## Step 5: Determine Activities and Interventions

Wherever possible, messaging about misoprostol should be integrated into broader maternal health behavior change efforts. A review of misoprostol introduction and demonstration studies suggests the following as a successful minimum package of interventions:

* Training of service providers at facility and community level, including interpersonal communication, job aids, and refreshers
* Group and individual counseling and education, especially by providers
* Materials to use in group and individual counseling and education (flipchart, pamphlet/brochure, package insert)
* Interventions to remind pregnant women and their support system of when and how to use misoprostol (role play, sticker for inside home, package insert, messages printed on useful items such as scarves)
* Interventions to remind and assist TBAs and other community-level providers (clean birth kit including misoprostol and instructions for its use and managing side effects)

On a larger scale, it will be important to have interventions that address policy and practice, supply, and monitoring.

Suggested approaches and activities and illustrative examples are presented here as appropriate choices for communicating to primary and influencing audiences about misoprostol. These suggestions are a starting point and close collaboration with communication and creative professionals can help ensure that design and execution are innovative and compelling.

**Mass Media**

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| **INTERVENTION AREA** | **ILLUSTRATIVE ACTIVITIES** | **PURPOSE** | **INTENDED AUDIENCE** |
| Short-form mass media | * Develop Radio Public Service Announcements (PSAs) on misoprostol (e.g. of real women talking about how happy they were to have misoprostol after childbirth and of men who wish they had known about misoprostol in time to save their partner.)
* Where TV coverage is good, could do TV spots as above and on facility delivery/safe birth including mention of main cause of maternal death
 | Increase product awareness and knowledge of benefits | Pregnant WomenMale partners of pregnant womenGatekeepers/extended familyCommunities/leadersSecondarily: Health providers (facility- and community-level) |
| Long-form mass media | * Integrate misoprostol into multi-episode radio drama serial
* Produce radio call-in shows that include misoprostol and excessive bleeding as a topic
 | Stimulate social dialogue about everyone’s role in protecting maternityShift social norms around assisted childbirth | Pregnant WomenMale partners of pregnant womenGatekeepers/extended familyCommunities |
| Print media | * Develop/adapt take home brochures/leaflets on misoprostol (including where to get it), stickers to remind women when to take misoprostol, posters
 | Increase product knowledge of where to find quality servicesProvide reminders  | Pregnant womenMale partners of pregnant women |
| Digital media and mHealth | * Produce SMS service on misoprostol benefits, reminders of when to take it, reminders to seek ANC, misoprostol suppliers (preferably in the context of safe birth messaging)
* Host maternal health hotline (phone and/or SMS-based)
 | Increase product awareness and knowledgeStimulate social dialogue | Pregnant WomenMale partners of pregnant womenCommunity-based providers |

**Clinic-Based Services**

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| **INTERVENTION AREA** | **ILLUSTRATIVE ACTIVITIES** | **PURPOSE** | **INTENDED AUDIENCE** |
| Clinic services | * Train providers in AMTSL, including the use of oxytocin or misoprostol if oxytocin is not available
* Discuss PPH and misoprostol during ANC education sessions
* Develop flipchart for group and individual education
* Develop safe birth video for clinic waiting room
* Develop and disseminate PPH/misoprostol guidelines
* Develop misoprostol job aids (instructions, algorithms, checklists, etc.) on when and how to use, management of side effects
* Develop low- and non-literate materials for take-home misoprostol
* Train pharmacists on misoprostol storage and dispensing
* Develop posters for awareness, teaching, and reminding
 | Increase product awareness/knowledgeEstablish quality standards to ensure good service for clientsImprove provider-client interaction | Clinical providersWomen |
| Digital/distance learning | * Develop distance learning/online module for clinicians, preferably integrated into an existing maternal health distance learning program
* Develop short video clips and print FAQs that model education and counseling that can be disseminated via video, smartphones, tablets and online
* Use Twitter or other social media as a discussion forum to share program implementation ideas, problems, and solutions
 | Increase and refresh knowledge and skills  | Clinical providersANC and non-clinical providersDistrict/facility-level decision-makers, supervisors, implementers |

**Community-Based Services, Outreach and Community Approaches**

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| **INTERVENTION AREA** | **ILLUSTRATIVE ACTIVITIES** | **PURPOSE** | **INTENDED AUDIENCE** |
| CHW outreach | * Train CHWs to conduct community-based education and referral for safe birth
* Develop and produce radio distance learning program on safe birth, including misoprostol for PPH, for community workers that model positive behaviors and relationships with communities and referral clinics
* Establish CHW radio listening groups for distance learning program
* Develop/adapt materials and job aides (flipbooks, pamphlets, checklists, referral cards, etc.) to provide guidance on counseling on safe birth including PPH and Misoprostol
 | Improve knowledge and skills Provide peer-supported learning opportunities Ensure quality education and referral Promote quality services | Community-level providers |
| CHW/TBA administration/ distribution | * Train and equip TBAs for safe delivery, including misoprostol
* Train CHWs to counsel pregnant women and distribute misoprostol to women by 32 weeks with low-literate take-away instructions on usage
* Develop an easy-to-keep and carry job aid
* Develop sticker to remind pregnant women when to take misoprostol
* Develop pictorial pamphlet with key messages for new mother/family
 | Increase understanding of misoprostol and its useProvide community-based counseling and services for womenPromote proper use of misoprostol among service providers, and patients themselves | Community-level providers |
| Community dialogues | * Hold community dialogues around maternal health, including PPH and misoprostol, using satisfied users (and their partners and gatekeepers) as key advocates
* Organize discussion groups for men, women and/or couples, other family members (e.g., mothers and mothers-in-law), and community/religious leaders as appropriate
 | Encourage social dialogue on preventing maternal deathsIncrease social support for safe birth using misoprostol | WomenMale partners of pregnant womenGatekeepers/extended familyCommunities |
| Champions | * Identify satisfied users as community advocates
* Identify “everyday heroes” – men and women in the community who support safe birth and are helping to ensure the health of their families – and celebrate them at community events and through community media and mass media
* Identify men who have suffered the loss of a wife in childbirth and want to save other families from such tragedy. Have them speak at community meetings, in mass media, at work where appropriate, and one-on-one with their neighbors
 | Encourage social dialogue on preventing maternal deathsIncrease social support for safe birth | WomenMale partners of pregnant womenGatekeepers/extended familyCommunities |
| Social franchising/ service promotion | * Establish network of pharmacies to stock, dispense, and instruct on misoprostol use.
* Develop and disseminate materials to pharmacies on misoprostol benefits and use
 | Promote quality brand of misoprostol | PharmaciesPregnant women and their support system |

**Structural**

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| **INTERVENTION AREA** | **ILLUSTRATIVE ACTIVITIES** | **PURPOSE** | **INTENDED AUDIENCE** |
| Policy and guidelines | * Disseminate guidelines for use of misoprostol to prevent and treat PPH in absence of oxytocin
* Twitter feed or other social media on international, national, and local progress toward making misoprostol available at community level, local impact, studies/reports published, implementation tips, and other relevant information

*N.B. Scaling Up Lifesaving Commodities for Women, Children, and Newborns: An Advocacy Toolkit* provides advocacy resources for utilizing the Commission platform to raise awareness and engage stakeholders in addressing commodity-related gaps in policy. See: <http://www.path.org/publications/detail.php?i=2381> | Ensure consistent availability and use of misoprostolAddress any abortion-related or safety concernsEnable community-level distribution and use of misoprostol | National and district health officials  |
| Pre-service/in-service training | * Integrate misoprostol into pre-service and in-service training for providers, including pharmacists, doctors, nurses, midwives, CHWs, etc.
 | Increase awareness  | Pharmacists, doctors, nurses, midwives, CHWs, etc. |