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**ACCRA MARKET OPERATIONS RESEARCH PROJECT**

**FINAL REPORT**

JUNE 1990

NATIONAL COUNCIL ON WOMEN AND DEVELOPMENT  
NATIONAL SECRETARIAT AND GREATER ACCRA REGIONAL SECRETARIAT, GHANA

OPERATIONS RESEARCH PROGRAM, CENTER FOR POPULATION AND FAMILY HEALTH  
SCHOOL OF PUBLIC HEALTH, COLUMBIA UNIVERSITY, USA

Accra Market Operations Research Project

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Operations Research Program, Center for Population and Family Health  
School of Public Health, Columbia University, USA

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## SUMMARY

In February 1989, the National Secretariat of the National Council on Women and Development (NCWD) initiated a pilot project to bring family planning services to the Accra markets. This was an operations research project conducted in cooperation with the Center for Population and Family Health of Columbia University, New York, with funds provided by USAID. The objectives of the project were to test the acceptability of sales of contraceptives by the traders in the traditional markets, to determine needs for training of market traders as sources of information and commodities, and to test a system for reliable supply of the participating traders.

In the first phase of the Market Operations Research Project traders from Kaneshie, Mallam Atta and 31st of December/Mokola markets were recruited as project agents. They were instructed in human reproduction and contraception by personnel of the Ministry of Health, Korle Bu Teaching Hospital, and other organisations as well as staff of the NCWD. The training was held in or near the market, usually for four hours a day on three days. At the completion of the training, the traders received identification badges, certificates, signs for their market stalls which identified them as family planning agents, and an initial supply of Panther condoms and Kamal foaming tablets -- the products of the Ghana Social Marketing Programme. For resupply, a system of sub-depots at pharmacist shops in or near the markets was organised.

Research conducted included collection of information on the background characteristics of the participating traders, their knowledge of family planning purposes and methods, and their attitudes toward contraception. A questionnaire was administered immediately after the training to evaluate their understanding of the course content. A random sample of agents was interviewed two months after training to measure their retention of information on the contraceptive methods. Both measures indicated satisfactory comprehension and retention.

Extensive publicity on television, radio and in the newspapers accompanied the launching of the project in the three markets and posters, handbills and banners announced the presence of the family planning agents. Later, a survey of shoppers was conducted in the markets to assess awareness of the programme. An important finding was the impact of radio and television on awareness. Second in importance was person to person information supplied by market traders.

In October 1989, the Greater Accra Secretariat of the NCWD assumed the administration of the project and services were extended to Labadi, Salaga and Nima markets. Research continued with focus group discussions among project agents, monitoring visits to the markets, and collection and analysis of service statistics.

Overall, about twice as many foaming tablets as condoms were sold. The records of sales, which were kept by the agents on forms which require only a hatchmark for each transaction, have been analyzed in order to explore possible

influences of age, educational level, items sold and other characteristics on the volume of sales of contraceptives. The findings suggest that older women, over 45 years, had more sales of foaming tablets than the younger women but differences are not large. The notable difference was the considerably higher average sales by agents in the Kaneshie market, as compared with Mallam Atta, 31st of December/Mokola, Labadi and Salaga (Nima market is not included because training of the agents was completed shortly before the conclusion of the operations research). It was also found that traders who had at some time used contraceptives were, on average, selling more condoms and foaming tablets than were other agents.

Plans for the future are to continue with development of market distribution of contraceptives in at least three more markets within Accra, with revisions of the system for resupply, and extension to two rural markets in the Greater Accra Region. Discussions are underway for the NCWD to initiate a similar programme in the urban area of Kumasi within the coming year.

## I. INTRODUCTION

Research on family planning in Ghana has shown a wide gap between knowledge of contraceptive methods and their use. One factor responsible for this phenomenon is limited accessibility and availability of services. In order to address this problem, the Ghana Contraceptive Social Marketing Programme (GSMP) was launched in 1986 with the sponsorship of the Ghanaian government and the United States Agency for International Development (USAID). This programme, which is implemented by DANAFCO, Ltd, a private pharmaceutical company, uses social marketing techniques such as promotion, packaging, market research and distribution through commercial outlets to promote the sale of contraceptives. The intention is to supplement clinic-based services by making family planning commodities easily available nationwide through approximately 3,000 retail pharmacy and chemical sellers' shops.

Although the GSMP has contributed to high levels of awareness regarding family planning, contraceptive prevalence rates have remained low. A Demographic and Health Survey in 1988 found that as few as five percent of the married women of reproductive age in Ghana were currently using modern family planning methods. At the National Conference on Population and National Reconstruction held at the University of Ghana in April 1986, it was proposed that educated teachers in villages, members of women's clubs, shop keepers and others be enlisted to provide information on family planning and to distribute contraceptives in their communities.

In November 1987, the Zonta Club of Accra (a women's service organisation), held a seminar for the market women's associations of Accra on primary health care and family planning, in cooperation with the GSMP, USAID and the Columbia University Operations Research Program. The purpose of the seminar was to discuss with the market women their needs for health services and to explore the possibility of sales of contraceptives by traders. The response was strongly positive and the leaders of the market associations urged the organisers of the meeting to start a programme for market distribution of contraceptives.

The Accra Market Operations Research Project is a result of that seminar. It was planned as a pilot project to test the extension of the GSMP to include traders in the Accra markets, with anticipation of integration of such outlets in GSMP's national programme. The research project was administered by the National Council on Women and Development (NCWD)<sup>1</sup> with funds from AID/Washington and USAID/Accra through a Cooperative Agreement with the Center for Population and Family Health of Columbia University. Technical assistance for the studies was

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<sup>1</sup>The National Council on Women and Development is the official organisation of the Government of Ghana. It advises the Government on matters relating to the integration of women in national development, undertakes research on the lives of Ghanaian women, conducts projects to assist women in income-earning activities, organises educational programmes for women, offers counseling services and compiles and disseminates information on the condition of women.

provided by the Operations Research Program of Columbia University and by the Ghana Ministry of Health

A pre-project study was conducted in December 1987 and January 1988 and the conclusion that a test of market distribution of contraceptives would be feasible was based on the following

- interviews with resource people knowledgeable about the market system and its operation in Accra
- a review of the literature on Ghana's markets
- information on the number and size of local markets and their organisation, especially the roles of the market associations
- interviews with market leaders, market traders and potential clients

Findings of this feasibility study guided the development of the project proposal and research design as well as the organisation of the training and service programme. Activities began officially in February 1989 with the signing of the project agreement between Columbia University and the National Council on Women and Development

## **II PROJECT OBJECTIVES**

The principal objectives of this operations research project were to test the acceptability of distribution of contraceptives in the marketplace, to determine the needs for training, and to test a system for supplying the commodities to participating market traders. Specific research questions included the following

- 1 Will market traders volunteer to sell contraceptives along with their regular wares? Will customers purchase contraceptives from sellers of vegetables, meat, cloth, cosmetics, and other items?
- 2 What training is necessary so that the traders are able to give their customers correct information about contraceptives?
- 3 Will sub-depots established by the GSMP near the markets function as efficient suppliers of contraceptives to the traders?

## **III. AGENT SELECTION AND TRAINING**

As of May 1990, 124 traders from six of Accra's largest markets were trained as project agents. In each market the market leaders (called queen mothers) were briefed about the project and, in their turn, informed their members. Each leader then submitted to the project officers a list of traders in her market who were

interested in being trained to become an agent Agents representing each commodity category were selected

The dates of the training sessions and number of agents from each market are shown in Table 1

**Table 1 Training Schedule**

<b>Market</b>	<b>Dates</b>	<b>Number of Trainees</b>
Kaneshie	March 13-15, 1989	24
Mallam Atta	April 10-12	33
31st December/ Makola	May 29-31	26
Labadi	Dec 20-21	9
Salaga	Jan 23-24, 1990	17
Nima	April 5-6	15

For the convenience of the agents, training was held within each market and lasted four hours per day for three days, or six hours per day for two days The curriculum was developed by the project officers and included the relationship between population growth and socioeconomic development, basic reproductive anatomy and physiology, principles of contraception and an overview of methods, and use, care and storage of condoms and foaming tablets (the methods the agents would offer), and information on resupply Detailed reports on the training are available from NCWD

Training resources were drawn from a variety of institutions active in family planning service delivery including the Population Impact Project at the University of Ghana, the Midwifery Training School, the Family Planning Unit at Korle-Bu Teaching Hospital, and DANAFCO The use of this group of trainers not only allowed the trainees to benefit from their expertise, but also helped enlist widespread support for the programme from those professionals active in family planning Staff from government clinics near the markets participated in the training and close links were created for referrals from the agents for clinical methods and from the nurses for condoms and foaming tablets

Training certificates and identification badges bearing the photo of the trained agent, signed by the Director of Medical Services, Ministry of Health, and the Executive Secretary of the NCWD, were given to the agents as proof that the project was backed by the government The agents received these ID materials, a durable signboard with the family planning and NCWD logos for their stall, and an initial stock of Panther condoms and Kamal foaming tablets (GSMP commodities) at a presentation ceremony marking the end of each training The training and opening and closing ceremonies were reported in the daily newspapers

The training conducted for agents in Nima market is described in Appendix B as an example of the format and curriculum followed for all the markets

#### **IV PROJECT MONITORING AND RESUPPLY OF COMMODITIES**

The project staff at NCWD monitored sales and agent activities through visits to the markets and occasional meetings to review the information on contraceptives and to discuss any problems experienced. Frequently agents are not at their stalls when the monitor visits and return visits are necessary. Problems with maintaining contact with agents and obtaining sales data have not yet been resolved. Alternative methods for monitoring are discussed in Section VI below.

A sub-depot system was designed to designate pharmacy shops in or near the project markets to resupply the traders with DANAFCO contraceptives. DANAFCO would supply the sub-depots at a discount so that the pharmacy shops would have some profit when selling to the market traders at the wholesale price. The pharmacy shops were to know who was a project agent by their identity cards and were to keep records of these sales for NCWD and DANAFCO.

The system has not been a universal success. The lack of commodities in the country delayed over a month the initial supply to one training group, and a reliable sub-depot has not always been found. One pharmacist participated for a short time but withdrew, claiming that it was a burden, and not worth the profit obtained from the two and a half percent markup allowed. Two markets have nearby pharmacies, but they are not acceptable to DANAFCO because of poor credit histories. A fourth market does not have a nearby pharmacy. A promising alternative that is to be tested is for DANAFCO to supply one of the agents in markets where there are no cooperating pharmacists, and she will then supply the others.

#### **V PUBLICITY**

During the pre-project feasibility study market leaders and traders expressed a fear that sellers of contraceptives would be harassed by the Ministry of Health, the police or other official organisations. To avoid this problem, staff developed a brief information sheet about the project which was widely circulated to governmental and private organisations related to family planning. In addition, personal visits were made to a number of agencies to discuss the project in detail.

The launching of the project at the car lot of the Kaneshue market complex on the first day of training was widely covered by radio, television and the daily papers, as was the closing ceremony. In order to create wider and continuing awareness of the new family planning services in the markets, NCWD developed and implemented a promotion plan, with the assistance of a health educator assigned to the project from the Greater Accra Regional Medical Office of the Ministry of Health.

NCWD produced and distributed four thousand handbills to shoppers in the project markets and to over two dozen women's organisations. One thousand posters were also produced and distributed to various organisations such as the Ghana Private Road Transport Union for display on their commercial vehicles. Many were also posted throughout the markets. A black-and-white version of the handbill was run as an advertisement once per week for six weeks in two of the popular newspapers.

Two spots were developed for television and two similar spots for radio in English and five Ghanaian languages. Although the project paid production costs, air time for these and for family planning jingles was granted free of charge as a public service of the Ghana Broadcasting Corporation. Radio spots currently being developed are aimed at involving men in the practice of family planning.

## VI RESEARCH ORGANISATION AND RESULTS

In addition to the data collected prior to and after training from 115 of the 124 agents and analysis of sales statistics, two small-scale surveys were carried out in the first three markets (Kanesue, Mallam Atta and 31st December) and agents from these markets participated in two focus group discussions. The studies conducted are summarised below.

Study	Target Group	Sample
Pre and Post Training Assessment	Traders	115
Shopper Awareness	Shoppers	120
Information Retention	Traders	45
Focus Group Discussions	Traders	15

Questionnaires for these studies were developed by the project research consultant and a senior research officer of NCWD. The questionnaires were pretested in Osu market which appeared to represent characteristics of all the project markets.

## Agent Sociodemographic Characteristics

The pre-training assessments provided information on background characteristics of 115 of the 124 the traders who were selected for training, as well as knowledge and attitudes about contraception. The traders were interviewed at their stalls or at the training locale before the first session. Post-training assessment took place within a few days of graduation. Background demographic and social data compiled included age, tribe, parity, church attended, marital status, educational level, length of time selling at the market and items sold. Economic characteristics were measured by proxy ownership of a car, lorry, truck, canoe, radio, sewing machine, or television. General questions on knowledge and attitudes regarding contraception, especially concerning foaming tablets and condoms, were asked. Additional information obtained on the post-test related to evaluation of the training course. In some few cases not all questions were answered and the percentages shown in the tables that follow are based on the number of responses recorded, not on the total number of agents interviewed. The distribution of the agents among the six markets is shown below in Table 2.

**Table 2 Distribution of Agents by Market**

<b>Market</b>	<b>N</b>	<b>(%)</b>
Kaneshie	19	(16)
Mallam Atta	31	(27)
31st December	24	(21)
Labadi	9	( 8)
Salaga	17	(15)
Nima	<u>15</u>	<u>(13)</u>
Total	115	(100)

Almost half of the agents were in the middle age group and the younger were the minority (Table 3). All but two of the agents are female. Over 30 percent of the traders recruited for the project had five or more children, 47 percent had two to four children, ten percent had one, and eleven percent had no living children.

**Table 3 Age Distribution of Agents**

<b>Age Group</b>	<b>N</b>	<b>(%)</b>
<30 years old	23	(21)
30 - 45	51	(46)
>45 years old	37	(32)

Fully half of the agents were Ga, the group that predominates in the Greater Accra Region, Ewes and Akans were each represented by about 20 percent and the remainder were Dangbes or Hausas Table 4 shows the religions followed by the agents Predominantly, they belong to the more orthodox Protestant religions

**Table 4 Religion of agents**

<b>Religion</b>	<b>N</b>	<b>(%)</b>
Protestant	69	(61)
Spiritualist	24	(21)
Catholic	12	(11)
Muslim	7	( 6)

Table 5 shows the level of education achieved by the agents More than half had been educated to the middle school level, and over 20 percent had additional years of vocational or secondary education This is a relatively well-educated group for Ghanaian women and raises questions for research concerning the possibility that literate women are more likely to volunteer for participation in family planning programmes, or to be sought out by market leaders as traders able to handle the training and record keeping required by the programme

**Table 5 Educational Level of Agents**

<b>Education</b>	<b>N</b>	<b>(%)</b>
None	10	( 9)
Primary school	17	(17)
Middle school	53	(52)
Commercial/Vocational	6	( 6)
Secondary/University	16	(16)

Socioeconomic status as measured by household possession of a car, lorry or canoe, a sewing machine, television, or radio is shown in Table 6. While comparable socioeconomic data are not available for market traders, or for the general population, project staff who have worked extensively among Accra women believed this to be on average a relatively advantaged group.

**Table 6 Socioeconomic proxy measures**

<b>Items owned</b>	<b>N</b>	<b>(%)</b>
Car/lorry/canoe	47	(41)
Sewing machine	84	(75)
Television	71	(62)
Radio	92	(81)

There were few newcomers to the markets among the traders recruited for this project. Sixty-five percent had traded more than ten years, 15 percent for five to nine years, and 20 percent less than five years. In selecting the agents, the variety of items sold was intentional, as was distribution of locations throughout the market so shoppers in all sections would have access to a project agent. As Table 7 shows, most of the agents trade in food items, either fresh, tinned, or dried, but cloth and cosmetic sellers are well represented.

**Table 7 Items Sold by Agents**

<b>Item</b>	<b>N</b>	<b>(%)</b>
Vegetables or meat products	45	(39)
Food stuff	24	(21)
Tinned foods/cosmetics	19	(17)
Cloth	15	(13)
Other	12	(10)

### **Contraceptive Knowledge, Attitudes and Use**

Before training, the agents were questioned about ideal family size, concepts of the benefits of family planning, knowledge and use of specific methods, and use of contraceptives by adolescents. Immediately after their training they were questioned again on methods. Responses to both questionnaires are summarised below.

Ninety-four percent of the agents had heard of family planning before they received training. Overall, 82 percent could name at least one modern contraceptive and generally describe the way it prevents pregnancy. Seventy-two percent had heard of the foaming tablet and 88 percent knew of the condom and at the outset about half knew that the foaming tablet is spermicidal, and three-quarters knew that the condom prevents sperm from entering the womb. After training, nearly all knew how the contraceptives are used and how they safeguard against pregnancy.

Approximately a third of the traders mentioned problems with foaming tablets that they had heard of, principally that they cause a burning sensation and vaginal irritation and that they are messy. Unspecified health problems were also reported. With respect to condoms, interference with sensitivity was mentioned as a problem by about ten percent, and 25 percent of the agents said that a condom might burst.

Traditional methods were relatively little known, or acknowledged. Herbal enemas were the most frequently mentioned (by 30 percent) but over 60 percent said they knew of none.

Before and after training the traders were asked to identify the period in a 28-day cycle when a woman is most likely to get pregnant, and knowledge of the safe period rose from 28 percent in the pre-test to 56 percent in the post-test. It appeared that the menstrual cycle was still not well understood by the agents and their advice to clients on how to calculate the period of ovulation in order to prevent pregnancy would not be reliable.

Use of contraceptives at some time was reported by 57 percent of the agents under age 49. Forty percent of these had used the pill and 27 percent the IUCD. Nineteen of the women in this age group (23 percent) reported that they were currently using contraceptives. This is a high prevalence rate for Ghana as a whole, but not for the Accra area, although it must be kept in mind that this is a very small sample. The 1988 Demographic and Health Survey found that 27 percent of married women in the Greater Accra Region were currently using a contraceptive method, including periodic abstinence.

Table 8 shows the agents' definitions of the purpose of family planning before and after training. The addition of economic and health benefits to the list after training is notable. This was a topic in the training course, and it is a theme in the government's publicity on family planning. Birth spacing, which was the principal response before training, retained its lead as the most frequently mentioned purpose, but family limitation gained a few percentage points.

**Table 8 Purposes of Family Planning  
Pre- and Post-Training (Percent)**

<b>Purpose</b>	<b>% Before (n=110)</b>	<b>% After (n=109)</b>
Birth spacing	60	43
Birth limitation	21	27
Economic/Health benefits	0	12
Other	19	18

When asked before training their opinion as to the ideal number of children each couple should have, only five percent mentioned five or more. The majority (71 percent) said that a couple should have no more than four.

Seventy percent responded in the affirmative to the pre-training question "Would you make family planning available to teenagers?" This was unexpected in view of frequently expressed community attitudes against even sex education for adolescents. As shown below in Table 9, a slightly different question about supplying contraceptives to unmarried young people was asked and 71 percent agreed.

The series of statements intended to assess the agents' attitudes toward family planning concluded the pre-training questionnaire. They were asked if they agreed or disagreed with each statement. The proportions agreeing are shown in Table 9.

**Table 9 Proportion of Agents Agreeing with Statements Before Training (n = 115)**

<b>Statement</b>	<b>%</b>
People who use family planning do not like children very much	24
Men are against family planning	47
Family planning leads to promiscuous (loose) behavior	34
People should use family planning for stopping births	69
Family planning should be made available to sexually active young people, even if they are not married	71
One should strongly encourage a woman with 6 children to stop having children	98
One should only give family planning to women who have their husband's permission	75
Family planning causes a lot of health problems	35

Of particular interest is the nearly unanimous opinion that a woman with six children should stop, and the agreement by two-thirds that family planning should be used for stopping births. As noted above, the majority believed that unmarried but sexually active young people should be given contraceptives. Almost half believed that men are against family planning and three-fourths believe that women must have their husband's permission to postpone or limit births. A final observation from this list of attitudinal statements is that 35 percent agreed that family planning causes a lot of health problems. This calls for better counseling for men and women so that side effects are understood, but also for greater efforts to make the full range of contraceptive methods known and available.

### **Shopper Awareness Study**

The objective of this study was to assess the effectiveness of the communication and publicity strategies employed in the programme. Information was obtained from

shoppers on awareness of contraceptive sales in the market, sources of that information, and whether or not the respondent had bought any method. Reasons for the choice of a specific method or any particular agent were also asked.

The study procedure involved interception of shoppers in each of the three markets. The interviewer first selected a stall five stalls away, to either side of the stall of a randomly-selected project agent. The shoppers buying from this stall were stopped and interviewed. One hundred and twenty-one shoppers, about half of whom were male and half female, were interviewed. Eighty-six percent of those questioned were regular shoppers in the market in which they were interviewed.

A little over half (54 percent) of the respondents were aware that family planning services were available in the interview market or in another market in Accra. Their sources of information are shown below in Table 10.

It is interesting to note that although radio and television spots had an obvious impact on awareness, newspaper ads had none. This finding tends to support the project staff's judgment while planning the promotion that newspaper advertisements were not likely to be the best medium for raising awareness of project activities among market shoppers. It was decided, however, that newspapers are an important medium for reaching decision-makers and professionals who need to be kept informed of project activities. The extent to which newspaper ads reached this important audience was not investigated.

**Table 10 Source of Information**  
(n = 65)

Source	N	(%)
Radio/Television	42	(65)
Market/Market traders/Project Agent	18	(28)
Friend	3	(5)
Banners hung in project markets	2	(3)
Newspaper	0	(0)

In spite of relatively high awareness of agent activity among randomly-selected shoppers, only one of the 121 people interviewed had ever bought contraceptives from a market agent.

Of the 65 respondents previously unaware of the agents' activities, 32 said they would be willing to buy contraceptives from them. The methods shoppers would prefer to buy from agents were condoms (mentioned by 16 people), foaming tablets (7), and the pill (2). Those who were not interested in patronising the agents (36) gave the following reasons:

Cannot trust market women, prefer other sources	9
Not married/no current partner	8
Against religion/dislike FP/fear of side effects	8
Wants to get pregnant/have children	7
Prefers natural family planning	3

Shoppers were also asked for any suggestions or comments regarding the programme. Almost half (18) of the 42 people who commented recommended that more information and education about family planning should be made available to the public. Other comments included preference for natural family planning (5), opposition to family planning for religious or health reasons (4), and the need for more information on the agents' qualifications to dispense contraceptive methods (3).

### Assessment of Trader Retention of Training Information

The object of the trader retention survey was to find out how much information was retained by the agent at least two months after training. A random sampling procedure by straight balloting was employed to select 15 agents from each market for a total sample of 45. The study was conducted by an experienced researcher unknown to the agents who posed as a potential customer, asked the required questions, and filled in the form immediately after the interview. Questions were asked on the types of contraceptives sold, the benefits of family planning, how to use the available methods and how to store them. This was considered the barest minimum information the agents were required to remember.

When asked which methods they sold, 98 percent of the women mentioned both the condom and the foaming tablet. Regarding which method they would recommend, the condom was recommended by 46 percent because it is good for men, 8 percent because it is easy to use, and 5 percent because it prevents AIDS. Foaming tablets were recommended by 16 percent because they are safe. Both methods were recommended by 22 percent because all methods are good.

When asked to explain how to use the condom, 30 percent described how it is worn over the erect male organ and that the tip of the condom should be held when it is put on in order to expel air. Sixty-five percent gave a similar description but did not mention pinching the tip of the condom.

Forty-two percent of the agents tested mentioned inserting the foaming tablet into the vagina and waiting for 10 - 15 minutes before intercourse. A waiting time of 5 - 10 minutes was recommended by 32 percent and 24 percent of those interviewed failed to mention any waiting period. As the effectiveness of the foaming

tablet depends on waiting for it to be fully dissolved, this point was stressed in review meetings with the agents and in later training

Finally, the "client" asked where she should store these methods at home. One-third said that they should be stored in a cool place, almost one half said out of the sun and away from children, and the others said they should be kept under the pillow or in the bedside locker

### **Focus Group Discussions**

The 15 agents selected from the three markets for focus group discussions represented both high and low performers with respect to sales of project commodities. The topics included communication about family planning, the agents' attitudes toward the methods sold, and their perceptions of community attitudes concerning family planning and market sales of contraceptives

The agents described their efforts to speak about family planning to their customers and outside the markets, and all spoke of some difficulties with communication. Common experiences were being accused of not being Christian because they were talking about sex or because contraception is wrong, and being teased by men about the agents' own sexual behaviour or use of contraceptives

"The women understand it better than the men. The men especially do not agree that their wives use it. Condoms reduce the sensitivity. It is not sweet," is a typical comment. Frequent purchasers of condoms were described as prostitutes, school boys and sugar daddies

Almost all the participants reported complaints about the Kamal foaming tablets. "Most people say it burns like peppermint. They say it makes the woman messy like they have already gone one round. Some say they can't time it."

The agents requested that training include information on the other family planning methods, since not all their customers want condoms or foaming tablets. People ask them for oral contraceptives and injections and the agents refer them to the clinics. However, all of the participants were of the opinion that they would be able to handle these methods if they were taught. Regarding injections, one said "We can do it like those with diabetes have been taught to do."

General satisfaction with the programme, a sense that they were making a contribution to their communities, the need for publicity on family planning and training others as they had been trained were common themes expressed by the agents throughout the two group discussions

## Sales of Condoms and Foaming Tablets

Market project agents record sales of condoms and foaming tablets on forms provided by NCWD, which do not require literacy (A sample is shown in the Appendix) These are tabulated for each agent and each market by month. The information and discussion in this report is based on the agents' records, with the assumption that reported sales are of strips of four condoms and four foaming tablets, although the agents may sell single, double or more than four and record the transaction with the same hatch mark as the sale of a strip of four. Not all of the sales take place in the markets. The agents are encouraged to take the commodities to their home communities and on their travels.

A supplementary source of data on distribution in the markets is DANAFCO's records of quantities sold to the pharmacy sub-depots earmarked for the project agents. DANAFCO records, however, do not show sale of stocks intended for the market to other customers. Since the latter could involve large quantities, the agent records probably give a closer approximation of the volume of sales and permit comparison of sales according to agents' background characteristics.

From April 1989, when the agents from the first market completed training, to April 1990, the total sales of Panther condoms recorded was 2,312 strips of four, or 9,248 single condoms, and 5,250 strips of four foaming tablets, or 21,000 single tablets. There were thus more than twice as many foaming tablets as condoms sold.

In the presentation of comparisons among markets and items sold, the sales unit used is "strips per month" in order to adjust for the different training dates for five markets. The sixth market, Nima, had not started activities during the time period covered by this report. One hundred agents were trained in the five markets from which these sales statistics were obtained, but records of 66 agents were available for analysis for this report.

Table 11 shows the average sales per month for agents grouped according to their market, age group, length of time they have been trading, items they sell, educational level and whether or not they have ever used a contraceptive.

The difference among the five markets is striking. Kaneshie market far exceeds the others in the average sales of foaming tablets per agent per month, and agent averages in both Kaneshie and Salaga exceed the others in sales of condoms. We do not have an explanation for this. There is some evidence that a few agents in Kaneshie market are making bulk sales which appreciably raise the market totals, but this has not yet been confirmed.

**Table 11 Mean sales per month by agent characteristics (N = 66)**

	Mean sales per month	
	Condom	Foam tab
Total	3 8	7 3
Market		
Kaneshie	6 1 **	15 8 **
Mallam Atta	2 3	5 0
31st December	2 6	6 3
Labadi	2 7	5 1
Salaga	7 9	7 2
Age group		
< 30 years	3 1 *	6 1
30 - 45	5 0	7 7
> 45	2 6	8 4
Time trading		
< 5 years	2 1	6 0 *
5 - 9	5 4	11 5
10 +	3 8	6 9
Items sold		
Vegetables	3 2	6 5
Meat/fish	4 2	7 3
Tinned food	4 5	11 5
Cloth	4 5	8 6
Cosmetics	3 9	8 6
Food stuffs	3 8	6 0
Other	3 9	7 8
Education		
None	4 1	3 5
Primary	4 7	5 1
Middle	3 8	8 0
Comm/voc	1 2	6 3
Secondary	4 5	8 1
Everuse FP		
Yes	4 7	8 8 *
No	3 0	6 0

\* Difference significant at < 05 level

\*\* Difference significant at < 001 level

It appears that the agents in the 30 to 45 age group have been more effective in sales of condoms than the other age groups, and the oldest age group may be more effective in selling foaming tablets, although differences are not large. The group with a moderate length of time in the market (five to nine years) shows considerably higher mean sales of foaming tablets per month than the groups with shorter or longer durations. This difference was observed in all age groups.

The similarity of mean sales by traders of the seven categories of items sold is of particular importance for the future of market distribution of contraceptives. The conventional wisdom has been that sellers of cosmetics, soaps, and other packaged goods would be the more appropriate sellers of contraceptives, but that is not the situation in the Accra markets. There is, as yet, no evidence that warrants exclusion of traders of any commodities from distribution of contraceptives in the marketplaces.

The per month averages of traders who have at some time used contraceptives are shown to be higher than those who have never done so. The differences are not large, but are statistically significant for foaming tablet distributions. It would not be practical to limit recruitment to sometime or current users, given the level of contraceptive prevalence in Ghana, but their relatively better averages suggest that special efforts might be made to seek their participation.

### **Agent Continuation**

In discussions of the issue of agents who sold contraceptives shortly after training and did not continue, or whose sales are unknown because they cannot be located at their stalls despite repeated tries, it should be kept in mind that participation is in most respects a volunteer activity. There is probably some expectation of profits, but the amounts are small. The training emphasises the importance of the programme as a health service and for national development, and agents are urged to spread the message about family planning for the good of the country. In essentially voluntary undertakings of this kind, discontinuation by some is not unexpected.

Among the 83 traders trained for the first three markets, 23 had no reported activity and 22 had no activity reported after August 1989 (the majority from Kaneshie and 31st of December markets). A comparison of inactive and active traders on age, educational level, items sold and use of family planning shows a difference only in that inactive agents are more likely to have had no formal schooling or to have primary education only. NCWD plans to undertake investigation of reasons for inactivity as a guide for selection of agents.

## **VI. RECOMMENDATIONS AND FUTURE DEVELOPMENTS**

On May 30, 1990, a meeting was convened for those who had participated in planning the Market Operations Research Project or in some aspect of its

implementation The purpose was to review project activities up to that date and to obtain recommendations for future development of market distribution of contraceptives The subjects discussed and recommendations made are summarised below

The meeting was attended by representatives from the Ministry of Health, the Ghana National Family Planning Programme, USAID/Accra, DANAFCO, Columbia University's Center for Population and Family Health Operations Research Program, and NCWD National and Greater Accra Secretariats The Ministry of Health representatives included six nurses who had assisted with training for the project, and who work in clinics in or near the markets, the health educator who had developed promotional materials, and the operations research consultant

The market agents are selling more than twice as many foaming tablets as condoms, a not unexpected finding since only two are male and women may be experiencing embarrassment in promoting condoms Since most traders and most shoppers in Accra markets are women, recruitment of men could be difficult Nonetheless, men do sell clothing and other items, a few have expressed interest in joining the project, and active recruitment may be beneficial to increasing sales of condoms

Improvements in the supply system are needed The most recently trained traders did not receive their condoms and foaming tablets because DANAFCO did not have sufficient stock, and this has adversely effected morale and motivation Refresher training is necessary when such unfortunate delays occur It was recommended that DANAFCO give the market project high priority when contraceptive supplies in the country are scarce

The designation of a pharmacy as a sub-depot has not been successful for all markets An alternative recommended was the direct supply by DANAFCO of one of the project agents, who would in turn supply the others in her market Two potential problems discussed were a) an incentive for this agent to take on this task, and b) communication of an order to DANAFCO It was strongly recommended that DANAFCO provide an incentive and make periodic visits to supplier agents to take orders

Maintaining communication with agents to make sure they are getting supplies and to collect their records of sales is often a difficult undertaking, although necessary for project management and evaluation Repeat visits may be necessary, and some traders may not be available after several tries because they are travelling or have personal or business concerns outside the market The nurses from the clinics in or near the markets can from time to time visit the agents, and that is desirable, but they are not responsible for programme monitoring An agent who is acting as the sub-depot for supplies, might have information on the other agents, and might collect records of sales, although some incentives would probably be necessary At present too little is known about the agents who do not report sales to recommend a

solution Investigation by means of a follow-up survey to interview traders who were trained but apparently are not currently active was advised

Publicity for the programme (sketches and jingles on the radio, posters, handbills, banners in the markets and metal signs identifying the traders as Family Planning Agents) must be revised to include all the participating markets Continuous promotion with a motivating as well as informational theme was advised, with messages directed at men

The development plan for the next months included expansion of the project to three markets in Accra Tuesday, Abeka and Teshie Markets Organisation and recruitment have started in Tuesday and Abeka, and training for traders is to take place in June 1990 Teshie market training will be scheduled at a later time

Markets in the rural areas in the Greater Accra Region have been considered and the concept of family planning agents has been presented to leaders in Kasseh market which meets twice a week A family planning programme in Kasseh would extend information and supplies to people from approximately 100 villages in the surrounding areas who come to buy and sell Traders who come with lorries from more distant places and travel to other rural markets, could greatly expand the distribution network A second bi-weekly market, Kasuah which is just outside Accra, also draws from a widely dispersed rural population and offers promise for augmentation of the contraceptive supply system

There has been considerable interest in the Market Operations Research Project from other NCWD Secretariats, especially in Kumasi The possibility of starting market distribution in that city was explored during a National Meeting on the project in June 1990, which brought together NCWD and Ministry of Health personnel from the other regions

**APPENDICES**

APPENDIX A

**Trainers and Resource Persons**

Ms Florence Ashutey	Dept of Obst /Gynae Korle Bu Teaching Hosp
Mrs Grace Akpası	Midwifery Training School Korle Bu Teaching Hosp
Mrs Mercy Offei	Family Planning Unit Korle Bu Teaching Hosp
Mrs Fredrica Bannerman	Senior Nursing Officer Labadi Polyclinic
Ms Theodora Sackey	Senior Nursing Officer Labadi Polyclinic
Mrs Elizabeth Chinery	Senior Nursing Officer Ussher Town Clinic
Ms Alexandria Addo	Nursing Officer Ussher Town Clinic
Ms Naomi Amugi	Nursing Officer Ussher Town Clinic
Ms Mildred Amponsah	Nursing Officer Ussher Town Clinic
Mrs Florence Ali	Nursing Officer Mamobi Polyclinic
Mrs Juliana Ahenkora	Senior Nursing Officer Mamobi Polyclinic
Mrs Martha Atakey	Nursing Officer Mamobi Polyclinic
Mr Kwaku Amponsah	DANAFCO, Ltd
Mr Henry Ofori	Population Impact Project
Mrs Frances Hagan	Senior Project Officer NCWD
Mrs Vera Quaye	Research Officer NCWD

## APPENDIX B

### **Agent Training in Nima Market Accra Market Operations Research Project**

The Chairman for the formal opening ceremony was the Nima community representative on the Accra Metropolitan Assembly and Chairman of the Committee for the Defense of the Revolution in Nima. The welcome address by the NCWD Greater Accra Secretary was followed by an address by a representative of the Planned Parenthood Association of Ghana.

The afternoon session was given first to an explanation of the anatomy and physiology of the human reproductive system, led by a Senior Nursing Officer of the Polyclinic which serves the Nima community. The use of flip charts and open discussion with the trainees reinforced the lecture material. This was followed by an explanation of the principles of contraception, by a Senior Nurse from Korle-Bu Teaching Hospital. Charts and posters were used to illustrate how population growth affects socioeconomic development and family life. Participants were then invited to mention family planning methods they knew and samples of the pills, foaming tablets, condoms and IUCDs were distributed for examination. The trainer thoroughly explained how the various methods prevent pregnancy, how they are used, and possible risks due to incorrect usage. Counseling and communication were also covered during this session and the presentation was followed by questions and open discussion.

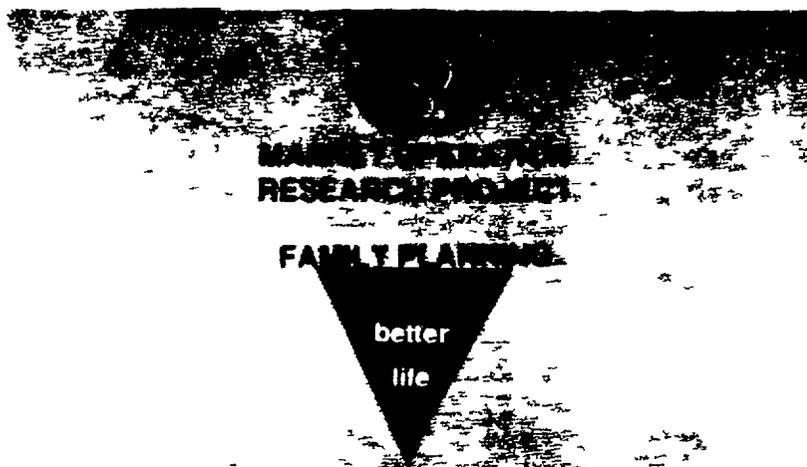
Role plays reinforced understanding of the use of each of the family planning methods and was an effective means of testing knowledge of the methods and of population issues generally. Participants also had the chance to assess their own performance in the role plays and to constructively criticise that of others.

Sexually transmitted diseases was the first topic of the second day in a session conducted by Nursing Sisters from the Polyclinic. The representative from DANAFCO reviewed the information on condoms and foaming tablets and explained correct usage, expiry dates, product handling and proper storage. Later he explained the supply system and restocking. A format for keeping a record of sales that had been developed by the NCWD was explained and distributed.

Other topics covered before the closing session included the use of oral rehydration solution, immunisation, the plight of the aged in Ghanaian society and energy conservation. A trained agent from Labadi market told the participants of her experiences after her training some three months before. As a success story, she told them of a man who had come to quarrel with her about family planning. After she explained family planning to him, showed him the contraceptives and how they are used, he bought ten condoms.

The closing ceremony featured the Nursing Sisters from the nearby clinic and an officer of the Greater Accra Regional Administration. The principal theme of the closing remarks to the traders was active promotion of family planning and spreading the knowledge they had gained to all and sundry.

# **FAMILY PLANNING FOR BETTER LIFE**



THE NATIONAL COUNCIL ON WOMEN AND DEVELOPMENT HAS NOW LAUNCHED FAMILY PLANNING SERVICES AT KANESHIE MARKET, MALATA MARKET AND 31ST DEC MAKOLA MARKET AS PART OF THE NATIONAL FAMILY PLANNING PROGRAMME

- 1 Find out as early as possible your Trained Family Planning Agent at the nearest market **LOOK OUT FOR THE ORANGE FLAG with the RED TRIANGLE and the BLUE DOVE**
  - 2 Ask about Family Planning from the agent
  - 3 Choose a method suitable to you Return for another method if the one chosen does not suit you You can get more supplies from these agents as needed
- CONTRACEPTIVES ARE CHEAP.**
- 4 In case of any problems or worries contact these agents They can help you or refer you to the nearest clinic

**REMEMBER TO LOOK OUT FOR THE FLAG AT THE  
MARKET PLACES  
GO FOR YOUR FAMILY PLANNING ADVICE AND  
SUPPLIES**

**FAMILY PLANNING TODAY  
BETTER LIFE TOMORROW!**

ENGLISH DIALOGUE ADVERTISEMENT

Efua Ama, why are you looking so dull and sad?

Ama Hmm! Efua, I'm thinking about the children. Since this morning they have only taken in koko without bread or anything. The three of them have been sent home for their school fees. The younger one, Kweku, is also seriously ill and I don't have money even to take him to hospital. What is even more devastating is that I'm so afraid I will get pregnant again. How would we ever manage?

Efua Oh, Ama! These should be problems of yesterday. Haven't you heard about family planning?

Ama Hm! I have, but I learnt that the services can only be given at hospital or clinic and that they are expensive. If I can't even afford to bring my child there when he is ill, how can I afford to travel there for these things?

Efua Ama, are you trying to say you are not aware of the sale of family planning methods right in the market? The National Council on Women and Development has trained some of the market traders to take care of your family planning needs at the marketplace. The clinic is not the only place you can go for family planning these days.

Ama Are you saying that I can take care of my family planning needs when I go marketing?

Efua Yes! It's very convenient and the prices are very cheap too. All you have to do is look out for the orange flag with the red triangle and the blue dove. These are the trained agents and they can help you solve your family planning problems.

Ama Well, let's go right now!

PLAN YOUR FAMILY NOW AND LIVE A BETTER LIFE TOMORROW!

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