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Assessment of the Contraceptive Distribution System  
of the Government of Trinidad and Tobago  
National Family Planning Programme

and

Forecast of Contraceptive Use  
for the National Population Programme and the  
Family Planning Association of Trinidad & Tobago

Sarita Kumar, IPPF/WHR  
Elise Levin, JSI/FPLM

April 29 - May 3, 1991



Family Planning  
Logistics Management  
Project

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John Snow, Inc.

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**I. Introduction**

Consultants Sarita Kumar of International Planned Parenthood Federation/ Western Hemisphere Region (IPPF/WHR) and Elise Levin of the Family Planning Logistics Management Project (FPLM), John Snow, Inc. visited Trinidad from April 29 through May 3, 1991 upon request by the U.S. Agency for International Development's ( A.I.D.) Latin America and the Caribbean bureau and the Office of Population (ST/POP/CPSD). A.I.D. donated in-kind contraceptives are supplied to the Family Planning Association (FPATT) through IPPF/WHR, and since 1987 the Government of Trinidad and Tobago has also been receiving these contraceptives which are channeled through IPPF/WHR and FPATT.

A.I.D. plans to phase out its provision of contraceptives to the National Population Programme (NPP) via the FPATT. During a phaseout period of approximately two to three years, A.I.D. may provide commodities directly to the NPP if additional quantities are needed. Technical assistance in the management of contraceptive supply, including logistics management information systems, may also be made available to the NPP by A.I.D. during the phaseout period.

Given the planned phaseout of contraceptive supply and technical assistance from A.I.D. to the Population Programme, the objectives of this trip were:

- a. To assess the needs of the National Population Programme with respect to its distribution system
- b. To assess the needs of the National Population Programme with respect to the phaseout of contraceptive supply from AID
- c. To prepare Contraceptive Procurement Tables for the National Population Programme and for the Family Planning Association of Trinidad & Tobago

We would like to extend our most sincere thanks to those individuals who provided information and shared their insights: Ms. Jacqueline Padmore, Acting Director, Population Programme Unit; Ms. Donna Martinez, Acting Executive Director, FPATT; Mrs. Lorna Hussein, Financial Director, FPATT; Mr. Paul Gomez, Supplies Coordinator, Population Programme Unit; Nurse Vernon, Population Programme Unit; Mr. Selwyn Ragoonan, Health Educator, NPP; Mr. Stanley Applewhite, PPU. A complete list of persons contacted may be found in Appendix A.

## II. Description of the Logistics System - Population Programme

The Population Programme Unit (PPU), which administers the National Population Programme, was transferred from the Ministry of Health to the Ministry of Social Development and Family Services in July, 1990. Prior to 1988, the PPU procured all contraceptives from manufacturers via public tender. In 1987, due to budget constraints the PPU requested FPATT for donated contraceptives. This request was submitted to A.I.D. through IPPF/WHO and it was agreed that in-kind contraceptives would be provided for the Government of Trinidad and Tobago's Population Programme through the IPPF affiliate FPATT. The PPU has continued to procure some products directly; for example, 1,008,000 condoms were purchased from PAHO in October, 1990. The PPU stores contraceptives in a section of Government warehouse C40 in Chaguaramas, outside Port-of-Spain. A minimum one-week supply is also kept in the PPU office in Port-of-Spain for direct delivery to clinics. The PPU supplies, on a monthly basis, 95 integrated Maternal and Child Health and Family Planning clinics in Trinidad and Tobago, using a Government van when it is available.

The Monthly Report Form is the primary instrument for data collection regarding contraceptive supply. Every month, clinics complete the form and send it with their District Visitor to the PPU, which uses the information to determine issue quantities. The system is both "push" and "pull" in that clinics request order quantities on the monthly report, but the decision on the quantity delivered is made by the central PPU office. Due to time and personnel constraints and the volume of work required to aggregate data for 95 clinics every month, data are not aggregated centrally. Therefore, there is no calculation of even basic management information such as total quantities dispensed to clients per month. The PPU estimates that it receives 85% of reports per month, an increase from 75% reporting in 1990. Quantities dispensed are also reported on the Daily Register in some clinics; this form is sent to the Statistics Office and is not used for the management of contraceptive supply. A copy of both forms can be found in Appendix C.

### III. Findings and Recommendations - Population Programme

#### A. Logistics Management Information System

There have been improvements in data collection in the logistics system since a brief visit by FPLM to the National Population Programme in 1989. Currently, the Population Programme Unit estimates that it receives 85 percent of monthly reports from the clinics, which is a very high percentage reporting. At the clinic level, improvements are needed in data collection. The forms and procedures used to record quantities dispensed is not standard across clinics. Stock cards are not kept at any clinics although stock records are maintained at several sites in the form of physical counts recorded in ledger books. In some cases, two daily registers are kept, one of which is sent to central office as a report, the other being used to tally total numbers of clients and products dispensed per month. Duplication of reporting exists in that some of the same information is reported on one form to the PPU and on another form to the CMOH; however, losses and adjustments of stocks are not routinely recorded or reported. Losses and adjustments may be included in the "Notes" section of the monthly report to the PPU.

Automation of reports of contraceptive use would reduce the time spent calculating issue quantities and would enable aggregation of 95 reports per month (if at 100% reporting) which staff currently are not doing manually. Support in the transition to automation may be available from FPATT. A complete assessment of the capacity to automate the system is recommended. The Computerized Contraceptive Management Information System (CCMIS), developed by the U.S. Centers for Disease Control and John Snow, Inc., may be an appropriate system for the NPP; a full assessment should recommend the most appropriate system.

Other recommendations pertaining to the recordkeeping system are:

- o Bin cards showing the contraceptive supply at the PPU office are not used. Presently the inventory control cards maintained by the Supplies Coordinator show stocks at the C40 warehouse and quantities at the PPU. There should be separate cards for the stock stored at the PPU offices.
- o Inventory control cards should continue to be kept at the PPU, showing quantities stored at the C40 warehouse.
- o The requisition form includes "Minimum Balance" columns which are now obsolete and are not used by the clinics. These columns should be removed from the form. In their place, the PPU should establish maximum and minimum stock levels, and should either instruct clinic staff to use them in ordering (for a "pull" system) or should use these levels centrally to determine issue quantities (for a "push" system). We recommend that these decisions be made in a Logistics System Development Workshop, including the type of system to use, the maximum and minimum levels, and the design of the report form. (See Section C below regarding the proposed workshop.)

- o Loss/adjustment columns should be added to stock cards and monthly reports.

## B. Distribution and inventory control systems

Monthly distribution to 95 clinics requires one full-time and one part-time person in addition to the van driver. Aggregation and analysis of reports are not done due to the lack of available staff time. In order to make staff time more available for data analysis, the PPU may wish to re-consider its monthly re-supply system; bimonthly or quarterly re-supply may be possible, although some clinics may require additional storage cabinets for condoms if resupply were quarterly. In addition to the volume of work involved in resupplying the clinics, the van used to transport product is often in repair and unavailable, causing monthly resupply to be a continual problem.

The calculation of order quantities is not standard across clinics. A standard system for calculating order or issue quantities should be established. See Section C below regarding a workshop for development of the inventory control system.

### Recommendation: Maximum Minimum Inventory Control System

In the interim, it is recommended that the PPU continue monthly reporting and adopt a two month minimum level and a four month maximum; issues of a particular product would be made only to those clinics that fall below a two month supply of that product, and the issue quantities should equal

$$(4 \times (\text{average monthly use})) - \text{stock on hand.}$$

Average monthly use would be calculated for each clinic on the basis of the last 6 monthly reports of quantities dispensed. Reports should continue to be submitted every month, whether or not supplies are needed.

This procedure should only be used at clinics where storage capacity is adequate for a four month supply. For clinics with storage capacity less than four months' supply, a maximum of 2 months would be used, and supply should continue to be topped off monthly, as in the current system. The issue quantity in these cases is:

$$(2 \times (\text{average monthly use})) - \text{stock on hand.}$$

Using a four month maximum and two month minimum supply level is beneficial in that it would reduce the level of use of the delivery van and would reduce the processing time overall. We therefore recommend shifting to a Maximum-Minimum Inventory Control system with a four month maximum and two month minimum wherever possible. We emphasize that this recommendation is for an interim period only until a system development workshop is held, at which time the interim system could be assessed.

### C. Proposed Logistics System Development Workshop

We recommend that the PPU hold a workshop for the further development of several key aspects of the contraceptive logistics system. This workshop would involve all PPU staff who implement any aspect of the distribution system, or who collect and use family planning data for any purpose.

The objectives of the proposed workshop would be:

1. to design standard data collection instruments at clinic level
2. to establish a max/min inventory control system in the clinics
3. to make necessary adjustments to reporting forms
4. to decide on distribution issues, such as monthly vs. bimonthly or quarterly distribution to clinics
5. to decide on required service statistics
6. to devise a plan for training all nurses and clerks in recordkeeping and reporting

FPLM assistance may be available for the design and implementation of a workshop on contraceptive logistics. A request for this assistance would be made through the A.I.D. office in Barbados.

### D. Storage

Consultants and PPU staff visited the Government Warehouse C40 where the Population Programme commodities are stored. A 1989 fire in the room where contraceptives were stored destroyed a large quantity of commodities, and rendered the room unfit for use. The PPU plans to return commodities to the original storeroom once the air conditioning unit has been replaced. The space in which the contraceptives are presently stored is in the main warehouse area, a large room in which a variety of medical equipment is stored. Drugs are stored on a separate floor which has air conditioning, shelving, and better security.

The PPU also stores contraceptives in its downtown office from which supplies are taken to the clinics. This area includes a former bank-type vault and additional space in the office, which is air conditioned during regular office hours.

Storage conditions were also observed at the three clinics visited. Observations and recommendations regarding all of the storage facilities follow.

1. C40 Warehouse, Chaguaramus

- a. Cartons of Lofemenal were not arranged in order of date of manufacture. There were manufacture dates 3/88, 9/88 and 4/89 stacked together. The bin cards do not record the date of manufacture and are filled only by quantities.

We recommend that all products be stacked according to date of manufacture, with the printed date visible. FEFO (first expiry-first out) should be implemented immediately and dates of manufacture should also be noted on bin cards.

- b. Physical inventories are not conducted regularly, and our physical count of Lofemenal did not match the quantity indicated on the bin card.

We recommend that physical inventories of all contraceptives be done at least every six months, and that quantities be reconciled on the bin cards. PPU staff should ensure that physical inventories are done.

- c. The present storage space is just adequate for the current stocks, which include only a minimal supply of condoms. Any additional stocks would require more space. Also, the present conditions are not appropriate for storage of condoms in particular. The warehouse becomes very hot and ventilation is poor. We recommend that for the present, condoms are stored only in the PPU office, several cartons at a time, until better storage can be arranged at C40.
- d. The separate space in which contraceptives were formerly stored is preferable to the current arrangement. Since funding for a replacement air conditioning unit appears to be a problem, we recommend installing ceiling fans to improve ventilation in that room, and moving the contraceptives back into it.

2. Population Programme Unit Office, Port of Spain

Contraceptives are stored at the PPU offices in a dry, well-ventilated space. For most products, no more than a one-month supply is kept in the PPU office. Staff stated that the room may become quite hot during the summer months when the air conditioning is turned off after-hours. The only other potential problem noted was the lack of security for the commodities. A low wall is expected to be built around the storage area; however, this would not prevent pilferage. Staff did not expect this to be a problem. Currently, separate bin cards are not maintained for the PPU storage area.

Products need to be secured adequately to discourage theft. Air conditioning or fans may be needed during off hours. As discussed above, there should be separate bin cards for the stocks stored at the PPU, as this functions as a separate storage facility.

### 3. Clinics

Cabinets are used to store contraceptives in the clinics. The main problem we observed was a shortage of space, which in some clinics would preclude storing more than a two month supply of condoms at any one time.

Additional storage space may be required in some clinics (in the form of additional cabinets), particularly if the PPU changes to a longer resupply period. Some clinics already have a 2 to 3 month supply on hand.

### E. Forecasting/ Procurement Process

Procurement of contraceptives at the central level is now done on an ad hoc basis. Estimation of yearly quantities needed for budget purposes is not based on actual distribution data from historical years. In one case, more than one million condoms were procured from the local WHO office although condoms had been ordered as a donation from FPATT, while certain types of pills, in particular a triphasic pill and a mini-pill, are not available from known donors. The consultants revised estimates of quantities needed for submission to the Ministry of Social Services and Family Welfare. The revised budget is in Appendix E.

The following recommendations pertain to forecasting and procurement of contraceptives:

- o Technical assistance in forecasting contraceptive use and identifying sources of supply could be provided by FPLM upon request to A.I.D./Washington. Proposed objectives of the forecasting and procurement activities would be:
  1. To estimate contraceptive requirements and a budget for the next five years
  2. To provide training to PPU staff in forecasting at the national level.
  3. To devise a plan for the PPU to procure contraceptives following the phaseout of supply from A.I.D.

Development of a five-year plan for contraceptives may be useful to the PPU in budget discussions with the Ministry. This plan would focus on budget requirements during and after phaseout of A.I.D. supply.

## 1F. Commodity Issues

Quantities of commodities other than condoms needed in 1992 and 1993 are limited to 7200 cycles of Lofemenal. This is a small quantity calculated by the CPT in order to bring stocks to the maximum level by the end of year. However, quantities of condoms needed are substantial, and beginning in 1994, budget requirements for other contraceptives should be expected to increase markedly. The depletion of stocks of IUDs and Lofemenal will occur during the same period of time as the phaseout of A.I.D. supply; therefore the Government will have to plan accordingly. We recommend that the Ministry of Social Development and Family Services convene a workshop to develop a more detailed plan for contraceptive needs after 1993, as discussed above in Section E.

### 1. Observations pertaining to supply status:

#### IUDs

The rate of IUD use is very low in the government program. One of the reasons for this low level of use is the lack of trained providers; most clinic sessions are staffed by nurses, who are forbidden to insert IUDs by Ministry of Health policy.

In 1990 the PPU requested FPATT for 14,000 IUDs, and a total of 16,000 Copper T 380a's were supplied by A.I.D. which included 2000 units for the FPATT. Of the total ordered for the PPU, only 4100 units were given by the FPATT to the Government Programme. The re-supply was to be done based on the actual usage data report from the PPU. However, the usage has been very low resulting in overstocking at the PPU and at FPATT. We estimate that there is an overstock of 3000 Copper T 380a's which are due to expire in October, 1993. We recommend that IPPF/WHR attempt to identify another FPA in the region to receive this overstock of IUDs and an additional overstock of 6400 at FPATT. The PPU and FPATT should determine the precise quantities for transfers to other FPAs.

#### Oral contraceptives

Currently mini-pills (progestin only) are not available in the family planning program. Ovrette can not be imported to Trinidad & Tobago due to import restrictions that require expiration dates to be printed on individual packets. The current supply of Lofemenal, a combined pill, is adequate through September, 1994. The Population Programme plans to procure a mini-pill via public tender if possible.

PPU staff also would like to re-introduce a triphasic pill to its programme. This type of combined pill would also require a public tender. Estimates of quantities required were included in the budget estimates for 1991 and 1992 that we prepared for the PPU. These estimates may be found in Appendix E.

## Spermicides

Conceptrol will no longer be available as a centrally procured product from AID. Quantity estimates of spermicides have been included in the budget prepared for the PPU, shown in Appendix E.

## Condoms

Currently, there are approximately 70,000 condoms in stock at C40, and FPATT is storing 1.2 million pieces for transfer to the NPP. Using the CPT estimate, 2.16 million condoms will be needed in 1992 to bring stocks to the maximum supply level by the end of the year. 1.6 million condoms will be required in 1993, again to bring stocks to the maximum level by end of year. We recommend that AID/ST/POP/CPSD provide as much of these quantities as possible so that Ministry funds may be used to procure items such as pills and spermicides.

## 2. Commodity Requirements and Contraceptive Procurement Tables for the NPP:

CPTs were prepared for the NPP for the following products: condoms, Lofemenal, Microlut, Copper Ts, Conceptrol. Current and past use estimates were based on NPP distribution data on quantities supplied to the clinics. Projections were based on trends; in most cases usage is expected to remain stable, with the exception of condoms which are being promoted for disease prevention. Trinidad has one of the highest incidence rates for AIDS in the Caribbean. Of the products available from A.I.D., only condoms will be required in substantial quantities: 2,160,000 in 1992 and 1,602,000 in 1993 in order to bring stocks to the maximum level by end of year. Two hundred Copper Ts and 7,200 cycles of Lofemenal will also be needed in 1993, according to the CPT calculation. We recommend that AID/ST/POP/CPSD supply the required quantities of condoms so that NPP resources can be used for other products that are not available through A.I.D. We note that the NPP procures and distributes Microlut rather than Ovrette because of recent importation laws that require expiration dates to be printed on packaging for pharmaceuticals.

The following product transfers are recommended between the two programs:

### from FPA to NPP:

- condoms: 1.2 million are due to be transferred. We recommend that this be done in stages, 15 cartons every two weeks until C40 is ready to receive condoms.
- Delfen foam: We recommend that FPATT offer 1000 cans for transfer to the NPP. FPATT has a surplus of this product.

from NPP to FPA:

- It is recommended that the FPATT and IPPF/WHR attempt to find a recipient for surplus Copper T stock at NPP and FPATT. If a recipient is identified, up to 3000 Copper T's would be transferred back to FPATT for shipment. Current usage at NPP is 200 units per year.

We examined the NPP and FPATT's share of the contraceptive market, based on these consumption estimates and a Target model projection from the 1987 Demographic and Health Survey by FPATT and Westinghouse. The results showing the market shares for condoms, IUDs, and pills are in Appendix G. For condoms, the NPP estimate is 28% of the total market, and the FPATT's is 19%. For IUDs, the NPP provides 4% of the total market and the FPATT provides 35%. For pills, only Lofemenal and Microlut were included, Lofemenal being the most important oral contraceptive for both programmes. Of the total pill market, the NPP accounts for 18% and FPATT for 5%.

Comparing these results to users' reported source of contraceptives in the 1987 DHS survey, the largest changes appear to be in the NPP's share of the IUD market, which dropped from 44% in 1987 to 4% in 1990; FPATT's share of the condom market, which increased from 11.5% to 19%; and the NPP's share of the total pill market, from 30.6% to 18%. None of these comparisons should be considered conclusive since they rely on two different sources of data, although they may point to some real trends that are occurring such as the reduction in IUD insertions in the Government programme.

A validation tool, CPTEST, was used to compare the CPT estimates to contraceptive prevalence projected from the 1987 DHS Report, using the Target Projection model. The results may be found in Appendix D. The CPTEST results show that total contraceptive prevalence for "modern" reversible methods, estimated to be 40.4% in 1990, compare to 13.3% prevalence from consumption estimated in the CPTs. Therefore, the CPT rates of consumption represent 32.8% of estimated prevalence for these methods. Total prevalence for "modern" reversible methods increases to 42.1% in 1994, and the proportion of this provided in the CPT consumption estimates range from 35% to 36%. We assume that the balance of the consumption, approximately 65% of prevalence, is provided by pharmacies and other private sources. In fact, the 1987 DHS showed that 49% to 62% of users of the various "supply" methods reported pharmacies and other private sources to be their source of supply.

The CPTEST also shows that prevalence for modern reversible methods is expected to increase by 0.4 percentage points per year between 1990 and 1994, and that prevalence from the CPT consumption estimates also increases by 0.4 percentage points per year. The CPT estimates appear to be very reasonable by comparison with the results of the Target projection.

#### IV. Family Planning Association of Trinidad & Tobago - CPTs

Estimates of current and future use of contraceptives were prepared and requirements were determined using the Contraceptive Procurement Tables (CPTs).

At the end of 1991, we estimate that there will be a fourteen month supply of condoms; a five year supply of Copper T 380a's, representing an overstock of 6400 IUD's; a three month supply of Lofemenal; and a three-year supply of Conceptrol. A draft shipping schedule is provided.

The FPATT has been instrumental in assisting the NPP in developing its reporting capacity, by requiring reports on the use of contraceptive products it donates to the NPP. FPATT staff offered to assist in the coordination of a system development workshop, as discussed in section III.3 of this report. FPATT staff are also interested in participating in any forecasting training that may take place with the National Population Programme.

Recommendations for the FPATT are:

1. There is an overstock of 6400 Copper T's, with an expiration date of October, 1994. It is recommended that IPPF/WHR assist in finding a recipient for these and the 3000 Copper T's stored at PPU, and that the final quantities for transfer be determined by the FPATT and the PPU.
2. The draft shipping schedule in Appendix F shows the quantities needed and recommended receipt dates. The FPATT will require 564,000 condoms in 1992 and 948,000 in 1993; 2,400 Copper Ts in 1993; 86,400 cycles of Lofemenal in 1992 and 44,400 cycles in 1993. There is currently a one-year surplus of Conceptrol, which is not in danger of expiry. However, Conceptrol will no longer be available to FPATT through the matching grant.
3. Stock cards in the FPATT storeroom should be reconciled promptly with deliveries; several discrepancies between quantities in stock and quantities recorded were found. In most cases, a backlog of recordkeeping was the cause of the discrepancy. FPATT should also ensure that thorough physical inventories are conducted at least semi-annually.
4. The FPATT should be contacted regarding the organization of a MIS/Inventory Control Workshop for the NPP (discussed in Section III.C). The capacity of the FPATT in administrative and logistical arrangements would be a significant contribution to such a workshop.
5. Future training in forecasting for NPP staff should also include FPATT staff.

V. Next Steps

A. Ordering Contraceptives

Quantities of contraceptives indicated in the CPTs and in the draft shipping schedule should be requested by the NPP to A.I.D.'s Regional Development Office in Barbados. The RDO would then make the request to AID/ST/POP/CPSD. This request should be made promptly, as there is a significant lead time in the processing of orders by AID/Washington, and the NPP is a new direct recipient of A.I.D. donated commodities.

B. MIS/Inventory System Workshop

A request for FPLM assistance in the design and implementation of a workshop on the NPP Logistics Management Information System and the Distribution and Inventory Control System may be made by the PPU through the A.I.D. Regional Development Office in Barbados. This workshop would involve all central PPU staff who implement any aspect of the distribution system, or who collect and use family planning data for management purposes.

C. Assessment of Automation Needs

A full assessment of the PPU's capacity and needs with regard to an automated logistics management information system for contraceptives could be made in conjunction with the MIS/Inventory System Workshop. This assessment should be specifically requested to A.I.D./Washington through the A.I.D. Regional Development Office in Barbados.

D. Training and technical assistance in forecasting and procurement

The training and technical assistance in forecasting and procurement recommended in Section III. E. would follow the Workshop on MIS and Inventory Control. At the appropriate time, the PPU may request this assistance from AID/Washington through the A.I.D. Regional Development Office in Barbados.

## APPENDICES

Appendix A	Persons Contacted
Appendix B	Report Forms
Appendix C	Contraceptive Procurement Tables
Appendix D	CPTests: Validation of Contraceptive Use Estimates
Appendix E	Estimated Quantity Requirements, 1991 and 1992 and Budget Requirements 1992
Appendix F	Draft Shipping Schedule for A.I.D. donated products
Appendix G	Market Shares for the NPP and FPATT

APPENDIX A  
PERSONS CONTACTED

**APPENDIX A  
PERSONS CONTACTED**

**National Population Programme**

**Population Programme Unit:**

Ms. Jacqueline Padmore, Acting Director  
Nurse Vernon, Population Programme Coordinator  
Mr. Paul Gomez, Supplies Coordinator  
Mr. Selwyn Ragoonan, Health Educator  
Mr. Stanley Applewhite, Statistician

**Couva Health Centre:**

Nurse Grace Thomas  
Stephanie Fraser Santan, Clerk

**Barataria Health Centre:**

Jacqueline Wong, District Health Visitor  
Bernadette Guissipi, District Health Visitor

**George Street Health Centre:**

Nurse Patino

**Ministry of Social Development and Family Services**

Ms. Joan Bishop, Director, Family Services

**Ministry of Health**

Dr. Glenda Maynard, Director, Clinical Services

**FPATT**

Ms. Donna Martinez, Acting Executive Director  
Mrs. Lorna Hussein, Financial Director  
Mr. Ricardo Cayones, Storekeeper

**APPENDIX B**  
**REPORT FORMS**

CLINIC SUPPLIES  
NATIONAL FAMILY PLANNING PROGRAMME  
MONTHLY REPORT FORM

CLINIC NAME .....

MONTH OF .....19....

CLINIC NUMBER .....

Item (1)	Unit (2)	Balance Last Month (3)	Received this Month (4)	Issued this Month (5)	Balance this Month (3)+(4)+(5)	MINIMUM BALANCE			Amount Requested (10)
						Large Cl. (7)	Medium Cl. (8)	Small Cl. (9)	
<b>ORAL CONTRACEPTIVES:</b>									
Gynovlar ... ..	Cycle					300	150	50	
Ovulen 50 ... ..	do.					200	50	50	
Eugynon ... ..	do.					200	100	50	
Neogynon ... ..	do.					300	150	50	
Other Oral Contraceptive (spe.)	do.					300	150	50	
<b>I. U. D.'s:</b>									
Size "D" ... ..	Each					50	30	20	
Size "C" ... ..	do.					50	30	20	
Inserters ... ..	Set					50	30	20	
<b>CREAMS AND FOAMS:</b>									
Delfen complete ... ..	Each					complete	48	24	
Delfen refill ... ..	do.					96			
Emko Complete ... ..	do.					complete	48	24	
Emko Refill ... ..	do.					96			
Orthogynol Complete ... ..	Tube					complete	48	24	
Orthogynol Refill ... ..						96			
Koromex A ... ..	do.					24	12	12	
Diaphragm: No. 85 ... ..	Each					5	3	2	
No. 80 ... ..	do.					8	3	2	
No. 75 ... ..	do.					10	3	2	
No. 70 ... ..	do.					10	3	2	
Condoms ... ..						2000	1000	500	
Other Contraceptives ... ..									
Dis. Gloves ... ..	Glove					300	100	50	
PAP Slides ... ..	Slide					500	200		
Scrapers (Spatulas) ... ..	Each					500	200		
Fixative ... ..						2	1		
New Case Cards ... ..						300	150	75	
Continuation Cards ... ..						150	100	50	
3-Part Cards (follow-up) ... ..						4	2	2	
Daily Register Pads ... ..						4	2	2	
Other (specify) ... ..									
Cytology Forms ... ..									
Transfer Slips ... ..									

Supplied by .....

11



**APPENDIX C**  
**CONTRACEPTIVE PROCUREMENT TABLES**

**CONTRACEPTIVE PROCUREMENT TABLES**

**NPP**

Country: Trinidad & Tobago  
 Recipient: National Population Programme  
 Product: 52mm Non Colored Sultan  
 Prepared by: S. Kumar/E. Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/02/91  
 Modified on: 07/12/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	2,033.0	840.1	640.1	1,200.1	1,202.1
2. Estimated Consumption					
(a) Use/Sales/ Distribution	1,240.0	1,400.0	1,600.0	1,600.0	1,600.0
(b) Transfer/Loss/ Disposal	953.7	-1,200.0			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	1,000.8				NA
4. End of Yr Stock	840.1	640.1	-959.9	-399.9	NA
5. Desired End of Year Stock	NA	NA	1,200.0	1,200.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	2,160.0	1,602.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	2,160.0	1,602.0	NA

1992 Minimum stock (months): 3 Maximum stock (months): 9  
 1993 Minimum stock (months): 3 Maximum stock (months): 9

Lead time (months): 1

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

Country: Trinidad & Tobago  
Recipient: National Population Programme  
Product: 52mm Non Colored Sultan  
Prepared by: S. Kumar/E. Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/02/91  
Modified on: 07/12/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

Stock records beginning in 1990 at the NPP.

2a. ESTIMATED USE Year: 1994

Use based on 80% of clinics reporting quantities dispensed to users.

2b. ESTIMATED LOSS Year: 1990

1,553,650 destroyed 9/90 due to fire damage in 1989. Condoms were tested locally and results were sent to IPPF. 600,000 were transferred including 360,000 from the FPA and 240,000 from CAREC.

2b. ESTIMATED LOSS Year: 1991

Transfer from the FPA.

22

Country: Trinidad & Tobago  
 Recipient: National Population Programme  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: S. Kumar/ E. Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/02/91  
 Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
	-----	-----	-----	-----	-----
1. Beginning Stock	337.0	340.0	250.0	157.0	70.2
2. Estimated Consumption					
(a) Use/Sales/ Distribution	87.0	90.0	93.0	94.0	94.0
(b) Transfer/Loss/ Disposal	-90.0				
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	340.0	250.0	157.0	63.0	NA
5. Desired End of Year Stock	NA	NA	70.5	70.5	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		7.2	NA
(b) Surplus	NA	NA	86.4		NA
7. Amount to Schedule	NA	NA		7.2	NA

1992 Minimum stock (months): 3 Maximum stock (months): 9  
 1993 Minimum stock (months): 3 Maximum stock (months): 9

Lead time (months): 1

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

23

Country: Trinidad & Tobago  
Recipient: National Population Programme  
Product: Lo-Femenal, Blue Lady  
Prepared by: S. Kumar/ E. Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/02/91  
Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

Stock figures from NPP beginning in 1990.  
Opening stock does not show 199,700 cycles that were destroyed  
sometime during 1989 or 1990 due to fire damage.

2a. ESTIMATED USE Year: 1994

Use figures based on 80% of clinics reporting.

2b. ESTIMATED LOSS Year: 1994

Transfers from the FPA.

Country: Trinidad & Tobago  
 Recipient: National Population Programme  
 Product: Copper T, 380  
 Prepared by: S.Kumar/E.Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/02/91  
 Modified on: 07/12/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
	-----	-----	-----	-----	-----
1. Beginning Stock	0.0	3.9	3.6	3.3	3.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	0.2	0.3	0.3	0.3	0.3
(b) Transfer/Loss/ Disposal	-4.1				3.0
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	3.9	3.6	3.3	3.0	NA
5. Desired End of Year Stock	NA	NA	0.2	3.2	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		0.2	NA
(b) Surplus	NA	NA	3.2		NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 9  
 1993 Minimum stock (months): 3 Maximum stock (months): 9  
 Lead time (months): 1

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

25

Country: Trinidad & Tobago  
Recipient: National Population Programme  
Product: Copper T, 380  
Prepared by: S.Kumar/E.Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/02/91  
Modified on: 07/12/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

Stock data from NPP records.

2a. ESTIMATED USE Year: 1994

Use data from clinic reports representing 80% of all clinics.

2b. ESTIMATED LOSS Year: 1990

Transfers from FPA.

2b. ESTIMATED LOSS Year: 1994

Current stock has expiry date of October 1993. 3000 units are expected to remain in stock at that time.

26

Country: Trinidad & Tobago  
 Recipient: National Population Programme  
 Product: Conceptrol Foaming Tablet  
 Prepared by: S.Kumar/E.Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/02/91  
 Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
	-----	-----	-----	-----	-----
. Beginning Stock	0.0	26.4	26.4	17.2	17.6
. Estimated Consumption					
(a) Use/Sales/ Distribution	36.0	36.0	38.0	38.0	38.0
(b) Transfer/Loss/ Disposal	-62.4	-36.0			
New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
. End of Yr Stock	26.4	26.4	-11.6	-20.8	NA
. Desired End of Year Stock	NA	NA	15.8	15.8	NA
. Net Situation					
(a) Quantity Needed	NA	NA	28.8	38.4	NA
(b) Surplus	NA	NA			NA
. Amount to Schedule	NA	NA	28.8	38.4	NA

992 Minimum stock (months): 2 Maximum stock (months): 5  
 993 Minimum stock (months): 2 Maximum stock (months): 5

Lead time (months): 1

\*\*\*\* S&T/POP/CPD records indicate that this recipient has never received this product before. USAID should cable S&T/POP/CPD to confirm product availability before ordering. \*\*\*\*

Country: Trinidad & Tobago  
Recipient: National Population Programme  
Product: Conceptrol Foaming Tablet  
Prepared by: S.Kumar/E.Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/02/91  
Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

NPP stock records.

a. ESTIMATED USE Year: 1994

Use based on 80% reporting from clinics.

b. ESTIMATED LOSS Year: 1994

Transfers from FPA.

c. ORDERS Year: 1992

This will have to be scheduled from another source. The program is centrally funded--A.I.D. will not supply.

d. ORDERS Year: 1993

This will have to be scheduled from another source. Centrally funded-A.I.D. will not supply.

28

Country: Trinidad & Tobago  
 Recipient: National Population Programme  
 Product: Microlut  
 Prepared by: S.Kumar/E.Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/02/91  
 Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	0.0	0.0	0.0	12.0	12.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution		30.0	30.0	30.0	30.0
(b) Transfer/Loss/ Disposal					
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources		13.0			NA
4. End of Yr Stock	0.0	0.0	-30.0	-18.0	NA
5. Desired End of Year Stock	NA	NA	12.5	12.5	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	42.0	30.0	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	42.0	30.0	NA

1992 Minimum stock (months): 2 Maximum stock (months): 5  
 1993 Minimum stock (months): 2 Maximum stock (months): 5

Lead time (months): 1

\*\*\*\* S&T/POP/CPSD records indicate that this product is not registered in country. Before ordering this product, USAID should cable S&T/POP/CPSD indicating that registration is either complete or not required. \*\*\*\*

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

29

Country: Trinidad & Tobago  
Recipient: National Population Programme  
Product: Microlut  
Prepared by: S.Kumar/E.Levin  
Modified by: Chovitz

Date: 07/22/91

Time: 11:14

Prepared on: 05/02/91

Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

. BEGINNING STOCK Year: 1990

Stock figures based on NPP records.

a. ESTIMATED USE Year: 1994

Estimated use based on availability of one-time purchase of 13,000 cycles. Additional data would be required to establish trends.

ORDERS Year: 1992

This will have to be scheduled from another source, as this product is not A.I.D.-supplied.

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Page - 2

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39

**CONTRACEPTIVE PROCUREMENT TABLES**

**FPATT**

131

Country: Trinidad & Tobago  
 Recipient: Family Planning Assn. of Trinidad/Tobago  
 Product: 52mm Non Colored, No Logo  
 Prepared by: Chovitz  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 12:07  
 Prepared on: 07/12/91  
 Modified on: 07/22/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
	-----	-----	-----	-----	-----
1. Beginning Stock	0.0	0.0	1,881.4	931.4	713.4
2. Estimated Consumption					
(a) Use/Sales/ Distribution	222.6	386.0	950.0	950.0	950.0
(b) Transfer/Loss/ Disposal		-995.4			
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA	1,272.0			NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	0.0	1,881.4	931.4	-18.6	NA
5. Desired End of Year Stock	NA	NA	712.5	712.5	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		732.0	NA
(b) Surplus	NA	NA	216.0		NA
7. Amount to Schedule	NA	NA		732.0	NA

1992 Minimum stock (months): 3 Maximum stock (months): 9  
 1993 Minimum stock (months): 3 Maximum stock (months): 9

Lead time (months): 1

-321

Country: Trinidad & Tobago  
Recipient: Family Planning Assn. of Trinidad/Tobago  
Product: 52mm Non Colored, No Logo  
Prepared by: Chovitz  
Modified by: Chovitz

Date: 07/22/91  
Time: 12:07  
Prepared on: 07/12/91  
Modified on: 07/22/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1990

52NX will replace 52NS (and 52CS). See 52NS CPT for BOYS information.  
At this time, no BOYS for 52NX is known to exist.

2a. ESTIMATED USE

Year: 1990

Use is based on FPA records on clinic and CBD use. Beginning in 1992,  
all condoms will be 52NX.

2a. ESTIMATED USE

Year: 1994

2b. ESTIMATED LOSS

Year: 1991

Transfer of remaining balance of 52NS, as 52NX will be only product  
offered in the future.

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Page - 2

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37

Country: Trinidad & Tobago  
 Recipient: Family Planning Assn. of Trinidad/Tobago  
 Product: 52mm Colored Sultan  
 Prepared by: S.Kumar/ E. Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 12:07  
 Prepared on: 05/01/91  
 Modified on: 07/22/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	72.6	563.7	0.0	0.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	647.7	563.7			
(b) Transfer/Loss/ Disposal	361.2				
3. New Supply					
(a) AID Shipments Received	1,500.0			NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	563.7	0.0	0.0	0.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3    Maximum stock (months): 15  
 1993 Minimum stock (months): 3    Maximum stock (months): 15

Lead time (months): 1

34

Country: Trinidad & Tobago  
Recipient: Family Planning Assn. of Trinidad/Tobago  
Product: 52mm Colored Sultan  
Prepared by: S.Kumar/ E. Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 12:07  
Prepared on: 05/01/91  
Modified on: 07/22/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK

Year: 1990

FPA stock records.

2a. ESTIMATED USE

Year: 1994

FPA records on clinic and CBD use.

2b. ESTIMATED LOSS

Year: 1990

Transfer to government program. Incoming transfer in 1990.

35

Country: Trinidad & Tobago  
 Recipient: Family Planning Assn. of Trinidad/Tobago  
 Product: 52mm Non Colored Sultan  
 Prepared by: S.Kumar/E.Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 12:10  
 Prepared on: 05/01/91  
 Modified on: 07/22/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
	-----	-----	-----	-----	-----
1. Beginning Stock	196.4	2,195.4	0.0	0.0	0.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution					
(b) Transfer/Loss/ Disposal		2,195.4			
3. New Supply					
(a) AID Shipments Received	1,998.0			NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources	1.0				NA
4. End of Yr Stock	2,195.4	0.0	0.0	0.0	NA
5. Desired End of Year Stock	NA	NA			NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 3 Maximum stock (months): 9  
 1993 Minimum stock (months): 3 Maximum stock (months): 9  
 Lead time (months): 1

2/6

Country: Trinidad & Tobago  
Recipient: Family Planning Assn. of Trinidad/Tobago  
Product: 52mm Non Colored Sultan  
Prepared by: S.Kumar/E.Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 12:10  
Prepared on: 05/01/91  
Modified on: 07/22/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

BOY stocks come from FPA stock records.

2a. ESTIMATED USE Year: 1994

FPA records on clinic and CBD use. Beginning in 1992, all condoms will be 52NX.

2b. ESTIMATED LOSS Year: 1991

1,200,000 to be transferred to NPP. 995,400 transferred to 52NX, as 52NX will be only product offered.

3c. SHIPMENTS FROM OTHER SOURCES Year: 1990

Returned to FPAT from an unknown source.

37

Country: Trinidad & Tobago  
 Recipient: Family Planning Assn. of Trinidad/Tobago  
 Product: Lo-Femenal, Blue Lady  
 Prepared by: S.Kumar/E. Levin  
 Modified by: S.Kumar/E. Levin

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/01/91  
 Modified on: 05/01/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
	-----	-----	-----	-----	-----
1. Beginning Stock	169.7	46.2	10.2	56.6	56.0
2. Estimated Consumption					
(a) Use/Sales/ Distribution	33.5	36.0	40.0	45.0	45.0
(b) Transfer/Loss/ Disposal	90.0				
3. New Supply					
(a) AID Shipments Received				NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	46.2	10.2	-29.8	11.6	NA
5. Desired End of Year Stock	NA	NA	56.3	56.3	NA
6. Net Situation					
(a) Quantity Needed	NA	NA	86.4	44.4	NA
(b) Surplus	NA	NA			NA
7. Amount to Schedule	NA	NA	86.4	44.4	NA

1992 Minimum stock (months): 3 Maximum stock (months): 15  
 1993 Minimum stock (months): 3 Maximum stock (months): 15  
 Lead time (months): 1

Country: Trinidad & Tobago  
Recipient: Family Planning Assn. of Trinidad/Tobago  
Product: Lo-Femenal, Blue Lady  
Prepared by: S.Kumar/E. Levin  
Modified by: S.Kumar/E. Levin

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/01/91  
Modified on: 05/01/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

Stock data from FPA stock records.

2a. ESTIMATED USE Year: 1994

Use from records of clinic and CBD dispensed to user data.

2b. ESTIMATED LOSS Year: 1994

Transfers to government population program.

7. ORDERS Year: 1992

IPPF plans to request the first shipment of 50,000 for receipt in December, 1991.

- 31

Country: Trinidad & Tobago  
 Recipient: Family Planning Assn. of Trinidad/Tobago  
 Product: Copper T, 380  
 Prepared by: S.Kumar/E.Levin  
 Modified by: S.Kumar/E.Levin

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/01/91  
 Modified on: 05/01/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	1.4	11.6	9.9	8.2	8.8
2. Estimated Consumption					
(a) Use/Sales/ Distribution	1.6	1.7	1.7	1.8	1.8
(b) Transfer/Loss/ Disposal	4.2				6.4
3. New Supply					
(a) AID Shipments Received	16.0			NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	11.6	9.9	8.2	6.4	NA
5. Desired End of Year Stock	NA	NA	2.3	8.7	NA
6. Net Situation					
(a) Quantity Needed	NA	NA		2.4	NA
(b) Surplus	NA	NA	6.0		NA
7. Amount to Schedule	NA	NA		2.4	NA

1992 Minimum stock (months): 3 Maximum stock (months): 15  
 1993 Minimum stock (months): 3 Maximum stock (months): 15

Lead time (months): 1

110

Country: Trinidad & Tobago  
Recipient: Family Planning Assn. of Trinidad/Tobago  
Product: Copper T, 380  
Prepared by: S.Kumar/E.Levin  
Modified by: S.Kumar/E.Levin

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/01/91  
Modified on: 05/01/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

FPA Stock records

2a. ESTIMATED USE Year: 1994

Use is based on clinic and CBD use. Future use based on phaseout of Lippes Loops.

2b. ESTIMATED LOSS Year: 1990

Transfers to government population program in 1990, plus 126 units transferred to private doctors.

2b. ESTIMATED LOSS Year: 1994

Losses expected due to expired product in October 1993.

41

Country: Trinidad & Tobago  
 Recipient: Family Planning Assn. of Trinidad/Tobago  
 Product: Conceptrol Foaming Tablet  
 Prepared by: S.Kumar/ E. Levin  
 Modified by: Chovitz

Date: 07/22/91  
 Time: 11:14  
 Prepared on: 05/01/91  
 Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate (1,000's)

	CY1990 Actual	CY1991 Actual	CY1992 Est	CY1993 Est	CY1994 Est
1. Beginning Stock	63.0	250.8	162.8	110.8	58.8
2. Estimated Consumption					
(a) Use/Sales/ Distribution	52.2	52.0	52.0	52.0	52.0
(b) Transfer/Loss/ Disposal	62.4	36.0			
3. New Supply					
(a) AID Shipments Received	302.4			NA	NA
(b) Future AID Shipments	NA				NA
(c) Shipments from Other Sources					NA
4. End of Yr Stock	250.8	162.8	110.8	58.8	NA
5. Desired End of Year Stock	NA	NA	52.0	52.0	NA
6. Net Situation					
(a) Quantity Needed	NA	NA			NA
(b) Surplus	NA	NA	57.6	4.8	NA
7. Amount to Schedule	NA	NA			NA

1992 Minimum stock (months): 6 Maximum stock (months): 12  
 1993 Minimum stock (months): 6 Maximum stock (months): 12

Lead time (months): 1

48

Country: Trinidad & Tobago  
Recipient: Family Planning Assn. of Trinidad/Tobago  
Product: Conceptrol Foaming Tablet  
Prepared by: S.Kumar/ E. Levin  
Modified by: Chovitz

Date: 07/22/91  
Time: 11:14  
Prepared on: 05/01/91  
Modified on: 07/15/91

CY1992 Contraceptive Requirements Estimate  
Footnotes

1. BEGINNING STOCK Year: 1990

FPA stock records.

2a. ESTIMATED USE Year: 1990

Use is projected at the same level as 1990 because the product will no longer be available through IPPF.

2a. ESTIMATED USE Year: 1994

FPA records on clinic use and CBD use. Future use based on recent trends.

2b. ESTIMATED LOSS Year: 1994

Transfers to government program.

47

**APPENDIX D**

**CPTTESTS: VALIDATION OF CONTRACEPTIVE USE ESTIMATES**

CPTests 1 and 5  
 All Figures are in 1,000s

Method	Product	Actual			Projected	
		1990	1991	1992	1993	1994
CONDOM	52CS	647.7	563.7	.0	.0	.0
	52NS	1,240.0	1,400.0	1,600.0	1,600.0	1,600.0
	52NX	222.6	386.0	950.0	950.0	950.0
	CPT Use	2,110.3	2,349.7	2,550.0	2,550.0	2,550.0
	Proj. Use % CPT/Proj	4,424.6 47.7	4,504.1 52.2	4,583.7 55.6	4,436.4 57.5	4,518.5 56.4
IUD	CT38	1.8	2.0	2.0	2.1	2.1
	CPT Use	1.8	2.0	2.0	2.1	2.1
	Proj. Use % CPT/Proj	8.9 20.2	4.6 43.3	5.1 39.1	3.9 53.6	5.3 39.9
DRALS	LFMP	120.5	126.0	133.0	139.0	139.0
	MCLT	.0	30.0	30.0	30.0	30.0
	CPT Use	120.5	156.0	163.0	169.0	169.0
	Proj. Use % CPT/Proj	622.3 19.4	642.1 24.3	662.3 24.6	649.6 26.0	665.9 25.4
VFT	VFTP	88.2	88.0	90.0	90.0	90.0
	CPT Use	88.2	88.0	90.0	90.0	90.0
	Proj. Use % CPT/Proj	1,802.6 4.9	1,868.4 4.7	1,935.3 4.7	1,906.0 4.7	1,941.3 4.6
Total CYPs		43.4	47.7	49.6	49.6	49.3
<hr/>						
	WRA 15 - 49	345.0	351.2	357.4	345.9	352.3
	% Sexually Active	95.0	95.0	95.0	95.0	95.0
	Sexually Active WRA	327.8	333.6	339.5	328.6	334.7
	Total Prevalence	55.3	56.2	57.0	57.7	58.5
	Prevalence of Steril.	9.9	10.3	10.5	10.7	11.1
	No-supply Prevalence	5.0	5.1	5.1	5.2	5.3
<hr/>						
	Maximum Prevalence of Modern Methods	40.4	40.8	41.4	41.8	42.1
	Prevalence from CPTs	13.3	14.3	14.6	15.1	14.7
	% CPT/MMM	32.8	35.1	35.3	36.1	35.0

45

CPTests 1 and 5

Average Prevalence Increase Per Year

Total Prevalence	0.8
Sterilization	0.3
No-supply Methods	0.1
Modern Reversible Methods	0.4
CPT Prevalence	0.4

Parameters Used in CPTests 1 and 5

	1990	1991	1992	1993	1994
<b>Prevalence Figures</b>					
Condoms	13.5	13.5	13.5	13.5	13.5
IUDs	6.0	6.1	6.3	6.4	6.6
Orals	14.6	14.8	15.0	15.2	15.3
VFTs	5.5	5.6	5.7	5.8	5.8
Other Mod Meth	0.8	0.8	0.9	0.9	0.9
Sterilization	9.9	10.3	10.5	10.7	11.1
No-supply	5.0	5.1	5.1	5.2	5.3
<b>Total</b>	<b>55.3</b>	<b>56.2</b>	<b>57.0</b>	<b>57.7</b>	<b>58.5</b>

CYP conversions per unit of method

CONDOM	0.0100
CONDOS	0.0100
FRT	0.0000
IMPLNT	3.5000
INJ-2	0.1667
INJ-3	0.2500
ORAL-P	0.0769
ORAL-S	0.0769
ORAL-X	0.0769
VFT	0.0100

Continuation rate for IUDs

Rate 80.0

\*\*\*\*\* The parameter figures have been changed in the field \*\*\*\*\*

46

**APPENDIX E**

**ESTIMATED QUANTITY REQUIREMENTS, 1991 AND 1992  
AND BUDGET REQUIREMENTS 1992**

ESTIMATED COMMODITY REQUIREMENTS FOR PROCUREMENT  
 NATIONAL POPULATION PROGRAMME  
 GOVERNMENT OF TRINIDAD & TOBAGO

<u>Product</u>	<u>Est. Quantity for Receipt in 1991</u>	<u>Total Cost 1991 (TT)</u>	<u>Est. Quantity for Receipt in 1992</u>
condoms	1,200,000	donation from FPA	2,160,000
<b>Oral contraceptives:</b>			
Combined Pill (Lofemenal)	0	0	0
Minipill (Microlut)	20,000	34,000	22,000
Triphasic	10,000	19,000	(based on 1991 usage)
Foaming Tabs (Conceptrol)	36,000	donation(FPA)	25,000
Diaphragms	500	27,600	(based on 1991 usage)
Cream	500 complete 500 refill	16,232.25 , 12,673.00	

**(Note: Recommendation is for an initial purchase of 100 diaphragms and 200 tubes of cream. Usage rates should be closely monitored prior to additional purchase.)**

Foam	1000 cans	possible donation from FPA
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TOTAL ESTIMATED COST FOR 1991 ----- 126,505.25  
 (TT Dollars)

45

**APPENDIX F**

**DRAFT SHIPPING SCHEDULE FOR A.I.D. DONATED PRODUCTS**

PROPOSED SHIPPING SCHEDULE FOR NATIONAL POPULATION PROGRAMME  
GOVERNMENT OF TRINIDAD & TOBAGO  
Source: AID

<u>Product</u>	<u>Approx. Ship Date</u>	<u>Receipt Date</u>	<u>Quantity</u>
52mm NoLogo condom	12/16/91	1/15/92	1,152,000
52mm NoLogo condom	8/16/92	9/15/92	1,008,000
52mm NoLogo condom	5/16/93	6/15/93	804,000
52mm NoLogo condom	11/15/93	2/15/93	798,000

**APPENDIX G**  
**MARKET SHARES FOR THE NPP AND FPATT**

TRINIDAD & TOBAGO  
 MARKET SHARE FOR GOVERNMENT AND FPATT  
 BASED ON 1990 CONSUMPTION IN 1992 CPTS  
 AND COMPARISON WITH 1987 SURVEY RESULTS

PRODUCT	CPT CONSUMPTION (000)		% FPATT*	% TOTAL	TOTAL MKT FOR METHOD**	GOVT		FPATT		COMPARISON: 1987 DHS SURVEY RESULTS	
	GOVT	%				% TOTAL MKT	% TOTAL MKT	GOVT	FPATT		
Condom	1240	59%	870.3	41%	2110.3	4504	28%	19%	28.7%	11.5%	
IUD	0.2	11%	1.6	89%	1.8	4.6	4%	35%	43.8%	32.2%	
Lofem	87	72%	33.5	28%	120.5	642	14%	5%			
Microlut	30										
TOTAL PILL	117	78%	33.5	22%	150.5	642	18%	5%	30.6%	7.2%	

\* FPATT includes CBD use

\*\* TOTAL MKT FOR METHOD is based on Target Model projection from 1987 DHS survey

\*\*\*\* Source of contraceptives: Percent of users of each method reporting FPATT or Government clinics

57