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Memorandum

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DATE: 9 March 1978

FROM : DS/POP/FPSD, Harald A. Pedersen

SUBJECT: Trip Report to Tunis, Tunisia

1. Discussion of CRS project Syntex/Tunisia AID/pha-C-1143

At the first meeting with staff of ONPFP I reviewed the history of the CRS project in Tunisia and set forth the overall objectives of the CRS projects generally. The first objective being to select a distributor with country wide retail outlets who is willing to add contraceptives to his line of merchandise. Second, to back up the distribution program with mass media advertising and point of purchase promotional material.

Following this Mr. Chekir gave a statement about the family planning program in Tunisia. He stressed that the recently appointed Minister of Health had stated that the prescription requirement for the sale of pills would stay and that both pills and condoms would be distributed through existing health and family planning facilities. Furthermore, under the French system of medical and pharmaceutical practice ethical drugs were not promoted through advertising and it was contrary to the mores of Tunisian society to advertise condoms.

Having thus set the stage I suggested it might be fruitful if we adjourned to a working session and he thereupon withdrew leaving his staff to carry on the discussion.

It took less than hour of further discussion to establish that there was very little basis for compromise. At this point I suggested that it might be useful if we would adjourn the work group and plan to reconvene the next day to allow time for further discussions between AID and the contractors to see if there was any basis for negotiation.

In discussions with Wallace, Donald, Smith and myself it became increasingly apparent that the residual scope of work envisaged by ONPFP was peripheral to the objectives set forth in the contract and the interests of Syntex. Furthermore, the scope of work would not call for the staff envisaged under the contract and Syntex was not interested in the less ambitious program.

It was decided that Mr. Wallace, Mr. Bachbaouab and I would meet with the working group and present ONPFP with the decision to terminate the contract.

At the third meeting after having presented our decision to terminate and discussed the reasons for this decision, the discussion turned to residual inputs from the Syntex contract in terms of actions now nearing completion.



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The wisdom of our decision became somewhat more clear to all concerned when the staff of ONPFP came up with four actions which they would give final approval on so that production could go forward. Furthermore, when they began to develop the actions which they hoped could be continued under other sources of support these too fell far short of the funding committed under the Syntex/Tunisia contract.

The fourth meeting was a session with Mr. Chekir and only Wallace and I present in which I had to take a few lumps but was also pleased to get a few quodo's for having been willing to terminate a bureaucratically untenable situation. It was after this session that Mr. Chekir arranged a dinner for me with the primary negotiators.

2. Visit to the clinic and training center.

The sterilization clinic was inaugurated and is in operation. Both of the Laparoscopes are installed in the operating rooms and are in operation. There were five women in the recovery rooms the day I visited the clinic at around 10:30 A.M. There were about as many as seven in the consultation rooms being interviewed by the social workers.

The staff gave me the full treatment and were anxious to show off the whole facility. Further details and assessment will have to await the visit of the next M.D. to pass that way. They get high marks from me.

3. Commodity warehousing, distribution and maintenance.

This is one of the best organized and managed warehousing and distribution systems I have seen in 13 years with the family planning program. The stock record card at the warehouse shows the running balance and the destination of all draw downs against the stock. The request for supplies which becomes the shipping document shows the current balance on hand and the quantity requested in this shipment.

Except for a sizeable quantity of condoms which are stored under a shed outside protected from blowing rains by a tarpaulin tied down to close the front, the commodities are stored inside with adequate ventilation. The oldest condoms are '74 non-colored and the oldest O.C.'s are early '76. The draw down on Noriday is not as fast as it should be but Mr. Chekir insists this is because the doctors, being French trained prefer to prescribe the known brands namely Scherring and Wyeth, Germany products.

4. Visit to IPPF/MENA regional office.

See the appendices attached which give the regional organization and the plan of action for the immediate future. The office is well established after having undergone the disruption of having to evacuate from Beirut and losing most of their files and personal belongings in the process. It has also been necessary to replace most of the clerical and some of the professional staff as a result of the move.

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MENAR PRIORITY OBJECTIVES AND TARGETS

1978-1980

The priority areas for action in the Middle East and North Africa Region have been studied within the Regional socio/economic/political context as well as in relation to the results of our work over the past years. These priority objectives and targets can be described as follows :

OBJECTIVE I : Influence governments in the region to accept a policy on Family Planning where this has not already been done and where possible exert influence and pressure upon them to a) accept responsibility for the provision of services and b) make services available to all those in need of them.

It is important to note here that governments within the region can be classified into four groups and action within this objective will be according to the characteristics of the group in question :

- a) Countries in which the government is really committed to Family Planning both on paper and in action. Tunisia falls into this classification
- b) Countries in which the government is officially committed to Family Planning; but does not actively implement its policy. This is the case with Egypt and Morocco.
- c) Countries in which the government is aware of the population problem but is as yet unprepared to go into real action, giving indirect support to Family Planning. Examples of such countries are Sudan, Jordan, Syria, Afghanistan, North and South Yemen and Algeria.

d) Countries in which the government is unaware of the population issue until now, this particularly applies to the small wealthy countries in the Gulf. In some such countries e.g. Bahrain, the government is aware of the issue but reluctant to get involved for political reasons.

e) Countries in which the government is against Family Planning officially on political/religious grounds e.g. Saudi Arabia, and this is influencing neighbouring countries such as those in d) above.

The major activity here will be to work on governments within the different categories according to their needs. Our approach will be to involve them in the human and health aspects of the cause of Family Planning. It is for the latter reason that we have become seriously interested in and decided to focus upon activities related to the International Year of the Child.

The emphasis will be not only upon getting governments involved in Family Planning but also to ensure that they are the main providers of traditional service delivery; this would free FPAs for other important activities such as :

- New approaches to service delivery
- CBD
- Delivery Systems for rural areas
- Women's Development
- Youth, particularly Sex Education

Where possible and appropriate, special, pilot-type projects will be developed in the above areas to demonstrate to governments both the positive benefits of family planning and the need for it, as well as ways of delivering services to remote areas of the type typical to our region.

Special attention will also be given to focussing upon FPAs in countries where there is a national programme to see whether their work is properly coordinated with that of the national programme as the situation is as yet not what we would wish for.

In our programme of influencing governments in favour of Family Planning special attention and focus will be placed upon cooperation with UN and other bodies such as the Arab League and Pan-Maghreb organisations.

The activities within this objective fall mainly under Goals II and III of the IPPF 3 Year Plan.

OBJECTIVE 2 : Review Associations' capacity to articulate and achieve objectives, evaluate objectively experience to date and accordingly strengthen manpower and organisation within FPAs with a view to effective programme implementation.

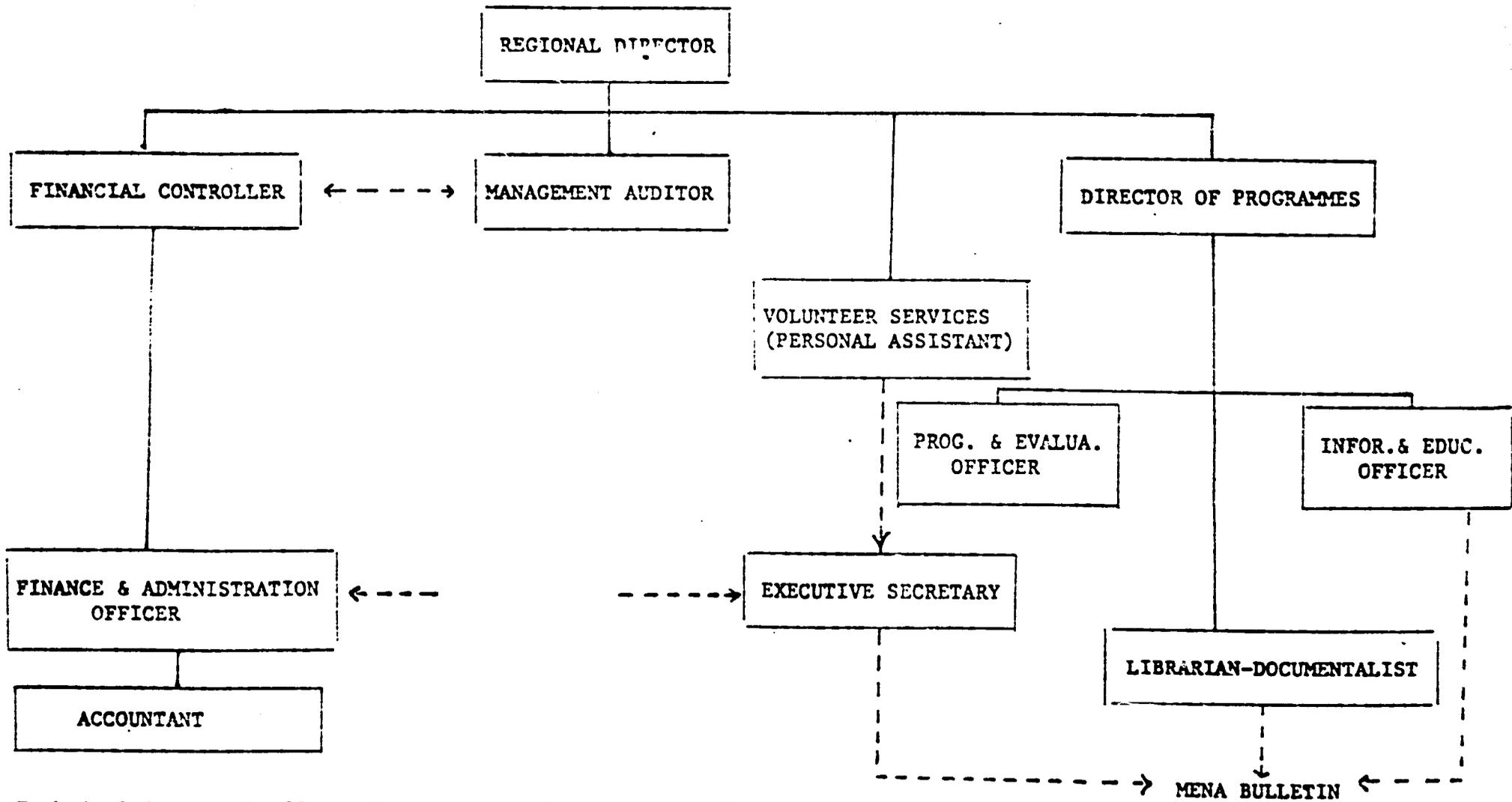
This objective represents an amalgamation of Goal IV of the IPPF 3 Year Plan and evaluating what has been achieved so far in the region. some FPAs in the region have now been established for as long as a decade, others for at least five years, and yet until now the only real

achievement has been to get Family Planning respected and accepted, but so far we have failed to get governments seriously involved in action programmes. In many areas action should be taken to change laws related to our field but nothing has been done except in Tunisia and Cyprus. Our priority will be to focus upon total country evaluation to see what the FPA has been doing and know where we are.

The result of the above should be to make FPAs as effective as possible in the administration and realistic planning of programmes and in the delivery of existing services in order to maximise resources both human and material. It should also help them in defining more precisely their role within their national context and deciding upon the new approaches which would be the most relevant for them.

OBJECTIVE 3 : Further to the discussion in the Central Council meeting in November 1977, and particularly in view of the increasing demand expressed by regions, especially Africa, we should participate in the endeavour to encourage inter-regional exchange of experience for both volunteers and staff where and when possible and appropriate.

MENA-IPPF REGIONAL OFFICE ORGANOGRAM



Technical Support Staff : - Secretaries - Duplicating & Printing

Non-Technical Support : Driver/Messenger, Cleaner, Gardener.

