



### Spotlight — Morocco

## Private Sector Moroccan Physicians Working Together

GROUP PRACTICES EXPAND ACCESS TO REPRODUCTIVE HEALTH FOR FAMILIES IN MOROCCO

In Morocco, CMS is working to expand the delivery of reproductive and family health services in the offices of private general practitioners (GPs). Currently, the role of the general practitioners is limited; most Moroccan women go to a public family planning clinic or to a private OB/GYN for this type of care. CMS is helping Moroccan GPs develop and promote group practices of "Family Health Providers" who offer quality health services, including family planning.

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# NEW DIRECTIONS

IN REPRODUCTIVE HEALTH

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## From the Director

As we enter the third year of the Commercial Market Strategies (CMS) project our goal is to remain innovative and to document our results. At this half way point we are finally able to see the impact of many of our start-up initiatives. Our consortium members bring particular strengths to the CMS project. Of note is PSI's work in social marketing, The Meridian Group's work in corporate social responsibility, Abt Associates' work in research and policy, and Deloitte's work in healthcare financing, NGO sustainability and the overall management of the project.

We've broadened our work beyond social marketing. Our multi-faceted program in Morocco is highlighted in this issue of *New Directions*—you'll learn how we are helping to develop networks of private general practitioners in that country. We also work with the Summa Foundation, a not-for-profit organization that provides financing and technical assistance to the private and commercial health sector in developing countries. Summa had a very fruitful year in 2000 with the approval of several investments. The initial implementation of one of these investments, targeting Ugandan Midwives, has been very successful.

CMS works in over 20 countries, so the following pages merely highlight some of our dynamic programs. As our projects grow and results from our research in the field are analyzed we will be publishing more of our findings. In the interim, I hope you will enjoy this second issue of our quarterly newsletter. For more information about Commercial Market Strategies please visit our web site at [www.cmsproject.com](http://www.cmsproject.com). I welcome your comments and suggestions for topics in upcoming issues of *New Directions*.

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## Fighting Malaria in Uganda

COMMERCIAL MARKET STRATEGIES LAUNCHES “SMARTNET” INSECTICIDE TREATED BED NETS IN UGANDA

On December 7th, 2000, Commercial Market Strategies launched its attack on malaria by introducing the revolutionary new *SmartNet*. Pre-treated with a biodegradable insecticide derived from chrysanthemums, the net is able to withstand up to 22 washes (washing is recommended once every three months). According to the WHO, the use of insecticide treated bed nets can lower overall childhood mortality by 15 to 35 percent. Bed nets are an inexpensive and effective method to reduce deaths, improve health and promote economic development. *SmartNet* is the first product of its kind to be social marketed anywhere in the world.

The December launch brought together over 100 participants — diplomats, donors, NGOs, government officials, journalists, manufacturers, distributors and advertisers — for the first large-scale malaria prevention effort in Uganda.

A traditional dance performance and a lively quiz show were among just a few of the colorful and entertaining activities of the day. There were also speeches from USAID representatives and the Ugandan Ministry Commissioner for National Disease Control. But the main event of the day was the sale of the first three *SmartNets* to visiting dignitaries. Following these initial purchases sales were brisk — over 300 nets sold in just a few hours. With continued support from USAID and UNICEF, CMS will distribute *SmartNets* in six districts of Uganda in the coming months. For more information about the CMS Uganda country program please contact Elizabeth Gardiner at [egardiner.cmsug@infocom.co.ug](mailto:egardiner.cmsug@infocom.co.ug).

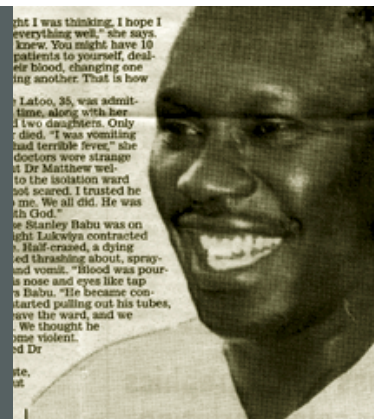


- 1 Don Brady, acting USAID Mission Director, addresses the crowd at the *SmartNet* launch in Kampala.
- 2 Insecticide treated *SmartNet* bed nets on display at the December 7 launch.

## In Memory

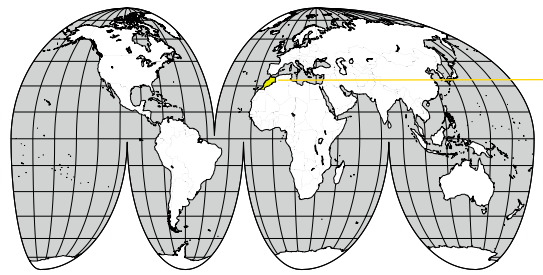
DR. MATTHEW LUKWIYA

It is with great sadness that we report the death of our colleague and friend, Dr Matthew Lukwiya. Dr Lukwiya was the Medical Supervisor of Lacor Hospital in Northern Uganda and a chief counterpart for the Mothers Uplifting Child Health (MUCH) project. Dr Lukwiya was heroic in his work to contain the outbreak of Ebola in Northern Uganda. It is a tremendous loss to the people of the Gulu province that he lost his own life to the Ebola virus in this most recent and deadly outbreak. Our deepest condolences go to his family.



*Dr Matthew Lukwiya, from his January 11 obituary in The New Vision (Uganda): "Despite the risk, Lukwiya did what was needed."*





## Spotlight – Morocco



### Private Sector Moroccan Physicians Working Together *(continued from front cover)*

GROUP PRACTICES EXPAND ACCESS TO REPRODUCTIVE HEALTH FOR FAMILIES IN MOROCCO

To demonstrate the effectiveness of private provider networks, CMS organized two study tours for Moroccan doctors and health officials. The first study tour was in the early fall of 2000 and the participants travelled to Washington DC, Montreal, Canada, and Bolivia. In Washington DC, the participants visited the Agency for Health Research and Quality, the Academy of Family Physicians, Columbia Hospital for Women and the Health Care Financing Administration. In Montreal they met with the Quebec College of Physicians, the University of Montreal Faculty of Medicine and the Federation of Private General Practitioners. In Bolivia, the group toured the PROSALUD headquarters in Santa Cruz as well as regional PROSALUD offices in La Paz and other areas. PROSALUD, a non-profit organization formed by a public-private partnership in 1985, is a successful model of an innovative network of high-quality, low-cost, client-focused clinics. While in Bolivia they also met with Dr Victor Hugo Parada, President of the Medical College and with Guillermo Cuentas, the Minister of Health.



The second study tour was to Pakistan. Participants on this tour visited Green Star social marketing sites and met with participants from all technical levels of the program. Green Star is an effective network of healthcare providers who are trained in contraceptive methods and who receive subsidized products to ensure that family planning services are offered at affordable prices. While in Pakistan, the study tour participants observed a community-based *Mohalla* (neighborhood) promotion session and met with various Green Star providers (GPs, pharmacists and paramedics).

A study tour wrap-up session was held in Rabat on November 18 (a national holiday). Over 60 study tour participants discussed their observations regarding the structure of group practices and healthcare networks in other parts of the world and how lessons learned could be applied to the Moroccan context. CMS Deputy Director, Dr Carlos Cuellar, gave a presentation outlining the highlights of the PROSALUD model in Bolivia. Also in attendance were representatives from USAID and the Moroccan Ministry of Health.

To complement the group practice initiatives and strengthen private general practitioners, CMS published the first GPs bulletin (focusing on reproductive health needs and products) and is developing a family health training program and quality assurance mechanisms. CMS will promote the Family Health Practitioners with a Mobile Video Unit, community health workers and “open door” sessions with local doctors. Concurrently, a CMS policy team is working to assess the regulations affecting the formation and promotion of provider networks. Based on this assessment, CMS will develop a campaign to increase awareness of the availability of these new private sector services.

For more information about the CMS country program in Morocco please contact Dr Mohamed Ktiri at [mktiri@cms.org.ma](mailto:mktiri@cms.org.ma).

- 1 Women in Marrakesh: the average Moroccan woman has three children.
- 2 The CMS Morocco delegation in front of a Green Star clinic in Karachi.



Country Name: Kingdom of Morocco  
 Population: 28.8 million (mid-2000 estimate)\*  
 Capital: Rabat  
 Area Comparative: Slightly larger than California  
 GNP per Capita: \$1,240 (USD, 1998)\*  
 Infant Mortality Rate: 37 per 1,000\*  
 Maternal Mortality Ratio: 332 per 100,000 (1992)\*\*  
 Contraceptive Prevalence Rate: (any method, married women) 59\*  
 Percent of Births at High Risk: 61.3\*\*

Source:  
 \* Population Reference Bureau: 2000 World Population Data Sheet  
 \*\* Morocco 1995: Demographic and Health Survey, Macro International

## Biosel Success Develops the Commercial Sector

Eleven years ago, dehydration caused by diarrhea was the primary killer of Moroccan children under five years old. As part of a national effort to fight this problem and improve overall child health, Population Services International began selling *Biosel* oral rehydration salts (ORS). The program, implemented by CMS since 1999, contributed to a dramatic decrease in the under-five mortality rate: from 112/1000 in 1990 to 53/1000 in 1999.<sup>1</sup> In poor rural areas, however, death due to dehydration



is still a problem. So, in addition to mass media advertising, CMS uses an innovative Mobile Video Unit (a van with a large-screen TV) to reach the most remote areas, promote the salts, and educate the community about diarrhea prevention and oral rehydration therapy.

Increased sales have allowed the manufacturer, Cooper Maroc, to set up a production line exclusive to the manufacture of ORS, ensuring a regular supply. The success of *Biosel* has developed the entire market for oral rehydration salts and made it feasible for Cooper Maroc to resurrect its own brand of ORS, *Diarit*.



The CMS Mobile Video Unit distributing oral rehydration salts and providing health information in Morocco.

## The Al Hilal Line of Contraceptives

Sales of this popular group of contraceptives, which includes pills, IUDs and injectables, are continuing to increase and dominate the private sector market in Morocco. Each method is supported by a combination of advertising, promotion, training and public relations activities — both individually and together through the “*Al Hilal* choice” campaign. CMS negotiates agreements with each of the manufacturers, usually stipulating that five percent of sales revenues be returned to an advertising and promotion fund. Additionally, CMS provides research-guided inputs on the creation of advertising as well as technical assistance with social marketing.



This brochure promoting the Al Hilal line of contraceptives builds brand recognition.

## Fortified Food Promotional Campaign

CMS is working with the Moroccan Millers Association in an effort to promote the consumption of enriched foods (specifically fortified flour). CMS has already conducted market research on people’s food habits which has led toward the start up of the campaign, including the development of a logo and a marketing strategy. As part of this commercial partnership, the Millers Association will promote the enriched foods using materials and messages developed by CMS. The new campaign and introduction of the fortified flour is expected to launch in the late spring or early summer of 2001.



<sup>1</sup> Source: UNICEF, State of the World’s Children (1992, 2001)



## A Technical Advisory Group Session on Health Financing Alternatives

The first CMS Technical Advisory Group (TAG) session was held on September 13th, 2000, in Washington DC. The subject of the TAG was health financing. In attendance was a panel of experts from the commercial and private sector from Africa, Latin America and the US as well as key CMS project personnel and representatives from USAID/Washington's office of Population Health and Nutrition.

Opening remarks from USAID/PHN Global Bureau Director, Duff Gillespie, and guidance from moderator Rich Feeley helped to steer the day's discussion. The panel concluded that private health insurance mechanisms could reach USAID target populations in developing countries, particularly in Africa and Asia. Another conclusion from the TAG was that risk pooling has the potential to improve access to healthcare and reduce impoverishment due to the costs of disease. In addition, the panel found that including primary and reproductive healthcare coverage helps to retain enrollees in an insurance plan because they receive tangible benefits even when they do not suffer from illness. For a printed or electronic copy of the TAG summary please contact Christine Préfontaine at [cprefontaine@cmsproject.com](mailto:cprefontaine@cmsproject.com).

*A poster promoting the CMS Health Financing Alternatives Technical Advisory Group held in September 2000.*

## NGO Sustainability — Senegal

In late November, Commercial Market Strategies sent a three-person team to Senegal to conduct a sustainability assessment and assist in the development of an operational plan for ADEMAs, the local NGO working with CMS in Dakar. CMS/ADEMAs social market the *Protec* condom, focusing on both family planning and STI/AIDS prevention. Improving governance, financial management, and strategic business planning were key areas of the assessment and the resulting recommendations.

The CMS team recommended that ADEMAs expand its membership to include all segments of Senegalese society and strengthen links to the community. Working to improve ADEMAs's financial and reporting systems, CMS installed accounting software and provided practical, hands-on training. One of the main areas of discussion was strategic business management. The CMS team identified ADEMAs's good reputation, existing relationships, and support from government and other donor agencies as one of the organization's primary strengths. A strategic planning exercise involving a broad range of stakeholders was recommended to further explore, identify, and leverage these assets in order to strengthen ADEMAs's financial and operational sustainability.

## Healthcare Networks — Nicaragua

WE'RE ALMOST THERE!

One of our most exciting CMS programs is the construction of health clinics in Hurricane Mitch-affected areas of Nicaragua. The initial phase of construction is near completion and we plan to open the first clinic in early March. Clinic services will include OB/GYN, pediatric services, 24-hour walk-in availability, on-site pharmacies, on-site labs, dental services, minor ambulatory surgery, cancer screening, immunizations and STI services. For more information about the CMS country program in Nicaragua please contact Kelly Wolfe at [kwolfe@cmsproject.com](mailto:kwolfe@cmsproject.com).

*CMS Nicaragua Country Representative Pilar Sebastian points out the features of the new clinic in Tipitapa to CMS Project Director, Lizann Prosser.*



## Adolescent Health — Madagascar

CMS MADAGASCAR PROMOTES ADOLESCENT REPRODUCTIVE HEALTH THROUGH DYNAMIC YOUTH-FRIENDLY PROGRAMS

To specifically target youth in Madagascar and promote the dual purpose of condoms — family planning and STI prevention — the CMS program recently redesigned the *Protector Plus* condom packaging and re-positioned the product as part of a new behavior change communication campaign.

*Protector Plus* condoms are sold using innovative marketing techniques guided by vital research information gathered from the 15–24 year old target group. Since the beginning of the CMS project in Madagascar, condom sales have increased more than 60 percent to over five million units annually. Additional adolescent reproductive health funds have come from sources outside of the CMS project to inaugurate a new ARH clinic network, launch state-of-the-art behavior change communication campaigns and develop the country's first Mobile Video Unit. All program efforts focus on informing youth regarding modern family planning methods, training doctors to provide FP counseling, and STI prevention and treatment options. For more information about the CMS Madagascar program please contact Rudolph Chandler at [rhandler@cmsproject.com](mailto:rhandler@cmsproject.com).



*What kind of family life do you think she has?*

## Jordan Uses Projective Techniques to Guide Communications Campaign

CMS Jordan recently completed a projective research study to explore Jordanian women's perceptions of contraceptives. The research employed a projective technique wherein 135 female respondents (ages 20–44), equally divided into three matched groups, were shown the medical record of a fictitious 31 year-old woman with three children. Each respondent saw a version of the medical record which differed only in the method of contraception chosen (Voluntary Surgical Contraception (tubal ligation), Rhythm Method and IUD). The respondents were first asked open-ended questions about their perceptions of the woman in the medical record, such as "What kind of family life do you think she has?" and "Do you think this is a modern or traditional person?" Then, the respondents were asked to state their degree of agreement with a series of statements about the woman, for example, "She has a good relationship with her husband."

The technique revealed that the respondents had distinctly different perceptions of the fictitious woman, based almost entirely on which method of contraception she had chosen, and hence different perceptions of the methods themselves. The results of this research have been used to guide a new media campaign in Jordan. A total of 40 different ads are now in preparation using a variety of approaches: cartoons, comedy, songs, short dramas, brief lectures from medical and religious authorities, and testimonials. The first three televised spots to air will be *fatwas* (religious decrees) delivered by the preeminent religious authority in the country. These will be the first *fatwas* on family planning in Jordan.

As the multi-faceted Jordanian ad campaign moves forward, we will be reporting on the developments and findings. For more detailed information about the projective study technique please contact Ruth Berg at [rberg@cmsproject.com](mailto:rberg@cmsproject.com) or CMS Jordan Country Representative, Michael Bernhart at [mbernhart@aol.com](mailto:mbernhart@aol.com).





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## The Summa Foundation

BANKING ON HEALTH THROUGH FINANCING TO MIDWIVES

The Summa Foundation is a not-for-profit organization that provides financing and technical assistance to the private and commercial health sector in developing countries. Summa's goal is to stimulate and expand the role of the private sector in the delivery of affordable health services. Summa currently operates under the Commercial Market Strategies project.

In September 2000, USAID approved an exciting new Summa investment: The Uganda Private Providers Loan Fund. The objective of this \$175,000 revolving loan fund is to harness the power of the private sector to positively impact the health of women and children. Specifically, Summa and CMS Uganda are working with two partners in the private sector, the Uganda Private Midwives Association and the Uganda Microfinance Union (UMU). Initially, the investment will provide small loans to private midwives to expand and improve their practices. To strengthen the success of this initiative, technical assistance will be provided through practical business skills training coupled with individual follow-up visits. In the future, Summa hopes to expand the program to other private providers.

The Uganda Private Midwives Association (UPMA) is helping Summa to identify high quality midwives. All UPMA midwives have access to CMS products and training in family planning service delivery. The Uganda Microfinance Union, a local financial institution with a track record of providing loans to the working poor, is administering the loan fund and tailoring its program to the financial needs of midwives. Currently, 75 midwives have received training and the UMU began disbursing loans in January 2001. During the three-year program, UMU plans to provide loans to approximately 280 midwives.

For more information about the Summa Foundation and our investments, please see our web site at: [www.summainvestments.org](http://www.summainvestments.org).



- 1 A UPMA midwife weighs a newborn infant. Notice the *PROTECTOR* calendar above the scale — the UPMA acts as a distributor for CMS family planning products.
- 2 A UPMA midwife and patient at a local maternity home.

## In Upcoming Editions of *New Directions*

- CMS will be opening the first **PROFAMILIA** clinic in Nicaragua in early March, 2001. We will be highlighting the official opening ceremony in the next issue of *New Directions*.
- CMS is hosting a workshop on **NGO Sustainability** in Tunisia on March 22nd, 2001. The objective of the workshop will be to help 14 IPPF (International Planned Parenthood Foundation) regional Arab offices develop strategies for financial sustainability.
- As the CMS social marketing activities get off the ground in **Jordan** we will be reporting on this dynamic program.
- Creative **Adolescent Reproductive Health** activities in Madagascar are getting high marks for their success in attracting additional support and for communicating effectively with youth. We will be highlighting the activities in Madagascar in upcoming editions of *New Directions*.

