CUSTOMER INSIGHTS FOR FP DEMAND GENERATION IN NIGER

ICFP Presentation:
Family Planning Determinants
January 2016
Why segmentation?

Segmentation is used to identify distinct groups within a population—and oftentimes within demographic groups—that have different needs, attitudes, and behaviors around a given topic.

Segmentation can be a powerful tool in resource-constrained settings: policymakers and implementers can focus resources and programming on segments that are more likely to change their behavior.
Niger has the highest fertility rate in the world, at 7.6 children per woman.

The fertility rate has risen since 2006, from 7.1 children per woman.
Segmentation approach

<table>
<thead>
<tr>
<th>~2000 OBSERVATIONS</th>
<th>KEY SEGMENTATION VARIABLES</th>
</tr>
</thead>
</table>

**USAGE BEHAVIORS**
- Consideration of traditional and modern methods
- Trial of traditional and modern methods

**PROACTIVITY**
- Been to a HC for a consultation
- Tried to obtain FP methods and/or information
- Attended info session on FP

**SOCIAL NORMS**
- Perception of # of women in community using MM
- Need for husband, others’ permission to use

**CONTRACEPTIVE ATTRIBUTES**
- Fertile immediately after discontinuing use
- Ability to stop at any moment
- Method is natural

**ATTITUDES AND BELIEFS**
- Acceptance of spacing, limiting, use of MM
- FP attitudes (i.e. health, spacing, timing, discretion, religious beliefs)
- Factors important to MM use decision (access, simplicity of use, availability of info, side effects)
## Five FP segments in Niger

<table>
<thead>
<tr>
<th>MODERN ELITES</th>
<th>HEALTHY PROACTIVES</th>
<th>TRADITIONAL AUTONOMISTS</th>
<th>SHELTERED SKEPTICS</th>
<th>CONSERVATIVE PASSIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>(16%)</td>
<td>(28%)</td>
<td>(10%)</td>
<td>(28%)</td>
<td>(19%)</td>
</tr>
<tr>
<td>“I want a good life for myself and my children, and that starts with good family planning”</td>
<td>“My health is important, so I try to learn as much as I can, and reduce my burden by spacing”</td>
<td>“What my husband and I decide is our business, and for now we think traditional methods are better”</td>
<td>“I’m not too familiar with Family Planning methods, but I don’t trust them”</td>
<td>“It’s important to me that others do not oppose my FP choices”</td>
</tr>
</tbody>
</table>

From CPR of…  
To, in 5 years…  

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</tr>
</thead>
<tbody>
<tr>
<td>23%</td>
<td>5%</td>
<td>2%</td>
<td>15%</td>
<td>22%</td>
</tr>
<tr>
<td>45%</td>
<td>23%</td>
<td>22%</td>
<td>15%</td>
<td>2%</td>
</tr>
</tbody>
</table>
Segment-tailored approach in Niger and in the Sahel

**NIGER**

**Program Design**
Animas Sutura
Pathfinder

**Communications**
Ministry of Health
EngenderHealth
PSI

**BURKINA, COTE D’IVOIRE, TOGO**

**Communications**
EngenderHealth

**COTE D’IVOIRE**

‘Factbase’, Policy, Program Design
Questions?

Please reach out to us if you have any questions or would like to explore how your organization might use it:

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This presentation, the summary research report and toolkit, and raw data are available on our website: www.cambercollective.com/fpniger
EXAMPLE: TRADITIONAL AUTONOMISTS

**Behavior Change Objectives:**
Consistent and effective use of traditional methods
Increased trial of modern methods, over time

**Considerations:**
- This woman dislikes feeling like ideas are being pushed on her
- She prefers traditional methods, esp. breastfeeding, and needs support in this
- Her husband’s opinion is very important to her. He should be included in decision-making around FP, if possible

**GUIDING PRINCIPLES**

**PROGRAMMING & FUNDING CONSIDERATIONS**

**Most relevant existing programs:**
- Mobile clinics
- Youth Outreach
- Husband Outreach

**MESSAGING CONCEPT**

“FP is a decision that you and your husband make together, and that’s the way it should be. Healthcare workers can help you understand your current approach better or discuss new methods, but the choice is up to you.”