

# UGANDA TRIP REPORT

Preparation of 1994 CPTs

October 7 - 22, 1993

Glenn Dixon  
Suzanne Thomas

Family Planning Logistics Management Project  
John Snow, Inc.



Family Planning  
Logistics Management  
Project

F P L M

1616 N. Fort Myer Drive  
11th Floor  
Arlington, Virginia 22209 USA  
Tel: (703) 528-7474  
Telex: 272896 JSIW UR  
Fax: (703) 528-7480



John Snow, Inc.

## **Table of Contents**

### **List of Acronyms**

- I. Executive Summary
- II. Major Recommendations
- III. Background and Scope of Work
- IV. Activities, Findings & Recommendations: non-CPT
- V. Highlights of CPTs
- VI. Follow-Up and Next Steps
- VII. Attachments
  - One: Persons Contacted
  - Two: Draft Order Cable
  - Three: Draft Financial Requirements
  - Four: Draft Shipping Schedule
  - Five: Tasks for MCH-FP Logistics Officer
  - Six: Condom Shipment Schedule for MCH-FP and World Learning
  - Seven: Draft CPTs

## List of Acronyms

ACP	AIDS Control Programme
ADMS	Assistant Director, Medical Services
AMREF	African Medical and Education Research Foundation
APCP	AIDS Prevention and Control Project
CA	Cooperating Agency
CDC	Centers for Disease Control
CEDPA	Center for Development and Population Activities
CMS/NMS	Central Medical Stores/New Medical Stores
CPSD	Commodities & Program Support Division
CPT	Contraceptive Procurement Tables
DANIDA	Danish International Development Agency
DISH	Development of Integrated Services in Health
DMO	District Medical Officer
EFHS	Expanded Family Health Services Project
FEFO	First Expiry, First Out
FPLM	Family Planning Logistics Management Project (JSI)
GOU	Government of Uganda
GTZ	German Technical Assistance Corporation
HPA	Health/Population Assistant (USAID)
HPN	Health/Population/Nutrition Officer (USAID)
IPPF/L	International Planned Parenthood Federation/London
JSI	John Snow, Inc.
LMIS	Logistics Management Information System
MCH-FP	Maternal/Child Health-Family Planning
MIS	Management Information System
MOH	Ministry of Health
NGO	Non-governmental Organization
NMS	New Medical Stores
NRA	National Resistance Army
ODA	Overseas Development Administration, Great Britain
PSI	Population Services International
SEATS	Services Expansion & Technical Support Project (JSI)
SDP	Service Delivery Point
SOMARC	Social Marketing for Change (The Futures Group)
STD	Sexually Transmissible Disease
TAACS	Technical Advisors in AIDS and Child Survival
UEDMP	Uganda Essential Drugs Management Programme
UNFPA	United Nations Population Fund
UPMA	Uganda Private Midwives Association
USAID	U.S. Agency for International Development, Kampala
VFT	Vaginal Foaming Tablets
WHO	World Health Organization
WLI	World Learning, Inc.

## **I. Executive Summary**

FPLM Logistics Advisors Glenn Dixon and Suzanne Thomas visited Uganda to assist USAID/Kampala, the Ministry of Health (MOH)/Maternal and Child Health-Family Planning (MCH-FP), the AIDS Control Programme (ACP), the Family Planning Association of Uganda (FPAU), and the local implementing agency for SOMARC activities, Armtrades, in the forecasting of contraceptive needs. A draft contraceptive order cable was prepared and left with the Mission, as well as a summary of financial requirements. The results of our contraceptive needs forecasting were discussed with the Mission, and copies of reports left on the completion of this visit. In addition, the Mission was updated on the status of the on-going contraceptive logistics management system strengthening activities.

The following are the highlights of our findings:

- The total estimated contraceptive requirement for the MCH-FP, SOMARC and other activities is USD 1,730,416. This budget would be for the supply of contraceptives through December 31, 1995. Several recommendations in this report address issues of improved mechanisms for cost sharing amongst donors. (Section IVf)
- The ADMS/MCH-FP began a one year course abroad in September 1993. Therefore, the Logistics Officer is now the Acting ADMS. The staffing situation at the MCH-FP is generally a factor in the slow progression of logistics activities. (Section IVa)
- The greatest obstacle to accurate forecasting has been, and continues to be, the lack of dispensed-to-user data. Although some improvements have been made in the data management system at the central level, it is unlikely that substantive improvements in the accuracy of contraceptive forecasting can occur until the procedures of the new contraceptive logistics management system are fully implemented, which would include transfer of dispensed-to-user data from district medical offices and service delivery points to the central level. (Section IIIId)
- There is no mechanism for coordinating the supply of donated contraceptives. This makes many activities difficult, particularly donor planning to meet forecasted requirements. The need for donors to coordinate their supply activities so that MCH-FP can improve their services cannot be over-emphasized.
- World Learning (WLI), an NGO, distributes the largest number of condoms in Uganda in the public sector. As these activities have expanded, WLI staff have established their own -- and adopted some of the MCH-FP -- procedures for managing their commodities. (Section IIIId).
- Logistics strengthening activities should continue to be assisted by FPLM through the beginning of DISH implementation, at which time these activities should be continued in collaboration with DISH and other technical assistance providers.
- The highest priority follow-up activities are the completion of the MCH-FP Contraceptive Logistics Management System Procedures Manual by FPLM, pilot

testing of these procedures in a selected district in the first quarter of 1994, and site visits to districts to review receipts and issues data to determine the appropriateness of past allocations and to conduct an assessment of training needs for the new contraceptive logistics management procedures.

## **II. Major Recommendations**

Recommendations related to these and other highlights are found throughout this report. The following is a summary of the major areas in which we believe improvements and/or corrective actions should be taken:

- 1) USAID/Kampala should ensure that follow-up and assistance is provided to the MCH-FP Logistics Advisor in completing tasks related to strengthening of the logistics system. As the Logistics Advisor currently is managing two position in the MCH-FP, this assistance should be provided at least until DISH is implemented at which time the logistics component of this project can also provide support in this area. (Section IIIa)
- 2) FPLM should provide a consultant to provide additional training to the MCH-FP Database Manager, to improve the existing system and expand the capabilities of the current data management system of the MCH-FP, to provide technical assistance to WLI in improving its LMIS, and to assess the needs of other recipients of MOH commodities in developing management information systems compatible with that of the MCH-FP. (Section III d)
- 3) The WHO Technical Advisor and the MCH-FP Logistics Officer should assume responsibility for the coordination of donated contraceptive supplies including scheduling of regular meetings of donors and recipients. USAID/Kampala should assist these officials in establishing mechanisms for effective monitoring and coordination. (Section III f)
- 4) FPLM should complete the Uganda Contraceptive Logistics System Procedures Manual and develop a training program in the use of these procedures in preparation for pilot testing in a selected district during the first quarter of 1994. (Section IV b)

## **III. Background and Scope of Work**

This was the seventh technical assistance visit and third CPT visit by FPLM since October, 1991. Initial CPT involvement on the part of FPLM evolved to include the identification and implementation of a range of strengthening activities for the contraceptive and condom logistics management systems. All of these activities are designed to transfer expertise to MCH-FP and NGO staff in the development and management of a contraceptive logistics management system. These activities support on-going work in logistics system redesign. Therefore, in addition to 1994 CPT preparation, we also undertook a variety of tasks related to the follow-up of this on-going work. During initial consultations with USAID/Kampala staff the following were identified as tasks within our scope of work during this trip:

- 1) Prepare, in conjunction with MCH-FP, the ACP, World Learning, Incorporated (WLI) and FPAU, an estimate of the contraceptive requirements for 1994, 1995 and 1996 in order to draft the 1994 CPT's.
- 2) Draft the 1994 financial requirements for these CPTs for review with USAID/Kampala; any adjustments would be made in consultation with Mission staff.
- 3) Prepare a draft order cable for USAID commodities, which would include types and quantities of contraceptives to be ordered, sources of funding, and dates of arrival of commodities in country.
- 4) Identify shortfalls in contraceptive supply (i.e., needs which no donor currently plans to meet).
- 5) Follow-up on activities in logistics system strengthening and update the Mission on their status.

See Attachment One for a list of persons contacted during this visit.

#### **IV. Activities, Findings & Recommendations: Non-CPT**

##### **A. Staffing Issues at the MCH-FP**

During the previous FPLM visit (See trip report dated June 20- July 10, 1993), a logistics system design workshop was held. During the course of this workshop and subsequent discussions, several tasks were identified for the MCH-FP Logistics Officer to undertake in the months following the workshop, with end dates suggested for each task. (Attachment Five) These tasks related, primarily, to the coordination of supplies from donors, and the organization of information related to supplies in MCH-FP. For example, we suggested that the Logistics Officer participate in the UEDMP drug surveillance activities in order to enhance his skills in reconciliation of receipts with issues.

Since the time of the previous FPLM visit, the Logistics Officer has been designated as the Acting ADMS for MCH-FP. Because of these additional duties, and the fact that the Logistics Officer was scheduled for a trip out of the country during the second week of our visit, a detailed review of progress made on these tasks was not possible. However, the Logistics Officer did indicate to us that he was unable to obtain any information from current and potential donors about supplies, and that the other tasks were not accomplished due to his conflicting duties as the acting ADMS. Several of these tasks involved liaison with the Health and Population Assistant (HPA) at USAID/Kampala. Unfortunately, we were also unable to meet with her, as she was on leave throughout our visit.

##### ***Recommendation #1***

The USAID/Kampala HPA should follow-up with the Logistics Officer/Acting ADMS regarding the status of the tasks specified in July and communicate her findings to FPLM. In order that FPLM can appropriately determine subsequent steps in contraceptive logistics strengthening activities, the HPA and the Logistics Officer should

communicate on a regular basis (e.g., monthly) to assess progress on completion of these tasks and to determine follow-up activities. Progress in strengthening of the MOH/MCH-FP management of contraceptive commodities should also be monitored, with these updating and monitoring tasks to be eventually undertaken by the DISH logistics advisor.

In addition to FPLM technical assistance, the USAID HPN Officer should discuss with staff at the appropriate level in the MOH the needs for local contraceptive commodities logistics management assistance in the period between now and the period of full implementation of DISH. This short term assistance could be provided during this period through the placement of a locally hired consultant, by a Peace Corps or UN volunteer, or by a graduate student intern. This person could provide support and follow-up activities to technical assistance provided by FPLM staff, ensuring that essential tasks are completed prior to implementation of DISH. This individual should work in close collaboration with the HPA, USAID/Kampala. Examples of these tasks include those identified and developed with the logistics officer during the July 1993 FPLM visit. (Attachment Five)

In addition to the primary function of providing assistance to the MCH-FP Logistics Advisor, the individual would report directly to the HPN at USAID as well as provide progress reports to FPLM and subsequently DISH staff.

## **B. Uganda Contraceptive Logistics System Procedures Manual**

Subsequent to the FPLM visit in June/July 1993, a draft of the Uganda Contraceptive Logistics System Procedures Manual was prepared by FPLM staff. A copy of this draft was presented to the MCH-FP Logistics Advisor for review, but no comments were received during our stay. Therefore, the next step will be for FPLM advisors to continue working on this draft and re-submit it to the MCH-FP Logistics Advisor and the CMS/NMS staff for review during the first quarter of 1994. We hope to develop the manual sufficiently so that a pilot test of the procedures can be started in a CARE district, probably Kabale, prior to the implementation of DISH. We anticipate that this test would begin in the first quarter of 1994, with procedures and training to be modified based on the results and experiences of this pilot test. Training in these procedures would be conducted in close collaboration with CARE personnel.

### ***Recommendation #2***

- 1) The MCH-FP Logistics Advisor should provide feedback to FPLM on the procedures manual prior to preparation and distribution of the second draft and should continue to advise FPLM during the process of revision of the manual in preparation for its use in pilot testing. The HPA Officer, USAID/Kampala, should provide necessary assistance to the Logistics Advisor in communicating to FPLM regarding comments on the manual.
- 2) Districts that are receiving intensive technical assistance in the strengthening of reproductive health service delivery should receive training in the procedures detailed in the contraceptive logistics system procedures manual as soon as possible following implementation of DISH in 1994. These procedures should be pilot tested in a selected district during the first quarter of 1994. Other agencies

receiving supplies from the MCH-FP should also use the system detailed in this document.

### **C. Two-Way Memos and MCH-FP Supplies Monitoring**

A review of the NEWVERN shipping history indicates that several shipments received by the MCH-FP did not have two-way memos returned to the NEWVERN Database Manager. Copies of these memos are sent both the MCH-FP Logistics Officer and to the USAID/Kampala HPA. Without the return of these memos, it is impossible to maintain current information on the status of USAID shipments.

#### ***Recommendation #3***

The HPA should work with the MCH-FP Logistics Officer to ensure adherence to established procedures for acknowledgement of receipt of contraceptive shipments. This would include timely return of two-way memos, or by cable transmissions acknowledging receipt.

The supply status of USAID supplied contraceptives at CMS/NMS is not reported on a regular basis to USAID/Kampala by MCH-FP despite agreement on this subject during the July FPLM visit, whereby reports were to be given quarterly to the USAID/Kampala HPA. Routine reporting would assist in the monitoring of shipping schedules, which could be altered when indicated so as to avoid over- and/or under-supply.

#### ***Recommendation #4***

The HPA should work with the Logistics Officer to ensure that reports of supply status are received on at least a quarterly basis.

### **D. Tracking of Issues from Central Medical Stores**

Procedures have not been implemented for collecting issues and/or consumption data from the district level and service delivery points. However, within the last eighteen months, CMS/NMS has included contraceptive receipts in their central registry system. This is the first step in making reconciliation of receipts and issues, throughout the system, possible.

In addition, physical inventories of contraceptives are now taken quarterly. The last two quarterly inventories have shown that there is virtually 100% agreement between the amounts recorded on the stock cards and the stock-on-hand.

Since late 1991, the MCH/FP has had the capability, currently supported by a consultant database manager, to track and report CMS issues by computer. Issues are tracked from the CMS/NMS to the districts, to NGOs, and to government agencies through collection and aggregation of stock card issues and receipts maintained at CMS/NMS. Issues are recorded on the database according to the source (district or agency), and receipts by the source of supply. Although currently funded by UNFPA, the status of the position of MCH/FP database manager is uncertain as continued funding is not guaranteed. The database manager is quite enthusiastic

about improvements to the system but does require additional dBASE training, as specified in recommendations contained in the July 1992 FPLM trip report.

Despite recent improvements in this area, there are still problems in the collection, storage, and use of issues data; most notable among these are the following:

- Recipient agencies are not required to report quantities of commodities distributed throughout their projects. This is especially crucial in the case of governmental recipients (the districts and governmental agencies), as they receive the bulk of MCH-FP issued contraceptives. Most recipient NGOs collect this information for their own project management purposes, but this data is not requested by the MCH-FP logistics officer and is not reported to him.
- Despite improvements in data collection and management, the MCH-FP does not use this data in a rational, consistent way for planning purposes. For example, although there are regular issues to both the FPAU and Busoge Diocese -- who have their own sources of supply -- and there are no equivalent transfers from these agencies, there has apparently been no effort by MCH-FP to discuss with these agencies their need to increase their order quantities based on their patterns of consumption. Another example is that issues are allocated with limited feedback from the district or service delivery point levels of the system, making it difficult to either ascertain the need for these issues or to determine if there is stockpiling at the recipient level. Despite the lack of information from the lower levels of the system, limited, if any, supervisory visits are made to district stores or service delivery points. Finally, even if the MCH/FP were to endeavor to rationally use data for planning purpose, these efforts would be compromised as there is no centralized listing and updating of family planning service delivery points, including staffing, equipment, services offered, etc.
- No losses or other adjustments are aggregated by the consultant database manager.
- Procedures have not been established for verification of data entry and for reconciliation of entered data from stock card entries made in error.
- The format for presentation of transaction data by districts and agencies as well as aggregated totals should be standardized (e.g., through inclusion of losses, subtotalling by district and by agency and totaling by all recipients, inputting of data from other recipients so that district totals can be summed).
- There is a lack of consistency in the recording of the names of particular agencies in this aggregation process. For example, the Uganda Private Midwives Association was variably listed as "UPMA," "Uganda Private Mid.," "Director of Midwives Association," "UPMA Project," "Midwives," and others. This lack of standardization in recording makes the resulting aggregation unwieldy in length and can also lead to confusion when agencies are unidentifiable as the same or different. The MCH-FP logistics officer acknowledged that this problem derives from the lack of a standardized list of recipients on file at the MCH-FP; when orders/issues are approved, that office does not provide guidance to the storekeeper as to what organization to record as the recipient.

As WLI is the largest NGO recipient of MOH supplies (condoms only), we met with WLI staff regarding their condom needs forecast as well as to review their management information system. Since the MCH-FP contraceptive logistics system design workshop in June/July, the WLI condom manager has made impressive progress in development of a manual contraceptive logistics management system. He has designed his own issues and receipts vouchers, and collects feedback from the WLI subgrantees on their dispensed-to-user quantities. However, this data is not reported to MCH-FP, as this information has not been requested from WLI by that office.

WLI is very interested in transferring this manual system to an automated database so that it is more responsive to their needs. This is particularly important as increasing quantities and types of commodities may be managed by WLI and their subgrantees. At the very least, in the absence of automation, WLI would like to make their system compatible with that of the MCH-FP. The MCH-FP should play a key role in assisting WLI and other recipients in developing management information systems that are compatible with that of the MOH.

**The urgency of remedying these problems is increased by the recently stated USAID/Kampala policy that the Mission will no longer continue to supply contraceptives to agencies that do not have a mechanism for accounting for them. Therefore, all recipients of USAID-supplied contraceptives will be required to demonstrate to USAID that they are making satisfactory progress in implementing the procedures that were described during the MCH-FP Contraceptive Logistics Management System Design Workshop. In order to allow time for adjustment to these new procedures USAID stated that these restrictions would apply to those orders that were made as a result of this CPT visit.**

#### ***Recommendation #5***

- 1) Funding, currently from UNFPA, should be continued for the position of the consultant database manager at MCH-FP.
- 2) Should USAID/Kampala, USAID/W, the MCH-FP and WLI agree, FPLM should provide a consultant to assist the database consultant and other interested parties (e.g., the WLI Condom Coordinator and/or other NGO staff) in making further improvements in the management information systems of the MCH-FP and its recipients, including the following:
  - a) inclusion of other transactions besides issues and receipts (e.g., losses and adjustments).
  - b) assistance in the development of a standardized list of names for recipient agencies for use by the MCH-FP logistics officer, the CMS/NMS contraceptive storekeeper, and the database manager at MCH-FP. The standardized names should also give consideration to the authorization of receipt of contraceptive commodities from the MCH-FP. (For example, WLI subgrantees should receive directly from WLI, and Busoge Diocese and the YWCA should normally receive supplies from their own sources.) **The standardization of this list of recipient agencies should be started immediately by the MCH-FP logistics officer. This list should also be reviewed by the HPN Officer, USAID/Kampala as he will be able to identify those agencies that receive contraceptive commodities from other USAID/W funded sources.**

- c) Assist in expanding the capabilities of the current CMS receipts and issues database to: 1) include receipts and issues of family planning commodities and supplies at all levels of the system; 2) standardize the minimum reporting requirements; and 3) enable the system to exist manually or on a computer.
  - d) Define development needs for other organizations, if any, in management information systems for condoms or other commodities. If time does not permit in this short-term consultancy, a work plan for accomplishing these tasks should be developed. It is anticipated that all such future work will take place in collaboration with DISH.
- 3) The FPLM consultant should also assess the LMIS of World Learning to determine needs for system improvements, training, and automation, all of which should be compatible with those of the MCH-FP. If the system is computerized, WLI has agreed to arrange for and fund dBASE training for the Condom Coordinator/Storekeeper of WLI as he currently does not have the expertise necessary to manage an automated data management system. The FPLM consultant could also assist WLI in identifying local resources for automation and training.

#### **E. Supply of Other Agencies by the MCH-FP**

In addition to GOU facilities which receive contraceptives from the MOH, there are several NGOs that regularly request and receive commodities from the CMS/NMS although some of these agencies have their own dedicated source of supply. For example, regular recipients of MCH-FP commodities include Busoge Diocese, FPAU, and the YWCA, all of which have sources of supply that are intended to be adequate to meet their programmatic needs. Pathfinder prepares CPTs annually for Busoge Diocese so that Pathfinder can provide adequate supplies, IPPF/L performs the same function for FPAU, and CEDPA for the YWCA. Although borrowing between contraceptive suppliers is a frequent, and cooperative, occurrence in Uganda, MCH issues data indicate that these "loans" are not routinely returned by these agencies. As one example, the FPAU 1994 annual budget, in draft during this visit, indicates that the anticipated source of supply for several commodities is the MOH. This has not been coordinated with MCH-FP, USAID, or UNFPA in advance of the budget drafting, nor do USAID or UNFPA, the major suppliers of the MCH-FP, wish to be a primary supplier of the FPAU.

At the request of the HPN Officer, we communicated by fax to both CEDPA and Pathfinder in Nairobi about the reliance by Pathfinder and CEDPA supported projects on MOH supplies, including an enumeration of the quantities of supplies involved. In addition, we suggested that the level of commodities forecasted for the annual activities of these and other agencies be increased by a reasonable amount to avoid any future shortfalls and further drain on the MCH-FP supplies. No response to these concerns was received from these agencies by the end of our visit. Although, for forecasting purposes during this trip, we made determinations of those agencies which should receive transferred products, such determinations should ordinarily be made by MCH-FP and the relevant agencies.<sup>1</sup>

---

<sup>1</sup>In the preparation of the CPTs, we determined which agencies were intended to receive USAID-funded supplies from MCH-FP and which should seek their supplies elsewhere. The breakdown of these is as follows: WLI gets condoms from MCH-FP, but their sub-grantees should not approach the MOH with an individual request; any SEATS,

### ***Recommendation #6***

- 1) The USAID/Kampala HPN officer should engage in discussions with agencies who supply contraceptives and those who promote family planning and STD prevention in order that they may jointly develop a set of guidelines regarding the ordering and allocation of contraceptives. In addition to coordination of these determinations between the Mission, MOH, and other supply agencies, we have suggested to the MCH-FP Logistics Advisor that guidelines be developed for CMS/NMS staff regarding agencies that may properly be issued supplies (See Section IIIe). The HPN has indicated that he will communicate this need for accountability and coordination to the Permanent Secretary of Health (PS) and other cooperating agencies.
- 2) The Mission, in conjunction with CAs providing contraceptive supplies in Uganda, should develop mechanisms to insure the sharing of complete and timely information regarding supply status. The Mission should also offer technical assistance to CAs in preparation of their CPTs, with FPLM assistance also available in this area.

### **F. Contraceptive/Condom Supply Coordination**

The lack of coordination of supply is a weakness which was noted in this visit as well as during previous FPLM consultancies and by other parties providing technical assistance in Uganda. These observations indicate a clear need for one agency to take the lead in coordinating donor sharing of information, planning, and forecasting for contraceptive supplies of all kinds.

### ***Recommendation #7***

The WHO Technical Advisor, in conjunction with the MCH-FP ADMS, should assume responsibility for the coordination of donated contraceptive supplies. The WHO Technical Advisor should assist the Office of the ADMS in establishing mechanisms so that office can eventually assume this responsibility on a permanent basis. Support in this area should also be available through the logistics component of USAID's DISH project.

We recommend scheduling of quarterly meetings, chaired by the WHO Technical Officer and the ADMS, of donors and implementing agencies working in reproductive health. These meetings should be devoted solely to issues related to contraceptive supplies, including:

- updating the MCH-FP Logistics Officer on any changes in contraceptive supply that donors anticipate, either in terms of commodities coming into the program or demand to be placed on the program(s).

---

UN agency, the ACP, and other NGOs without a source of supply should receive family planning supplies, whereas those with a supply (for example, those noted in text) should rely on their funders.

- apprising the MCH-FP of anticipated future shifts in policy that would impact the supply situation.
- reporting by the ADMS on all coordinated activities, which for any new project proposals should include:
  - an identified group to be served by the proposed reproductive health activity.
  - estimated number of service recipients.
  - an enumeration of the supply needs for service delivery.
  - an identified source of the required supplies for service delivery including the amount and source of funding (*not* merely the MCH-FP), and dates required for arrival in-country to initiate service delivery.
  - resupply and sustainability.
  - assurance on the part of the implementing agency that they will track and issue commodities according to the methods developed in the MCH-FP Contraceptive Commodities Logistics System Procedures Manual (See FPLM Trip Report, July, 1993)

#### **G. World Bank Activities**

The World Bank is in the process of initiating two new projects to follow the Uganda First Health Project: 1) An STD/AIDS prevention project, to be implemented through the MOH/ACP, with project appraisal during November, 1993, and 2) a district health services project, with the project document scheduled for writing in March 1994. These two project replace what was originally anticipated to be one large health project, earlier known as "CHAPS."

Through discussions with non-Bank personnel, we understand that a large quantity of contraceptives will be procured under the first of the STD/AIDS prevention project. The only definitive information that we received from the Coordinator of the Uganda First Health Project is that the ACP Manager has made a request from this project for an emergency consignment of 10,000,000 condoms, with more funds requested for two subsequent shipments of 10 million pieces each. (See Section Vc below.)

We were told that, per IDA regulations, the local procurement cell of the Project would be the body undertaking this condom procurement. They will receive advice from the Procurement Officer of CMS/NMS.

#### ***Recommendation #8***

As these condoms will likely be a locally managed procurement through international competitive tender, both USAID/Kampala and FPLM may be called upon to offer technical assistance in procurement and in development of procedures for appropriate compliance testing and subsequent quality monitoring of these commodities.

## **H. Warehouse Visits**

### **1) Central Medical Stores/New Medical Stores**

We visited the Central Medical Stores (CMS) warehouse where greatly improved management procedures were noted. The warehouse manager now maintains complete and current stock cards for all types of products and brands of commodities. Although contraceptive supplies are stored in the same warehouse as other medical supplies, all supplies are stored in separate, well labelled locations. Supplies are clearly marked for identification and expiry date, and are now stored according to proper FEFO procedures. The storekeeper maintains an expiry file, and when contraceptives reach six months before expiration, they are pulled and distributed to those centers that can use them the most quickly. Although the storage capacity is inadequate for the volume of supplies in the warehouse, they are stored in separate locations according to good storekeeping practices, including stacking, ventilation, temperature, and on pallets. The only major problem noted in the warehouse was the somewhat limited access to supplies due to space constraints.

A problem noted in previous FPLM visits was the intermixing of two separate doses of Depo-Provera®. During this visit, only the 150mg dose per vial dose of Depo-Provera® was on hand. We believe, however, that the problem of intermixing should no longer exist if both doses are again stocked because of the improved procedures noted above.

Further improvement in supply warehousing should be realized when the Danish Red Cross completes the transformation of CMS to NMS, which includes the dismantling of the current facility and construction of larger facilities at the same site, with an estimated completion date of 1998.

### **2) World Learning**

WLI has recently acquired a warehouse for storage of its supplies. The facility was found to be in excellent condition, and no inadequacies were noted during our visit. In addition to being dry and well-ventilated, it is located in a secure compound where WLI stores expensive agricultural equipment with no problems. There are both a thermometer and a barometer in place; regular monitoring shows that the temperature and humidity have not been excessive.

### **3) Others**

We were unable to see either the ACP or NRA warehouses as it was impossible to obtain appointments to see staff of these groups. It is our understanding that the ACP warehouse is still the same inadequate facility that has been in existence for some years.

## **V. Highlights of CPTs**

### **A. Background**

The 1994 CPTs were prepared using issues data from the central level only and were supported by interviews with program managers and donor representatives. Because there is no reporting

of stock levels or issues data from the lower levels of the system, and MCH-FP staff have not made supervision visits to either district or service delivery points, there is no mechanism to verify issues and receipts at or to these levels.

There are now two years of central level issues data on hand at the MCH-FP from which to make crude estimations of contraceptive requirements. The following must be remembered when considering the current CPTs:

- issues from the central level comprise the majority of information used to determine trends and future requirements; these issues data, though much improved, are not always accurate, as indicated when cross-checking data from the MOH with receipts and issues from other agencies. For example, MCH-FP records of transactions between MCH-FP and FPAU were not always consistent with those of FPAU. Details of other similar findings for transactions for the MOH and other agencies can be found in the footnotes for the 1994 CPTs. **Issues data alone do not give an accurate picture of activity in the system nor do they represent or necessarily approximate consumption. The need to verify these data, at least in part, is critical to improving the quality of forecasts.**
- since receiving logistics training in January 1993, the Logistics Officer for MCH-FP has instituted an allocation system for all contraceptive methods. However, orders are not calculated by the issuing level on the basis of information that comes up through the system. The basis on which allocations are made has not been articulated to us and is not evident from the data. Initially allocations were planned on a quarterly basis, although some issues are currently made on an irregular basis, such as when new supplies are about to come in, or when a large quantity of goods is about to expire.<sup>2</sup>
- in addition to allocated issues, some issues are made in response to orders from the district level, although it is impossible to determine from the data which orders are calculated centrally and which are calculated based on district level requests. The identification and tracking of these district level orders would be useful in determining trends for at least some districts in Uganda, thus improving the quality of forecasts.

During CPT preparation, several issues regarding particular methods, and in some cases particular programs, came to our attention. We present below general conclusions reached while preparing the 1994 CPTs as well as specific observations by method.

## **B. General CPT Findings**

Though there are many contraceptive donors in Uganda, the supply process for all programs -- governmental as well as those of NGOs -- is uncoordinated, leading to confusion and periods of shortfall and oversupply for all methods. Given likely increased demand through multiple new program initiatives by many donors, resources for commodities are shrinking on the part of all

---

<sup>2</sup> This problem should be somewhat reduced, however, with the introduction of the FEFO system. It will remain, however, until regular orders come up through the system so that the true level of demand can be established.

suppliers, making it even more essential that the donor community coordinate its supply activities.

There is a general lack of understanding of the procurement process and the function and purpose of the USAID-supported CPT preparation exercise. The CPTs serve not only USAID and the activities that they support but can guide other donors as well in the determination of supply levels which they should consider in order to fully support any one program or activity. They can be used to assist in the coordination process.

USAID continues to remain the largest donor, though there are indications that ODA will supply some commodities in conjunction with its CARE implemented projects. The World Bank will reallocate funds to supply condoms in the short run and will supply all types of contraceptives in a family planning project that will begin in late 1994. The African Medical and Education Research Foundation (AMREF) indicated that they have a small amount of money for the purchase of some commodities that are to be used at eight service delivery sites. They are, however, willing to discuss which kinds of contraceptives they should buy and in what quantities in order to complement those already available at MCH-FP. GTZ continues to fund the Engabu social marketing campaign that will bring in about 24 million condoms in the next five years. UNFPA is always willing to make a contribution to supplying the contraceptive needs of the MCH-FP and exhibits interest in doing this in collaboration with other donors. However, there is no one person in Uganda who coordinates these groups and their supply activities and maintains current information about receipts, consumption, and donor plans.

#### ***Recommendation #9***

- 1) The USAID HPN Officer should contact the WHO Technical Advisor to the MCH-FP to discuss this need for on-going coordination. (Please refer to Recommendation #7 for further details on this proposal.)
- 2) In the immediate term, USAID/Kampala should contact Malcolm MacDonald of ODA/Nairobi to determine what contraceptives will be brought in under their project which is currently in the planning phase.
- 3) FPLM should follow-up with the World Bank Health Project Team Leader in Washington to both review the current CPTs and determine what commodities will be supplied through this project.

### **C. Method-Specific CPT Findings**

#### ***Depo-Provera®***

Depo-Provera®, which appears to be an increasingly popular method of family planning in Uganda<sup>3</sup>, is currently in extremely short supply in all agencies in Uganda.

---

<sup>3</sup> This comes from interviews and discussion with family planning program managers, and their assessment of demand for Depo-Provera®. No quantified data are available.

- FPAU staff advised us that they intend to make requests for their supplies through the MOH, as IPPF/L is not currently planning on supplying the FPAU with Depo-Provera® this year. The FPAU intends to request 74,000 doses from the MCH-FP. However, FPAU has not made this request formally to the MOH.
- The MOH/MCH-FP has, historically, been supplied by the UNFPA. The UNFPA annual budget of USD 30,000 will supply only about 45,000 doses to MCH-FP in 1994. However, the MCH-FP had originally requested that this funding be spent on the procurement of Norplant® for MCH-FP activities. As USAID/Kampala can procure Norplant®, we recommended that they continue to do so, and that the MCH-FP request that UNFPA reallocate this funding for the procurement of Depo-Provera®. We are still waiting to see that this request was made. If UNFPA does supply these 45,000 doses, we estimate that this supply will last approximately one quarter. In the CPTs, it was assumed that these 45,000 doses would be supplied by UNFPA, and that Norplant® would not be supplied by UNFPA.
- USAID/W has not been able to negotiate a contract for the purchase of U.S. manufactured Depo-Provera®, thus making the supply to the MCH-FP with USAID/Kampala funds unlikely in the early part of 1994. Therefore, a source for this commodity was not identified in the CPTs, and the need for this supply is not calculated into the 1994 and 1995 financial requirements.
- The ODA and the World Bank appear to be potential sources for Depo-Provera® supply.

For the foreseeable future, it appears likely that demand for Depo-Provera® will exceed identified supplies.

#### ***Recommendation #10***

- 1) The MOH/MCH-FP Logistics Officer should contact the FPAU to determine if they intend to request Depo-Provera® from the MCH-FP, and he should explain to them that it is unlikely that these needs can be met by the MCH-FP at this time without having an impact on their own activities.
- 2) The USAID/Kampala HPN Officer should contact the ODA Representative in Nairobi, Mr. Malcolm MacDonald, to determine the financial obligation that the ODA is willing to make for contraceptive donations. Based on this estimate, USAID should discuss with ODA their willingness to supply Depo-Provera® through the Belgian manufacturer in the following quantities according to the following shipment schedule:

286,900 doses to arrive in country in January of 1994

53,200 doses to arrive in country in October, 1994

72,900 doses to arrive in country in January, 1995

## *Condoms*

Condom activities should be coordinated through the Condom Coordinating Committee that was established for this purpose. However, this committee seems to have lapsed into inactivity, and we consulted with programs individually.

### **1) Condoms for Social Marketing**

There are two condom social marketing programs in Uganda. One, the Engabu campaign, is currently not active in Kampala, and receives funding other than from USAID. This program was not consulted during this visit. The other, the Protector campaign, receives technical assistance from SOMARC, and representatives were available to discuss the supplies that they anticipate receiving from USAID.

For their activities, Protector utilizes the USAID-supplied 52mm no color, Blue/Gold logo condom. Projections for these activities were prepared by SOMARC and Armtrades, the local implementing agency, and given to us during this consultancy so that we could include them in the CPTs. During the course of our visit, the SOMARC Representative found that there was a need for additional supplies above what was already in the pipeline. She found that there was an excess of about 2.2 million pieces in Rwanda, and thought that these would be shipped to Uganda. However, since our return, it is not certain that these supplies will be designated for Uganda, as other countries had requests for supplies as well. Therefore, since our return, we have removed this transfer from Rwanda to Uganda, and the need for additional supplies appears in the calculated financial requirements, proposed shipping schedule, and draft order cable.

### **2) Condoms for the AIDS Control Programme (ACP)**

Despite numerous efforts, we were unable to obtain an appointment with ACP program management, and we were consequently unable to prepare a CPT for the ACP.<sup>4</sup> More importantly, we were unable to discuss with the ACP general issues related to condom supply. We did learn that the ACP has made a formal request for an emergency order for 10 million condoms from the World Bank First Health Project, and that additional funds may be reallocated for the funding of another 20 million. (See Section IIIg above, for further discussion of World Bank Activities). Per IDA regulations, these condoms must be procured by the Health Project itself. As the procurement process has not begun, it is unlikely that these condoms will be available for the program before late 1994.

### **3) Condoms Consigned to the MCH-FP**

Because of the previously mentioned problems in accounting for supplies, and because of the lack of data that is useful for forecasting (See Section IIIId above) we decided not to base the forecast for condom requirements on distribution data. The forecast for condoms assumes the following:

---

<sup>4</sup> This is not an important omission from the financial perspective of USAID, as USAID supplies condoms for STD prevention through WLI, but it does leave a significant gap in the knowledge about condom programs and activities throughout Uganda.

**60,000 condoms (41 districts) were forecast for distribution to each district, meaning that in 1994 and 1995 only 2,460,000 pieces should be set aside for the MCH-FP. The remaining condoms in the MCH-FP order are designated for WLI.**

Although neither the ADMS nor the Acting ADMS/Logistics Officer were available to discuss this forecasting assumption, it was discussed with the USAID/Kampala HPN Officer. We agreed that this quantity should be sufficient since supplies through social marketing programs are increasing and because WLI supplies free condoms through their outlets.

#### **4) Condoms for World Learning**

WLI continues to receive large quantities of condoms for their AIDS prevention activities. They are consigned to the MCH-FP, which handles the clearing of these commodities. They are then collected by WLI staff and are now stored in the new WLI warehouse for distribution to their subgrantees. Until now, WLI has received half of all condoms that MCH-FP receives, based on an earlier agreement made with both the MCH-FP and WLI. However, this 50% proportion will change, not because WLI will receive any fewer condoms, but because the quantity of condoms to be consigned by USAID to the MCH-FP for distribution to the districts will be reduced slightly (See above paragraph). Therefore, WLI should receive quantities that are consigned to the MCH-FP according to the schedule that is found as Attachment Six.

#### ***Recommendation #11***

- 1) The USAID HPN Officer should explain this allocation to the acting ADMS. The ADMS should also be advised that, when the new contraceptive logistics system for MCH-FP is finalized, adopted, and implementation is begun, then allocation may be increased to reflect actual consumption.<sup>5</sup>
- 2) WLI should continue to explore the possibility of obtaining condoms from another source of supply, as the HPN officer has indicated that USAID does not wish to continue to be the primary source of condom supply. Prior to any major change in levels of USAID condom procurement, the Mission and WLI should initiate discussions with other potential suppliers to ensure that the activities which they support have sufficient and continuous sources of supplies. One potential source would be through the new World Bank STD/AIDS prevention project.

#### ***LoFemenal***

To date in 1993, 1,200,000 cycles of this oral contraceptive product have been issued by MCH-FP to lower levels in the system. This large allocation was due partly to the fact that several hundred thousand cycles of LoFemenal are due to expire in November; MCH-FP wished to push them down to outlets where they might possibly be used. Though there were many problems with this particular shipment of LoFemenal which were not in the control of MCH-FP or

---

<sup>5</sup>The implementation of this system is a long process. However, as groups adopt these procedures and data collection and reporting improves, order quantities may be adjusted by USAID to reflect a better estimate of need/demand.

CMS/NMS (See FPLM trip report dated October, 1992), solutions were proposed much earlier so that this massive push of about-to-expire commodities could be avoided. Already, one DMO has refused to accept their allocated consignment, and others are likely to return these up the system for destruction. Because of these factors, in preparing the 1994 CPTs, we used lower estimated consumption than would be indicated by distribution in 1993.

#### *Vaginal Foaming Tablets (VFTs)*

The MCH-FP is essentially stocked out of VFTs. There is no actual consumption data, but during 1992, 421,700 tablets were distributed by this program. During the first three quarters in 1993, MCH-FP distributed only 40,000 VFTs because of the shortage of supplies. During both years, additional stocks were transferred to other programs, primarily those with their own sources of supply. (See Section IIIe above) Although distribution in 1993 has been made on an as-requested basis, we were unable to determine if orders were filled completely, or if conservation was taking place in response to the declining stock levels.

The cost of supplying VFTs for 1994 and 1995 in the quantities which we believe would be sufficient would account for about 25% of the total USAID contraceptive budget of approximately U.S. \$ ## for FY 1994 and 1995.<sup>6</sup> However, the HPN Officer indicated to us that the Mission would prefer not to purchase VFTs in such large quantities because they are a relatively inefficient method -- the Mission hopes to see Uganda move towards methods that are longer-term. Though we support the notion that longer-term methods are desirable in all programs, we believe that VFTs have a place in the method mix for Uganda. We have already noted the lack of Depo-Provera<sup>®</sup>, and Norplant<sup>®</sup> is both expensive and limited in its distribution. Though VFTs may not be suitable for certain populations of women, it may be the only method available to women whose partners refuse to use condoms, or who cannot avail themselves of another method.

#### ***Recommendation #12***

Before making a definitive decision not to supply VFTs, the HPN Officer should consult with other donors who may be interested in supplementing the array of contraceptives available from the MCH-FP. In this manner, as USAID scales down its supply of VFTs, a determination can be made of how this gap will be filled. (See Section IIIf for further discussion of coordination issues)

#### *Microval*

UNFPA purchases these oral contraceptives for use in the MCH-FP program. The most recent supply of these -- 149,800 -- arrived in early 1993. There are no funds available in the 1993 UNFPA budget for an additional Microval purchase, although, given the low levels of use, stock-on-hand at the central level should last through the first quarter of 1995.

FPAU receives transfers of Microval from MCH-FP. FPAU records indicated that they had received supplies of Microval from both the MCH-FP and the IPPF, making it appear to us that these "receipts" were double-counted. We were not able to verify, using MCH-FP records, that

---

<sup>6</sup>This total excludes costs for Depo-Provera<sup>®</sup> and assumes that SEATS will procure NORPLANT<sup>®</sup>.

these supplies actually were transferred, nor double-counted. Therefore, these transfers were left out of the CPTs for 1993.

## **VI. Follow-Up and Next Steps**

In addition to follow-up tasks in preparation and submission of the 1994 CPTs, other tasks, both short- and long-term, were identified by FPLM as part of our efforts to strengthen the contraceptive logistics management system in Uganda. Since the DISH project is designed to strengthen the capacity of agencies in Uganda in the delivery of integrated reproductive health care, future FPLM activities should be closely coordinated with the implementation of DISH, which the Mission anticipates should occur by July 1994. As numerous problems and inadequacies currently exist in the logistics system of MOH/MCH-FP, discussions were held with the Mission to explore mechanisms to best undertake these strengthening activities.

The following are suggested follow-up and next steps for FPLM staff:

- 1) Complete the 1994 CPTs and finalize the 1994 financial requirements and draft order cable.
- 2) Complete the first draft of the MCH-FP Contraceptive Logistics System Management Procedures Manual, and forward copies for comment to USAID/Kampala, MCH-FP, and CARE. This draft should be revised as necessary based on this feedback in order to finalize a second draft which can be used for initial pilot testing in the CARE-assisted districts. FPLM assistance will be provided in the development, initiation, and evaluation of pilot tests.
- 3) Develop indicators and mechanisms for evaluation of implementation in these districts in preparation for expansion to other districts.
- 4) Determine, in discussion with USAID, the range of future logistics technical assistance activities, including the following:
  - i) The provision of assistance in the coordination of contraceptive supply issues. During this visit, the HPN Officer, USAID/Kampala, indicated that he would take the initiative in drafting a letter to concerned parties regarding the need for increased coordination, and proposing formation of a donor coordination committee from which information could be gathered regarding commitments of contraceptive supply. Although eventually the MCH-FP Logistics Officer should chair this committee, in the short term, the HPA Officer, USAID/Kampala, and FPLM staff -- during technical assistance visits and in coordination with DISH staff -- can provide liaison assistance.
  - ii) Use of a management information systems consultant (first quarter of 1994) to provide assistance to MCH-FP in further development of its MIS, and to WLI and other agencies in developing systems compatible with that of the MCH-FP (see Section IIIId). FPLM is able to provide the

assistance for this consultancy, given CPSD concurrence. This technical assistance would best be provided in conjunction with other FPLM work so that work can be coordinated.

- iii) Provide training in the procedures specified in the Uganda Contraceptive Logistics System Procedures Manual to staff in district(s) chosen for pilot testing. As pilot testing will likely occur in a CARE-assisted district, FPLM's efforts should be in collaboration with CARE and utilize their available staff resources.
- iv) Undertake site visits to DISH districts to assess the current supply status, review records to determine appropriate supply levels, and prepare staff for the introduction of the new contraceptive logistics management system. As this will take place in districts where CARE is working, this will be done in close cooperation with CARE staff.
- iv) Working with DISH project staff, undertake a training needs assessment for district, SDP and NGO recipients of MOH contraceptives to guide curriculum development and to develop a long-term training and impact evaluation plan. (The time frame for this activity cannot be determined until the DISH project is implemented.)

**Attachment One  
Persons Contacted**

## **Persons Contacted**

### **Ministry of Health**

Dr. Fred Katumba, Assistant Director for Medical Services, MCH-FP (Acting)  
Mr. Fabian Sebakera, Senior Supplies Officer for Clearing and Receipts  
Mr. Michael Okalebo, MCH-FP Supplies Officer/Stores Assistant  
Ms. Solveig Gulbrandsen, Stores Management Advisor, UEDMP  
Ms. Rachel Roshota, Training Coordinator, MCH-FP  
Mr. Emmanuel Kayaga, MCH-FP Database Consultant  
Dr. Jon Aishem, Project Coordinator, UEDMP  
Dr. Johan van Haperen, Pharmaceutical Advisor, UEDMP  
Mr. Bjarne Sjostrom, Administrative Officer

### **USAID/Kampala**

Mr. Jay Anderson, HPN Officer  
Dr. Elizabeth Marum, AIDS Advisor (CDC)  
Mr. David Puckett, TAACS Advisor (CDC)  
Ms. Holly Wise, General Development Officer

### **UNFPA**

Ms. Neela Jayaratnam, Population Advisor

### **The Futures Group**

Ms. Gretchen Bachman, Advisor, Washington  
Mr. Lalit Jayaratnam, SOMARC Coordinator, Kampala

### **The World Bank**

Dr. Luongo, Coordinator, First Health Project  
Mr. Falconer, Country Representative

### **World Learning, Inc.**

Ms. Patricia Neu, Project Administrator, Washington  
Dr. Sam Ibanda, APCP Project Manager, Uganda  
Dr. Willie Salmond, Country Director, Kampala  
Dr. Anne Salmond, Orphans Project Coordinator, Kampala  
Mr. Joseph M. Mugisha, Condom Logistics/Store Keeper

### **CARE**

Mr. Stanley Dunn, Country Director  
Ms. Robina Shonubi, Management Assistant

**Family Planning Association of Uganda**

Mr. David Sserubi, Purchasing/Supplies Manager  
Mrs. B.J.A.S. Nima, Executive Director

**CDC**

Dr. Deborah MacFarland, Health Economist, Atlanta  
Dr. Melinda Moore, Technical Advisor, AIDS Information Center, Atlanta

**AMREF**

Dr. Dean Schuey, Country Director

**Attachment Two  
Draft Order Cable**

TO: SECSTATE  
INFO: CDC/Atlanta for Tim Johnson  
SUBJECT: Population: Order for Contraceptives  
FOR: R&D/POP/CPSD

USAID/Kampala requests CPSD to arrange the shipment of the following contraceptives:

1. Contraceptive shipping information

A. Ministry of Health - MCH/FP

Contraceptive	Quantity	Date to Arrive in Country
52mm Non Colored, No Logo	2,100,000	01/31/95
	5,958,000	08/31/95
Depo-Provera (every 3 mos)	354,300	07/31/94
	272,900	07/31/95
Lo-Femenal, Blue Lady	206,400	11/30/94
	50,400	11/30/95
Norplant	1,300	03/15/94
	1,300	08/31/95
Ovrette	196,800	09/30/94
	138,000	05/30/95
	136,800	12/31/95

Send all shipments to:

Ministry of Health - MCH/FP  
c/o Interfreight Panalpina  
PO Box 4555, Plot 284  
Nakawa Industrial Area, Kampala, Uganda  
Dr. F. Ebanyat, Asst Dir. for Med. Serv.

Shipping documents sent to USAID Health/Pop Asst should include a donation certificate. Health/Pop Asst should hand over 3 copies of each document listed above to MCH/FP, MOH, Entebbe. A Don Cert should be included with ship doc's handed over to the MOH. RECIPIENT NAME TO APPEAR ON ALL DOCUMENTS. Please courier documents in advance of shipment. \*\*Ship by AIR\*\* Ship door-to-port. The SGS requirements for imports does not affect present AID shipments from US.

Mark containers/boxes with:

Mark For - Air Shipments

Dr. Florence Ebanyat  
Ministry of Health - MCH/FP  
Assistant Director for Medical Services  
c/o Interfreight Panalpina  
PO Box 4555, Plot 284  
Nakawa Industrial Park, Kampala, Uganda

Mark For - Surface Shipments

Dr. Florence Ebanyat  
Ministry of Health - MCH/FP  
Assistant Director for Medical Services  
c/o Interfreight Panalpina  
PO Box 4555, Plot 284  
Nakawa Industrial Park, Kampala, Uganda

Send documents to:

	Ocean or Air Negotiable	Bill Copy	Pack List	Export Invoice
Same as Consignee	1	2	2	2
Annie E. Kaboggoza-Musoke Health/Pop Asst., USAID/Kampala 42 Nakasero Road, Kampala, Uganda PH:(256-41) 235879 FX:(256-41)233417		4	4	4

B. Arm Trades, LTD

Contraceptive	Quantity	Date to Arrive in Country
52mm Non-Colored Blue-Gold	1,596,000	02/28/95
Norquest, CSM	130,800	09/30/94
	220,800	01/31/95
	187,200	05/31/95

Send all shipments to:

USAID/Kampala c/o INTERFREIGHT PANALPINA  
P.O. Box 4555, Plot 284  
Nakawa Industrial Area  
Kampala, UGANDA

Ship Docs sent to USAID Attn: Health/Pop Asst should include a don cert. The Health/Pop Asst should hand over 3 copies of each document listed above to Interfreight Panalpina, Kampala and 1 copy of each document to Armtrades Attn: Roy Mayinja, Executive Director. A don cert should be included with shipping doc's handed over to Interfreight Panalpina. \*AIR SHIPMENTS ONLY\* Door-to-port shipments. SGS inspection not req'd for AID shipments from US.

Mark containers/boxes with:

Mark For - Air Shipments

USAID/Kampala  
 Arm Trades, c/o INTERFREIGHT PANALPINA  
 P.O. Box 4555, Plot 284  
 Nakawa Industrial Area  
 Kampala, UGANDA

Mark For - Surface Shipments

USAID/Kampala  
 Arm Trades, c/o INTERFREIGHT PANALPINA  
 P.O. Box 4555, Plot 284  
 Nakawa Industrial Area  
 Kampala, UGANDA

Send documents to:

	Ocean or Air Negotiable	Bill Copy	Pack List	Export Invoice
	1	2	2	2
Same as Consignee				
Annie E. Kaboggoza-Musoke Health Population Asst, USAID/Kampala 42 Nakasero Road, Kampala, Uganda PH: (265-41) 235879 FAX: (256-41)233417		5	5	5

2. Source of funding

Charge OYB Transfer from project number .

3. Summary quantities and estimated cost table

Product	Quantity	Cost	Freight	Total
52mm Non-Colored Blue-Gold	1,596,000	\$77,566	\$19,392	\$96,958
52mm Non Colored, No Logo	8,058,000	\$391,619	\$97,905	\$489,524
Copper T, 380	0	\$0	\$0	\$0
Depo-Provera (every 3 mos)	627,200	\$576,761	\$144,190	\$720,951
Lo-Femenal, Blue Lady	256,800	\$46,287	\$11,572	\$57,859
Norplant	2,600	\$61,615	\$5,404	\$77,019
Norquest, CSM	538,800	\$143,860	\$35,965	\$179,825
Ovrette	471,600	\$86,626	\$21,657	\$108,283
Conceptrol Foaming Tablet	0	\$0	\$0	\$0

**Attachment Three**  
**Draft Financial Requirements**

Uganda

Fiscal Year 1994 Operating Year Budget Needs

Product Code	Quantity Year 1	Quantity Year 2	Cost	Freight	Total
Family Planning Association of Uganda					
CNDM	0	0	\$0	\$0	\$0
CT38	0	0	\$0	\$0	\$0
DEPO	0	0	\$0	\$0	\$0
FEMP	0	0	\$0	\$0	\$0
MICR	0	0	\$0	\$0	\$0
MULT	0	0	\$0	\$0	\$0
NRST	0	0	\$0	\$0	\$0
OVRP	0	0	\$0	\$0	\$0
VFTP	0	0	\$0	\$0	\$0
			\$0	\$0	\$0 TOTAL
Ministry of Health - MCH/FP					
52NX	0	8,058,000	\$391,619	\$97,905	\$489,524
CT38	0	0	\$0	\$0	\$0
DEPO	354,300	272,900	\$576,761	\$144,190	\$720,951
LFMP	206,400	50,400	\$46,287	\$11,572	\$57,859
MICR	0	0	\$0	\$0	\$0
NPLT	1,300	1,300	\$61,615	\$15,404	\$77,019
OVRP	196,800	274,800	\$86,626	\$21,657	\$108,283
VFTP	0	0	\$0	\$0	\$0
			\$1,162,908	\$290,727	\$1,453,635 TOTAL
Arm Trades, LTD					
52NG	0	1,596,000	\$77,566	\$19,391	\$96,957
NRQS	130,800	408,000	\$143,860	\$35,965	\$179,825
			\$221,425	\$55,356	\$276,782 TOTAL

\*\*\*\*\*  
 \*  
 \* Total Commodity Costs : \$1,384,333 \*  
 \* Total Estimated Freight Cost ( 25%) : \$346,083 \*  
 \* Total OYB Financial Requirements : \$1,730,416 \*  
 \*  
 \*\*\*\*\*

NB For an explanation of the calculation methodology, contract periods and unit prices, please refer to the attachment listing

DRAFT      DRAFT      DRAFT      DRAFT      DRAFT      DRAFT      DRAFT

the parameters used in the Financial Requirements Analysis.

**BEST AVAILABLE DOCUMENT**

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

Uganda

Fiscal Year 1995 Congressional Presentation Projections

Product Code	Quantity	Cost	Freight	Total
Family Planning Association of Uganda				
CNDM	0	\$0	\$0	\$0
CT38	0	\$0	\$0	\$0
DEPO	0	\$0	\$0	\$0
FEMP	0	\$0	\$0	\$0
MICR	0	\$0	\$0	\$0
MULT	0	\$0	\$0	\$0
NRST	0	\$0	\$0	\$0
OVRP	0	\$0	\$0	\$0
VFTP	0	\$0	\$0	\$0
		\$0	\$0	\$0 TOTAL
Ministry of Health - MCH/FP				
52NX	10,968,000	\$559,368	\$139,842	\$699,210
CT38	0	\$0	\$0	\$0
DEPO	313,600	\$311,185	\$77,796	\$388,982
LFMP	302,400	\$59,512	\$14,878	\$74,390
MICR	0	\$0	\$0	\$0
NPLT	1,500	\$38,235	\$9,559	\$47,793
OVRP	292,800	\$57,623	\$14,406	\$72,029
VFTP	0	\$0	\$0	\$0
		\$1,025,923	\$256,481	\$1,282,404 TOTAL
Arm Trades, LTD				
52NG	4,635,500	\$236,411	\$59,103	\$295,513
NRQS	445,700	\$119,002	\$29,750	\$148,752
		\$355,412	\$88,853	\$444,266 TOTAL

\*\*\*\*\*  
 \*  
 \* Total Commodity Costs : \$1,381,336 \*  
 \* Total Estimated Freight Cost ( 25%) : \$345,334 \*  
 \* Total CP Financial Requirements : \$1,726,670 \*  
 \*  
 \*\*\*\*\*

NB For an explanation of the calculation methodology, contract periods and unit prices, please refer to the attachment listing

DRAFT DRAFT DRAFT DRAFT DRAFT DRAFT DRAFT

the parameters used in the Financial Requirements Analysis.

BEST AVAILABLE DOCUMENT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

Uganda

Fiscal Year 1996 Annual Budget Submission Projections

Product Code	Quantity	Cost	Freight	Total
Family Planning Association of Uganda				
CNDM	0	\$0	\$0	\$0
CT38	0	\$0	\$0	\$0
DEPO	0	\$0	\$0	\$0
FEMP	0	\$0	\$0	\$0
MICR	0	\$0	\$0	\$0
MULT	0	\$0	\$0	\$0
NRST	0	\$0	\$0	\$0
OVRP	0	\$0	\$0	\$0
VFTP	0	\$0	\$0	\$0
		\$0	\$0	\$0 TOTAL
Ministry of Health - MCH/FP				
52NX	10,962,000	\$587,563	\$146,891	\$734,454
CT38	0	\$0	\$0	\$0
DEPO	354,100	\$368,937	\$92,234	\$461,171
LFMP	159,600	\$32,973	\$8,243	\$41,217
MICR	0	\$0	\$0	\$0
NPLT	1,700	\$45,499	\$11,375	\$56,874
OVRP	310,800	\$64,211	\$16,053	\$80,264
VFTP	0	\$0	\$0	\$0
		\$1,099,184	\$274,796	\$1,373,980 TOTAL
Arm Trades, LTD				
52NG	5,033,300	\$269,785	\$67,446	\$337,231
NRQS	482,600	\$128,854	\$32,214	\$161,068
		\$398,639	\$99,660	\$498,299 TOTAL

\*\*\*\*\*  
 \*  
 \* Total Commodity Costs : \$1,497,823 \*  
 \* Total Estimated Freight Cost ( 25% ) : \$374,456 \*  
 \* Total ABS Financial Requirements : \$1,872,279 \*  
 \*  
 \*\*\*\*\*

NB For an explanation of the calculation methodology, contract periods and unit prices, please refer to the attachment listing

DRAFT      DRAFT      DRAFT      DRAFT      DRAFT      DRAFT      DRAFT

the parameters used in the Financial Requirements Analysis.

**BEST AVAILABLE DOCUMENT**

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

Parameters Used in the Financial Requirements Analysis  
 Prices are for a Single Unit of Product

Prod Code	Product	OYB Year 1 Price	OYB Year 2 Price	CP Year Price	ABS Year Price
52NG	52mm Non-Colored Blue-Gold	0.0475	0.0486	0.0510	0.0536
52NX	52mm Non Colored, No Logo	0.0475	0.0486	0.0510	0.0536
CT38	Copper T, 380	1.0870	1.1414	1.1984	1.2583
DEPO	Depo-Provera (every 3 mos)	0.9000	0.9450	0.9923	1.0419
LFMP	Lo-Femenal, Blue Lady	0.1785	0.1874	0.1968	0.2066
NPLT	Norplant	23.1200	24.2760	25.4898	26.7643
NRQS	Norquest, CSM	0.2670	0.2670	0.2670	0.2670
OVRP	Ovrette	0.1785	0.1874	0.1968	0.2066
VFTP	Conceptrol Foaming Tablet	0.1010	0.1040	0.1080	0.1134

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

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

DRAFT

**Attachment Four  
Draft Shipping Schedule**

NEWCPT V2.1  
Proposed Shipping Schedule for Uganda  
Based on 1994 CPT's

Run Date: 12/19/93  
Run Time: 14:00:30  
Page: 1

Supplier: AID

Product	Receipt Date	Quantity
Arm Trades, LTD		
52mm Non-Colored Blue-Gold	02/28/95	1,596,000
* 52mm Non-Colored Blue-Gold	1996	4,635,500
* 52mm Non-Colored Blue-Gold	1997	5,033,300
Norquest, CSM	09/30/94	130,800
Norquest, CSM	01/31/95	220,800
Norquest, CSM	05/31/95	187,200
* Norquest, CSM	1996	445,700
* Norquest, CSM	1997	482,600
Ministry of Health - MCH/FP		
52mm Non Colored, No Logo	01/31/95	2,100,000
52mm Non Colored, No Logo	08/31/95	5,958,000
* 52mm Non Colored, No Logo	1996	10,968,000
* 52mm Non Colored, No Logo	1997	10,962,000
Depo-Provera (every 3 mos)	07/31/94	354,300
Depo-Provera (every 3 mos)	07/31/95	272,900
* Depo-Provera (every 3 mos)	1996	313,600
* Depo-Provera (every 3 mos)	1997	354,100
Lo-Femenal, Blue Lady	11/30/94	206,400
Lo-Femenal, Blue Lady	11/30/95	50,400
* Lo-Femenal, Blue Lady	1996	302,400
* Lo-Femenal, Blue Lady	1997	159,600
Norplant	03/15/94	1,300
Norplant	08/31/95	1,300
* Norplant	1996	1,500
* Norplant	1997	1,700
Ovrette	09/30/94	196,800
Ovrette	05/30/95	138,000
Ovrette	12/31/95	136,800
* Ovrette	1996	292,800
* Ovrette	1997	310,800

\* This shipment represents the aggregate amount that the supplier will provide of this product during the year and is not meant to indicate a specific shipment quantity or receive date.

**Attachment Five**  
**Tasks for MCH-FP Logistics Officer**

## TASKS FOR MCH-FP LOGISTICS OFFICER

From July 1993 through December 1993

### 1. Calculating Space Requirements for Storage and Transport

- When: July 1993
- For all FP contraceptives anticipated to be handled by CMS during the next 5 years, or as far out as donors' programming details
- Source of data: Any donor who has or is planning a MCH/FP programme
  - USAID
  - ODA
  - The World Bank
  - UNFPA
  - GTZ and Pathfinder
  - Anyone else
- Contact the donors and ask for items, quantities of each, and the expected arrival timings. Ask them to contact MCH-FP Logistics Officer if they should reschedule or alter any planned inputs. Ask if there are any large shipments of equipment (i.e., bicycles, etc.)
- Calculate the space requirements for the storage and transport of each item for each expected shipment, by date and by donor
- Place all information on a chart
- Note which donors are uncertain about amounts of type of inputs and ask them to contact MCH/FP when they have decided. Ask if they need guidance as to quantity/type. Follow-up with them if you do not hear from them.
- Write a letter to the Chair of the Donor Health Coordination Committee requesting all donors to include space requirements and timings in their project documents for all expected and/or estimated subsequent MCH/FP inputs to be handled by CMS. Note in this letter that this information should be given to MCH-FP and discussed with them and with CMS.
- Give a copy of your results to Dr. Jon Asheim, UEDMP/CMS and Ms. Annie Kabaggoze-Musoke, USAID/HPA. Ms. Kabaggoze-Musoke may wish to inform donors of the CPT process in 4th quarter of 1993.
- Complete this task by 1 August, 1993
- JSI is to send you a suggested Logistics Checklist for use at MCH-FP when reviewing and writing project proposals. This Logistics Checklist should also be sent by MCH-FP to all donors and to the Donor Health Coordination Committee Chairperson.

2. Depo-Provera® Stock Cards at CMS July 1993

- Contact Ms. Solveig Gulbrandsen at UEDMP/CMS and arrange to meet with her and with Mr. Michael Okalebo, the MCH-FP storekeeper
- Review the current Depo-Provera® stock to assess the storage situation of the two dosages currently in stock
- Separate the two dosages in two separate areas in the store room
- Take a physical inventory of each dosage
- Ask the storekeeper to make a stock card for each dosage, with the difference between the two clearly labeled
- Ensure that the inventory count of each dosage is included as the beginning balance on each stock card and that the comments field reflects what you have done (i.e., "Inventory for separation of 2 dosages" and the date)
- Ensure that the storekeeper, Mr. Michael Okalebo knows the units with which he is to count and record each dosage
- Notify districts that the two dosages of Depo-Provera® should be kept separated, with separate stock cards. Describe each item to them.
- Return to CMS each month to review the continuing separation of the stock and the accounting for each on the stock cards

3. Review Draft Procedures Manual and Approval of Revised Draft

- You will receive the Draft Manual by 1 September, 1993 from Suzanne Thomas, FPLM and Jane Schuler-Repp. The review described below should take one month to complete.
- Copies of this Draft Manual should be sent to a list provided by MCH-FP Logistics Officer and by FPLM.
- Ask for comments to be returned to you within two weeks.
- Follow-up with those who do not return within two weeks. Give them one additional week.
- Put everyone's comments together in a letter or write them all in your copy of the manual. Note who did not return their comments.
- Give Ms. Annie Kabaggoze-Musoke the comments.
- When you receive the final draft manual and forms, get formal approval for adopting the new contraceptive logistics system from \_\_\_\_\_.
- When you have the formal approval, notify Ms. Annie Kabaggoze-Musoke, USAID/HPA

4. HPU Forms Approval

- When the new logistics forms have been drafted by FPLM, commented on and the draft finalized by FPLM, take the forms to the HPU Working Group for their approval. Ask Ms. Solveig Gulbrandsen, Stores Management Advisor to attend the Working Group meeting with you.
- If HPU has any comments on these forms, note the comments and return them to Ms. Annie Kabaggoze-Musoke, USAID/HPA
- **Who is responsible for answer any HPU questions and for deciding how any changes will be incorporated ?**
- **Keep HPU approved forms on file, to be printed in limited quantity at a later time for the pilot testing.**
- The timing for this task will depend upon the meeting schedule of the HPU Working Group, but should be no longer than 6 weeks if they meet monthly.

5. Quarterly Reporting of CMS Issues (Each Quarter)

- Ensure that Emmanuel Kayaga is monthly copying the information from the contraceptive stock cards and entering the data into the database.
- During your monthly visits to CMS, verify Mr. Kayaga's handwritten transcription of the stock card information against the stock cards. Note any discrepancies on Mr. Kayaga's list. Ask Mr. Kayaga to correct these discrepancies in the database.
- Ask Mr. Kayaga to list from the computer, each monthly addition, after correction. The MCH-FP Logistics Officer then compares this computer listing with Mr. Kayaga's handwritten listing. Note all errors and return to Mr. Kayaga.
- Request, quarterly, all reports from Mr. Kayaga regarding issuance of contraceptive supplies at CMS.
- Request from Ms. Solveig Gulbrandsen, a quarterly reporting of all FP contraceptive supplies. Ms. Gulbrandsen can give you totals per item, as: Beginning Balance; Total Issued; Ending Balance; Total Receipts; Source.
- Verify the quarterly report totals from CMS against the quarterly report totals (on the Monthly Summary Report) from Mr. Kayaga and resolve any discrepancies.
- When all discrepancies have been resolved, copy the reports from Mr. Kayaga and send them to:
  - USAID, Ms. Annie Kabaggoze-Musoke
  - UNFPA
  - Any other donor who contributed any of these contraceptives

6. Visits to SDPs with UEDMP Drug Surveillance Team

- When: Twice between July '93 and November '93
- Objective: To observe how an existing programme is reconciling issues with receipts. The new logistics system will also reconcile all issues and receipts.
- Contact Ms. Solveig Gulbrandsen, UEDMP/CMS, to express your interest in being a Drug Surveillance Team member, and schedule two surveillance trips in which you can participate.
- Participate in the Drug Surveillance !!

7. Selection of Districts for Pilot Testing (Complete by December, 1993)

- **Criteria:**
  - Decentralized districts
  - Districts with USAID-funded projects
  - DHT is enthusiastic
  - District stores are in reasonable shape
  - District storekeeper is experienced
- Discuss with appropriate GOU officials, USAID/HPN Officer and USAID/HPA
- FPLM will send follow-up materials regarding defining tasks for initiating a pilot test

**Attachment Six**  
**Condom Shipment Schedule for MCH-FP**  
**and World Learning**

**ALLOCATIONS OF CONDOM SHIPMENTS TO MCH-FP AND WORLD LEARNING**

Although World Learning will now receive a large proportion of AID-supplied condoms consigned to the MCH-FP, WLI is not currently a direct recipient of these commodities. The following is a suggested formula and schedule for allocation of condoms shipped to the MCH-FP in 1994:

Estimate of 1994 total sales/distributions of condoms for MCH-FP, including World Learning and other recipients of commodities from Central Medical Stores;

10,960,400 pieces

Total estimated 1994 sales/distributions of condoms by World Learning and its sub-grantees:

7,330,000 pieces

Percentage of AID supplied condoms to be allocated to World Learning:

67%

The following table presents AID condom shipments to MCH-FP, quantities to be allocated to World Learning, and quantities to be allocated to MCH-FP (actual allocations for specific shipments may be adjusted to meet immediate needs of these agencies):

<u>DATE OF SHIPMENT</u>	<u>QUANTITY SHIPPED</u>	<u>TOTAL ALLOCATED TO WORLD LEARNING</u>	<u>TOTAL ALLOCATED TO MCH-FP</u>
2/15/94	3,570,000	2,391,900	1,178,100
6/30/94	6,006,000	4,024,020	1,981,980
12/30/94	5,994,000	4,015,980	1,978,020

**Attachment Seven**  
**Draft CPTs**

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Dixon and Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/16/93  
 Modified on: 12/20/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	4,014.0	6,875.6	3,770.9	8,380.5	5,478.1
2. Estimated Consumption					
(a) Sales/Distrib.	3,018.4	13,753.1	10,960.4	10,960.4	10,960.4
(b) Loss/Disposal					
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	5,880.0	10,648.4		NA	NA
(b) Scheduled	NA		15,570.0		NA
4. End of Yr Stock	6,875.6	3,770.9	8,380.5	-2,579.9	NA
5. Desired EOY Stock	NA	NA	5,480.2	5,480.2	NA
6. Net Supply Situation					
(a) Surplus	NA	NA	2,898.0		NA
(b) Qty Needed	NA	NA		8,058.0	NA
7. Supply Shortfall	NA	NA			-5.5

1994 Minimum stock (months): 3  
 Maximum stock (months): 6  
 Desired stock (months): 6

1995 Minimum stock (months): 3  
 Maximum stock (months): 6  
 Desired stock (months): 6

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: 52mm Non Colored, No Logo  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/20/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

Min/Max levels set at 3/6 to shorten pipeline. Three condoms (52NX, 52NP, & 52CP) were stocked at beginning of year; BOYS represents aggregate of stock levels of these three.

2a. ESTIMATED USE

Year: 1992

MOH records - CMS distributions to districts and government agencies. See transfer notes for further information.

2a. ESTIMATED USE

Year: 1993

MOH records - same as 2a 1992. See transfer notes for further information.

2a. ESTIMATED USE

Year: 1994

Based on average distribution of 10 cartons to each of 41 districts - as MCH/FP is unable to account for commodities that go to lower levels, SOMARC activities are expanding, and WLI expanding, USAID decided to limit distributin through free channels. See transfers.

2a. ESTIMATED USE

Year: 1995

Same as 1994 as SOMARC will increase supply. See transfers for more detail.

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

-47-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: 52mm Non Colored, No Logo  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/20/93

2a. ESTIMATED USE Year: 1996

Same as 1995. See transfer notes.

2c. TRANSFERS Year: 1992

MOH records of tranfers: FPAU - 300,000; Busoga Diocese - 312,000; YWCA - 12,000, ACP - 420,000; World Learning - 360,000; Save the Children - 6,000; UPMA - 216,000; UN agencies - 13,200; USAID Kampala 6,000; World Neighbors - 180,000.

2c. TRANSFERS Year: 1993

MOH records of transfers (in 1000s): World Learning - 5,488; Molabo Project (SEATS) - 96; SDA (SEATS) - 8; Busoga Diocese - 105.9; FPAU - 552; NRA - 253.8; Rakai Project - 46.7; YWCA - 160; UPMA - 24; UN Agencies - 264; USAID Kampala - 96.

2c. TRANSFERS Year: 1994

See trip report for explanation of changes in transfer procedures. Estimate for World Learning (from World Learning & FPLM forecast) - 7,330,000. Estimate for remaining transfer agencies (1993 plus 10%) - 1,170,400.

2c. TRANSFERS Year: 1995

Same as 1994 based on assumption that SOMARC expansion will cover increased consumption.

2c. TRANSFERS Year: 1996

Same as 1995.

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: 52mm Non Colored, No Logo  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/20/93

3a. SHIPMENTS RECEIVED

Year: 1992

Combination of receipts for three condom products from NEWVERN and MOH records of receipts.

DRAFT

DRAFT

DRAFT

Page - 4

DRAFT

DRAFT

DRAFT

-49-

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Copper T, 380  
 Prepared by: Dixon and Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/17/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	0.0	10.9	18.5	23.4	23.2
2. Estimated Consumption					
(a) Sales/Distrib.	12.5	6.0	7.5	9.4	9.4
(b) Loss/Disposal					
(c) Transfer/Adjust.	4.8	4.0			
3. Add'l Contraceptives					
(a) Received	28.2	12.6		NA	NA
(b) Scheduled	NA	5.0	12.4	9.2	NA
4. End of Yr Stock	10.9	18.5	23.4	23.2	NA
5. Desired EOY Stock	NA	NA	9.4	9.4	NA
6. Net Supply Situation					
(a) Surplus	NA	NA	14.0	13.8	NA
(b) Qty Needed	NA	NA			NA
7. Supply Shortfall	NA	NA			

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

**BEST AVAILABLE DOCUMENT**

-50-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Copper T, 380  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

MOH records

2a. ESTIMATED USE

Year: 1992

MOH records

2a. ESTIMATED USE

Year: 1993

MOH records

2a. ESTIMATED USE

Year: 1994

Estimated increase in distribution of 25% based on implementation of DISH and CARE projects.

2a. ESTIMATED USE

Year: 1995

Same as 1994 - continued expansion of DISH.

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

-51-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Copper T, 380  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/06/93

2a. ESTIMATED USE Year: 1996

Will be adjusted on later CPTs.

2c. TRANSFERS Year: 1992

Per MOH records -  
Busoga Diocese - 800  
FPAU - 4000

2c. TRANSFERS Year: 1993

MOH records: FPAU - 4000.

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Depo-Provera (every 3 mos)  
 Prepared by: Dixon/Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/17/93  
 Modified on: 12/19/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	3.2	0.0	0.0	145.3	169.2
2. Estimated Consumption					
(a) Sales/Distrib.	62.5	121.0	209.0	249.0	290.0
(b) Loss/Disposal					
(c) Transfer/Adjust.	-7.2				
3. Add'l Contraceptives					
(a) Received	1.2	120.0		NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	0.0	0.0	-209.0	-103.7	NA
5. Desired EOY Stock	NA	NA	145.3	169.2	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	354.3	272.9	NA
7. Supply Shortfall	NA	NA			

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Depo-Provera (every 3 mos)  
Prepared by: Dixon/Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/19/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1992

From MOH records

2a. ESTIMATED USE Year: 1992

From MOH distribution data.

2a. ESTIMATED USE Year: 1993

From MOH distribution data. 24,000 transferred to FPAU by MOH, though the records at MOH don't agree with those of the FPAU,

2a. ESTIMATED USE Year: 1994

Program planners estimate huge increase in consumption given adequate supply, we used 50% based on the increased project activities in Uganda. FPAU anticipates a transfer of 12,000 from MOH, though it is unofficial.

2a. ESTIMATED USE Year: 1995

Same as 1994 consumption. Anticipated transfer of 12,000 is the same situation as described in 1994 notes.

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Depo-Provera (every 3 mos)  
Prepared by: Dixon/Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/19/93

2a. ESTIMATED USE Year: 1996

Anticipate that FPAU will continue to request depo, as IPPF/L  
aparently is not supplying this any longer to FPAU.

2c. TRANSFERS Year: 1992

From FPAU. Only considered transfers if they came or went from FPAU  
because FPAU and IPPF are the only sources.

3b. SHIPMENTS SCHEDULED Year: 1994

There is a shortfall indicated for 1994-6 for this product. If USAID  
Uganda doesn't plan to meet this shortfall through CPSD, then the  
Mission should coordinate with other donors to meet this need.

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: Dixon/Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/17/93  
 Modified on: 12/19/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	709.4	861.2	0.0	316.9	224.4
2. Estimated Consumption					
(a) Sales/Distrib.	705.8	1,244.1	670.7	543.7	385.0
(b) Loss/Disposal	71.0				
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	928.6	261.6		NA	NA
(b) Scheduled	NA		781.2	400.8	NA
4. End of Yr Stock	861.2	0.0	110.5	174.0	NA
5. Desired EOY Stock	NA	NA	317.2	224.6	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	206.4	50.4	NA
7. Supply Shortfall	NA	NA			-0.5

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

-56-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Lo-Femenal, Blue Lady  
Prepared by: Dixon/Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/19/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1992

From MOH records

2a. ESTIMATED USE Year: 1992

From MOH records - 1993 CPT. See transfer notes for more detail.

2a. ESTIMATED USE Year: 1993

Distribution data - from MOH records. Due to the delayed shipment from Momasa, there was an attempt to push all the Lo-Fem that was about to expire down the system, resulting in an artificciously high estimate of consumption. See transfer notes.

2a. ESTIMATED USE Year: 1994

1992 increased by 10% to estimate what 1993 dist. would have been had not the expiring LoFem been pushed down the system. Then this increased by 10%. Subtracted half of the 350,000 that are anticipated to be sold under Pilplan. See transfer notes.

2a. ESTIMATED USE Year: 1995

Same as for previous year. See transfer notes.

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

-57-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Lo-Femenal, Blue Lady  
Prepared by: Dixon/Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/19/93

2a. ESTIMATED USE Year: 1996

Same as previous year. See transfer notes.

2b. ESTIMATED LOSS Year: 1992

7,400 units were unaccounted for. 63,600 were damaged out (water) in 10/92 as they were delayed in getting shipments from Mombasa. Damage occurred in transit.

2c. TRANSFERS Year: 1992

From MOH records - 1993 CPTs

2c. TRANSFERS Year: 1993

Busoga - 20,000; UNDP - 1,600; YWCA 2,400

2c. TRANSFERS Year: 1994

Assumed still be transfers to some programs - impossible to determine how much, especially since most of the transfers and allocations made this year were based on the fact that half of the stock on hand will expire in November. Pilplan will reduce the need for Lofem.

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Microval  
 Prepared by: Dixon and Thomas  
 Modified by: Dixon and Thomas

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/19/93  
 Modified on: 10/19/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	0.0	0.0	114.8	76.3	34.0
2. Estimated Consumption					
(a) Sales/Distrib.		35.0	38.5	42.3	46.5
(b) Loss/Disposal					
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received		149.8		NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	0.0	114.8	76.3	34.0	NA
5. Desired EOY Stock	NA	NA	42.3	46.5	NA
6. Net Supply Situation					
(a) Surplus	NA	NA	33.6		NA
(b) Qty Needed	NA	NA		12.0	NA
7. Supply Shortfall	NA	NA		12.0	63.0
1994 Minimum stock (months):	6				
Maximum stock (months):	12				
Desired stock (months):	12				
1995 Minimum stock (months):		6			
Maximum stock (months):		12			
Desired stock (months):		12			

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Microval  
Prepared by: Dixon and Thomas  
Modified by: Dixon and Thomas

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/19/93  
Modified on: 10/19/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

MOH records: it is uncertain if they had no stock or if the stock cards were so inaccurate that they were removed and the process started over when a new storekeeper arrived in 1993. No ledgers were kept for contraceptives in 1992.

2a. ESTIMATED USE

Year: 1993

Consumption for 1st 3 quarters plus added 33%.

2a. ESTIMATED USE

Year: 1995

Increased by 10% from prior years - no information on which to base forecast.

2a. ESTIMATED USE

Year: 1996

Increase by 10% from prior year - no information on which to base forecast.

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Norplant  
 Prepared by: Dixon and Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/16/93  
 Modified on: 12/13/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	0.0	0.0	0.2	1.1	1.3
2. Estimated Consumption					
(a) Sales/Distrib.		0.1	0.9	1.1	1.3
(b) Loss/Disposal					
(c) Transfer/Adjust.		-0.3	0.3		
3. Add'l Contraceptives					
(a) Received				NA	NA
(b) Scheduled	NA		0.8		NA
4. End of Yr Stock	0.0	0.2	-0.2	0.0	NA
5. Desired EOY Stock	NA	NA	1.1	1.3	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	1.3	1.3	NA
7. Supply Shortfall	NA	NA			

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

- 61 -

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Norplant  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/13/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

MOH records

2a. ESTIMATED USE

Year: 1993

Distribution since receipt of product - 25 sets  
Average distribution per week - 7 sets  
Estimated distribution for remainder of 1993 - 70 sets  
Total distribution for 1993 - 95 sets

2a. ESTIMATED USE

Year: 1994

Based on discussion with MOH on estimated distribution

2a. ESTIMATED USE

Year: 1995

Based on MOH estimate

2a. ESTIMATED USE

Year: 1996

1995 estimate plus 20% - expected increase in consumption because DISH activities will be well underway

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Norplant  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93

Time: 15:23

Prepared on: 10/16/93

Modified on: 12/13/93

2c. TRANSFERS Year: 1993

Borrowed from Kenya Family Planning Program

2c. TRANSFERS Year: 1994

Transferred to Kenya Family Planning Program

3b. SHIPMENTS SCHEDULED Year: 1994

This shipment will be paid for through the SEATS project.

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

-63-

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Ovrette  
 Prepared by: Dixon and Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/17/93  
 Modified on: 12/16/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	92.7	304.1	52.6	255.0	274.5
2. Estimated Consumption					
(a) Sales/Distrib.	280.6	256.3	238.0	255.3	274.3
(b) Loss/Disposal					
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	492.0	4.8		NA	NA
(b) Scheduled	NA		243.6		NA
4. End of Yr Stock	304.1	52.6	58.2	-0.3	NA
5. Desired EOY Stock	NA	NA	255.3	274.3	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	196.8	274.8	NA
7. Supply Shortfall	NA	NA			-0.5

1994 Minimum stock (months): 6	1995 Minimum stock (months): 6
Maximum stock (months): 12	Maximum stock (months): 12
Desired stock (months): 12	Desired stock (months): 12

-64-

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Ovrette  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/16/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

MOH records

2a. ESTIMATED USE

Year: 1992

MOH records. See transfer notes for more detail.

2a. ESTIMATED USE

Year: 1993

MOH records. See transfer notes.

2a. ESTIMATED USE

Year: 1994

Issues are likely to be between the two extremes of previous two years - new projects will begin, but it is likely that there are high stocks at lower levels. See transfer notes.

2a. ESTIMATED USE

Year: 1995

Increased by 10%, but this should be reviewed at the time of DISH implementation. See transfer notes.

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Ovrette  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/17/93  
Modified on: 12/16/93

2a. ESTIMATED USE Year: 1996

10 percent until any consumption data available from the MOH.  
See transfer notes.

2c. TRANSFERS Year: 1992

Per MOH records:  
FPAU - 44,000  
Busoga Diocese - 4800

2c. TRANSFERS Year: 1993

Per MOH records:  
FPAU - 134.4 MOH records - and therefore CPT- don't agree  
Busoga Diocese - 6.4  
AYC Clinic - 1.6

2c. TRANSFERS Year: 1994

65,000 for FPAU. Busoga, and others who have sources of supplies  
other than the MOH should increase their orders accordingly.

MOH records - and therefore CPT - don't indicate same number.

2c. TRANSFERS Year: 1995

Constant transfers until we discuss this with the Mission

NEWCPT V2.1

Country: Uganda  
 Recipient: Ministry of Health - MCH/FP  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Dixon and Thomas  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/16/93  
 Modified on: 12/16/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	1.7	101.2	3.5	0.0	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	451.7	92.0	434.0	477.4	525.1
(b) Loss/Disposal		5.7			
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	551.2			NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	101.2	3.5	-430.5	-477.4	NA
5. Desired EOY Stock	NA	NA	477.4	525.1	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	907.2	1,003.2	NA
7. Supply Shortfall	NA	NA	907.2	1,003.2	1,095.8
1994 Minimum stock (months):	6				
Maximum stock (months):	12				
Desired stock (months):	12				
1995 Minimum stock (months):		6			
Maximum stock (months):		12			
Desired stock (months):		12			

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

-67-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Conceptrol Foaming Tablet  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/16/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

MOH records - stock for Neo-Sampoon only; no stock for Conceptrol

2a. ESTIMATED USE

Year: 1992

For both products from MOH records. Note that MOH did not maintain separate records for the two products. See transfer notes for further information.

2a. ESTIMATED USE

Year: 1993

MOH records. See transfer notes for further information.

2a. ESTIMATED USE

Year: 1994

Because MOH utilizes allocation system without reconciliation with consumption data (no consumption data is used at MOH level), estimate is based on two cartons of supplies per district. See transfer notes for further information.

2a. ESTIMATED USE

Year: 1995

1994 consumption plus 10%. Will be adjusted for 1995 CPTs when MOH provides actual consumption data. See transfer notes for further information.

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Conceptrol Foaming Tablet  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/16/93

2a. ESTIMATED USE

Year: 1996

Same as 1995. See transfer notes for further information.

2b. ESTIMATED LOSS

Year: 1993

Adjustment to reconcile end of year stock with MOH records

2c. TRANSFERS

Year: 1992

Per MOH records, transfers:  
Busoga Diocese - 10,000  
YWCA - 20,000

2c. TRANSFERS

Year: 1993

FPAU - 60,000 MOH records say his, but FPAU records don't agree  
Busoga Diocese - 7700

2c. TRANSFERS

Year: 1994

Transfers to program that have no source of supplies other than MOH,  
e.g. SDA and IMAU.

2c. TRANSFERS

Year: 1995

1994 consumption plus 10%. Will be adusted for 1995 CPTs for actual  
consumption data.

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

-69-

NEWCPT V2.1

Country: Uganda  
Recipient: Ministry of Health - MCH/FP  
Product: Conceptrol Foaming Tablet  
Prepared by: Dixon and Thomas  
Modified by: Wildman

Date: 12/20/93

Time: 15:23  
Prepared on: 10/16/93  
Modified on: 12/16/93

2c. TRANSFERS Year: 1996

Same as 1995.

3a. SHIPMENTS RECEIVED Year: 1992

Total includes both Conceptrol and Neo-Sampoon.

3b. SHIPMENTS SCHEDULED Year: 1994

Despite the supply shortfall, no further VFT shipments have been proposed. This decision reflects the Mission's policy to give priority to long term contraceptive methods.

DRAFT

DRAFT

DRAFT

Page - 4

DRAFT

DRAFT

DRAFT

NEWCPT V2.1

Country: Uganda  
 Recipient: Arm Trades, LTD  
 Product: 52mm Non-Colored Blue-Gold  
 Prepared by: Dixon/Thomas/Bachman  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/18/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	1,200.0	1,661.0	4,568.5	4,970.5	2,566.5
2. Estimated Consumption					
(a) Sales/Distrib.	1,318.0	1,789.0	3,600.0	4,000.0	4,400.0
(b) Loss/Disposal	117.0				
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	1,896.0	2,788.5		NA	NA
(b) Scheduled	NA	1,908.0	4,002.0		NA
4. End of Yr Stock	1,661.0	4,568.5	4,970.5	970.5	NA
5. Desired EOY Stock	NA	NA	2,333.3	2,566.7	NA
6. Net Supply Situation					
(a) Surplus	NA	NA	2,640.0		NA
(b) Qty Needed	NA	NA		1,596.0	NA
7. Supply Shortfall	NA	NA			-2.0

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

-71-

Country: Uganda  
Recipient: Arm Trades, LTD  
Product: 52mm Non-Colored Blue-Gold  
Prepared by: Dixon/Thomas/Bachman  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/18/93  
Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1992  
Arm Trades records

2a. ESTIMATED USE Year: 1992  
Arm Trades records.

2a. ESTIMATED USE Year: 1993  
Arm Trades records.

2a. ESTIMATED USE Year: 1994  
From SOMARC forecast, by agency as follow (in 1000s): ARM - 3,000;  
CADMER - 312; BATA - 192; UPMA - 12; Safe Motherhood - 18; AIC - 18;  
IMAU - 18; CARE - 30.

2a. ESTIMATED USE Year: 1995  
SOMARC forecast - 1994 estimate plus 10%.

-72-

NEWCPT V2.1

Country: Uganda  
Recipient: Arm Trades, LTD  
Product: 52mm Non-Colored Blue-Gold  
Prepared by: Dixon/Thomas/Bachman  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/18/93  
Modified on: 12/06/93

2a. ESTIMATED USE Year: 1996

SOMARC forecast - 1995 plus 10%.

2b. ESTIMATED LOSS Year: 1992

Administrative adjustment to reconcile 1993 CPT BOYS with Arm Trades records - this figure represents distribution for sampling and losses.

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

-73-

NEWCPT V2.1

Country: Uganda  
 Recipient: Arm Trades, LTD  
 Product: Norquest, CSM  
 Prepared by: Thomas/Dixon/Bachman  
 Modified by: Thomas/Dixon/Bachman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/10/93  
 Modified on: 10/18/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	0.0	40.7	193.0	324.2	347.2
2. Estimated Consumption					
(a) Sales/Distrib.		67.7	350.0	385.0	424.0
(b) Loss/Disposal					
(c) Transfer/Adjust.		-100.0			
3. Add'l Contraceptives					
(a) Received	40.7			NA	NA
(b) Scheduled	NA	120.0	350.4		NA
4. End of Yr Stock	40.7	193.0	193.4	-60.8	NA
5. Desired EOY Stock	NA	NA	224.6	247.3	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	31.2	308.4	NA
7. Supply Shortfall	NA	NA	-99.6	-99.6	-100.0

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

- 74 -

NEWCPT V2.1

Country: Uganda  
Recipient: Arm Trades, LTD  
Product: Norquest, CSM  
Prepared by: Thomas/Dixon/Bachman  
Modified by: Thomas/Dixon/Bachman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/10/93  
Modified on: 10/18/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

From Armtrades/SOMARC reports - product not sold at this time.

2a. ESTIMATED USE

Year: 1992

Although first shipment of product received in July 1992, social marketing program was not launched until June 1993.

2a. ESTIMATED USE

Year: 1993

Arm Trades records - After program start in July 1993, sales averaged 13.5 per month, resulting in stock out. Shipment to be received 11/8/93; estimate sales of 13.5/mth for Nov. and Dec. Total sales for 1993 -  $40.7 + 27.0 = 67.7$ .

2a. ESTIMATED USE

Year: 1994

From SOMARC forecast, based on agency estimated sales as follows (in 1000s): ARM - 180; UPMA - 6; Safe Motherhood - 12(?); IMAU - 12(?); CARE - 24(?); FPAU - 120; CADMER - 30. Because of questionable estimate for 3 agencies, SOMARC reduced total from 384,000 to 350,000.

2a. ESTIMATED USE

Year: 1995

SOMARC forecast - 1994 estimate plus 10%.

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

- 175 -

NEWCPT V2.1

Country: Uganda  
Recipient: Arm Trades, LTD  
Product: Norquest, CSM  
Prepared by: Thomas/Dixon/Bachman  
Modified by: Thomas/Dixon/Bachman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/10/93  
Modified on: 10/18/93

2a. ESTIMATED USE Year: 1996

SOMARC estimate - 1995 estimate plus 10%.

2c. TRANSFERS Year: 1993

To be transfered from the Malawi program, and should arrive by end of 1993.

3b. SHIPMENTS SCHEDULED Year: 1994

SOMARC anticipates receipt of pills from Malawi during either late 1993 or early 1994. These are included in the "Transfers" box for 1993. Depending on continued sales, SOMARC may wish to adjust future shipping dates.

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Generic condom  
 Prepared by: Thomas/Dixon  
 Modified by: Thomas/Dixon

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/20/93  
 Modified on: 11/18/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	287.9	409.8	317.8	588.3	274.1
2. Estimated Consumption					
(a) Sales/Distrib.	238.1	250.0	285.6	314.2	345.6
(b) Loss/Disposal					
(c) Transfer/Adjust.	-180.0	130.0	143.9		
3. Add'l Contraceptives					
(a) Received	180.0	288.0		NA	NA
(b) Scheduled	NA		700.0		NA
4. End of Yr Stock	409.8	317.8	588.3	274.1	NA
5. Desired EOY Stock	NA	NA	183.3	201.6	NA
6. Net Supply Situation					
(a) Surplus	NA	NA	408.0	72.0	NA
(b) Qty Needed	NA	NA			NA
7. Supply Shortfall	NA	NA			290.6

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 7

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

-77-

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Generic condom  
Prepared by: Thomas/Dixon  
Modified by: Thomas/Dixon

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/20/93  
Modified on: 11/18/93

1994 Contraceptive Requirements Estimate  
Footnotes

- 1. BEGINNING STOCK Year: 1992  
FPAU records
  
- 2a. ESTIMATED USE Year: 1992  
FPAU records as issues to agency acceptors
  
- 2a. ESTIMATED USE Year: 1993  
From FPAU records as issues to agency acceptors
  
- 2a. ESTIMATED USE Year: 1994  
FPAU forecast
  
- 2a. ESTIMATED USE Year: 1995  
FPAU forecast

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Generic condom  
Prepared by: Thomas/Dixon  
Modified by: Thomas/Dixon

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/20/93  
Modified on: 11/18/93

2a. ESTIMATED USE Year: 1996

FPAU forecast

2c. TRANSFERS Year: 1992

FPAU records as issues to other agencies, including private practitioners. FPAU rec'd 300,000 from MOH, and transferred out 120,000.

2c. TRANSFERS Year: 1993

From FPAU records as issues to other agencies, including private practitioners.

2c. TRANSFERS Year: 1994

FPAU forecast

2c. TRANSFERS Year: 1995

Not available

3a. SHIPMENTS RECEIVED Year: 1992

FPAU received this from IPPF/L, but they were actually an in-kind donation from A.I.D.

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Generic condom  
Prepared by: Thomas/Dixon  
Modified by: Thomas/Dixon

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/20/93  
Modified on: 11/18/93

3a. SHIPMENTS RECEIVED Year: 1993

From IPPF/L which were an in-kind donation from AID

3b. SHIPMENTS SCHEDULED Year: 1994

This is the amount that FPAU has requested from IPPF/L and aID as a donation

3b. SHIPMENTS SCHEDULED Year: 1995

Not available

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Copper T, 380  
 Prepared by: Thomas and Dixon  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	1.1	3.0	3.1	6.3	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	4.0	4.9	5.8	7.0	8.4
(b) Loss/Disposal					
(c) Transfer/Adjust.	-2.4	-4.0			
3. Add'l Contraceptives					
(a) Received	3.5	1.0		NA	NA
(b) Scheduled	NA		9.0		NA
4. End of Yr Stock	3.0	3.1	6.3	-0.7	NA
5. Desired EOY Stock	NA	NA	7.0	8.4	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	0.8	9.2	NA
7. Supply Shortfall	NA	NA	0.8	9.2	18.1

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT

-81-

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Copper T, 380  
Prepared by: Thomas and Dixon  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1992  
FPAU records
- 2a. ESTIMATED USE Year: 1994  
FPAU forecast including issues to other agencies
- 2a. ESTIMATED USE Year: 1995  
Based on prior two years, approximately 20% increase yearly
- 2a. ESTIMATED USE Year: 1996  
Same formula as 1995 forecasted consumption
- 2c. TRANSFERS Year: 1992  
From IPPF/USAID

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Copper T, 380  
Prepared by: Thomas and Dixon  
Modified by: Wildman

Date: 12/20/93

Time: 15:23

Prepared on: 10/09/93

Modified on: 12/06/93

2c. TRANSFERS

Year: 1993

Transfer from MOH

3b. SHIPMENTS SCHEDULED

Year: 1994

FPAU received ambiguous letter from IPPF/Nairobi re possible donation of CT38; however no evidence exists for scheduled shipment. The amount that they expect to receive through this in-kind donation from USAID is 9,000 pieces. They will then be 677 pieces short.

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

-83-

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Depo-Provera (every 3 mos)  
 Prepared by: Thomas and Dixon  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	3.0	0.0	2.4	38.2	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	67.9	41.6	74.0	85.1	97.9
(b) Loss/Disposal	0.1				
(c) Transfer/Adjust.	7.2	-24.0	-79.8		
3. Add'l Contraceptives					
(a) Received	30.0	20.0		NA	NA
(b) Scheduled	NA		30.0		NA
4. End of Yr Stock	0.0	2.4	38.2	-46.9	NA
5. Desired EOY Stock	NA	NA	85.1	97.9	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	46.9	144.8	NA
7. Supply Shortfall	NA	NA	46.9	144.8	207.8

1994 Minimum stock (months): 6                      1995 Minimum stock (months): 6  
 Maximum stock (months): 12                      Maximum stock (months): 12  
 Desired stock (months): 12                      Desired stock (months): 12

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

-84-

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Depo-Provera (every 3 mos)  
Prepared by: Thomas and Dixon  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1992  
FPAU records

2a. ESTIMATED USE Year: 1992  
FPAU records

2a. ESTIMATED USE Year: 1993  
FPAU records

2a. ESTIMATED USE Year: 1994  
FPAU forecast

2a. ESTIMATED USE Year: 1995

Difficult to estimate consumption due to stockout in 1993, but demand for product appears to be increasing rapidly, as product stock-outs immediately, and interviews with program staff at all levels and types indicate that they would like to have more depo for clients.

- 85 -

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Depo-Provera (every 3 mos)  
Prepared by: Thomas and Dixon  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

2a. ESTIMATED USE Year: 1996

Same as 1995

2b. ESTIMATED LOSS Year: 1992

FPAU records

2c. TRANSFERS Year: 1992

Transferred to MOH as per both MOH and FPAU records

2c. TRANSFERS Year: 1993

Transfer from MOH. The FPAU recorded this amount of 24,000 as being received from the MOH, but the MOH recorded that they transferred 30,700 doses. This may be related to the fact that there were two doses of depo in the system, and records were inter-mingled.

2c. TRANSFERS Year: 1994

Same footnote as 2c, 1993. No means to reconcile these differences.

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Femenal  
 Prepared by: Thomas and Dixon  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	224.7	647.1	562.1	372.1	163.1
2. Estimated Consumption					
(a) Sales/Distrib.	121.2	85.0	190.0	209.0	230.0
(b) Loss/Disposal					
(c) Transfer/Adjust.	-543.6				
3. Add'l Contraceptives					
(a) Received				NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	647.1	562.1	372.1	163.1	NA
5. Desired EOY Stock	NA	NA	209.0	230.0	NA
6. Net Supply Situation					
(a) Surplus	NA	NA	163.2		NA
(b) Qty Needed	NA	NA		67.2	NA
7. Supply Shortfall	NA	NA		67.2	316.9

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

DRAFT

DRAFT

DRAFT

Page 1

DRAFT

DRAFT

DRAFT

-87-



NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Femenal  
Prepared by: Thomas and Dixon  
Modified by: Wildman

Date: 12/20/93

Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

2c. TRANSFERS

Year: 1992

Transfer from MOH/USAID

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

-89-

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Microval  
 Prepared by: Thomas and Dixon  
 Modified by: Thomas and Dixon

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
	-----	-----	-----	-----	-----
1. Beg. of Year Stock	6.3	0.1	6.6	0.0	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	7.5	8.5	8.9	9.7	10.5
(b) Loss/Disposal	0.2				
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	1.5	15.0		NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	0.1	6.6	-2.3	-9.7	NA
5. Desired EOY Stock	NA	NA	9.7	10.5	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	12.0	20.4	NA
7. Supply Shortfall	NA	NA	12.0	20.4	21.8

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

-90-

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Microval  
Prepared by: Thomas and Dixon  
Modified by: Thomas and Dixon

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

FPAU records

2a. ESTIMATED USE

Year: 1992

FPAU records

2a. ESTIMATED USE

Year: 1993

FPAU records

2a. ESTIMATED USE

Year: 1994

FPAU forecast

2a. ESTIMATED USE

Year: 1995

Forecast based on average annual increase for previous years

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

-91-

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Microval  
Prepared by: Thomas and Dixon  
Modified by: Thomas and Dixon

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

2a. ESTIMATED USE Year: 1996  
Same as 1995

2b. ESTIMATED LOSS Year: 1992  
FPAU RECORDS

2c. TRANSFERS Year: 1993  
Though FPAU recorded a receipt of 15,000 cycles from MOH, there is no evidence of this on the stock cards at MOH, and three stocktakings this year at the MOH have not revealed any discrepancies in supplies. therefore, we did not include this transfer.

3a. SHIPMENTS RECEIVED Year: 1992  
Received from 1PPF/L, but no date available.

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Multiload IUCD  
 Prepared by: Thomas and Dixon  
 Modified by: Thomas and Dixon

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	0.5	0.1	0.1	0.2	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	0.4	0.3	0.4	0.4	0.4
(b) Loss/Disposal					
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received		0.3		NA	NA
(b) Scheduled	NA		0.5		NA
4. End of Yr Stock	0.1	0.1	0.2	-0.2	NA
5. Desired EOY Stock	NA	NA	0.4	0.4	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	0.2	0.6	NA
7. Supply Shortfall	NA	NA	0.2	0.6	0.8
1994 Minimum stock (months):	6				
Maximum stock (months):	12				
Desired stock (months):	12				
1995 Minimum stock (months):		6			
Maximum stock (months):		12			
Desired stock (months):		12			

DRAFT

DRAFT

DRAFT

Page - 1

DRAFT

DRAFT

DRAFT



NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Multiload IUCD  
Prepared by: Thomas and Dixon  
Modified by: Thomas and Dixon

Date: 12/20/93

Time: 15:23

Prepared on: 10/09/93

Modified on: 12/06/93

2a. ESTIMATED USE

Year: 1996

Same as 1995

DRAFT

DRAFT

DRAFT

Page - 3

DRAFT

DRAFT

DRAFT

-95-

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Noristerat (every 2 mos.)  
 Prepared by: Thomas and Dixon  
 Modified by: Thomas and Dixon

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 11/18/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	4.9	4.0	0.0	5.2	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	0.9	3.8	4.8	6.0	7.5
(b) Loss/Disposal		0.4			
(c) Transfer/Adjust.					
3. Add'l Contracepti.					
(a) Received				NA	NA
(b) Scheduled	NA		10.0		NA
4. End of Yr Stock	4.0	0.0	5.2	-0.8	NA
5. Desired EOY Stock	NA	NA	6.0	7.5	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	0.8	8.3	NA
7. Supply Shortfall	NA	NA	0.8	8.3	16.4

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

-96-

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Noristerat (every 2 mos.)  
Prepared by: Thomas and Dixon  
Modified by: Thomas and Dixon

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 11/18/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1992

FPAU records

2a. ESTIMATED USE Year: 1992

FPAU records

2a. ESTIMATED USE Year: 1993

FPAU records

2a. ESTIMATED USE Year: 1994

FPAU records

2a. ESTIMATED USE Year: 1995

Estimate based on percent increase of 25 for successive years. FPAU staff feel that, like Depo-Provera, the popularity of Noresterat will continue to increase.

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

-97-

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Noristerat (every 2 mos.)  
Prepared by: Thomas and Dixon  
Modified by: Thomas and Dixon

Date: 12/20/93

Time: 15:23

Prepared on: 10/09/93

Modified on: 11/18/93

2a. ESTIMATED USE Year: 1996  
Same as 1995

2b. ESTIMATED LOSS Year: 1993  
FPAU records, though no indication of why this loss occurred was given.

3a. SHIPMENTS RECEIVED Year: 1992  
FPAU records

3a. SHIPMENTS RECEIVED Year: 1993  
FPAU records

3b. SHIPMENTS SCHEDULED Year: 1994  
FPAU forecast

-98-

NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Ovrette  
 Prepared by: Thomas and Dixn  
 Modified by: Wildman

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	0.0	23.9	21.1	5.2	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	20.1	12.0	24.0	28.8	34.6
(b) Loss/Disposal					
(c) Transfer/Adjust.	-44.0	-9.2	-8.1		
3. Add'l Contraceptives					
(a) Received				NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	23.9	21.1	5.2	-23.6	NA
5. Desired EOY Stock	NA	NA	28.8	34.6	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	24.0	58.8	NA
7. Supply Shortfall	NA	NA	24.0	58.8	74.5

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

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

NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Ovrette  
Prepared by: Thomas and Dixn  
Modified by: Wildman

Date: 12/20/93  
Time: 15:23  
Prepared on: 10/09/93  
Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1992

FPAU records

2a. ESTIMATED USE

Year: 1992

FPAU records

2a. ESTIMATED USE

Year: 1993

FPAU records

2a. ESTIMATED USE

Year: 1994

FPAU forecast

2a. ESTIMATED USE

Year: 1995

Estimate based on data for 1992 and 1994; stockout in 1993

DRAFT

DRAFT

DRAFT

Page - 2

DRAFT

DRAFT

DRAFT

-100-



NEWCPT V2.1

Country: Uganda  
 Recipient: Family Planning Association of Uganda  
 Product: Conceptrol Foaming Tablet  
 Prepared by: Thomas and Dixon  
 Modified by: Thomas and Dixon

Date: 12/20/93  
 Time: 15:23  
 Prepared on: 10/09/93  
 Modified on: 12/06/93

1994 Contraceptive Requirements Estimate  
 All Numbers in 1,000's

	1992	1993	1994	1995	1996
1. Beg. of Year Stock	7.7	6.5	0.0	0.0	0.0
2. Estimated Consumption					
(a) Sales/Distrib.	97.2	61.5	114.9	135.6	160.0
(b) Loss/Disposal					
(c) Transfer/Adjust.					
3. Add'l Contraceptives					
(a) Received	96.0	55.0		NA	NA
(b) Scheduled	NA				NA
4. End of Yr Stock	6.5	0.0	-114.9	-135.6	NA
5. Desired EOY Stock	NA	NA	135.6	160.0	NA
6. Net Supply Situation					
(a) Surplus	NA	NA			NA
(b) Qty Needed	NA	NA	249.6	297.6	NA
7. Supply Shortfall	NA	NA	249.6	297.6	342.6

1994 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

1995 Minimum stock (months): 6  
 Maximum stock (months): 12  
 Desired stock (months): 12

-102-



NEWCPT V2.1

Country: Uganda  
Recipient: Family Planning Association of Uganda  
Product: Conceptrol Foaming Tablet  
Prepared by: Thomas and Dixon  
Modified by: Thomas and Dixon

Date: 12/20/93

Time: 15:23

Prepared on: 10/09/93

Modified on: 12/06/93

2a. ESTIMATED USE Year: 1996

Same as 1995

3a. SHIPMENTS RECEIVED Year: 1993

FPAU records