## Step 4: Design Message Strategy

| **PRIMARY AUDIENCE 1: PREGNANT WOMEN** | |
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| **OBJECTIVES** | |
| By 2015, increase the percentage of women (15-49), at all levels of parity and marital status, who:   1. Are aware that using 7.1% chlorhexidine digluconate alone on the umbilical cord stump protects the newborn better than traditionally applied substances. 2. Are motivated and have the self-efficacy to ask the ANC provider, CHW, TBA, or pharmacist about cord care and chlorhexidine. 3. Are willing to pay a reasonable amount for 7.1% chlorhexidine digluconate for cord care. 4. Have correctly used 7.1% chlorhexidine digluconate to prevent umbilical cord infection. 5. Have not used any substance other than chlorhexidine for cord care with their most recent child. 6. Would recommend chlorhexidine to a relative or friend to protect the newborn’s health. | |
| **POSITIONING** | |
| 7.1% chlorhexidine digluconate is a best buy for newborn health. It does everything a mother wants cord care to do–including fighting infection–and gets the baby off to a great start in life. | |
| **KEY PROMISE** | |
| Using 7.1% chlorhexidine digluconate for cord care helps protect your baby, keeping him or her safe from infection and possibly even death. | |
| **SUPPORT STATEMENT** | |
| In communities like yours where oils, powders, pastes, or other substances are normally applied to the umbilical cord stump, applying chlorhexidine instead decreased the number of babies who died from infections caused by bacteria that came into contact with the newly cut umbilical cord stump. Mothers in these communities sing the praises of chlorhexidine for cord care. Nurses and doctors recommend it as one of the best things women can do for their newborns. | |
| **KEY MESSAGES** |  |
| Key messages must be tailored to the specific socio-cultural context. Different regions or ethnic groups have different reasons for their cord care practices and different beliefs around outcomes (such as how long the cord remains attached). To be effective, messages must address relevant benefits, concerns, and practices. Key information should also be provided in a simple, easy-to-understand and non-threatening, respectful way.   * All mothers want to do their best to protect their babies. * Cord care is one of the first things mothers do for their babies once they are born. * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Chlorhexidine for cord care is the best and only thing that should be applied to the cord stump. * Newborns are more likely to survive and be healthy when chlorhexidine is the only thing applied to their cord stump. * In communities like yours where mothers use chlorhexidine for cord care, more babies survive, and they are healthier. * Mothers have tried many different things to protect the cord and protect the newborn. Chlorhexidine for cord care is the only thing you need. * Chlorhexidine for cord care gives your baby a healthy start in life. * Chlorhexidine keeps the cord clean and prevents infection. * Putting chlorhexidine on your baby’s cord every day could save his/her life. (Country teams will determine the specific time frame for application, whether single or multiple day application chlorhexidine.) * Make chlorhexidine a part of your birth preparation – have it ready when the child is born because it is most effective when applied on the day of birth. * After cutting the cord, apply chlorhexidine to the tip of the cord, the stump, and around the base of the stump daily or as recommended by a health care provider * You can get chlorhexidine for cord care from [the ANC clinic, a TBA, a CHW, a pharmacy]. Chlorhexidine may be applied to the umbilical cord stump by health facility staff if you deliver at a health care facility. * Chlorhexidine for cord care is free [or very low cost, especially considering how effective it is]. * Ask your ANC provider, CHW, pharmacy, or midwife about chlorhexidine and where you can get it. * Using chlorhexidine might make it take a day or two longer for the cord to fall off. Taking a little longer is normal and will not hurt the baby. * 1-2 extra days for the cord to fall off is a small price to pay for the health of your baby and gives you extra time to devote to just him/her. It can also save time and money because the cord will not get infected and need care – and medicines – from outside the home. * Giving birth with a skilled birth attendant can help keep you and your baby safe. * Go with the baby to the health center for post-natal care to make sure everything is okay with both of you and learn more about how to care for both of you after delivery. | |

| **PRIMARY AUDIENCE 2: GRANDMOTHERS AND FAMILY MEMBERS WHO PROVIDE NEWBORN CARE** | |
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| **OBJECTIVES** |  |
| By the year 2015, increase the percentage of grandmothers and family members who:   1. Know that chlorhexidine for cord care is an effective replacement for traditional cord care practices (and practices they see as modern such as talcum powder or methylated spirits) 2. Believe that chlorhexidine for cord care increases the chances of the newborn’s survival 3. Approve of the use of chlorhexidine to prevent neonatal sepsis and cord infection 4. Accept that using chlorhexidine for cord care will likely cause a delay of one or two days for the cord to fall off and that this is not a poor reflection on the parents or grandparents 5. Use chlorhexidine and no other substance when they care for the cord stump 6. Recommend that their daughter/daughter-in-law/relative use chlorhexidine for cord care instead of any other substance 7. Recommend that their daughter/daughter-in-law/relative deliver with a skilled birth attendant | |
| **POSITIONING** |  |
| Generations have sought the best ways to care for the umbilical cord stump, and some ways have worked better than others. Now there is a proven way to reduce newborn deaths related to cord infection—chlorhexidine for cord care. Chlorhexidine is the new and best way to keep the baby healthy! | |
| **KEY PROMISE** |  |
| If the baby’s cord is cared for with 7.1% chlorhexidine digluconate instead of other substances, his/her chances of survival improve considerably. The baby’s mother will respect and appreciate you for helping her make and carry out this choice. | |
| **SUPPORT STATEMENT** |  |
| Grandmothers and aunts play a critical role in newborn care. In many communities, they are helping the expectant mother in their family choose chlorhexidine instead of other substances to protect and heal the cord stump—one of the first and most important choices made for the newborn. In these communities, fewer babies are dying from infections acquired through the cord stump. Supportive caregivers are proud of the impact they are having on their families. | |
| **KEY MESSAGES** |  |
| Key messages for grandmothers and other caregivers should focus on benefits of chlorhexidine and their role in cord care.   * Too many babies die in your community due to neonatal sepsis. * You can help make sure your new grandchild/family member survives by encouraging the newborns’s mother to use chlorhexidine for cord care. * The idea behind traditional cord care is a good one. Now there is something new you can put on the cord stump that works even better. * You have the power to help your family by ensuring that your daughter/daughter-in-law/family member has chlorhexidine for cord care ready right after the cord is cut. * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Chlorhexidine for cord care is an important part of newborn care. Make it one of the first choices your family makes for the new baby. * Chlorhexidine for cord care has proven to be the best and only thing to put on the cord stump. * Chlorhexidine might make the cord take a day or two longer to fall off. This is normal and should not be a cause for concern. Protecting the newborn is more than worth the extra time. * Encourage your daughter-in-law/relative to attend ANC and to give birth in a health facility or with a skilled attendant. This decision has saved millions of lives. * Before the baby is due, help your family decide where the mother will deliver, what supplies she needs, and how to get to the health center if needed. * Encourage your daughter/daughter-in-law/relative to go with the baby for post-natal care. | |

| **PRIMARY AUDIENCE 3: TRADITIONAL BIRTH ATTENDANTS AND COMMUNITY HEALTH WORKERS** | |
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| **OBJECTIVES** |  |
| By the year 2015, increase the percentage of TBAs and CHWs who:   1. Believe that chlorhexidine can prevent umbilical cord infection 2. Are confident that they can correctly teach women how to use chlorhexidine to prevent umbilical cord infection 3. Are confident that they can educate family members and others about umbilical cord infection and the safety and effectiveness of using chlorhexidine to prevent it 4. Are able to discuss cord care practices with the patient/client and family members and recommend chlorhexidine 5. Know where to get chlorhexidine and either have a supply on hand or advise pregnant clients to have it for delivery 6. Apply chlorhexidine to the newborn’s umbilical cord stump in view of the mother and teach her how to do it | |
| **POSITIONING** |  |
| Chlorhexidine for cord care is a state-of-the-art, life-saving element of newborn care that respected providers like you can offer to pregnant women and new mothers. | |
| **KEY PROMISE** |  |
| Applying chlorhexidine immediately after the birth and teaching new mothers how to care for the umbilical cord stump with chlorhexidine instead of other substances will improve newborns’ chances for survival and earn you esteem and appreciation. Your reputation as a provider who delivers healthy babies will grow. | |
| **SUPPORT STATEMENT** |  |
| The Ministry of Health recommends use of chlorhexidine for cord care as a replacement for other cord care practices in order to improve neonatal health and reduce neonatal deaths. Health workers and TBAs in many communities are successfully using and supplying chlorhexidine to help families care for newborns. Helping save newborn lives in this way makes them proud and improves relationships with the community. | |
| **KEY MESSAGES** |  |
| Key messages for TBAs and CHWs should be focused on confident, capable providers that believe in the appropriateness, safety, and effectiveness of chlorhexidine for cord care.   * Too many newborns get very sick or die because of neonatal sepsis and cord stump infection. * Newborns deserve the best possible care, even if it involves changing old customs. * The MOH now recommends 7.1% chlorhexidine digluconate as the best way to protect the umbilical cord from infection. * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Chlorhexidine for cord care is inexpensive, has a long shelf life, and does not require refrigeration. * Women can get chlorhexidine for cord care at ANC clinics, or it can be bought from \_\_\_\_\_\_\_\_. It is very inexpensive, especially compared to treating cord infection. * Chlorhexidine for cord care is a special service you can provide your clients. * Many families, communities, and community-level health providers are now using chlorhexidine for cord care instead of other substances such as methylated spirits, breast milk, oils, and pastes. More babies are surviving in these communities. You can join them and help improve newborn survival in your own community. * Counsel women that using chlorhexidine for cord care will likely make it take a day or two longer for the cord stump to fall off and that this is normal. Help them practice explaining this to their male partner and other family members. * Advise women to put only chlorhexidine on the cord stump—nothing else. * If possible, counsel family members and male partners as well about using chlorhexidine only and about the likely delay in cord separation. * Tell women and their families about other aspects of good newborn and post-partum care as well, and help them practice what they learn. * As more mothers and babies in your care survive, the community will respect you even more. | |

| **PRIMARY AUDIENCE 4: SKILLED BIRTH ATTENDANTS** | |
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| **OBJECTIVES** |  |
| By 2015, increase the percentage of providers who:   1. Believe that chlorhexidine can prevent umbilical cord infection 2. Are confident that they can correctly teach women how to use chlorhexidine to prevent umbilical cord infection 3. Are confident that they can educate family members and others about umbilical cord infection and the safety and effectiveness of using chlorhexidine to prevent it 4. Are able to discuss cord care practices with the patient/client and family members respectfully and come to agreement on a plan that is beneficial and not harmful to the newborn 5. Know where to get chlorhexidine and either have a supply on hand or advise pregnant clients to have it for delivery. 6. Apply chlorhexidine to the newborn’s umbilical cord stump in view of the mother and teach her how to do it. | |
| **POSITIONING** |  |
| Chlorhexidine for cord care is a state-of-the-art, life-saving element of newborn care that respected providers like you can offer to pregnant women and new mothers. | |
| **KEY PROMISE** |  |
| Applying chlorhexidine immediately after the birth and teaching new mothers how to care for the umbilical cord stump with chlorhexidine instead of other substances will improve newborns’ chances for survival and earn you esteem and appreciation. Your reputation as a provider who delivers healthy babies will grow. | |
| **SUPPORT STATEMENT** |  |
| The World Health Organization (WHO) recommends 7.1% chlorhexidine digluconate for cord care in places with high neonatal mortality and traditional cord care practices that are or could be harmful. Recent community-level randomized controlled trials in Bangladesh Nepal, and Pakistan have shown that applying a 7.1% chlorhexidine digluconate to the umbilical cord saves lives (Mullany et al., 2006; Soofi et al., 2012). Across the three countries, data from over 54,000 newborns showed an aggregate 23% reduction in neonatal mortality (not including deaths in the first few hours of life) and a 68% reduction in severe infections for the chlorhexidine intervention groups. These are some of the largest effect sizes seen in any neonatal intervention (UN Commission Report, 2012). It is estimated that chlorhexidine has the potential to reduce overall newborn mortality risk by up to 18%, resulting in over half a million newborn lives saved (UN Commission Report, 2012; Hodgins, 2013). | |
| **KEY MESSAGES** |  |
| Key messages for providers should be focused on confident, capable providers that believe in the appropriateness, safety, and effectiveness of chlorhexidine for cord care.   * Too many newborns get very sick or die because of neonatal sepsis and cord stump infection. * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Where used, chlorhexidine has prevented around one quarter of newborn deaths and two thirds of severe neonatal infections. This is a difference worth making, and you can play a key role in making it. * The MOH and WHO now recommend 7.1% chlorhexidine digluconate as the best way to protect the umbilical cord from infection. * Chlorhexidine for cord care is safer and more effective than alcohols and has been found acceptable to mothers who feel a strong need to put something on the umbilical cord stump. * Chlorhexidine for cord care is inexpensive, has a long shelf life, and does not require refrigeration. * Many health care providers are now using chlorhexidine for cord care in areas where neonatal mortality is high. More babies are surviving in these communities. * Ask clients and colleagues what mothers in the area normally do to the cord stump after delivery and in the following days. * Newborns deserve the best possible care, even if it involves effort to overcome old customs. * Apply chlorhexidine shortly after the birth and, where the MOH recommends multiple-day application, show the mother how to apply chlorhexidine at home. * Chlorhexidine for cord care is available at [ANC clinics], or women can buy it from \_\_\_\_\_\_\_\_. It is very inexpensive, especially compared to treating cord infection. * Counsel pregnant women that using chlorhexidine for cord care will likely make it take a day or two longer for the cord stump to fall off and that this is normal. Help them practice explaining this to their male partner and other family members. * Advise pregnant women not to put anything else on the cord stump. Help them convince family members that chlorhexidine is the only thing to use. * If possible, counsel family members and male partners on the use of chlorehexidine for cord care. * Remember to tell pregnant women and their families about other aspects of good newborn and post-partum care as well, and help them practice what they learn. * Verify that the ANC clinic is teaching the most-up-to-date newborn care practices, including chlorhexidine for cord care. * As more mothers and babies in your care survive, the community will respect and trust you and your health facility even more. | |

| **INFLUENCING AUDIENCE 1: ANTENATAL CARE PROVIDERS** | |
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| **OBJECTIVES** |  |
| By 2015, increase the percentage of ANC providers who:   1. Are aware of the incidence of cord infection seen at their facility 2. Are aware that 7.1% chlorhexidine digluconate is a safe and effective method for preventing cord infection 3. Are aware of substances women in their catchment area normally use for cord care 4. Report feeling confident that they can teach and negotiate with clients to replace traditional substances with chlorhexidine for cord care 5. Regularly teach and demonstrate chlorhexidine for cord care as part of teaching about essential newborn care 6. Distribute chlorhexidine for cord care to ANC attendees by month 7 of gestation 7. Recommend that clients deliver with a skilled attendant so they get the best mother and newborn care and advice available 8. Believe that providing chlorhexidine to prevent umbilical cord infection makes them better health care providers | |
| **POSITIONING** |  |
| Chlorhexidine for cord care is a state-of-the-art, life-saving element of newborn care. It is culturally and medically acceptable, easy-to-teach, and inexpensive way for respected professionals to significantly improve newborn survival. | |
| **KEY PROMISE** |  |
| The ANC provider’s role is crucial even after birth. Teaching new mothers how to care for the umbilical cord stump with chlorhexidine in lieu of other substances will improve newborns’ chances for survival and earn you esteem and appreciation. Asking about their plans and practices and addressing them respectfully will help them trust you more. Your reputation as a knowledgeable and respectful provider who helps families have healthy babies will grow. | |
| **SUPPORT STATEMENT** |  |
| WHO and the Ministry of Health recommend 7.1% chlorhexidine digluconate (delivering 4% chlorhexidine) for cord care in places with high neonatal mortality. Recent community-level randomized controlled trials in Bangladesh, Nepal, and Pakistan have shown that applying chlorhexidine to the umbilical cord saves lives (Mullany et al., 2006; Soofi et al., 2012). Among 54,000 newborns in these countries, there were almost 25% fewer neonatal deaths and more than 2/3 fewer severe infections. These are more impressive results than seen in almost any intervention for newborns (UN Commission Report, 2012). It is estimated that chlorhexidine has the potential to save over half a million newborn lives (UN Commission Report, 2012; Hodgins, 2013).  New mothers respect ANC providers and take their advice seriously. ANC providers play a crucial role in improving newborn care practices in their catchment areas. | |
| **KEY MESSAGES** |  |
| Key messages for ANC providers should focus on their crucial role in encouraging safe cord care practices and beneficial newborn care in general.   * Neonatal sepsis and cord infection is a big and serious problem here, causing unnecessary suffering and deaths. [Provide local statistics if possible.] * Mothers in your community might put various substances on the cord stump to keep it dry, keep it from being too dry, improve its appearance, make it fall off faster, reduce the newborn’s vulnerability, or treat signs of infection. Ask mothers what they plan to do and why. Use this information to encourage them to use chlorhexidine instead. * WHO and the Ministry of Health now recommend 7.1% chlorhexidine digluconate for cord care in areas with high neonatal mortality (30 or more neonatal deaths per 1000 live births). * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Chlorhexidine for cord care is safer and more effective than methylated spirits and other substances and has been found acceptable to mothers who feel a strong need to put something on the umbilical cord stump. * Where used, chlorhexidine has prevented around one quarter of newborn deaths and two thirds of severe neonatal infections. This is a difference worth making, and you can play a key role in making it. * Distributing chlorhexidine for cord care at ANC clinics will help make sure as many new mothers as possible have it when the baby is born. * Chlorhexidine for cord care is very inexpensive, especially compared to treating cord infection. * Teach every expectant mother about chlorhexidine for cord care, regardless of how far along her pregnancy is. It is never too early, since you do not know if you will see her again. * Chlorhexidine for cord care is inexpensive, has a long shelf life, and does not require refrigeration. * Give all expectant mothers the recommended amount of chlorhexidine for cord care at no later than 7 months of gestation. * Counsel women that using chlorhexidine for cord care will likely make it take a day or two longer for the cord stump to fall off and that this is normal. Help them practice explaining this to their male partner and other family members. * If possible, counsel family members and male partners on the life saving benefits of chlorhexidine as well. * Remember to tell women and their families about other aspects of good newborn and post-partum care as well, and help them practice what they learn. * Teaching about and providing chlorhexidine for cord care makes you a better ANC provider and helps you save lives. * As more mothers and babies in your care survive and thrive, communities will value ANC and your services more. * Encourage your clients to prepare for delivery and to plan to deliver with a skilled birth attendant to help ensure the health of mother and child. | |

| **INFLUENCING AUDIENCE 2: FATHERS AND COMMUNITY MEMBERS** | |
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| **OBJECTIVES** | |
| By the end of 2015, increase the percentage of fathers and community leaders who:   1. Recommend that pregnant women attend ANC clinics 2. Recommend that women give birth with a skilled birth attendant whenever possible 3. Have heard of chlorhexidine for cord care 4. Believe that chlorhexidine can protect the cord and child better than substances traditionally applied to the cord stump until it falls off 5. Understand and accept that it will likely take an extra day or two for the cord to fall off when chlorhexidine is used 6. [Community members] Encourage women to have chlorhexidine for cord care on hand at childbirth 7. [Fathers] Are willing to pay a reasonable sum for chlorhexidine for cord care | |
| **POSITIONING** | |
| Children are the future of your family and community. Chlorhexidine for cord care is inexpensive, safe, and highly effective in ensuring the child gets a healthy start in life. You can be proud of giving the newborn a chance at a bright future. | |
| **KEY PROMISE** | |
| Using chlorhexidine for cord care improves the chances of the newborn’s survival. You will be proud and happy that your partner/community made the change. | |
| **SUPPORT STATEMENT** | |
| In communities where chlorhexidine is being used for cord care, fewer newborns are getting infections, fewer are dying, and more are getting a good start to a life full of possibilities. You can play a role in making this happen [for your family]. | |
| **KEY MESSAGES** |  |
| Key messages for fathers and community members should focus on their roles as well as chlorhexidine’s benefits.   * You play a critical role in improving child survival in your family and community. * Ensuring that newborns have what they need for a healthy start in life is one very important thing you can do. * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Chlorhexidine for cord care is safer than other substances applied to the cord stump, more effective at preventing cord infection and newborn deaths, and inexpensive. It is a “best buy” in newborn care. * Save lives. Switch to chlorhexidine for cord care. * Talk to your partner/community about the benefits of chlorhexidine for cord care. People who know about chlorhexidine for cord care use chlorhexidine for cord care, and their babies stay healthier. * Chlorhexidine for cord care might make it take 1-2 days longer for the cord stump to fall off. This is normal and is not a cause for concern. * Invite a health provider to come speak to your community about saving newborn lives and to listen to what challenges your community faces. * Chlorhexidine for cord care is available for free at the health center or at very low cost from \_\_\_\_\_\_\_\_\_\_\_. * Be like other men in your community who protect the health of their babies by ensuring the mother has chlorhexidine when it comes time for her to deliver. * Encourage your partner/community members to attend ANC clinics. * Encourage your partner/community members to deliver with a skilled attendant. | |

| **INFLUENCING AUDIENCE 3: RETAIL PHARMACISTS OR SOCIAL MARKETERS** | |
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| **OBJECTIVES** | |
| By the end of 2015, increase the percentage of pharmacy staff and social marketers who:   1. Believe that chlorhexidine can prevent umbilical cord infection 2. Believe that marketing chlorhexidine for cord care will provide additional revenue and improve family/community well-being 3. Are confident that they can correctly teach women how to use chlorhexidine to prevent umbilical cord infection 4. Are confident that they can educate family members, TBAs, and others about umbilical cord infection and the benefits of using chlorhexidine to prevent it 5. Maintain a supply of and market chlorhexidine for cord care or advise pregnant customers, TBAs, and others to have it for delivery. | |
| **POSITIONING** | |
| Chlorhexidine for cord care is a state-of-the-art, life-saving element of newborn care that retailers like you can offer to pregnant women and new mothers to increase revenue and help your community. | |
| **KEY PROMISE** | |
| Chlorhexidine for cord care is easy to stock and sell for extra income and will help you help your community. You will be seen as keeping up with important health care innovations. | |
| **SUPPORT STATEMENT** | |
| The MOH recommends use of chlorhexidine for cord care as a replacement for other cord care practices in order to improve neonatal health and reduce neonatal deaths. WHO recommends 7.1% chlorhexidine digluconate for cord care and has added it to the essential medicines list. Recent community-level randomized controlled trials in Bangladesh, Nepal, and Pakistan have shown that applying a 7.1% chlorhexidine digluconate to the umbilical cord saves lives (Mullany et al., 2006; Soofi et al., 2012). Across the three countries, data from over 54,000 newborns showed an aggregate 23% reduction in neonatal mortality (not including deaths in the first few hours of life) and a 68% reduction in severe infections for the chlorhexidine intervention groups. These are some of the largest effect sizes seen in any neonatal intervention (UN Commission Report, 2012). It is estimated that chlorhexidine has the potential to reduce overall newborn mortality risk by up to 18%, resulting in over half a million newborn lives saved (UN Commission Report, 2012; Hodgins, 2013). Drug sellers in many communities are successfully supplying chlorhexidine for cord care. Helping save newborn lives in this way improves relationships with the community. | |
| **KEY MESSAGES** |  |
| Key messages for retailers and social marketing should emphasize the sales potential as well as the benefits to the community.   * Too many newborns get very sick or die because of neonatal sepsis and cord stump infection. * Chlorhexidine for cord care is an inexpensive gel or liquid applied to the cord stump daily [or as recommended by the MOH] to protect the newborn from infection. * Strong latent demand exists for something safe and effective to apply to the umbilical cord stump. You can help stimulate and meet that demand by promoting the use of chlorhexidine. * WHO, the MOH, and physicians now recommend 7.1% chlorhexidine digluconate delivering 4% chlorhexidine to prevent cord infection. This is the only concentration of chlorhexidine recommended for cord care. * Chlorhexidine for cord care is inexpensive to retailers, has a long shelf life, and does not require refrigeration. * Studies have shown that women and families are willing to pay a reasonable price for chlorhexidine for cord care since they value its life-saving effects. * Chlorhexidine for cord care is safer and more effective than other substances applied to the cord in your community, including other antiseptics. Families in many communities are now using chlorhexidine for cord care instead of other substances such as methylated spirits, breast milk, oils, and pastes, and more babies there are surviving because of it. * Counsel women that using chlorhexidine for cord care will protect the cord from infection and that chlorhexidine should be applied shortly after birth (and, where the MOH has designated multiply day application, daily at home). * Counsel women that using chlorhexidine for cord care might make it take a day or two longer for the cord stump to fall off, which is normal. Help them practice explaining this to their male partner and other family members. * As more babies in your area survive because of chlorhexidine, demand for chlorhexidine for cord care will increase. * Market chlorhexidine for cord care alongside clean birth kits for an easy sell that also benefits families and the community. * Consider working with TBAs to get chlorhexidine for cord care to more expectant mothers in time for delivery. | |