A boost for family planning

In Ghana, pharmacists and sellers of non-prescription medicines are distributing contraceptives and giving family planning advice within the framework of a demonstration programme which, it is hoped, will lead to a significant improvement in the health of rural populations.

Ghana’s network of 500 retail pharmacists and 2500 private-sector chemical sellers is being used in a demonstration programme to distribute contraceptives to rural populations and counsel couples about family planning. Women are being encouraged to space their pregnancies so as to benefit their health and that of their children, and clients are being referred to clinics and physicians as necessary, particularly when undesirable side-effects of the contraceptive pill become evident.

The chemical sellers are a supportive group in the delivery of non-prescription medicinal products, such as antimalarials, antipyretic analgesics, and germicides. Government-registered, they have at least the primary school leaving certificate. A survey revealed that the chemical sellers, even although not legally permitted to dispense ethical pharmaceuticals, were already distributing contraceptive pills. Clients were appreciative of the services offered, particularly where clinics were a long way from their homes. It was observed that chemical sellers had acquired some knowledge of contraceptive products.

The aim of the demonstration programme is to train chemical sellers to improve their services, to offer continuing education in family planning to pharmacists, and to motivate them to take an interest in this field. Research is being undertaken to evaluate whether chemical sellers can reliably screen and counsel potential pill users, i.e., whether women obtaining pills through chemical sellers can take the pill as safely as those obtaining it from health clinics. Evaluation should indicate whether the pill can be dispensed without prescription. When the five-year programme has been completed an assessment will be made as to whether the objectives of increased contraceptive use and reduced maternal and infant mortality have been achieved. If this proves to be the case, the law will be changed in order that the hormonal pill can be distributed without prescription.

**Training**

The first phase of the training programme for retail pharmacists and chemical sellers has involved the development of a manual and the design and testing of a poster providing information for retailers and the public on the screening criteria for oral
contraceptive use. The poster is displayed conspicuously in all retail shops. The manual and poster were developed after intensive interaction with retailers and consumers.

The second phase, in which the training materials were pre-tested, involved focus groups, each comprising ten salesmen, ten distributors and five trainers. The groups tested the clarity and effectiveness of the training materials and of the trainers’ presentations. The first group of ten salesmen who were responsible for delivering products to regional depots and retail outlets benefited from in-service instruction so that they could convey to retailers accurate information on the proper use, storage and inventory management of the products. The second and third groups consisted of representative samples of retail pharmacists and chemical sellers and the trainers. Inputs from these two groups provided information on their respective retail perceptions and insights into special training needs.

The third phase involved the formal training of the retailers. Conducted in all ten regional capitals, it began in 1986 and was extended further afield in 1987. By the end of March 1988 all retailers had received training. The retailers were taught about the reproductive system and were then introduced to contraceptive social marketing programmes. Instruction was given on the composition, mode of action, side-effects, advantages and disadvantages of the contraceptive pill. The use of condoms, vaginal foaming tablets, and other methods was explained. Lessons were given in inventory management to enable proper storage and stock control to be achieved, and less detailed information was given on sterilization, implants, injectables, intrauterine devices, and natural methods of contraception. This and the succeeding

phase involve 100 nurse/midwives and 600 private doctors.

The final phase consists of nationwide monitoring and evaluation to determine whether the oral hormonal contraceptive pill can be safely distributed without prescription by retail pharmacists and chemical sellers.

The three products marketed are low-dose hormonal pills with very minor side-effects, condoms and vaginal foaming tablets.

The vehicles and the computer used in the programme are provided by the United States Agency for International Development. The programme is also aiming to distribute oral rehydration salts and nutritional supplements.

**Evaluation**

Consumer intercept studies will be conducted periodically to learn about contraceptive awareness and usage by clients of pharmacies and chemical sellers. Any problems reported with oral contraceptives will be carefully investigated. Periodically, retailers will be asked about their knowledge of contraindications for contraceptive use, side-effects, and

![Box: It is intended that the training of retailers will result in heightened public awareness about the choices in family planning.](image)

problems reported by customers using oral contraceptives. In-pack coupons will solicit information on side-effects of pills. Finally, periodic interviews of a sample of pill users will be conducted in order to assess health
status and the development of side-effects in the long term.

By November 1987, stocks that had been expected to last until April 1988 were almost exhausted. A survey has shown that this was partly due to vigorous advertising in favour of family planning and against the spread of AIDS. Sales records also indicate that pill usage has increased. Furthermore, the private sector programme has boosted the national family planning programme being conducted in the public sector.

The focus on pharmacists and chemical sellers has generated an awareness of their potential as distributors of primary health care products. Chemical sellers are now confident of their ability to work in this area and to interact with other health professionals. By prepackaging the products in Ghana the programme has created job opportunities.

It is intended that the training of retailers will result in heightened public awareness about the choices in family planning and that it will increase the availability of accurate information on appropriate and safe contraceptive products. This would significantly help to improve the health and welfare of the population. It is also hoped that the law will be amended to allow a wider distribution of contraceptive products.

**Intrauterine devices against contraception**

A Scientific Group convened by WHO considered the intrauterine device (IUD) to be an important method of fertility regulation with high continuation rates and significant advantages in convenience of use. The newer copper-releasing devices are comparable to oral contraception in terms of safety and efficacy, and the use of IUDs in both developed and developing countries should continue to be supported as a reliable and safe method of reversible fertility regulation.

In view of the findings regarding pregnancy rates and since the newer copper-releasing devices also tend to have lower expulsion rates than the plastic and steel ring devices, and as a result, have higher overall continuation rates, the Scientific Group recommends that as supplies or current stocks of the latter devices are exhausted, they should be replaced by the more effective copper-releasing IUDs.