

Honduras

Total Market Initiative

Final Technical Report

July 8, 2010

Submitted by:
Abt Associates, Inc

Submitted to:
PATH/Reproductive Health Supplies Coalition



Reproductive Health
Supplies Coalition



Abt Associates Inc.

SECTION I – IMPLEMENTATION

Activity #1 – Review TMI with core stakeholders through the convening authority of CIDAIA (Scheduled for April 2009)

As reported in Interim Report #1, Activity #1 was completed in May, 2009.

Activity #2 – Review DHS data to describe main characteristics of target populations (Scheduled for April and May 2009)

As reported in Interim Report #1, Activity #2 was completed in June, 2009.

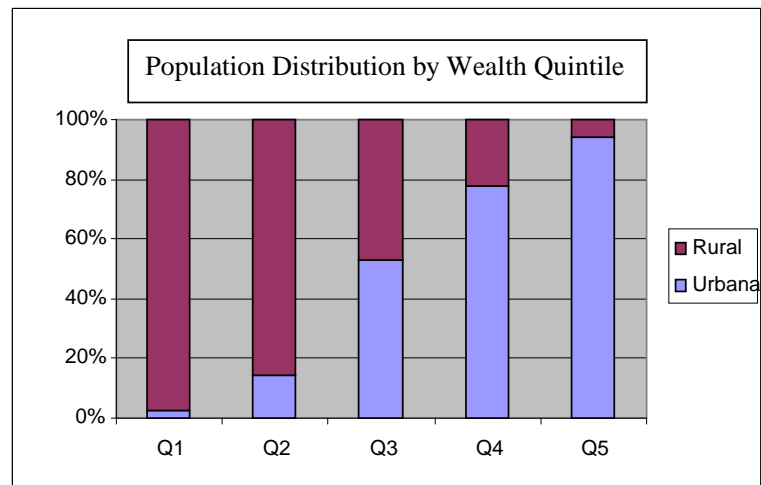
Activity #3 – Conduct supplementary small scale qualitative assessment of target populations (Scheduled for June, July and August 2009)

As reported in Interim Report #2, Activity #3 was completed in October, 2009.

Activity #4 – Synthesize background information for stakeholders meeting (October 2009)

Data presented at the Stakeholder’s Meeting ended up being a big draw for participation in the meeting. The TMI team synthesized information from the following sources: the secondary analysis of DHS data, the qualitative assessment, IMS pharmacy sales data, MOH, Ashonplafa and PASMO institutional data and stakeholder interviews. Utilizing this information the team presented: an analysis of overall contraceptives market segmentation in Honduras, the six segment descriptions, a supply analysis, and analyses of the three family planning markets in Honduras (clinical services, hormonal contraceptives, and condoms)¹.

Being able to tell a story with the data, highlighting key issues and building consensus, is a critical success factor for a Total Market initiative. The information presented allowed the TMI team to play an objective role in bringing together various organizations with different missions and motives. This permitted non-threatening discussions on key issues. For example, one finding which spurred a lot of dialogue and was

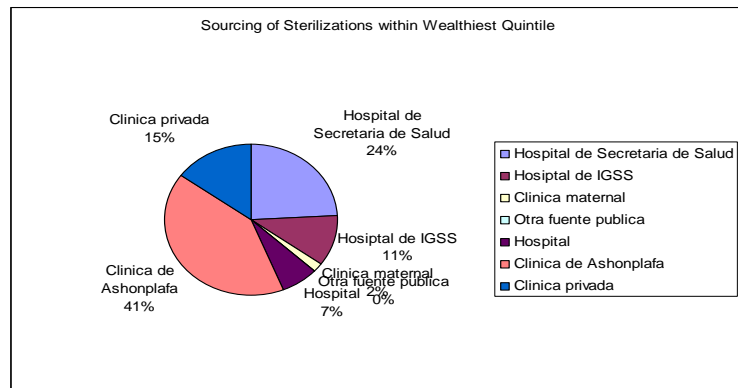


¹ ANNEX D includes a brief summary of the four female user segments identified by the TMI analyses.

a wake-up call to the public sector is demonstrated in the graph above. It clearly shows that the vast majority of wealth quintiles 1 and 2 are in rural areas and very few are in urban areas. Therefore, if the public sector is to serve the poor and the poorest quintiles, they must focus on and improve rural distribution efforts.

As mentioned above, the data also demonstrated areas where there is great opportunity to improve segmentation. For example, in female sterilizations there is still a large portion of the wealthy and wealthiest quintiles sourcing from the public sector.

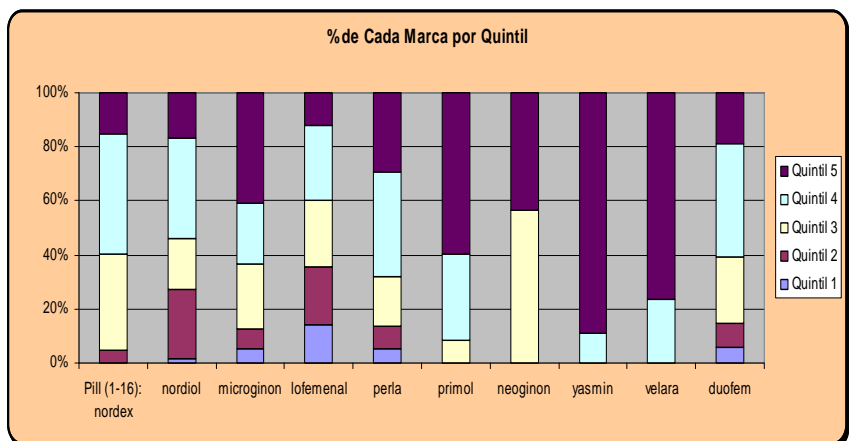
As demonstrated by the chart to the right, 24% of women from the wealthiest quintile who had received a sterilization at the time of the 2005/6 DHS sourced from the Ministry of Health (*Secretaría de Salud*). There was a lot of discussion around this issue because the general consensus is that most likely these



sterilizations were post-partum. 94% of women who deliver in a facility, delivered in the public sector according to the last DHS. The participants discussed the barrier to increasing private sector sterilizations and the lack of private sector providers offering delivery services. This is a strategy Ashonplafa (the Honduran IPPF-affiliate) is currently considering. Ashonplafa is the largest provider of female sterilizations in the private sector. Presumably the women from the upper quintiles who are getting sterilized in the public sector do so because they delivered a baby in the public sector, otherwise they most likely would have gotten sterilized at Ashonplafa.

Another example, from the oral contraceptives market, is demonstrated in the graph below which shows the distribution by wealth quintiles of users of each brand of oral contraceptive. For example, we can see that over 60% of users of lofemenal (the public sector brand) come from the middle, wealthy and wealthiest quintiles. This implies opportunities for both Perla (social marketing brand) and

commercial brands to capture new users. The TMI team calculated that this opportunity represents over 10,000 consumers from the top three wealth quintiles who source OCs from the public sector. Additionally, in the injectables market there are approximately 21,000 users from quintiles 4 and 5 which source from the public sector.



The data also showed which methods are growing fastest and where; for example the overall orals market grew 109% from 2005 to 2009 yet progesterone-only orals grew 213% during the

same time period with only two commercial brands. This led to discussion and a possible strategy to introduce a low priced progesterone-only pill onto the market. Additionally, the team presented data showing opportunities for improved segmentation through pricing strategies; for example in the injectables market there 10 brands priced at or below 150 Lempiras/cycle, no brands between 150 and 200 Lempiras/cycle and two brands between 200 to 300 Lempiras/cycle. So, there seems to be opportunity to position within the 150 and 200 Lempira price range.

The data was the basis of discussion and strategy development during the workshop. It was also a big pull because participants were getting information that was directly related to their work. A full agenda, which gives a sense of the type and breadth of data presented at the Stakeholder's Workshop, is included in Attachment A.

Activity # 5 – Plan and hold Stakeholders Meeting (November, 2009 to March, 2010)

A pre-meeting was held with the Honduran Contraceptive Security Committee on February 25th. At the pre-meeting background information was presented and the draft agenda was reviewed and approved.

The Stakeholders' Workshop was held March 17th and 18th in Tegucigalpa. The meeting was a huge success with 50 participants from 30 different organizations (a participant's list is included in Attachment B). The breakdown from different sectors is as follows:

Commercial Sector – 7

Public Sector – 6

NGO Sector – 6

Academic/Professional Associations – 5

International donors/implementers – 6

The first day of the workshop was focused on introducing the audience to TMI, market segmentation theory and the benefits of segmentation and presenting the data. The second day was more participatory; including breaking participants into four working groups to conduct a SWOT analysis by sector (NGO, MOH, IHSS, and commercial) and to brainstorm strategies for improving market segmentation and reaching unmet need. Although each group focused on strategies from one sector, the groups were made up of participants from the different sectors (except for IHSS which didn't have enough representatives to spread). Therefore the group conducting the SWOT and developing strategies for the public sector included representation from the commercial and NGO sectors and vice versa.

The groups brainstormed the following 18 strategies which they saw as opportunities to improve coordination and segmentation based off of the analyses presented and the SWOTs. Each sector then presented their SWOT results and strategies to the larger group.

Strategies brainstormed at the TMI Stakeholder's Workshop:

a) Public Sector:

- Explore the possibility of introducing new products, such as: female condom, implants, and impregnated IUD
- Reactivate CIDAIA to continue work initiated under TMI and its previous work in contraceptive security
- Expand CIDAIA membership to include more actors from all three sectors, including the participants in the TMI Stakeholder's Meeting
- Modify National Reproductive Health strategy to focus on improving coverage of family planning in the rural areas
- Pursue joint communications strategies with other actors, such as targeted messaging on side effects (#1 reason for non-use) utilizing all platforms (e.g. mass media (print, radio, etc), charlas, etc). Also, socialize results of PRODIM's discontinuation study once available and use information from this study to jointly develop communication messages across the three sectors.
- Create a website to serve as portal for FP information, similar to Guatemala's
- Develop a PPP with other actors to open a youth hotline for information on sexual and reproductive health
- Improve forecasting to minimize spikes and dips which adversely affect both consumers and private sector providers

b) NGO Sector:

- Develop a complete and detailed mapping of all the institutions in FP space to get a better sense of where alliances could be built geographically
- Create an umbrella NGO or alliance of NGOs working in the family planning space, similar to HonduSalud, but specific to family planning
- Coordinate/combine advocacy efforts with other NGOs to increase political impact (could be done through the above alliance, PRODIM and/or HonduSalud)
- Create information platform/portal to increase access to information for all actors (same as website idea from public sector)
- Explore the possibility of introducing a progesterone-only oral contraceptive

c) Commercial Sector:

- Pursue Public-Private Alliances for distribution and education/information campaigns (e.g. commercial sales force can distribute national FP/RH norms & guides for MOH), joint campaigns with NGO and public sector on side effects.
- Increase geographical penetration (through increased sales force/medical visits, distribution channels and investment in education (medical visits & mass media))
- Pursue "institutional" pricing structures to sell to public sector, create institutional sales staff
- Create information platform using technology

d) **Social Security:**

- Resume advocacy via CIDAIA for a legitimate FP program within Social Security

The workshop was viewed as a great success by participants from all sectors. Evaluations were collected and showed high marks across the board. Additionally, interviews were conducted with participants from commercial, public and NGO sectors. The event was concluded with a call to action by the Deputy Minister of Health, Ms. Miriam Paz. Since the March meeting the CIDAIA has subsequently met two more times (April and May, 2010) to further explore and develop the strategies brainstormed during the TMI Stakeholder's Workshop.

An article from the SupplyInsider about the TMI-Honduras Stakeholder's Workshop is included in Attachment C.

Activity # 6 – Produce a short video to document the successful TMI Stakeholder's Meeting (April and May 2010)

Per the request of RHSC and in accordance with Modification #2 to the sub-agreement, Abt Associates produced a 7-minute video documenting the successful TMI Workshop. The video can be viewed on YouTube™ at the following link:

<http://www.youtube.com/watch?v=vuA3QzshONA>

SECTION II – CONCLUSIONS, OUTCOMES, & NEXT STEPS

The TMI initiative was extremely successful in not only reinvigorating the Honduran Contraceptive Security Committee (CIDAIA), but also redirecting its focus and bringing a new cadre of actors to the table. Because of the Coup D'état, the CIDAIA ceased to meet formally in June 2009, shortly after the TMI initiative was launched. During this time, the TMI team conducted analyses and research. In November, 2009 the team began meeting one-on-one with key DAIA members in preparation for a change in government and the March Stakeholder's Workshop. By February, with the new government in place, the team had conducted stakeholder interviews, courted more than 20 new actors and developed an agenda to the satisfaction of the CIDAIA. The March meeting was extremely successful and viewed by all not as an end, but rather as a beginning.

In addition to re-awakening the CIDAIA, TMI expanded participation and brought in new perspectives. The CIDAIA previously had no representation from the commercial sector; however, as a result of TMI efforts, seven key commercial actors are interested in becoming members of the committee and are open to participating in Whole Market efforts. TMI expanded participation within the NGO and public sectors as well. Crucial additions from these sectors include the National Institute of Statistics (INE), the MOH's product registration/licensing division, the National Institute for Women, Marie Stopes International-Honduras, and HonduSalud. Because Honduras is currently in a graduation process with USAID and funding for the next DHS survey is undetermined, it was important to bring in INE since they will most

likely be coordinating and/or implementing the next survey. The March meeting made very clear to all actors the value of data and everyone agreed that segmentation and unmet need cannot be successfully reached without having data to measure results and to identify opportunities. Additionally, allowing the commercial sector to directly interface with the product registration division was essential, as the major barriers faced by this sector relate to registration and licensing.

The CIDAIA committee has met twice since the March meeting in pursuit of further developing segmentation strategies. A meeting is also planned for this month, however, as of Abt's most recent information; the expanded membership was not fully involved.

It is vital to foster the participation of the private sector, commercial and NGO alike, as well as the additional actors within the public sector. Although, there is very strong ownership and initiative at the local level in Honduras, some areas where further support to some of the strategies identified in the workshop could be beneficial. For example:

- a) Support NGO Strategy #1 – develop a complete mapping of current family planning offering, including an inventory of providers, size/volume, near-term future plans, products, geographic reach, and distribution channels
- b) Support qualitative research to help develop messages regarding side effects for joint campaigns
- c) Support the development of a public sector strategy for decreasing unmet need in rural areas
- d) Support the design of targeting strategies for “pulling” consumers from quintiles 4 and 5 to the private sector for all methods
- e) Support a sustainability plan/advocacy efforts to secure future DHS surveys

ANNEX A – Stakeholder’s Meeting Agenda

TALLER DE SEGMENTACIÓN DE MERCADO DE ANTICONCEPTIVOS Y CONDONES EN HONDURAS

Meta

Propiciar mayor coordinación entre los sectores que ofrecen servicios y productos de Planificación Familiar en Honduras, para establecer interrelaciones y acciones de trabajo que coadyuven a atender en una forma equitativa y eficiente el mercado de métodos anticonceptivos y condones con un enfoque de mercado total.

Objetivos

Presentar y analizar los resultados de los estudios de segmentación del mercado de anticonceptivos y condones en Honduras e identificar ineficiencias y brechas en el acceso y prestación de servicios y productos de planificación familiar.

Analizar las fortalezas y oportunidades de cada uno de los sectores que proveen servicios y productos de Planificación Familiar, para mejorar las estrategias de segmentación del mercado de anticonceptivos y condones en Honduras bajo un enfoque integrador.

Identificar oportunidades específicas en cada uno de los sectores y sus recursos disponibles para desarrollar y aplicar mejores coberturas de Planificación Familiar en el país tomando en cuenta los mercados que atiende cada uno de ellos.

Definir estrategias y líneas de acción que contribuyan a mejorar el acceso equitativo a los insumos y servicios de Planificación Familiar en Honduras.

AGENDA

Fecha: Miércoles 17 de Marzo, 2010
 Lugar: Hotel Marriot / Salón La Leona
 Horario: 8:30 a.m. – 4:30 p.m.

<i>Hora</i>	<i>Actividad</i>	<i>Responsable</i>
8:30 – 8:45	Inauguración del Taller <ul style="list-style-type: none"> Palabras de Apertura. 	<i>Dr. Jorge Fernández Asesor Dirección General Promoción de la Salud Secretaría de Salud</i>
8:45 - 9:00	<ul style="list-style-type: none"> Introducción de las metas y objetivos del taller, agenda de las actividades y detalles administrativos. 	<i>Dawn Crosby Abt Associates, Inc</i>
9:00 – 9:05	Conformación del Comité de Redacción <ul style="list-style-type: none"> Conformar un Comité de 5 integrantes en los que estén representados: S de Salud, Ashonplafa, Pasmó, IHSS, Laboratorio de Hormonales y Representante de Importadores de Condonos. Instruir a la Comisión sobre su rol y las expectativas de su trabajo. 	<i>Martha Mérida Abt Associates Inc</i>
9:05 – 9:20	<ul style="list-style-type: none"> TMI en Honduras, objetivos, actividades y avances a la fecha 	<i>Dawn Crosby Abt Associates, Inc.</i>
9:20 – 9:40	Vinculación de la DAIA y la Iniciativa Total de Mercado <ul style="list-style-type: none"> Marco Conceptual de la DAIA. 	<i>Dr. Manuel Sandoval, Director Médico de Ashonplafa</i>
9:40 – 10:00	<ul style="list-style-type: none"> Marco Conceptual de la Segmentación de Mercado 	<i>Martha Mérida Abt Associates, Inc</i>
10:00 – 10:20	<i>Coffee Break</i>	
10:20 – 11:30	Segmentación del Mercado de Anticonceptivos y Condonos en Honduras	
10:20 – 10:50	<ul style="list-style-type: none"> Presentación de Estudio de Segmentación del Mercado de Anticonceptivos, Año 2008 	<i>Nora Quesada JSI</i>
10:50 – 11:20	<ul style="list-style-type: none"> Presentación: Resultados de los Análisis Cualitativo y Cuantitativo: Análisis de los Segmentos de Mujeres No Usuarías de Métodos Anticonceptivos 	<i>Dawn Crosby Abt Associates, Inc</i>
<i>Hora</i>	<i>Actividad</i>	<i>Responsable</i>
11:20 – 11:30	<ul style="list-style-type: none"> Presentación: Análisis de los Segmentos de Hombres 	<i>Yma Alfaro Abt Associates, Inc</i>

11:30 – 12:00	Análisis de la Disponibilidad de Anticonceptivos <ul style="list-style-type: none"> • Presentación de hallazgos del abastecimiento de Anticonceptivos por proveedores públicos y privados 	<i>Nora Quesada JSI</i>
12:00 – 12:25	Resultado de las Entrevistas a Actores Claves	<i>Martha Mérida Abt Associates, Inc</i>
12:25 – 12:45	La Reforma en el Sector Salud y el Mercado de la Planificación Familiar <ul style="list-style-type: none"> • Presentación 	<i>Dra. Justa Urbina Secretaría de Salud</i>
12:45 – 1:45 pm.	<i>Almuerzo</i>	
1:45 – 2:35	Análisis de los Mercados <ul style="list-style-type: none"> • Análisis del Mercado de Condones 	<i>Yma Alfaro Abt Associates, Inc</i>
2:35 – 3:05 pm.	<i>Coffee Break</i>	
3:05 – 3:50 pm.	<ul style="list-style-type: none"> • Análisis del Mercado de Anticonceptivos Hormonales 	<i>Dawn Crosby Abt Associates, Inc</i>
3:50 – 4:30 pm.	<ul style="list-style-type: none"> • Análisis del Mercado de Servicios AQV y DIU 	<i>Dawn Crosby Abt Associates, Inc</i>

Fecha: Jueves 18 de Marzo, 2010
Lugar: Hotel Marriot / Salón La Leona
Horario: 8:30 a.m. – 1:00 p.m.

<i>Hora</i>	<i>Actividad</i>	<i>Responsable</i>
8:30 - 8:40 am.	Resumen Actividades del 17/marzo <ul style="list-style-type: none"> • Síntesis de lo discutido el día anterior 	<i>Representante Comité de Redacción</i>
8:40 – 10:00 am.	Análisis prospectivo de las fortalezas, desafíos y oportunidades para la segmentación del mercado por sectores <ul style="list-style-type: none"> • Análisis grupal por sectores : las fortalezas y oportunidades • Priorizar los retos • Definición de 2 estrategias para cada reto (como mínimo) y para cada sector • Preparar presentación del grupo a la audiencia con base a guía específica. (Utilizar carteles o slides de power point) 	<i>Facilitan sesión: Nora Quesada Dawn Crosby Yma Alfaro Martha Mérida</i>
10:00 -10:20	<i>Coffee Break</i>	

10:20 - 11:30 am	Plenaria: <ul style="list-style-type: none"> • Presentación de estrategias por grupo. (Utilizar carteles o slides de power point) 20 minutos por grupo 	<i>Facilita sesión: Nora Quesada JSI</i>
11:20 - 12:20 pm	Conclusiones y Sigüientes Pasos <ul style="list-style-type: none"> • Presentación de las Conclusiones y Próximos pasos de la segmentación del mercado de Anticonceptivos en Honduras en el marco de la DAIA. (Utilizar 3 a 5 slides de power point). 	<i>Facilita sesión: Dawn Crosby Abt Associates, Inc</i>
12:20 - 12:30 pm	Clausura del Taller <ul style="list-style-type: none"> • Palabras de Clausura 	<i>Representante de la Secretaría de Salud</i>
12:30 – 1:30 pm.	<i>Almuerzo</i>	

ANNEX B - List of Participants

TMI Stakeholder's Workshop: March 17th and 18th, 2010
Tegucigalpa, Honduras

Individual participants:

1 Dra.	Marina	Padilla de Gil	Coordinadora	FIGO
2 Dra.	Karla Patricia	Castellanos	Vocal I	Sociedad de Ginecología y Obstetricia
3 Lic.	Guido	Bueso	Gerente de Marca	Distribuidora Solis (Durex)
4 Lic.	María Concepción	Cáceres	Directora	Asociación Hondureña Mujer y Familia
5 Dra.	Doris	Henríquez	Técnico Normativo	Dirección Médica / IHSS
6 Dra.	Mariela	Medina	Oficial Salud	U.L.A.T.
7 Dr.	Mauricio	Dinarte	Oficial Salud	U.L.A.T.
8 Dra.	Gladys	Ordoñez	Técnico Normativo	Dirección Médica / IHSS
9 Dra.	Flor María	Matute	Oficial Salud	U.N.F.P.A.
10 Lic.	Elena J.	Bosch	Jefe de Compras	ASHONPLAFA
11 Ing.	Mario	Varela	Gerente	Cía. Productos Latex (CPL)
12 Dr.	David	Castellanos	Especialistas Proyectos Salud	U.S.A.I.D.
13 Dr.	Jorge	Fernández	Asesor Especialista Salud	Secretaría de Salud
14 Lic.	Daisy Isabel	Cruz	Jefe de Departamento	ASHONPLAFA
15 Lic.	Carlos	González	Director Ventas	Laboratorios ARSAL (El Salvador)
16 Dra.	Linda	Pineda	Gerente de País	Laboratorios ARSAL (Honduras)
17 Dra.	Lourdes	Andrés	Coordinadora de País	Laboratorios VIJOSA (Honduras)
18 Lic.	Oscar	Delgado	Gerente de Región	Laboratorios VIJOSA (El Salvador)
19 Lic.	Rosa Marlen	Flores	Enfermera Programa A.I.M.	Secretaría de Salud
20 Dra.	Dinora	Fuentes	Técnico Programa A.I.M.	Secretaría de Salud
21 Lic.	Nely Elizabeth	Fúnes	Jefe de División	ASHONPLAFA
22 Sra.	Miriam	Chang	Oficial VIH/SIDA	Fondo Mundial / CHF
23 Dra.	Karen	Chinchilla	Representante Farmacéutico	Laboratorios Pfizer M.D.
24 Lic.	German	Cerrato	Jefe de Administración	ASHONPLAFA
25 Lic.	Suyapa	Pavón	Jefe de División	ASHONPLAFA
26 Dr.	Manuel	Sandoval	Director Médico	ASHONPLAFA
27 Lic.	Ricardo	Reyes	Jefe de Ventas	ASHONPLAFA
28 Sra.	Margarita	Fernández	Asistente Técnica	I.N.A.M.
29 SDr.	Winston	Mejía	Médico Especialista	Secretaría de Salud
30 Lic.	Elisa	Aguilera	Jefe de Mercadeo	ASHONPLAFA
31 Sra.	Sobeida Lizeth	Godoy	Asistente Técnica Prevención	I.N.A.M.
32 Sra.	Nalda Elisa	Gómez	Técnica	Dirección General Regulación Sanitaria
33 Lic.	Julio	Zúniga	Gerente de País	PASMO
34 Lic.	Elvin	Nuñez	Gerente de Ventas	PASMO
35 Dr.	Manuel	Carrasco	Jefe Prog. Atención al Hombre	Secretaría de Salud
36 Dr.	José Cipriano	Ochoa	Consultor	MSH/ULAT
37 Dr.	Ivo	Flores	Jefe Depto. Salud Integ.Fam.	Secretaría de Salud
38 Lic.	Carlos R.	Calix	Técnico Programa A.I.M.	Secretaría de Salud
39 Sr.	Allan Noel	Palma	Supervisor CEC	PASMO
40 Dra.	Polly	Morán	Coordinadora	PRODIM

41	Dra.	Astarté	Alegría	Coordinadora	UNAH / Posgrado Salud Pública
42	Dra.	Karen	Láinez	Inspectora	Colegio Químico-Farmacéutico Honduras
43	Dra.	Bessy	Moncada	Coordinadora	Centro Médico San Miguel / Marie Stopes
44	Sra.	Roxeli	Rodríguez	Supervisora	Proyecto Aldea Global
45	Lic.	Jorge	Plata	Jefe Estadísticas Sociales	I.N.E.
46	Dr.	José Manuel	Espinal	Presidente	Colegio Médico de Honduras
47	Dra.	Justa	Urbina	Coordinadora UMSS	Secretaría de Salud

ANNEX C – Article on TMI-Honduras from SupplyInsider, March 2010

Total Market Initiative takes off in Honduras: On 17-18 March, the [Total Market Initiative \(TMI\)](#) held a Stakeholder’s Workshop on market segmentation in Tegucigalpa, Honduras. More than 30 organizations from the public sector, the NGO sector, the international donor community and the commercial sector met to analyze the Honduran family planning market and identify segmentation strategies to better reach unmet need.

With partial funding from the Coalition’s Innovation Fund, the TMI was launched in April 2009 by Abt Associates and John Snow, Inc. The project conducted quantitative and qualitative research on the Honduran contraceptive market, courted new stakeholders into the contraceptive security process at the national level, expanded participation both from the public and NGO sectors, and brought the commercial sector to the table for the first time.

The one-and-a-half day workshop resulted in the development of 15 possible sector-specific strategies for market segmentation and/or market expansion. The Salvadoran drug manufacturer, Vijosa, for example, reported that the workshop helped them identify unexploited market niches, while Pfizer discovered there are consumers within their target group who continue to source from the public sector. Finally, the workshop reinvigorated the local Contraceptive Security Committee (CIDAIA), which had not met since the June 2009 coup d’état. The Vice Minister of Health, Ms. Miriam Paz, closed the workshop by officially reconvening the CIDAIA and invited all workshop participants to continue the momentum of the Total Market Initiative. For more information, contact [Dawn Crosby](#).

ANNEX D – Summary of four female user segments

<p>Segment 1: “Young women in union:</p> <p>15-25 years old, average children 2.1 Users: 53% modern methods Future intent: Injectables preferred Non-users: 98% want more children</p>	<p>Segment 3: “Thirty-somethings”</p> <p>30-39 years old, average children 4.1 Users: 62% modern methods Future intent: Sterilization preferred Non-users: Unmet need higher in rural areas</p>
<p>Segment 2: “I think my family is complete.”</p> <p>15-29 years old, average children 2.8 Users: 67% modern methods Future intent: Injectables preferred Non-users: Majority want no more children</p>	<p>Segment 4: “Menopausal”</p> <p>40-49 years old, average children 5.6 Users: 45% modern methods Future intent: low percent Non-users: Do not want more children</p>