong executive. Jamaica is a member of the British Commonwealth of Nations, the Caribbean Community (CARICOM), and the United Nations.

## Economy

Jamaica's major sources of income are bauxite and alumina. In the early 1970's, Jamaica was the world's second leading producer of bauxite. In 1975, 5.4 million long tons of bauxite and 2.4 million long tons of alumina were exported.<sup>2</sup> The tropical climate attracts a large number of tourists each year, and tourism is an important segment of the economy. In addition, bananas, sugar and rum are exported.

## The People

The Jamaican population is 90 percent black. The remaining 10 percent is East Indian, Chinese, white, or of other racial origin.<sup>3</sup>

English is the primary language, but many people speak the dialect of the country, a mixture of English and African-Indian words.

## Population

Jamaica has a population of 2.1 million people,<sup>4</sup> scattered over 4,244 square miles. This results in a population density of 448 people per square mile. The most recent population data (1975) shows that the population is unevenly distributed over 14 parishes ranging from a high of 38.4 percent in Kingston/St. Andrew to a low of 3.1 percent in Hanover. Approximately 34 percent of the population lives in urban areas (defined in this report as Kingston/St. Andrew and Montego Bay.)

... ..

**BIRTHRATE AND DEATHRATE**

PER 1,000 POPULATION -

ANNUM

Year	Birth Rate	Death Rate
1950	40 (estimated)	17.0
1951	39.7	17.0
1952	39.4	17.0
1953	39.0	17.0
1954	38.6	17.0
1955	38.2	17.0
1956	37.8	17.0
1957	37.4	17.0
1958	37.0	17.0
1959	36.6	17.0
1960	36.2	17.0

(Statistical Yearbook of Jamaica, 1976.)

**POPULATION DENSITY OF JAMAICA 1975**

(Statistical Yearbook of Jamaica, 1976.)

- a. Initial government recognition of population growth.
- b. First full year of government family planning services.



# PROGRAM DEVELOPMENT

Westinghouse Health Systems, Columbia, Maryland, was contracted by USAID to initiate the contraceptive retail sales program in Jamaica. Health Systems had previously investigated the role of commercial channels in the distribution of contraceptives in several developing countries, including Jamaica. This research identified and evaluated the existing contraceptive market, the channels of distribution, and the potential for increased private sector participation in expanding the availability and usage of contraceptive products.

As a result, Westinghouse designed a marketing plan based on the inputs from importers, retailers, and current and potential consumers of contraceptive products. Emphasis in this plan was placed on five areas:

- Product and packaging
- Price
- Advertising and promotion
- Distribution
- Program evaluation and monitoring

Westinghouse's contract called for the implementation of this plan over a three year period. The first year's efforts were to establish distribution and promotional programs, begin basic promotion to previously defined target groups, launch new products, and establish monitoring procedures. During the second year promotional activities were to be modified as indicated by evaluation programs and the distribution network was to be expanded in

the final year emphasis was to be placed on increasing awareness by setting up focus groups and on establishing guidelines for minimum program implementation.

Westinghouse Health Systems focused its initial efforts on the development and implementation of the program and the dissemination of the program objectives to target groups. The program objectives to target groups were disseminated to the government of Jamaica. A working relationship was established with the Jamaican National Family Planning Board (NFPS). An initial staff of personnel was developed in consultation with the Ministry of Health (MHW) for implementation. Administrative support was provided at all levels of operation (marketing, distribution, printing, market research).

THE NEW YORK

[REDACTED]

## The Message

An early priority in the program was the selection of an advertising agency. Based on a thorough review of all Jamaican advertising agencies, the firm of Dunlop Corbin Compton, Ltd., was selected. It was necessary that the philosophy and advertising message developed by this agency be coordinated with the National Family Planning Board's objectives. Those objectives, as given official recognition in 1974 in "Ministry Paper No. 1," were to:

- Motivate people toward the use of contraceptives
- Create a realization of the role and benefits of family planning within the framework of national development.

The Board's message emphasized the voluntary nature of family planning, not only in limiting the number of children a couple might have, but in promoting better care for those children.

The commercial retail program enlarged on this theme by stressing the importance (and the possibility) of not having a child until it could be provided for properly and not until the parents were ready for it.

The theme of "The Care About Life" was adopted for the campaign — emphasizing a sense of responsibility and dignity.

## The Product

The system is manufactured by **IBM** Corporation, 221 North **Michigan** Street, **Ann Arbor**, Michigan 48106. It is a **mainframe computer system** consisting of both **hardware** and **software** components.

The **hardware** consists of the **System/360** computer system, which includes the **central processor**, **main storage**, and **input/output devices**. The **software** consists of the **Operating System**, **Application Programs**, and **Utilities**.

An **operator** must be present at all times to monitor the system and to perform necessary maintenance. The system is designed to be used by **multiple users** simultaneously. The system is **compatible** with other IBM systems and can be used in a **variety of configurations**.

The system is **designed** to provide a **high level of performance** and **reliability**. It is **easy to use** and **flexible**, allowing users to **customize** the system to meet their specific needs.

The system is **supported** by a **large number of service centers** and **training courses**. It is **available** in a **wide range of configurations** and **prices**.

The system is **designed** to be **easy to maintain** and **flexible**. It is **compatible** with other IBM systems and can be used in a **variety of configurations**.

The system is **designed** to provide a **high level of performance** and **reliability**. It is **easy to use** and **flexible**, allowing users to **customize** the system to meet their specific needs.

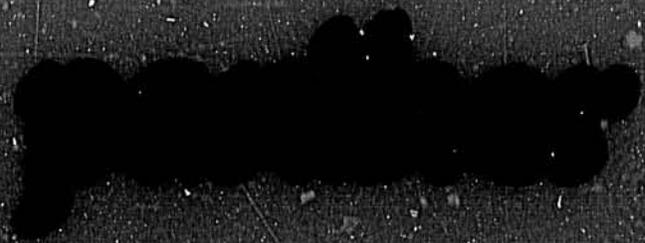
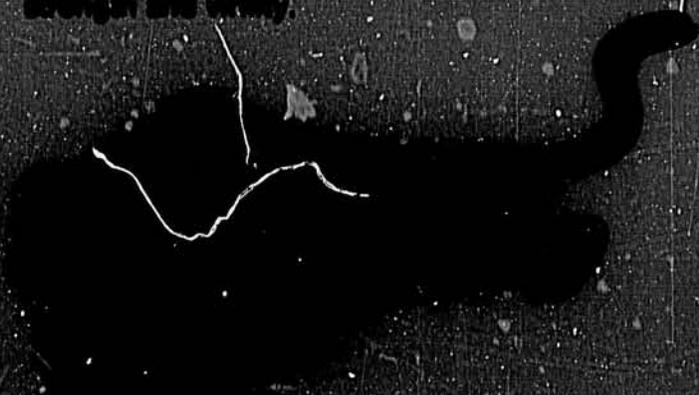
The system is **designed** to be **easy to maintain** and **flexible**. It is **compatible** with other IBM systems and can be used in a **variety of configurations**.

## Copy, Brand Name and Packaging Selection

Early in the development stage, Westinghouse Health Systems conducted an evaluation of several proposed contraceptive brand names, copy, logos, packages, point-of-sale materials and educational leaflets. A sample of 400 males and 400 females between the age of 18 and 45 were interviewed. The results of this study were used to select the brand names and associated materials.

Other objectives, specific to each product, guided the final selection of brand names. For the condom, the desire was to present an image that would be recognizable to the majority of the population; have a bold, masculine connotation; and contribute to a "respectable" image for the product.

To reinforce brand recognition, a graphic symbol was designed for impact and realism — a slinking panther, conveying a sense of strength and virility.



© 1975 Westinghouse Health Systems



The brand name for the oral pill was selected with the same care and sensitivity as was used for the condom. It was recognized that an educational program would be needed to promote use of the pill. However, it was felt that the right image for the product could promote its use and acceptability in and of itself, by conveying an aura of safety, protection and femininity.

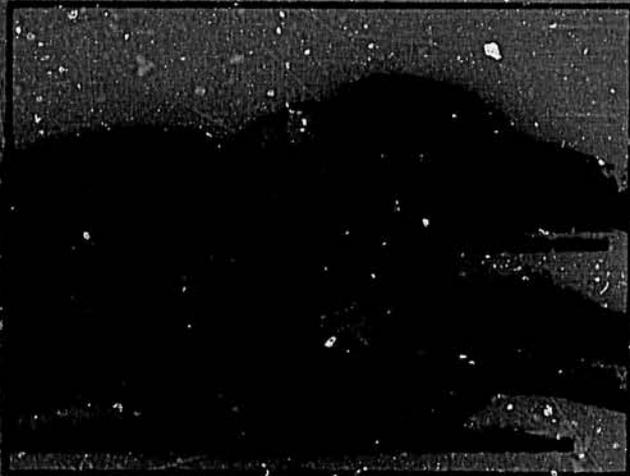
# PERLE

ORAL CONTRACEPTIVES

The symbol of a pearl, safety enclosed within a gem shell, chosen by the women who were consulted. Particular emphasis was placed on selecting a color scheme that was soft and soothing — light greens and blues.



Perle is offered in a satchel pack containing one cycle of oral pills.



Perle Single Pack

The amount of money being offered is a



In addition, each pack contains a leaflet developed in conjunction with the NFPB, which tells how to use Perle and lists other important information on oral contraceptives.

**HOW TO USE PERLE**

First make sure you get the correct Perle pack. Your doctor should give you the correct pack. If you are sure of your cycle, you may start on Day 1 (even if there is a 5 Day Start Pack) or Day 5 (the first day of your next period). Take one pill each day for 21 days. On the 22nd day, stop taking the pills for 7 days. During this time, you may have a menstrual period. On the 23rd day, start taking the pills again. If you do not have a menstrual period, you may start on Day 1 or Day 5. If you do not have a menstrual period, you may start on Day 1 or Day 5. If you do not have a menstrual period, you may start on Day 1 or Day 5.

**IF YOU FORGET TO TAKE A PILL**

Take the pill you forgot, as soon as you remember. If you forget to take a pill for 2 or 3 days, you may have a menstrual period. If you forget to take a pill for 4 or more days, you may have a menstrual period. If you forget to take a pill for 4 or more days, you may have a menstrual period.

**IMPORTANT INFORMATION ON PERLE**

Perle is a prescription drug. It is not for everyone. You should talk to your doctor about whether you should take Perle. Perle may have some side effects. Some of these side effects may be serious. You should talk to your doctor about these side effects. You should also talk to your doctor about any other medicines you are taking. Perle may interact with some other medicines. You should talk to your doctor about these interactions. You should also talk to your doctor about any other health problems you have. Perle may make some health problems worse. You should talk to your doctor about these health problems. You should also talk to your doctor about any other health problems you have. Perle may make some health problems worse. You should talk to your doctor about these health problems. You should also talk to your doctor about any other health problems you have.

Perle Label

# The Media

An important aspect of the program was an extensive, broad based advertising campaign utilizing all types of media aimed at all socio-economic groups. Particular emphasis, however, was placed on the high-risk 14 to 35 year age group. Radio, television, cinema and press ads promoted the message; billboards, metal signs, bus cards and bus shelters reinforced product image and availability.

## Radio

Jamaican radio reaches all socio-economic groups throughout the island. Approximately 80 percent of the population listens to the radio in an average day. An initial series of radio ads were composed in standard Jamaican English. They were designed to have a broad-based appeal for all socio-economic classes and to establish mass consumer brand recognition.

### Typical Panther Radio Spot

### Typical Perle Radio Spot

<p>CLIENT: Westinghouse Health Systems    DATE: August 14, 1975</p> <p>PRODUCT: Panther    JOB NO</p> <p>AREA:    MEDIA: Ra.Ho</p> <p>REMARKS:    SCHEDULE:</p> <p>DESCRIPTION: Dur: 30 sec.</p> <p>Preventing unwanted pregnancy is a 50/50 responsibility, that men and women must share.</p> <p>That's why we made Panther for men.</p> <p>Panther, a bold new condom... made for the man who cares enough about life - to accept the responsibility of life. To wait until he's ready and is attired to make life.</p> <p>Why take chances. Use Panther condoms.</p> <p>Panther is sure, Panther is safe, Panther is strong.</p> <p>Panther is made to protect you, to protect her to protect life.</p> <p>If you care about life.....you can find Panther everywhere.</p>	<p>DATE: 12/3/75</p> <p>CLIENT: WESTINGHOUSE HEALTH SYSTEMS    CONC:</p> <p>PRODUCT:    MEDIA: RADIO</p> <p>AREA:    SCHEDULE:</p> <p>REMARKS: PERLE    DESCRIPTION: Dur: 30 seconds</p> <p>Children are among God's greatest gifts to mankind. They are to be loved, cherished and cared for.</p> <p>But caring becomes difficult when a child is born and you are not quite ready or able to cope.</p> <p>To prevent unwanted pregnancy... take the pill called Perle.</p> <p>Perle oral contraceptives.</p> <p>Perle is safe, sure and easily available.</p> <p>Ask your Doctor or dispenser about Perle.</p> <p>But you don't need a prescription to buy it.</p> <p>Perle Oral Contraceptives... If you care about life.</p>
--	--

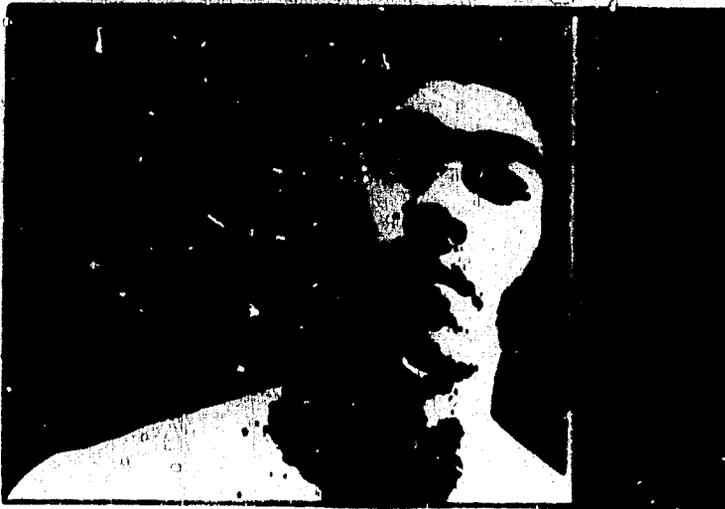
## Television/Cinema

Television's greatest contribution to the art of mass communication is the television screen. It is the most powerful and most intimate of all mass communication media. It is the only medium that can be seen and heard at the same time. As a result, it has become the most powerful and most intimate of all mass communication media.

Television's greatest contribution to the art of mass communication is the television screen. It is the most powerful and most intimate of all mass communication media. It is the only medium that can be seen and heard at the same time. As a result, it has become the most powerful and most intimate of all mass communication media.

## Press

Three daily newspapers reach all socio-economic classes. The major paper has an average circulation of over 60,000 daily (86,000 on Sundays) with an average readership of seven persons per copy. The initial Panther and Perle ads were aimed at promoting brand recognition and acceptance among all socio-economic groups.



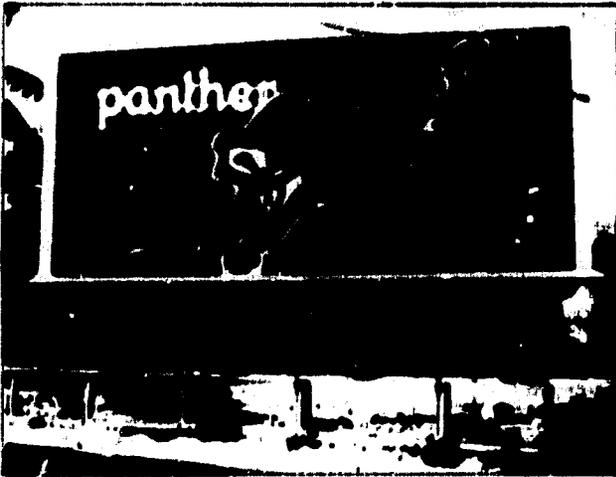
Initial Panther Press Ad



Initial Perle Press Ad

### Billboards (Panther Only)

Panther billboards were placed in major towns and along primary traffic corridors in rural areas. Initially there were ten billboards rotated among twenty locations on a quarterly basis.

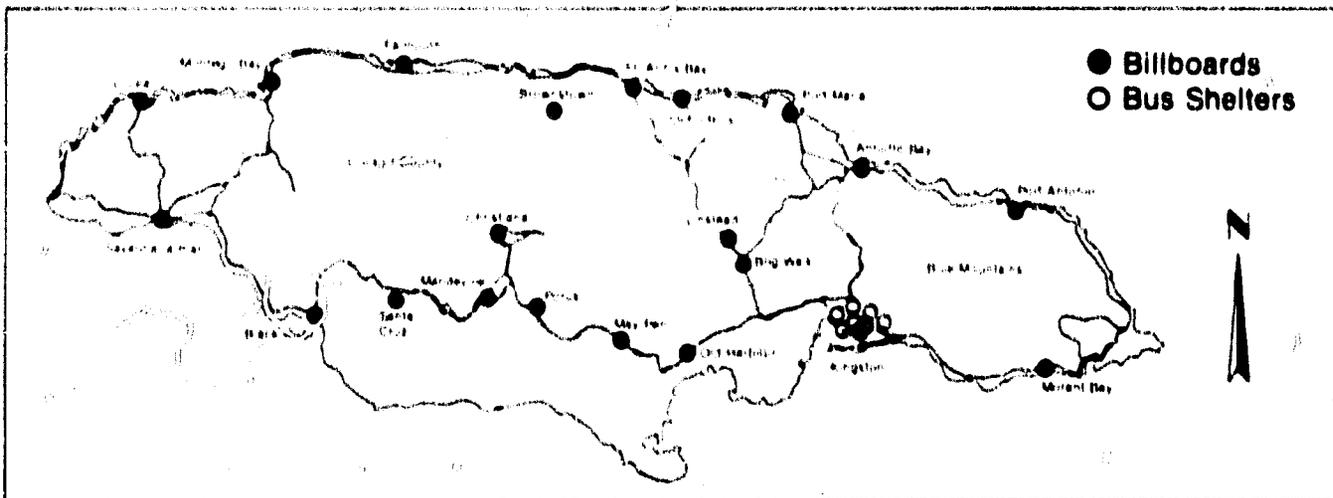


### Bus Shelters (Panther Only)

Eight Panther bus shelters were placed along major bus routes in Kingston. These shelters are visible not only to bus users, but to motorists and others using these routes.

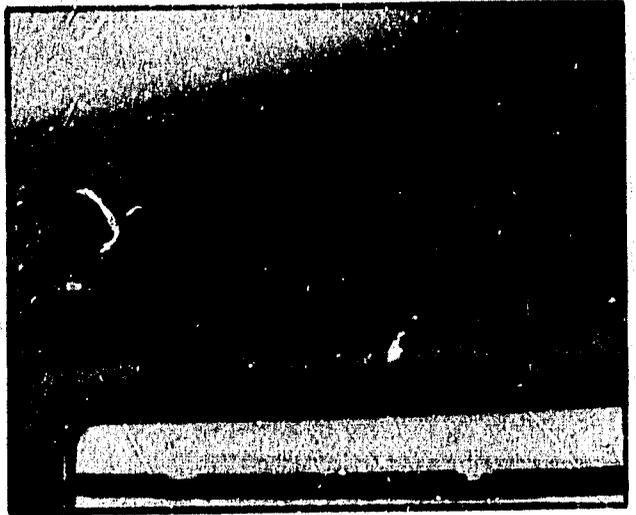


### LOCATION OF PANTHER OUTDOOR ADVERTISEMENTS (June 1975)



## Bus Cards (Perle Only)

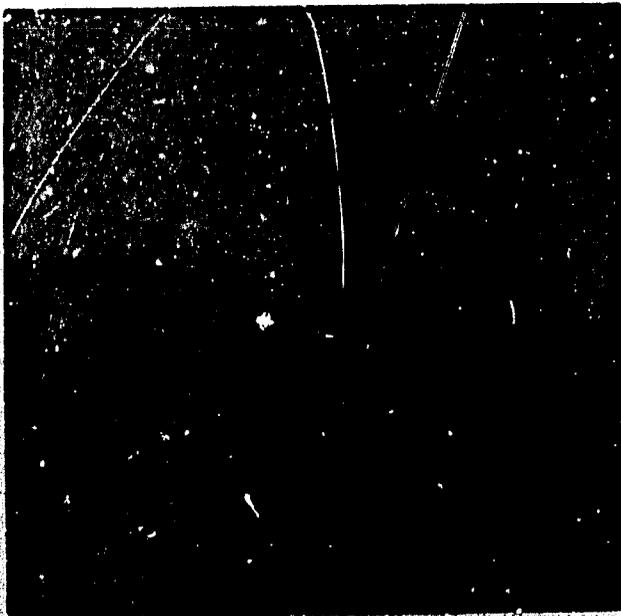
Cards promoting Perle oral contraceptives were placed in the interior of sixty buses operated by the Jamaican Omnibus Service in Kingston.



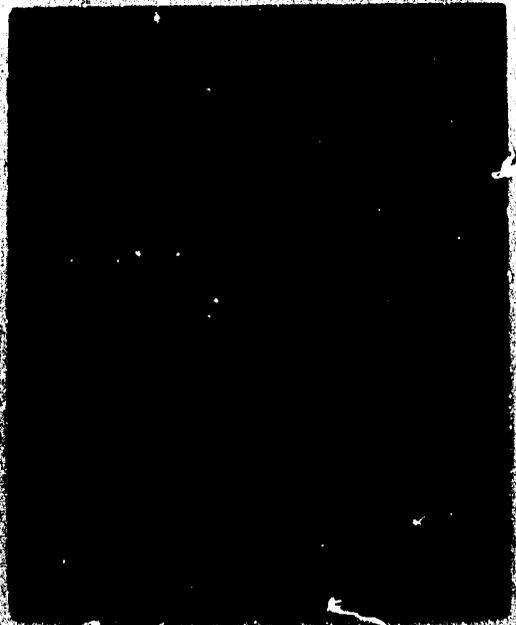
Perle Bus Card

## Metal Signs

Panther and Perle metal signs are used to reinforce product image and recognition and as point-of-sale items. They are posted in numerous locations throughout the island.



Perle Metal Sign



Panther Metal Sign

## **Advisory Committee**

Westinghouse helped form an advisory committee to assist in program development and to gain the support of various sectors of the Jamaican community. Represented on this committee were the following groups:

- The Ministry of Health
- Nurses Association of Jamaica
- Jamaica Teachers Association
- Family Planning/Epidemiology Unit, University of the West Indies
- Jamaica Council of Churches
- Consumers League of Jamaica
- Medical Association of Jamaica
- Pharmaceutical Society of Jamaica
- Jamaica Family Planning Association
- Private enterprise.

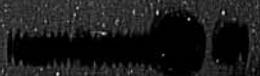
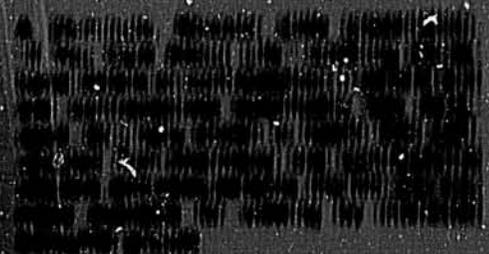
## **The Audience**

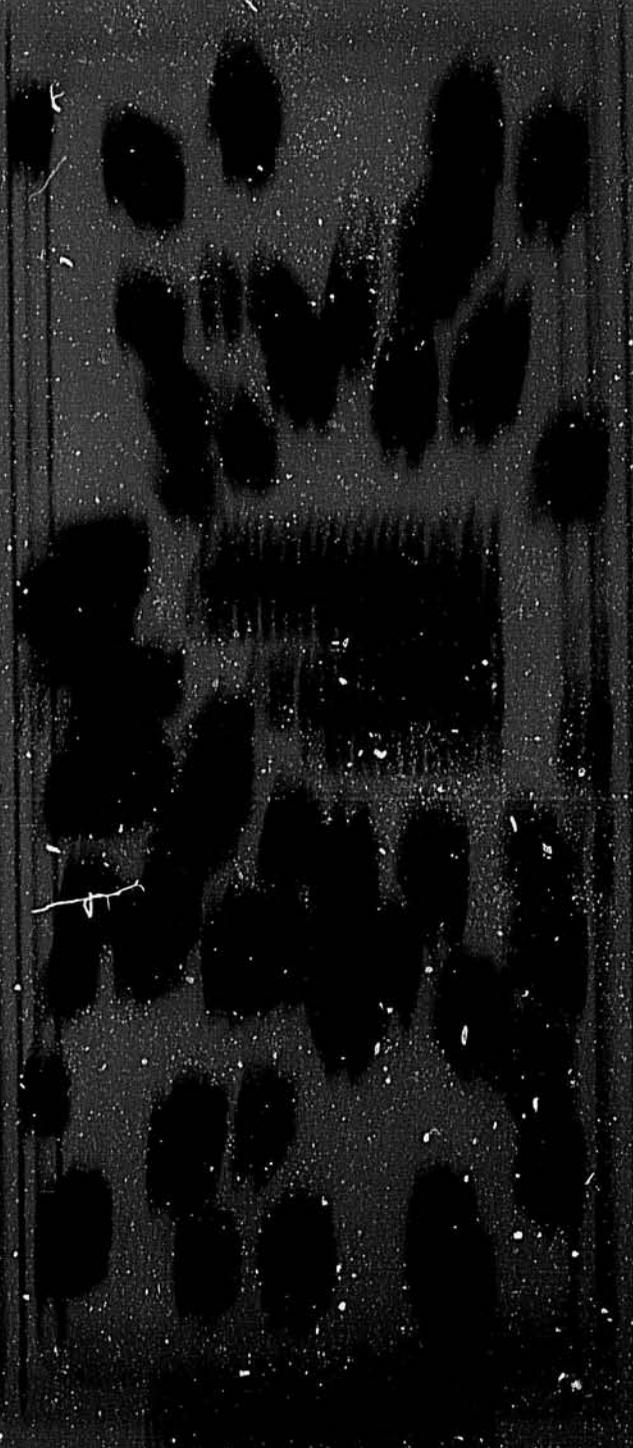
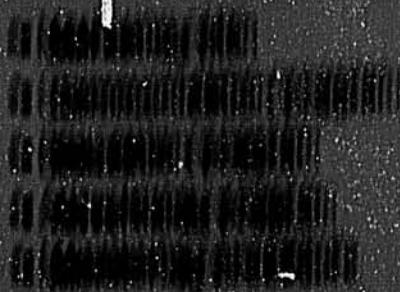
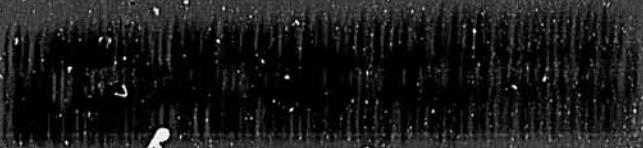
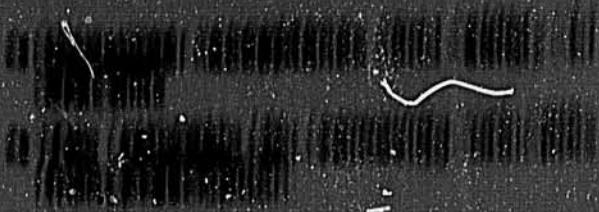
In cooperation with the NFPB and the MOH, educational and informational messages were developed for promoting both acceptance of family planning and confidence in oral pills and condoms as methods of family planning. With the support and advice of the advisory committee, these messages were directed to the medical and public health sector, the non-pharmacy oral contraceptive retailer, the distributor and potential consumers.

In communicating with these groups, the primary objective was to relay the information that two new brands of contraceptives, Panther and Perle, would soon be available through a government program. Through the use of Jamaicanized product images and a positive theme, product usage was promoted. In addition, for Perle oral contraceptives, it was recognized that a concentrated educational program would be needed to communicate the pill's benefits, effectiveness and potential side effects. Therefore, specific procedures were developed for presenting information on Perle to each of the concerned groups.

## **The Medical and Public Health Sector**

From the beginning, the support of health professionals from all disciplines was sought. It was assumed that acceptance of the program by these opinion leaders would go a long way towards making the program a success. Briefings, promotional meetings, brochures and slide presentations were used to communicate the objectives of the program.





## Non-Pharmacy Oral Contraceptive Readers

1977

Though the level of awareness about oral contraceptives among non-pharmacy oral contraceptive readers was high, there was a lack of information on specific medical side effects. To address this, efforts were made to present the readers with the necessary information on the oral pill, in particular, and contraception in general.



Para Poster



An information kit was provided to non-pharmacy readers containing:

- Samples of both Pariter and Para
- The consumer brochure
- Pariter and Para cards
- The Para fact sheet
- A sample return form
- The brochure "Distribution of Contraceptives Through Commercial Channels"

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



## Distributors

To actively promote both products, it was important that the salesmen as well as sales supervisors, and management personnel, have a clear understanding of family planning and contraceptive use. In order to promote this understanding, a seminar utilizing slide presentations, brochures and briefings was held for all management and sales personnel connected with the program.

## Consumers

Efforts to educate and communicate with the consumer centered around slide presentations, newspaper ads, radio shows, brochures, fact sheets, and posters.



Consumer Brochure

Pamphlet intended primarily for consumers, but given to other concerned parties. The pamphlet contains sections on:

- How the pill works
- Advantages of the pill
- Possible side effects
- Other methods of contraception

FACT SHEET PROVIDED TO ALL ORAL  
CONTRACEPTIVE RETAILERS FOR  
DISTRIBUTION TO CUSTOMERS



## The Referral System

As a result of discussions between the NPPB and The Jamaica Medical Association, a Paro referral system was established to monitor potential medical problems.

The Paro Referral System was implemented in the following manner:

- Retailers were trained to instruct Paro customers with problems to contact their physician or a health clinic.
- A referral message is printed on the outside of each Paro pack, as well as on the enclosed letter. The message informs the customer to see a physician or go to a health clinic if any problems are experienced.
- Health clinic personnel complete a brief description of the patient (name, age, problem, place of purchase, problems related to Paro's use) and forward the description to the NPPB.
- Monthly reports are issued by NPPB showing type of complaints by parish, outlet, and age.

REFERRAL FORM			
1. Name of Health Center or Hospital	_____		
2. Date	_____		
3. Name of Client	_____		
4. Place of Purchase	_____		
5. Medical Exam before taking Paro	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6. Type of Complaint	_____		
7. Is complaint related to:	_____		
a) The product used?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
b) Did client follow instructions in taking Paro?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8. Age & Sex (only)	_____		
<p><b>National Family Planning Board</b>  <b>Ministry of Health and Family Services</b>  <b>100 Montserrat</b></p>			
<p><b>N.B.</b> Please return this form to the National Family Planning Board along with a letter describing the patient's problem.</p> <p><b>C</b> Health clinic personnel are not held liable for health center, unless otherwise stated.</p> <p><b>The National Family Planning Board</b>  <b>100 Montserrat, St. John's, Barbados</b></p>			

## Product Distribution

The selection of a distributor was an early priority because of the length of time required to establish an outlet network, train salesmen, and establish an inventory control system. A bid letter was sent to several local distributors asking each to submit a proposal outlining the existing number and type of retail outlets, projected annual sales for both products, pricing formula in terms of minimum mark-up required, promotional plans, and training planned for salesmen and retailers in conjunction with the program. Criteria for selecting the distributor included:

- A Jamaican firm with a strong national distribution network
- Experience in distribution of consumer goods
- Delivery schedule at least once every two weeks in rural areas and once a week in the Kingston area
- Adequate warehousing and inventory controls
- Qualification of in-house personnel
- Financial and management stability
- Proposed marketing plans
- Established relationships with pharmacies and the medical profession.

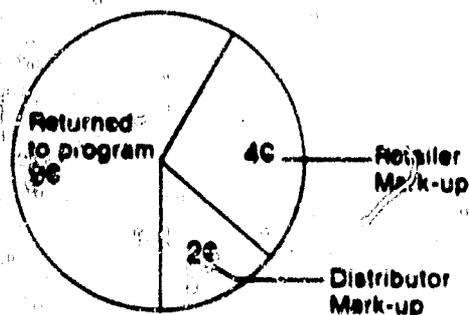
Once the distributor (Ceoil de Cordova, Ltd.) was chosen, the next task was to secure outlets for one or both of the products. The following types of outlets were sought:

- Pharmacies — Panther and Parle
- Charge shops (shops that are supplied goods from the distributor on credit) — Panther only
- Small cash van outlets (Shops must pay for goods with cash) — Panther only
- Drug Windows (located in government clinics) — Panther and Parle
- Wholesalers (Sell directly to small retail shops) — Panther only
- Selected Retail Outlets (non-pharmacy oral contraceptive retailers) — Panther and Parle

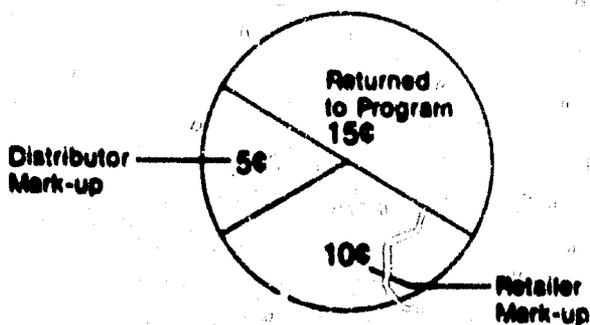


Panther Press Ad (1979)

Another important step was the establishment of distributor and retailer mark-ups for Panther and Perle. Based on market research, the price had been set at 15¢ and 30¢, respectively which meant that it was necessary to work within these limits. It was recognized that the return would be lower than most other consumer goods because of the low price. However, it was hoped that the absolute percentages could be comparable with that obtained on other products. After negotiations with Cecil De Cordova, the following breakdown was established:



**Panther**  
3 pieces = J\$.15



**Perle**  
1 cycle = J\$.30

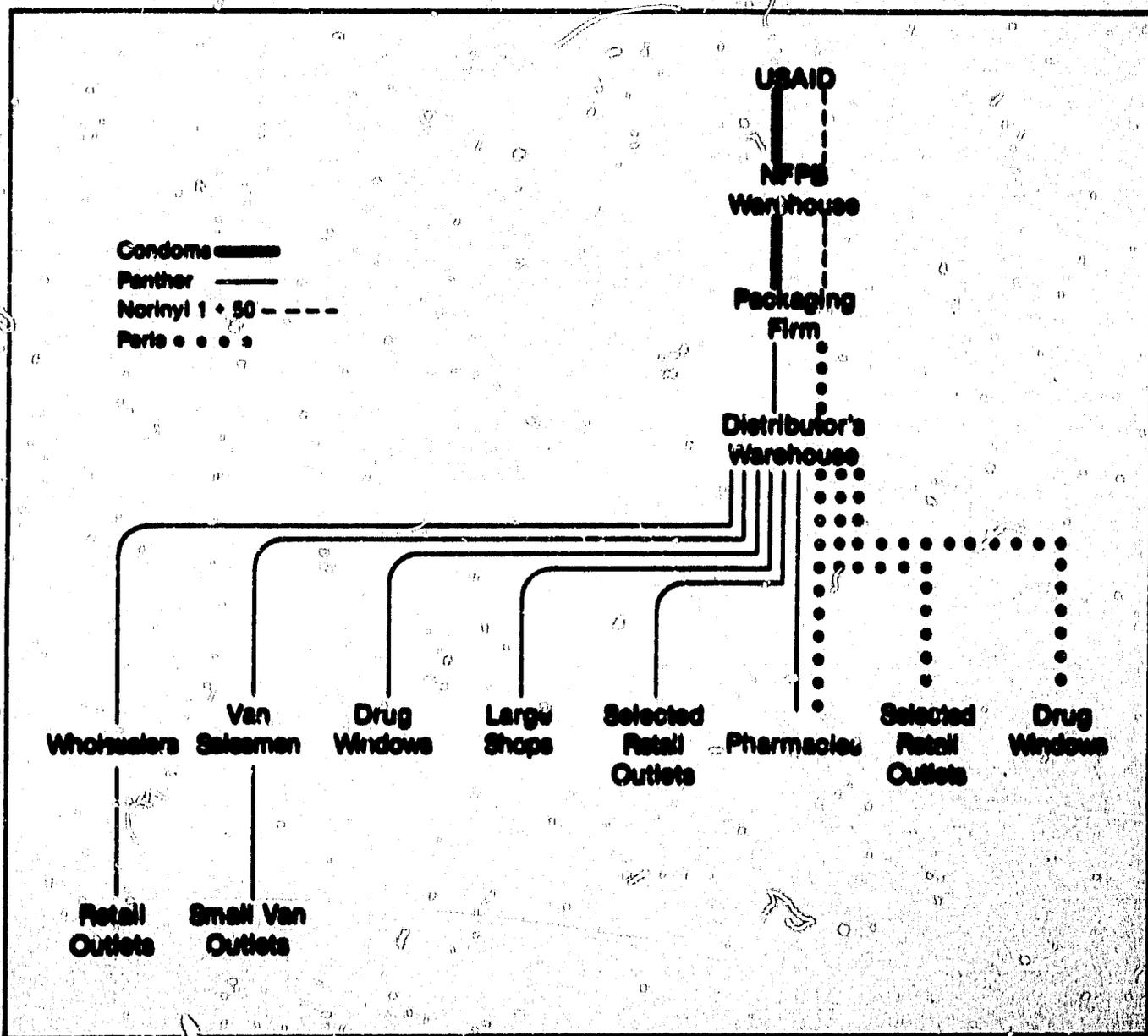
In addition to an attractive margin, several incentives were offered to motivate the distributor to actively promote the products, and to encourage retailers to place orders. For example, for the first three months, initial orders received from retailers were billed at half the normal wholesale price. Goods provided to the distributor to fill these initial orders were free of charge.

In addition, after this offer expired, quantity discounts were made available to retailers as follows:

Panther	Buy	Receive Free
	10 gross	1 gross
	50 gross	7 gross
	100 gross	17 gross

Perle	Buy	Receive Free
	6 gross	6 doz. cycles
	12 gross	15 doz. cycles

# MOVEMENT OF GOODS THROUGH THE DISTRIBUTION NETWORK



## Inventory Control System

A system was established to monitor the flow of goods from the NFPB warehouse to the distributor and from the distributor to the retailer.

NFPB personnel maintain a monthly inventory on stocks in the NFPB warehouse. This inventory is made available to the program for monitoring.

In addition, two steps are taken by the distributor to allow monitoring of product sales and inventories. First, their sales books are available for inspection by program personnel on a daily basis. A stock and sales report is also filed at the end of each month. This report contains data on opening stock levels, receivables, sales, samples, free goods, closing stock, program sales and program revenues.

a pill a day...  
keeps pregnancy  
away...  
till you're ready

Now there's Perle Oral Contraceptives to help you have children when you want to. Perle is safe, sure and economical.  
Perle Oral Contraceptives - available at drug windows, dispensaries, pharmacies and selected retail outlets.

**PERLE**  
ORAL CONTRACEPTIVES

**If you care about life.**

PERLE ORAL CONTRACEPTIVES  
REGISTERED TRADEMARK OF  
HEALTH SYSTEMS CORPORATION

Perle Press A2 (1975)

# PRODUCT LAUNCH

2

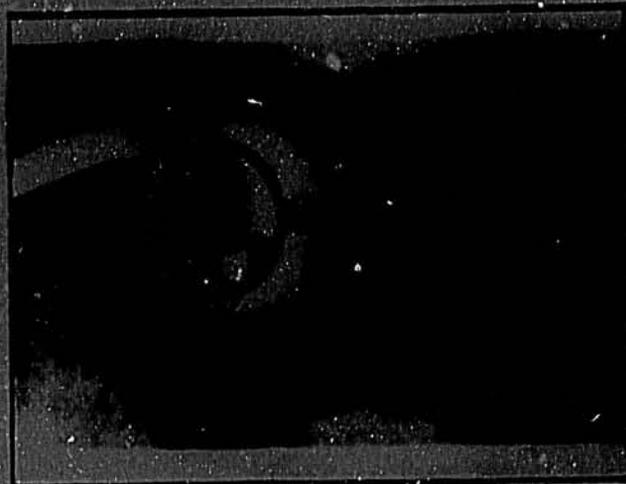
1. The first step in the product launch process is to identify the target market. This involves understanding the needs and preferences of the potential customers. The next step is to develop a marketing strategy that will reach the target market. This may include advertising, public relations, and direct marketing. The final step is to launch the product and monitor its performance. This involves tracking sales, customer feedback, and market trends. The product launch process is a complex one, but it is essential for the success of any new product.

2. The second step in the product launch process is to develop a marketing strategy. This involves identifying the target market and determining the best way to reach them. The marketing strategy should be based on a thorough understanding of the target market's needs and preferences. The strategy should also take into account the competitive landscape and the overall market environment. The marketing strategy should be flexible and adaptable, as the market and customer needs may change over time. The marketing strategy should be implemented through a variety of channels, including advertising, public relations, and direct marketing. The marketing strategy should be monitored and evaluated regularly to ensure it is effective and efficient.

3. The third step in the product launch process is to launch the product and monitor its performance. This involves tracking sales, customer feedback, and market trends. The product launch should be accompanied by a marketing campaign that is designed to generate awareness and interest in the product. The marketing campaign should be implemented through a variety of channels, including advertising, public relations, and direct marketing. The product launch should be monitored closely to ensure it is successful. This involves tracking sales, customer feedback, and market trends. The product launch should be evaluated regularly to determine its effectiveness and to identify areas for improvement. The product launch process is a complex one, but it is essential for the success of any new product.

Further efforts were made to reach consumers through a series of programs for consumer groups conducted by the Bureau of Health Education. These programs utilized slide presentations, brochures, and program posters. Medical personnel were briefed on the program through NFFS seminars. In addition, informative letters were sent to other health sector personnel. Additional efforts sought to establish the Parle referral system and to place Parle posters in clinic waiting areas.

A second press conference was held three days prior to the launch on June 23, 1975. This briefing resulted in the program's being the leading item in both the television and radio news reports and receiving prominent coverage in both morning newspapers.



JAMAICA DAILY NEWS —  
SATURDAY, JUNE 21, 1975

## Pill, condom to be sold without prescription

The Ministry of Health and Environmental Control and the National Family Planning Board have devised a comprehensive commercial marketing programme for two of the contraceptive devices most widely used in the island: the pill and the condom. Over the counter sale of "Parle" and "Parle" brand rubber for the condom and pill bags will begin on Monday.

Jamaica has thus joined a growing number of countries which have removed the prescription requirement on the pill and are using simple commercial channels in order to meet the need for contraceptives and convenient access to family planning.

This commercial marketing programme is designed to complement the family planning efforts of the public health sector. The pill and condom as well as a variety of other contraceptives are still available at all family planning clinics, health centres and hospitals throughout the island.

"Parle" and "Parle" are being distributed through Government drug warehouses, pharmacies and selected retail outlets. In addition, the programme will be sold in supermarkets, bars and gas stations. All outlets for the oral contraceptives have been selected on the basis of proximity to health services and population density and the retailers were

required to attend training seminars which were conducted by the National Family Planning Board. The scheme also has a built-in referral system, and will be continuously monitored.

The commercial marketing programme has a strong educational component, designed to equip the public with accurate information regarding safety, effectiveness, proper usage and side effects of the contraceptives. The importance of family life and the relationship between contraception and parental responsibility are also being stressed throughout the entire programme.



# PROGRAM MAINTENANCE

After launch, the major focus of activity was on continued evaluation and monitoring. The general objectives of this activity were to

1. Maximize the effectiveness of the advertising program.
2. Evaluate data on sales trends.
3. Maintain momentum in outlet expansion.
4. Continue consumer educational programs.



Parle Press Ad Aimed at Youth Market (1976)

## Consumer Survey

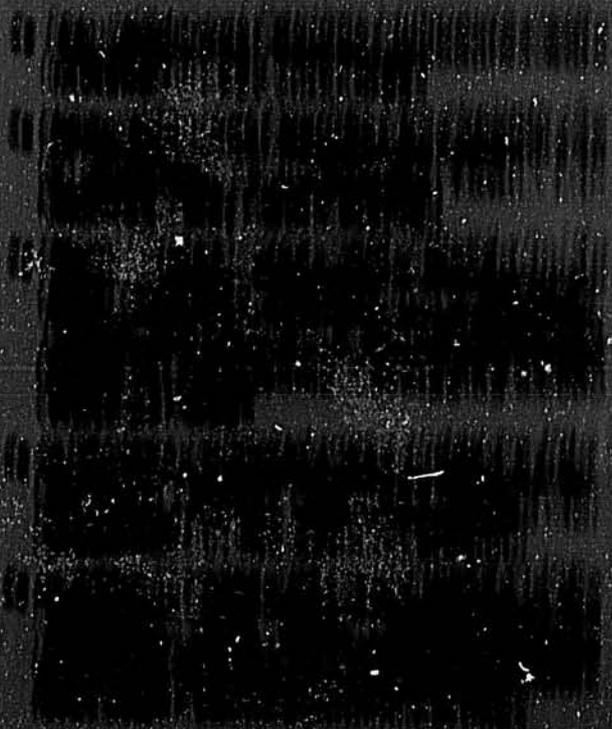
The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.

- The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.
- The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.
- The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.
- The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.
- The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.
- The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.

The survey was conducted with the following objectives: to determine the level of awareness of the product among the target audience; to identify the main reasons for non-purchase; to assess the effectiveness of the advertising program; and to provide a basis for the development of a more effective marketing strategy.

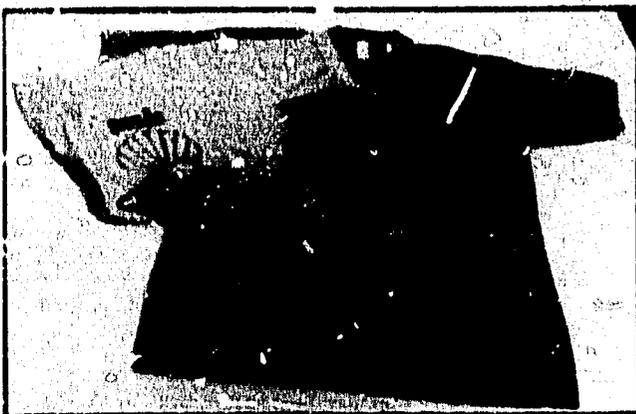
Report on a Survey of Attitudes, Awareness and Behavioral Habits Related to Family Planning Methods Among the Fertile Jamaican Population, unpublished

Report, Working/Research Institute, University of the West Indies, St. Augustine, Trinidad, 1976. (The results of this survey were first published in the Journal of Family Planning, 1976).



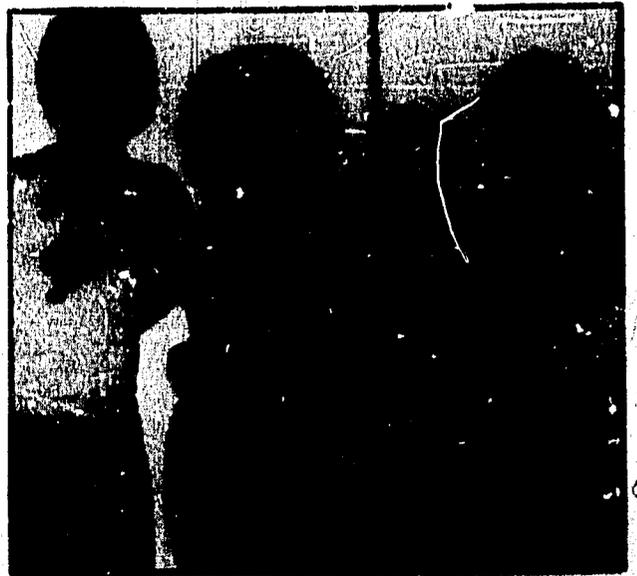
Of several promotional strategies considered (a Perle drinking cup; a Perle calendar; a Perle change purse; product multi-packs; a protective satchel for Perle cycles, redeemable coupon inside boxes of sanitary napkins), only one idea was accepted and implemented. A smaller, wooden Panther dispenser was designed for use in medium-sized and small retail outlets.

In late 1975, the popularity of the Panther and Perle image became evident in several ways. A manufacturer/distributor of soft goods requested permission to market a Panther tee-shirt in over 160 retail outlets. The success of this product was so great that a Perle shirt was also marketed. Eventually, a design incorporating both Panther and Perle was marketed under the caption "See Panther — with Perle". Several hundred of the Panther tee shirts were purchased by the program for use as handouts during the program's initial stage.



**Perle and Panther/Perle Tee-Shirts**

A leading record company composed a Reggae song about Panther and Perle. Reggae music, very popular with young people in Jamaica, was an excellent means of reaching this very important audience.

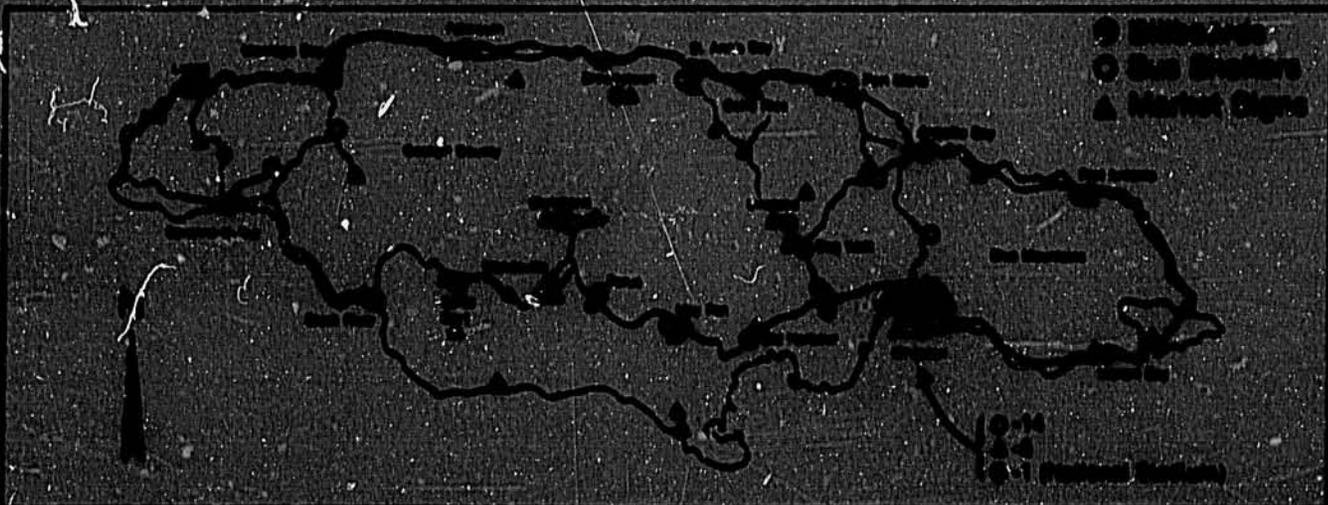


**"Back Back" Village Records label. Composed by B. Campbell, versions performed by the tellers and the Village Bunch.**

In early 1979, further steps were taken to increase awareness of Panther and Perle and to increase the advertising program. The steps were as follows:

- Addition of 25 product market signs, covering 500 remaining parish product signs
- Increased showing of Panther and Perle signs in commercials in rural areas
- Construction of 3 additional rural bus shelters
- Urban bus shelters and bus cards were changed and modifications were made in the frequency of press and TV ads
- Development of new radio, TV, and press advertisements to maintain consumer interest and to attract the attention of motorists in the younger age groups and the rural areas.

**LOCATION OF PANTHER AND PERLE OUTDOOR ADVERTISEMENTS (1979)**



CLIENT:	Westinghouse/ Health Systems	DATE:	January 6th 1976
PRODUCT:	PANTHER CONDOMS	JOB NO:	
AREA:		MEDIA:	Radio
REMARKS:		SCHEDULE:	
		DESCRIPTION:	1 x 30

Look here now, I going have to have some strong words wid my daughter ya know.....she cesa jus given a have so much children on man. We cesa even tek care a do one dem we have already and she pregnant again.....she she a y/he man!

Res ya self man - to your responsibility too ya know! Yu never hear 'bout Panther. Protect ya daughter man - a man!

Panther Condoms, made for the man who cares about life. If you care about life, look for the package with the Panther on it - You can find Panther anywhere.

CC/cal

Typical New Panther Radio Spot

CLIENT:	WESTINGHOUSE HEALTH SYSTEMS	DATE:	January 7th, 1976
PRODUCT:	PERLE ORAL CONTRACEPTIVES	JOB NO:	
AREA:		MEDIA:	Radio
REMARKS:		SCHEDULE:	
		DESCRIPTION:	1 x 30

Wow, my wife jus have a nice baby you ol, a proud a her man.....proud a her.

How much children ya have now?

Jus this one.....so we cesa cesa wid another one now either.....but that alright, because as soon as the doctor tell my wife say she can start.....she a start tek Perle. We na tek no chance Master.

Life is a precious thing.

Perle Oral Contraceptives. Perle is safe, sure and easily available.

Ask your doctor about Perle, but you don't need a prescription to buy it.

**PERLE ORAL CONTRACEPTIVES.....IF YOU CARE ABOUT LIFE.**

Typical New Perle Radio Spot

Although the number of people who  
participate in the program has increased  
in recent years, it is still necessary  
to have a large number of people  
to carry out the program.

**Government Employees**

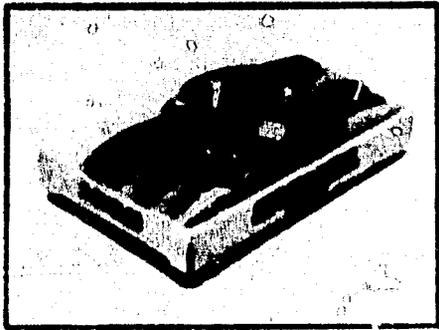


The Government Employees  
Program is a voluntary  
program that provides  
a variety of benefits  
to its participants.  
The program is open  
to all government  
employees who are  
at least 18 years  
old and have been  
employed for at least  
one year.

For more information,  
contact your local  
office.

## Perle Three-Pack

In mid-1976 a Perle three-pack was introduced to promote product continuity and use. The cost savings resulting from a multipack were passed on to consumers -- 85¢ for a three-pack vs. 90¢ for three single packs.



Perle Three-Pack

The Perle three-pack utilized the same graphic design as the single pack and contained identical information on the pill.



Press Ad Used to Introduce  
Perle Three-Pack (1976)

## Education

During the initial months following launch, the education program for consumers, public health staff, and retailers was continued because the success of the program depended upon an educated and informed public. The primary channel for reaching consumers was through educational brochures. Additional stocks of the brochure were supplied to the Bureau of Health Education and retail outlets. In addition, the brochure was modified to include an advertisement for Perle.

**PERLE**  
ORAL CONTRACEPTIVES

Now there's Perle Oral Contraceptives to help you have children when you want to. Perle is safe, sure and economical.  
Perle Oral Contraceptives - available at drug stores, dispensaries, pharmacies and selected retail outlets.

...if you care about life!

Perle Advertisement Added to  
Consumer Brochure (1973)

## Retailer Seminars

The initial training seminars for Selected Retail Outlets (SRO) were held in central locations. As the identification of retailers continued on a regular basis, the format of the group training sessions became impractical for several reasons:

- Many retailers could not leave their shops for even one day
- Potential SROs were obtained irregularly (e.g. 1 one month, 3 the next)
- Potential SROs were located in various geographical areas of the island.

Since it had become impractical to hold group sessions, the procedure of training retailers in their own store was adopted. While this procedure required more time by the NFPB marketing officer and training officer, it was the only practical way of carrying out this task.

## **The Referral System**

The referral system was an important ingredient in acceptance of the Perle program and therefore was closely monitored. It was noticed that few referral slips were being received by the NFPB statistician, so a letter was sent to all clinics asking for their comments and ideas. The number of complaints about the system remained very low. In early 1977 an informal survey was conducted to determine if retailers were actively promoting the existence of the referral system. They reported that although they informed customers of the steps to take in case of problems, few complaints were registered. It was apparent that either there were few problems or users were reluctant to report them.

## **General Educational Steps**

In May 1977, an educational program was presented at the Frome Sugar Estate, the largest in Jamaica. This program included films and lectures on family planning and was presented by the Jamaican National Family Planning Board. Samples of Panther and information on Perle were available at the conclusion of the program. It was anticipated this type of activity would become a regular aspect of the Family Planning Program after the contraceptive retail sales program was taken over by the NFPB.

## **Distribution**

Sales and outlet growth were monitored on a regular basis. Though the progress in both areas was satisfactory, efforts continued to stimulate the market and promote outlet expansion.

## **Incentive Program for Salesmen**

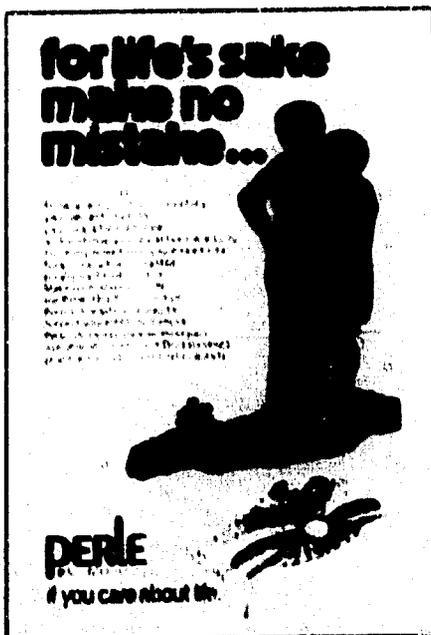
The opportunity for expansion in the number of Panther and Perle outlets was seen as ever present. The distributor's sales management team attempted to motivate its salesmen by devoting extra time to Panther and Perle at sales meetings, individually meeting with salesmen, and traveling with them in the field.

In addition, an incentive program was used to encourage salesmen to secure more outlets. This program more than doubled the rate of expansion from one month to the next and led to a substantial increase in the number of reorders.

## Marketing Assistant

In October 1976 a marketing assistant was hired by the distributor, with funds provided by the program, to promote program sales and outlet expansion. This individual traveled throughout the island performing duties which included:

- Restocking where necessary
- Recruiting outlets, with emphasis on non-pharmacy, Perle outlets
- Providing feedback directly to the program from the field
- Posting promotional materials
- Visiting Drug Windows.



Perle Press Ad (1977)

## Sampling Plan

While the distribution of condom samples was a continuing practice, greater emphasis was placed on this activity in early 1977, particularly for rural areas.

One method used was to provide samples of Panther condoms at nightly showings of films from a mobile van used by a cigarette distributor to promote products. Additional quantities of Panther condoms were given to industrial workers in Kingston and to workers on sugar estates. The rationale for the sampling plan was to promote Panther (i.e. family planning) by making it easier for the consumers to try the product for the first time. The dissemination of promotional information on Panther and Perle also promoted brand recognition.

In all, 205 gross of sample Panther condoms were distributed as follows:

<b>Urban Areas</b>	
Desnoes and Geddes	30 gross
The Gleaner Company	3 gross
Jaycees of Jamaica	8 gross
Agricultural Marketing Corp.	9 gross
<b>Rural Areas</b>	
Carreras, Ltd.	60 gross
Frome Sugar Estates	20 gross
Mony Musk Estates	15 gross
Bernard Lodge Estates	10 gross
Grays Inn Estates	15 gross
Innswood Estates	10 gross
Holland Estates	20 gross

## Perle Outlet Locations

A major program concern was the promotion of Perle. Because of the restrictions placed on locating non-pharmacy outlets, it was necessary to improve the method of informing the consumer where Perle outlets were located. This was done in two ways. The first step was to use a press ad to list the location of selected retail outlets.

In 1977 a series of posters, listing Perle outlets by parish were designed. Posters were placed in approximately 784 post offices, 163 clinics and several youth and community centers.

## NUMBER OF POST OFFICES AND CLINICS PER PARISH FOR POSTING PERLE OUTLET POSTERS

Parish	No. Post Offices	No. Clinics
Kingston/St. Andrew	56	41
St. Thomas	42	4
Portland	48	8
St. Mary	70	10
St. Ann	71	16
Trelawny	41	10
St. James	47	10
Hanover	39	9
Westmoreland	43	9
St. Elizabeth	73	12
Manchester	75	12
Clarendon	93	7
St. Catherine	86	15

**PERLE**  
ORAL CONTRACEPTIVES

available at drug windows, pharmacies and the following selected retail outlets:

**ST. ANDREW**  
[List of outlets]

**ST. THOMAS**  
[List of outlets]

**PORTLAND**  
[List of outlets]

**ST. MARY**  
[List of outlets]

**ST. ANN**  
[List of outlets]

**TRELAWNY**  
[List of outlets]

**ST. JAMES**  
[List of outlets]

**HANOVER**  
[List of outlets]

**WESTMORELAND**  
[List of outlets]

**ST. ELIZABETH**  
[List of outlets]

**MANCHESTER**  
[List of outlets]

**CLARENDON**  
[List of outlets]

**ST. CATHERINE**  
[List of outlets]

**If you care about life**

Press Ad Listing Perle Outlets (1976)

# MANAGEMENT TRANSITION

## Program Management

In June 1977, planning began for the National Family Planning Board to assume complete program management.

A series of meetings were held between NFPB personnel and the Washington Field Office in Washington and Upper Merion, Pennsylvania, in an effort to transfer program management responsibility to the National Family Planning Board.

On September 14, 1977, Washington Field Office transferred program management responsibility to the National Family Planning Board.

## Distribution Packaging

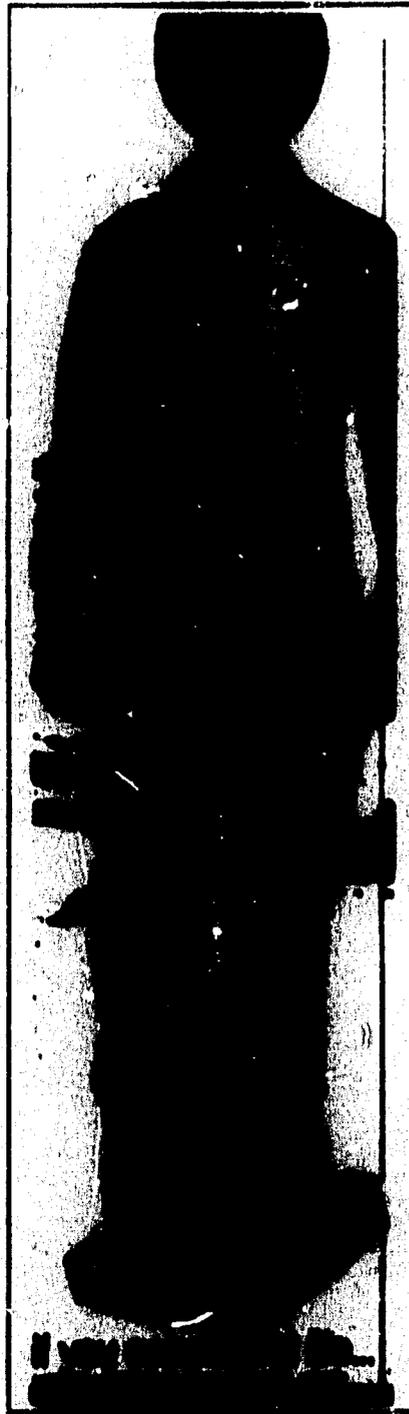
Distribution and packaging contracts were awarded to the NFPB and the NFPB is currently procuring supply of boxes and other packaging. This was done in a cost-plus contract from October 1977 through June 1978.



## Advertising/Promotion

One of the primary goals of this period was to implement an advertising schedule that would keep Panther and Perle before the public at a reduced cost. In this regard the following steps were taken:

- The radio schedule was maintained with new radio ads aimed at young males and females and skeptical males.
- New press ads were produced emphasizing that contraceptive practice is a joint decision and a responsibility of both the man and the woman.
- A new Panther billboard design was commissioned. However, only 10 billboards at locations with the highest traffic volume were maintained.
- The frequency of TV advertisements for both products was reduced — 15 and 30 second spots were alternated for variety.
- The 48 market signs and 8 rural bus shelters were continued.
- Renewed emphasis was placed on informing non-acceptors about the pill through the press ad "What You Should Know About The Pill."



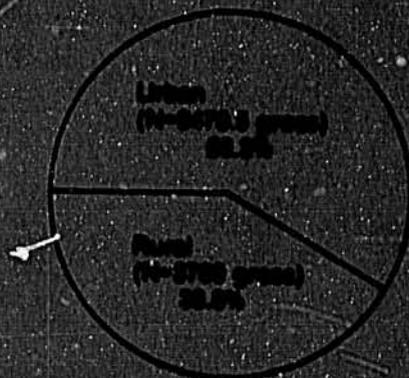
Panther Press Ad (1976)

# RESULTS

Distribution for both products during the 26 months of actual sales (June 1975 - September 1977) is shown below. Detailed data on sales and outlet growth can be better examined by looking at each product separately.

## Parthen

During the 26 months of distribution, a total of 1,511,364 pieces (11,180 gross) were distributed. Of this total, 1,172,135 pieces (8,550 gross) were sales; 21,422 pieces (154.6 gross) were distributed as a courtesy for office purchases (free goods); 30,798 pieces (224.6 gross) were given away as samples.



Distribution\* of Parthen Condensate by Rural/Urban\*\* Location (Excludes Samples)



Distribution of Parthen Condensate by Type of Sales Outlet





# JAMAICA — CONTRACEPTIVE RETAIL SALES

## (Unit Sales, Revenues and Outlets)

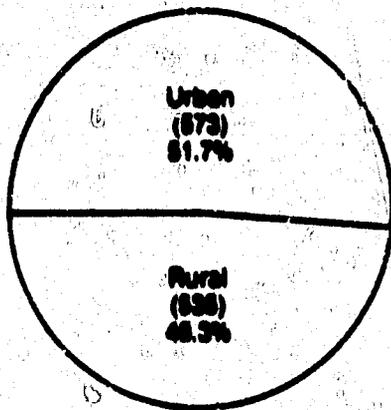
### June 1975 through 1977

Month Ending — 1976

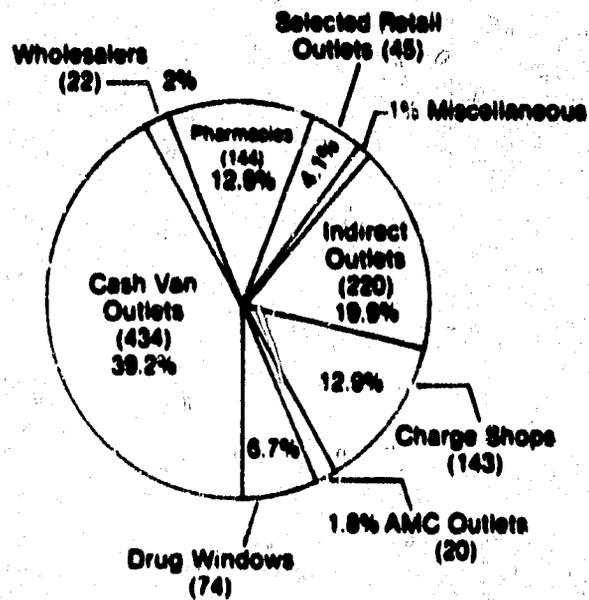
Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
44,888	69,912	37,224	43,884	75,024	35,712	44,828	48,728	34,416	31,487	43,056	32,282
144	—	36	144	144	1,728	360	782	1,728	1,584	—	1,584
<u>45,012</u>	<u>69,912</u>	<u>37,260</u>	<u>44,028</u>	<u>75,168</u>	<u>37,440</u>	<u>45,188</u>	<u>47,520</u>	<u>36,144</u>	<u>33,051</u>	<u>43,056</u>	<u>33,876</u>
7,704	4,680	5,055	10,280	7,956	6,306	7,764	10,608	10,440	13,621	11,484	4,176
902	—	36	—	—	—	108	—	324	432	—	180
<u>8,606</u>	<u>4,680</u>	<u>5,091</u>	<u>10,280</u>	<u>7,956</u>	<u>6,306</u>	<u>7,872</u>	<u>10,608</u>	<u>10,764</u>	<u>14,053</u>	<u>11,484</u>	<u>4,356</u>
—	—	—	—	—	—	—	108	972	4,320	3,420	2,232
—	—	—	—	—	—	—	—	—	432	—	144
<u>—</u>	<u>108</u>	<u>972</u>	<u>4,752</u>	<u>3,420</u>	<u>2,376</u>						
7,704	4,680	5,055	10,280	7,956	6,306	7,764	10,716	11,412	17,941	14,904	6,408
902	—	33	—	—	—	108	—	324	864	—	324
<u>8,606</u>	<u>4,680</u>	<u>5,091</u>	<u>10,280</u>	<u>7,956</u>	<u>6,306</u>	<u>7,872</u>	<u>10,716</u>	<u>11,736</u>	<u>18,805</u>	<u>14,904</u>	<u>6,732</u>
1,288	1,888	1,045	1,230	2,042	1,013	1,254	1,315	987	882	1,218	317
1,134	630	756	1,480	1,156	935	1,132	1,542	1,855	2,547	2,207	943
<u>2,432</u>	<u>2,518</u>	<u>1,801</u>	<u>2,710</u>	<u>3,198</u>	<u>1,948</u>	<u>2,386</u>	<u>2,857</u>	<u>2,822</u>	<u>3,409</u>	<u>3,425</u>	<u>1,860</u>
1,587	2,284	1,275	1,504	2,488	1,238	1,533	1,808	1,182	1,054	1,488	1,121
1,512	907	1,008	1,974	1,341	1,246	1,509	2,482	2,208	3,400	2,947	1,208
<u>3,099</u>	<u>3,191</u>	<u>2,283</u>	<u>3,478</u>	<u>4,037</u>	<u>2,484</u>	<u>3,042</u>	<u>4,070</u>	<u>3,390</u>	<u>4,454</u>	<u>4,435</u>	<u>2,329</u>
489	532	988	582	587	622	636	653	662	688	722	738
210	230	230	230	230	230	230	230	230	240	280	280
<u>709</u>	<u>762</u>	<u>788</u>	<u>812</u>	<u>827</u>	<u>852</u>	<u>866</u>	<u>883</u>	<u>892</u>	<u>928</u>	<u>972</u>	<u>988</u>
185	187	185	185	188	189	189	187	187	200	200	200

Sales in Jamaica were made through a total of 1,188 outlets by the end of September 1977.\* Of this total, 888 were direct outlets and 220 were indirect outlets (sales through wholesalers to small retail outlets).

Panther outlets are classified into nine types. The distribution by type of outlet is shown in the following diagram.



Distribution of Panther Outlets by Urban/Rural\*\* Location.



Distribution of Panther Outlets by Type.

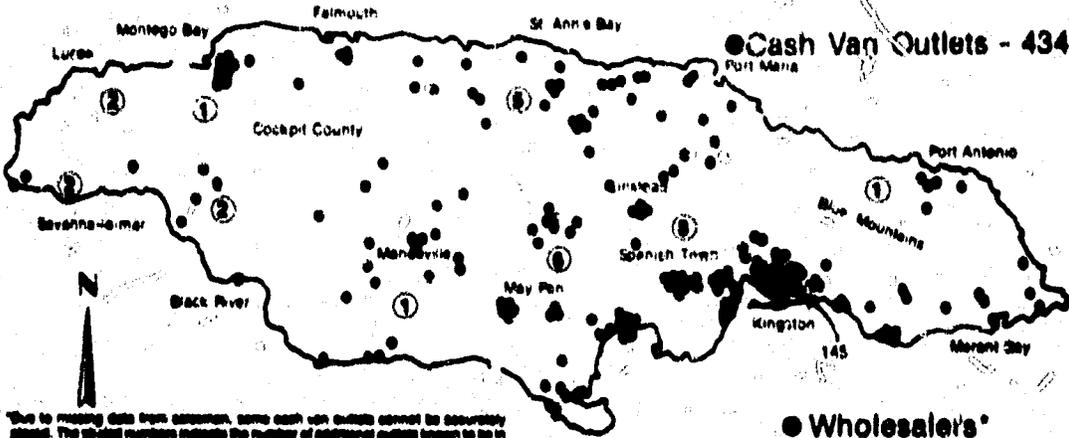
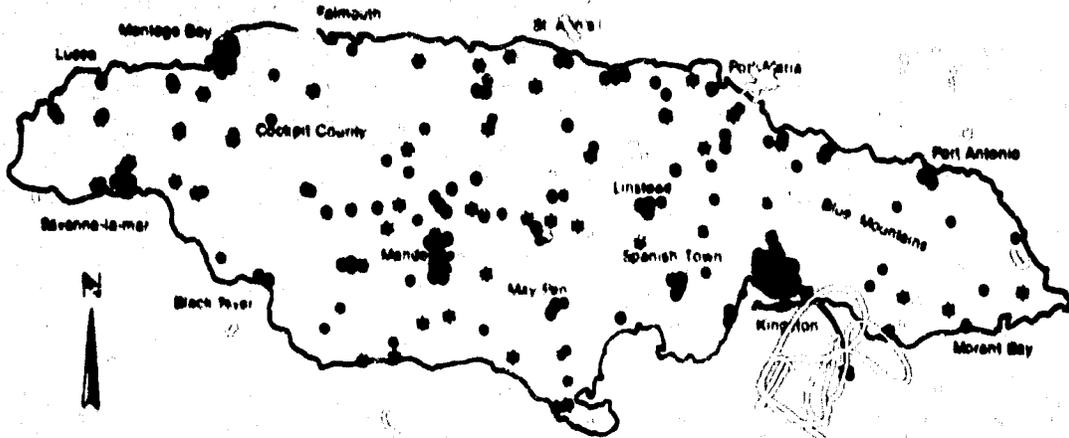
\*An extensive review of outlets was conducted in June of 1977. Outlet totals were adjusted to reflect only active outlets.

\*\* Urban areas include Kingston/St. Andrew and Montego Bay.

• Selected Retail Outlets - 45

● Pharmacies - 144

● Drug Windows - 74



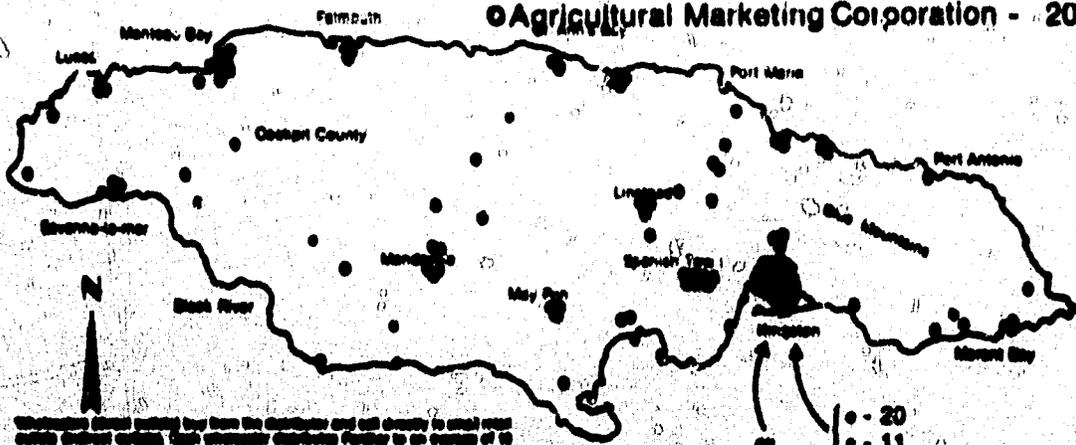
Due to missing data from certain areas, some cash van outlets cannot be accurately plotted. The shaded numbers indicate the number of additional outlets known to be in the area (Portia), but the particular town is unknown. Also, an additional 50 outlets cannot be plotted by parish.

● Wholesalers'

Direct - 22

Indirect - 220

● Agricultural Marketing Corporation - 20



Wholesalers' direct outlets are from the distributor and are directly to retail outlets. Indirect outlets are distributed further to an average of 10 retail outlets.

● Charge Shops - 143

Total 1103

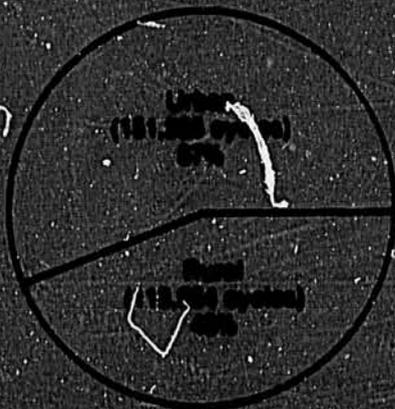
**PANTHER CONDOM OUTLETS**  
As of 30 September 1977

## Parts

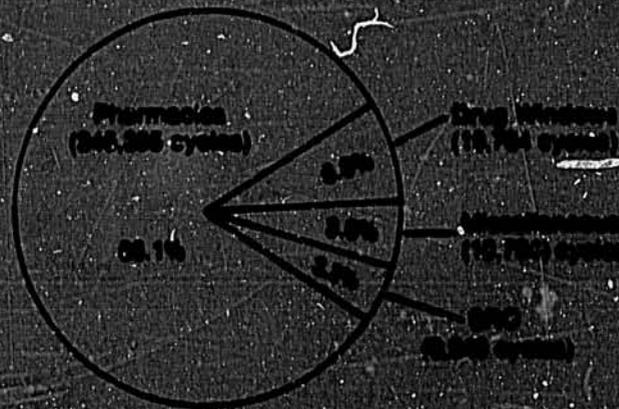
A total of 201,200 cycles of Parts were distributed from June 1976 to September 1977. Of this total:

- 277,200 cycles were sales
- 7,000 cycles were free goods
- 5,000 cycles were given away as samples

Approximately 17 percent (40,000 cycles) were distributed as three-pack Parts.



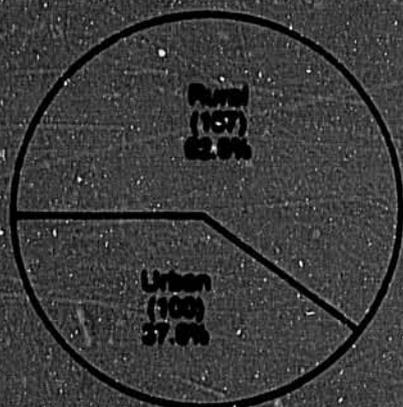
Distribution of Parts Oral Contraceptives by User (Parts include includes samples)



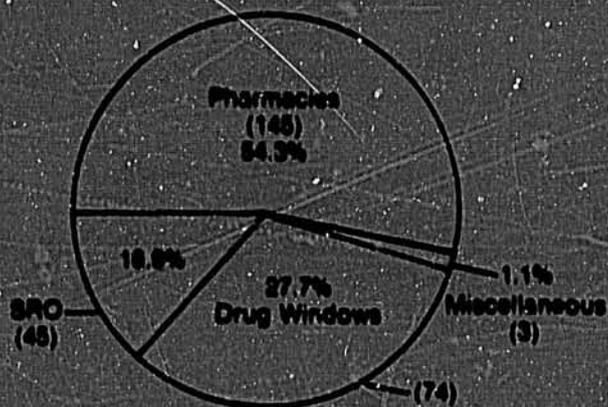
Distribution of Parts Oral Contraceptives by Type of Cycle (includes includes samples)

A total of 267 Perle outlets were active as of September 30, 1977. The distribution of the outlets by location is shown in the following figures.

Perle outlets are classed into 4 types.



Distribution of Perle Outlets by Urban/Rural Location.



Distribution of Perle Outlets by Type.

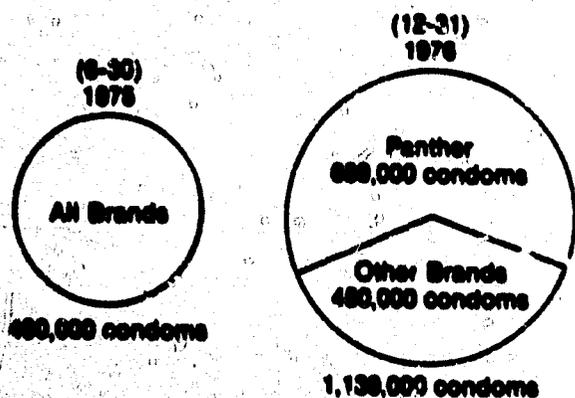
## Competitive Sales Performance

In assessing the impact of the contraceptive retail sales program on family planning acceptance, one must look at the program's distribution in terms of other ongoing programs/activities.

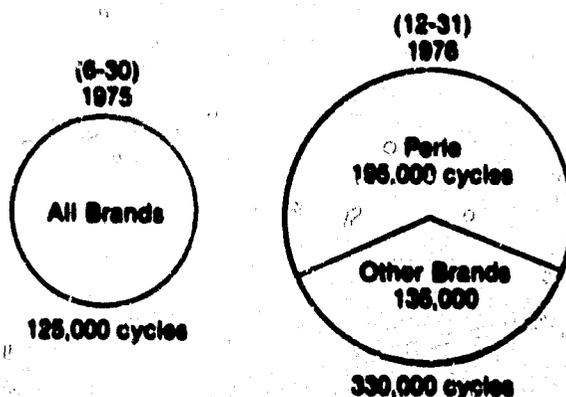
The central question was whether Panther and Perle traded acceptors with other sources or whether Panther and Perle acceptors were incremental. Closely related to this question is whether the program was cost effective in gaining acceptors relative to the existing public sector clinic program.

It was never an intention of the Panther/Perle program to take sales away from the competitive brands previously available, though some customer switching and brand loyalty change was inevitable. Rather, it was hoped Panther and Perle would induce non-acceptors to practice family planning by providing a less expensive, more easily accessible product.

From early indications\* it appears there has been a modest increase in commercial sales of other brands of orals and condoms since launch. This indicates that Panther and Perle did not draw from the existing private sector sources, but rather expanded the market by motivating new users.



Annualized Commercial Condom Distribution as of June 30, 1978 and Estimated Annualized Condom Distribution as of December 31, 1978.



Annualized Commercial Oral Contraceptive Distribution as of June 30, 1978 and Estimated Annualized Oral Contraceptive Distribution as of December 31, 1978.

\* Competitive sales figures for 1977 not available.

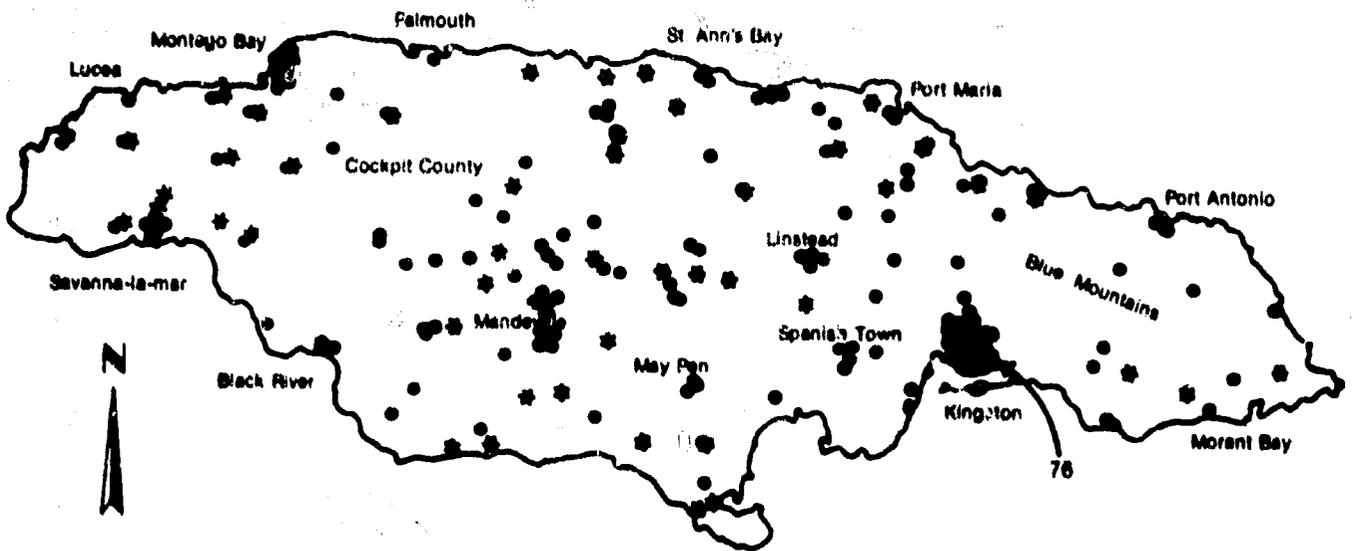
• Drug Windows - 74

★ Selected Retail Outlets - 45

• Pharmacies - 144

---

Total 264



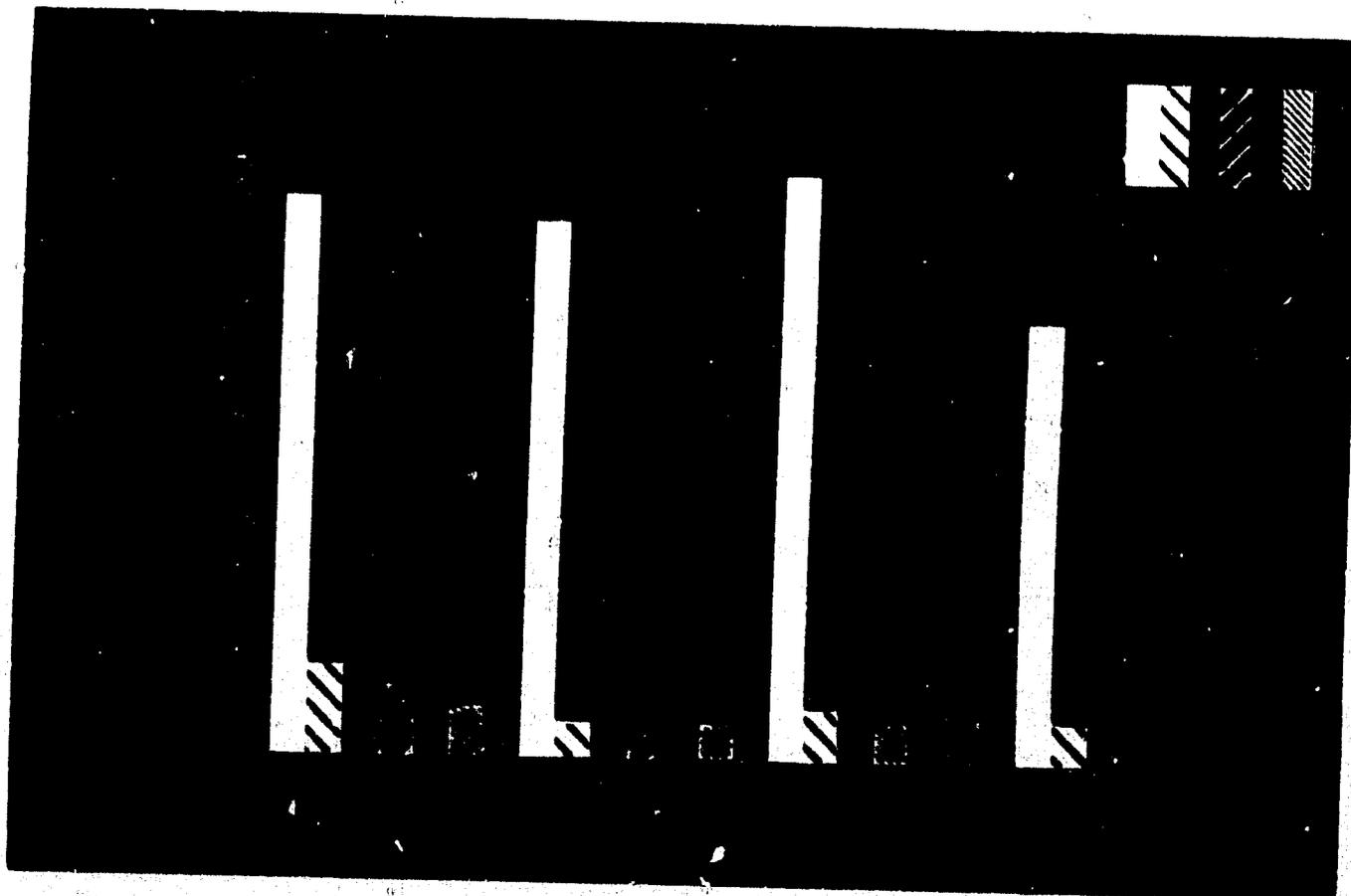
**PERLE ORAL CONTRACEPTIVE OUTLETS**  
As of 30 September 1977

## Public Sector Clinic Performance

The effect of Panther and Perle on the acceptor rate in the public sector clinics was equally important. Two measures of clinic activity are available for analysis:

- Number of new acceptors
- Distribution of condoms and pills to clinics.

NUMBER OF NEW ACCEPTORS  
PUBLIC CLINICS (1973-1976)

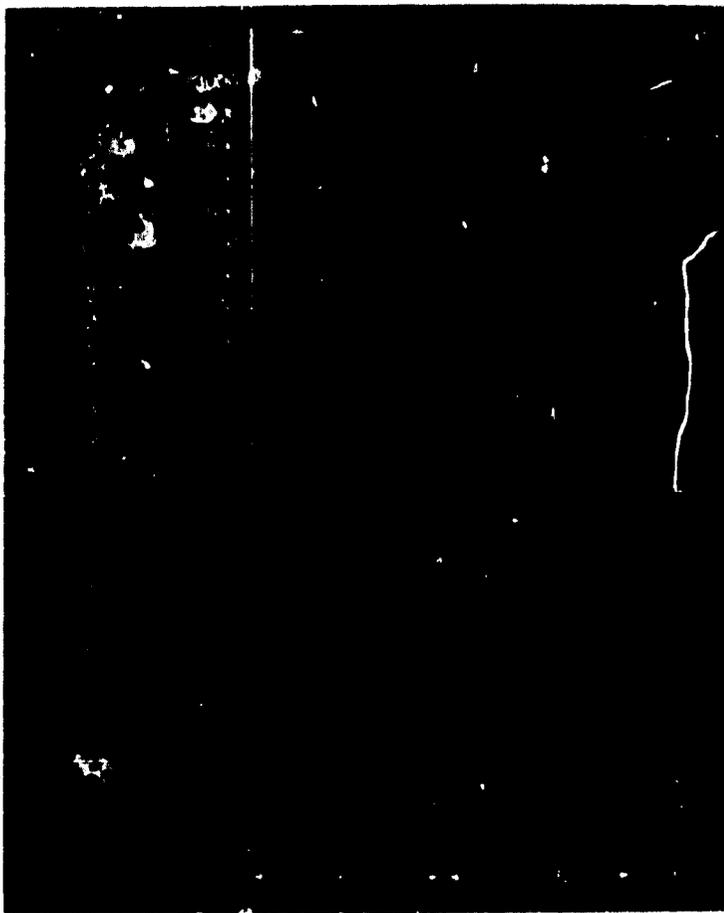


## New Clinic Acceptors

The number of new clinic acceptors from 1973 to 1976 is shown below. The data shows a decrease in 1976 in the number of new acceptors. Unfortunately, it can not be determined whether this indicates a permanent downturn or merely a temporary drop.

Data for 1977 is available for only the first quarter and omits family planning clinics in the parishes of Kingston, St. Andrew, Portland, Trelawny, and St. Catherine (clinics on new statistical system). Omitting these clinics from previous totals permits comparison with the first quarter results for 1977. This reflects an increase to the levels of new acceptors experienced in 1975.

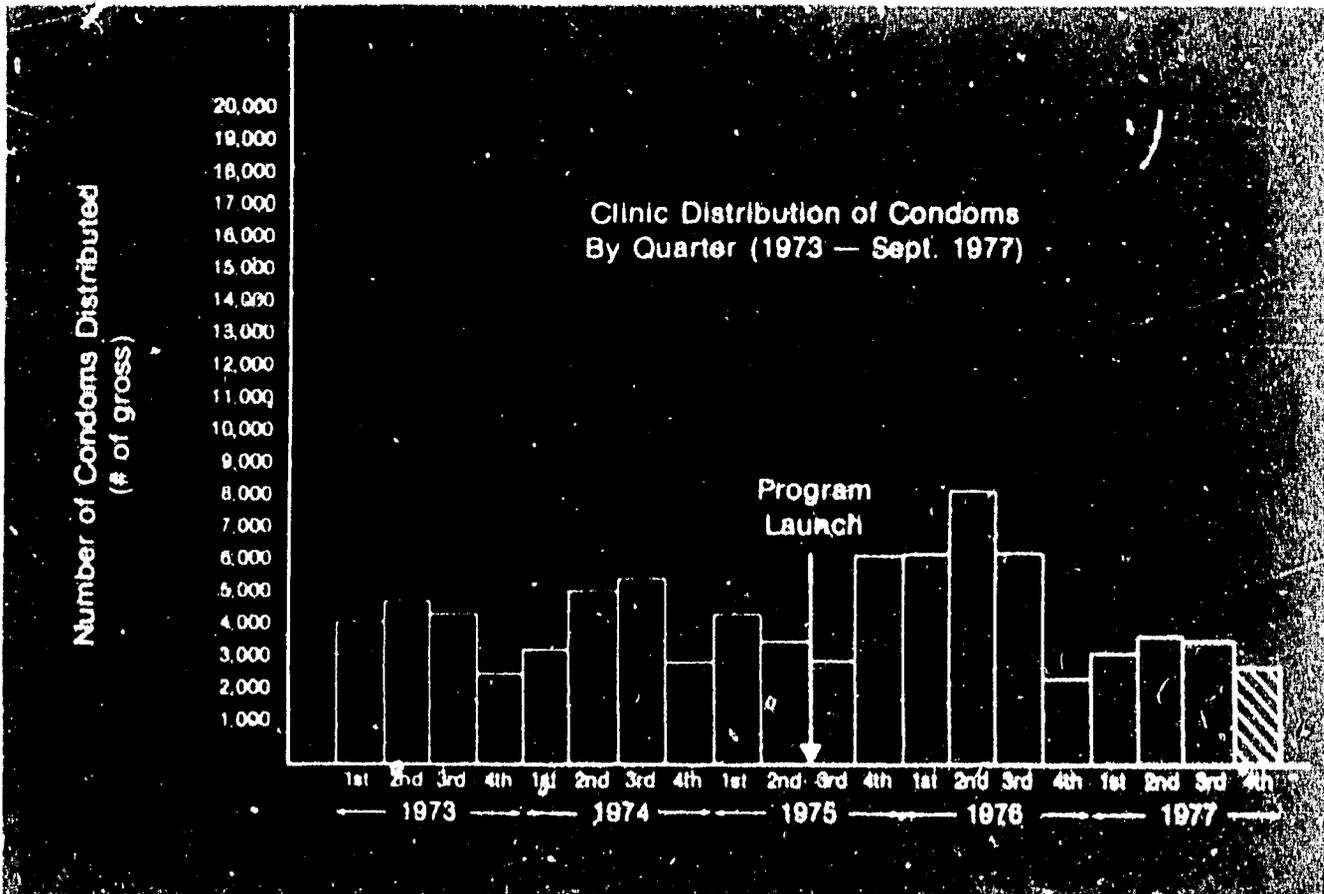
**NUMBER OF NEW CLINIC ACCEPTORS  
1975 THROUGH FIRST QUARTER 1977,  
ADJUSTED FOR CLINICS ON NEW DATA  
SYSTEM.**



## Clinic Distribution

The measure of clinic activity most similar to the CRS program is the distribution of condoms and oral pills from the NFPB warehouse to the public sector clinics. Because this distribution is only to the "outlet" and not the actual consumer client, the number distributed is most comparable to sales that are made in the commercial program to retail outlets.

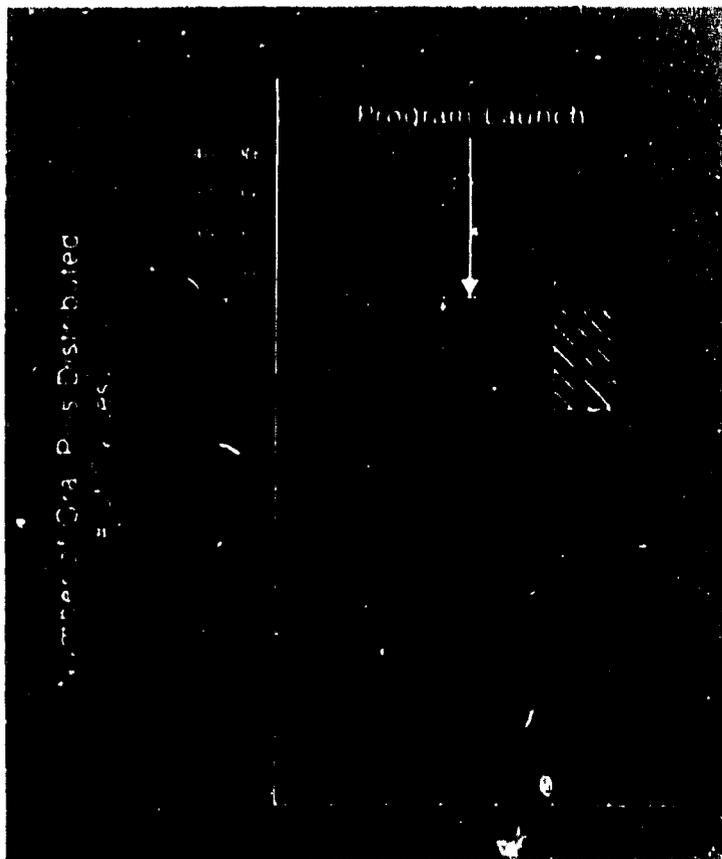
### CLINIC DISTRIBUTION OF CONDOMS BY QUARTER JANUARY 1973 TO DECEMBER 1977



\*Shaded area indicates projection for remainder of 1977

It appears that, although sales in the commercial sector have shown dramatic increases since 1975, clinic distribution of oral contraceptives and condoms has remained stable.

#### CLINIC DISTRIBUTION OF ORAL CONTRACEPTIVES 1973 THROUGH 1977



\*First 3 quarters only, shaded area indicates projection for remainder of 1977.

# Comparative Cost Study

This study is a comparative study of the costs of various methods of providing water supply to the community. The study was conducted by the Department of Public Works and Engineering, and the results are presented in the following table. The study was conducted in 1972, and the costs are in dollars per year.

Method	1972	1973	1974	1975	1976	1977
Method A	100	105	110	115	120	125
Method B	150	155	160	165	170	175
Method C	200	205	210	215	220	225

Comparison of Public and Private Water Supply  
 Estimated Costs for Year 1972-73

- Public Water Supply - Estimated Annual Operating Costs
- Private Water Supply - Estimated Annual Operating Costs
- Total Annual Operating Costs - Estimated Annual Operating Costs

The following table shows the comparative cost of various methods of providing water supply to the community. The study was conducted in 1972, and the costs are in dollars per year.

# RECOMMENDATIONS

The following recommendations are proposed as they relate to promoting family planning in Jamaica in general or to promoting Family and Fertility as specific aspects of family planning.

## Recommendations For Promoting Family Planning in General

### Duties and Taxes

Eliminate duties and taxes on certain contraceptive products. A major goal of this program was to bring about the elimination of duties and taxes on imported contraceptive devices approved in Jamaica and distributed there on the part of Westinghouse and Co. (1972). The recommendation was never adopted.

### Prescription Requirements

Remove the prescription requirement for certain contraceptive products. This was a goal of the program. A major goal of this program was to bring about the elimination of duties and taxes on imported contraceptive devices approved in Jamaica and distributed there on the part of Westinghouse and Co. (1972). The recommendation was never adopted.

## Contraceptive Education

Contraceptive education is a key component of family planning. It is essential for the success of any family planning program. The following are some of the key components of a contraceptive education program:

- 1. Provide accurate information on the various contraceptive methods available.
- 2. Educate people on the benefits of family planning.
- 3. Encourage people to use contraceptive methods.
- 4. Provide counseling and support to people who are using contraceptive methods.

[REDACTED]

## **Panther 12-pack**

Introduce a Panther multi-pak. The availability of Panther condoms in a larger pack would have several benefits for the program including:

- Allow penetration to large supermarkets by reducing the fear of pilferage
- Allow for a consumer price break on multi-pak purchases
- Promote continued use.

## **Quality of Panther Condoms**

Emphasize "quality" of Panther condoms in advertising. Questions exist concerning the quality of Panther due to its low price. Steps should be taken to communicate the fact that Panther is a quality product sold around the world at substantially higher prices.

## **Rural/Perle Outlets**

Continue to emphasize recruitment of rural and Perle outlets. Though penetration into rural areas is strong, there are still districts with no outlets. In addition, the concentration of pharmacies in urbanized areas restricts the general availability of Perle. The solicitation of selected retail outlets should remain a program priority.

## **Market Research**

Conduct prevalence studies on regular basis. Plans for additional market research were dropped because of financial restraints. In order to continue an efficient, effective program it is important to know the market in which the program is operating. The National Family Planning Board should attempt to institutionalize regular studies of the contraceptive market with direct feedback to the contractive retail sales program.

## **Extension of Sales Throughout CARICOM**

Extend Panther and Perle sales throughout the Caribbean area. Because of the similarities between the various Caribbean islands (particularly those in CARICOM), Panther and Perle brands would be acceptable as family planning methods in numerous countries. The extension of sales to other islands would have the following benefits for the program, as well as the potential for reducing population growth in those countries:

- Reduce costs as a result of quantity discounts on packaging materials and advertising
- Provide an additional source of revenue for the Jamaican program.

# **CREDITS**

## **WESTINGHOUSE HEALTH SYSTEMS**

**G.L. Damkoehler, Co-Project Director**  
**L. Smith Jr., Co-Project Director**  
**R. Dery, Resident Manager, 1974-76; Program Manager 1976-77**  
**D. Wood, Resident Manager, 1977**  
**U. Kluge, Program Planner**

## **UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT**

### **Washington**

**Dr. R. T. Ravenholt, Director, Office of Population**  
**Dr. W. H. Boynton, Deputy Director, Office of Population**  
**Dr. H. Pedersen, Chief, Family Planning Services Division**  
**Mr. J. Thomas, Project Manager, Family Planning Services Division, 1976-present**  
**Mr. H. Harris, Project Manager, Family Planning Services Division, 1975**  
**Mr. T. Markow, Project Manager, Family Planning Services Division, 1974-75**  
**Mr. G. Gold, Contracting Officer**  
**Mr. W. Hawley, Contracts Representative**  
**Mr. J. Pittenger, Contracts Representative**

### **Kingston, Jamaica**

**Mr. C. Campbell, Deputy Mission Director**  
**Mr. W. Wallace, USAID Population Officer, 1973-76**  
**Mr. A. Cole, USAID Population Officer, 1976-present**