## Step 4: Design Message Strategy

| **PRIMARY AUDIENCE 1: CAREGIVERS OF CHILDREN UNDER FIVE** | |
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| **OBJECTIVES** | |
| By 2015, increase the percentage of caregivers of children under five who:   1. Recognize the signs and symptoms of childhood pneumonia and urgently seek treatment from a healthcare provider; 2. Believe that childhood pneumonia is life-threatening yet treatable with antibiotics; 3. Know where to access quality treatment for childhood pneumonia; 4. Receive an appropriate diagnosis and treatment from a qualified health care provider. | |
| **POSITIONING** | |
| Caring mothers recognize that cough, fever and fast breathing are signs of pneumonia in children, and are empowered to seek treatment quickly so that their children will have a full recovery. | |
| **KEY PROMISE** | |
| Cough, fever and fast breathing are signs of a serious illness *that can be cured* with immediate treatment from a healthcare provider. | |
| **SUPPORT STATEMENT** | |
| The Ministry of Health recommends antibiotics to cure pneumonia in children under five. | |
| **KEY MESSAGES** |  |
| Critical information and key messages should be provided in a simple, easy-to-understand and memorable way, especially for dosage and duration of treatment. Examples of key messages include:   * Coughing and fast breathing in young children are signs of pneumonia, a serious illness; mothers should seek immediate medical treatment for their children right away. * If your child has a fever, be sure to ask the provider to also check for pneumonia (especially important in malaria endemic areas). * Coughing and fast breathing in young children can be cured with antibiotics; seek treatment from a provider right away. * Mothers in my community seek treatment immediately from a healthcare provider for coughing and fast breathing in children. * Treatment for cough, fever and fast breathing in children is safe, affordable and effective.   A Global Evidence Review (Health Communication Capacity Collaborative, 2013) found limited evidence about precisely which messages used in communications campaigns have been most effective in increasing treatment seeking for pneumonia or demand for amoxicillin/antibiotics to treat pneumonia. However, based on the evidence available, programmatic experience and successful campaigns for malaria treatment, the Pneumonia Working Group for the UNCoLSC recommends that the critical content in key messages for caregivers are:   * Symptom recognition, and * Seek treatment immediately.   When selecting key messages, the Pneumonia Working Group recommends that formative research investigate whether caregivers receive a correct diagnosis and prescription when they seek treatment.   * If there is confidence that caregivers who seek treatment will get the correct diagnosis and treatment, then messages should emphasize “seek treatment”; * If there is a concern that symptoms will not be correctly diagnosed, then the messages may want to emphasize getting “checked for pneumonia.”   In areas where malaria is endemic, it may now be common practice for parents to seek treatment when their children have fevers. However, it may not be common practice for providers to check for symptoms of pneumonia. Therefore, the key message to caregivers should be “If your child has a fever, have your child *checked* for pneumonia and malaria immediately.” Finally, the Diarrhea and Pneumonia working group recommend using the term “pneumonia” instead of naming the symptoms of pneumonia in contexts where the symptoms of pneumonia are readily recognized by caregivers. | |

| **PRIMARY AUDIENCE 2: COMMUNITY HEALTH WORKERS** | |
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| **OBJECTIVES** |  |
| By the year 2015, increase the percentage of CHWs who:   1. Correctly recognize pneumonia symptoms in young children (and, where permitted, distribute dispersible amoxicillin as the first line treatment for suspected pneumonia). 2. Refer caregivers to qualified providers for severe pneumonia in young children. 3. Demonstrate accurate knowledge of correct diagnosis and treatment – dosage and duration – with amoxicillin for suspected pneumonia in young children. | |
| **POSITIONING** |  |
| In areas where CHW are permitted to prescribe/dispense antibiotics:  *Respected health care workers recognize that cough, fever and fast or difficult breathing are the signs of pneumonia in children under five and they earn the trust of the community members because they treat childhood pneumonia effectively with amoxicillin.*  In areas where CHW are not permitted to prescribe/dispense antibiotics:  *Respected health care workers recognize that cough, fever and fast or difficult breathing are the signs of pneumonia in children under five and they earn the trust of the community members because they refer caregivers for appropriate treatment.* | |
| **KEY PROMISE** |  |
| Community Health Workers who offer correct, effective pneumonia treatment or advice (depending on whether CHWs are permitted to treat with antibiotics) for children under five are recognized as knowledgeable leaders in their communities, and their neighbors will return regularly to seek advice and medicine. | |
| **SUPPORT STATEMENT** |  |
| Amoxicillin is the treatment that the WHO and the Ministry of Health recommend for pneumonia in children under five. | |
| **KEY MESSAGES** |  |
| *In countries where CHWs are permitted to distribute antibiotics, the key message is to use amoxicillin when a child presents with symptoms of pneumonia:*  When a child shows symptoms of pneumonia – cough, fever and fast or difficult breathing, amoxicillin is the recommended treatment because it is effective and affordable.  *In countries where CHWs are* ***not*** *permitted to distribute antibiotics, the key message is to refer the child for immediate treatment:*  When a child shows symptoms of pneumonia – cough, fever and fast or difficult breathing, immediately refer caregivers to a clinic for affordable antibiotics that will effectively treat pneumonia.  Key messages for CHWs should be focused on knowledge of effective treatment in line with national guidelines, confidence in providing counseling and referrals to qualified providers, and emphasizing how a good reputation benefits their work. Illustrative examples include:   * Cough, fever and fast breathing in children under five are symptoms of pneumonia, which should be treated with (dispersible) amoxicillin. * Health care workers should always counsel caregivers to seek treatment immediately if their children are coughing or have fast breathing. * Check the child for symptoms of pneumonia if a child under five presents with a fever, cough or fast breathing. * (In malaria endemic areas) Providers should check for signs of pneumonia as the symptoms are similar to malaria but the treatment is different. * Amoxicillin is the recommended treatment for pneumonia children under five by the Ministry of Health and WHO (or other respected sources of medical information such as a national association of pediatricians, etc.) * Children under five with pneumonia can be treated effectively and affordably with amoxicillin. * Health workers should carefully counsel caregivers to complete the full course of amoxicillin. | |

| **PRIMARY AUDIENCE 3: NON-CLINICAL PROVIDERS (PHARMACISTS)** | |
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| **OBJECTIVES** |  |
| By the year 2015, increase the percentage of non-clinical providers (pharmacists) who:   1. Demonstrate accurate knowledge of the symptoms and treatment of pneumonia in children under five, including the correct dosage and duration of treatment with amoxicillin; 2. Correctly recommend and sell amoxicillin as the first line treatment for suspected pneumonia in children under five; 3. Refer caregivers to qualified providers for suspected pneumonia in children under five. | |
| **POSITIONING** |  |
| Trained providers recognize that cough, fever and fast or difficult breathing are the signs of pneumonia in children under five and they earn the respect of their customers because they offer effective, affordable amoxicillin to treat childhood pneumonia. | |
| **KEY PROMISE** |  |
| Providers who offers correct, effective childhood pneumonia treatment and referrals will gain a loyal customer base. | |
| **SUPPORT STATEMENT** |  |
| Amoxicillin is the medicine that the WHO and the Ministry of Health recommend for treatment of pneumonia in children under five. | |
| **KEY MESSAGES** |  |
| Key messages for non-clinical providers should be focused on improving their knowledge of the signs, symptoms and correct treatment of childhood pneumonia with amoxicillin. Non-clinical providers should be encouraged to refer caregivers to hospitals and health centers for appropriate diagnosis and treatment, emphasizing that customers will be loyal to providers who offer correct treatment and advice. Illustrative messages include:   * Cough, fever and fast breathing are symptoms of pneumonia in children under five. * Amoxicillin is scientifically shown to be the effective treatment for suspected pneumonia in children under five. Check for pneumonia if a child presents with a fever, cough or fast breathing (for trained non-clinical providers). * If caregivers seek treatment for a child’s fever, providers should check for signs of pneumonia also. The symptoms of both illnesses are similar but the treatment is different. (In malaria endemic areas) * The Ministry of Health recommends amoxicillin as treatment for pneumonia in children under five (per country context). * Customers have confidence in health workers who offer correct treatment and referrals, and will recommend that provider to their family and friends. * Health workers should carefully counsel caregivers to complete the full course of amoxicillin when treating for childhood pneumonia.   Evidence from social marketing programs suggests that non-clinical providers, especially pharmacy and drug shop owners, are motivated both by reputation and by profit. Communications programs and key messages should consider opportunities to address both the providers’ desire to be recognized as knowledgeable and his/her need to manage a successful business. | |

| **PRIMARY AUDIENCE 4: CLINICAL PROVIDERS** | |
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| **OBJECTIVES** |  |
| By the year 2015, increase the percentage of clinical providers who:   1. Demonstrate accurate knowledge of the symptoms and treatment of pneumonia in children under five; 2. Correctly diagnose pneumonia in children under five and prescribe the right dosage and duration of amoxicillin as the first line treatment for pneumonia. | |
| **POSITIONING** |  |
| Doctors and clinical providers who offer correct, effective pneumonia treatment for children under five with amoxicillin will be respected and trusted by members of their community. | |
| **KEY PROMISE** |  |
| Amoxicillin effectively and affordably treats pneumonia in children under five. | |
| **SUPPORT STATEMENT** |  |
| The WHO and the Ministry of Health guidelines advise providers to treat pneumonia in children under five with amoxicillin. | |
| **KEY MESSAGES** |  |
| Key messages for providers should focus on improving their knowledge and practice for managing pneumonia in children under five. Messages should reinforce that amoxicillin is the recommended treatment. In areas where malaria is endemic, key messages should emphasis checking for pneumonia given that malaria and pneumonia may present with the same or similar signs.  Illustrative key messages for clinical providers include:   * Amoxicillin is scientifically shown to be an effective treatment for pneumonia in children under five. * Amoxicillin is the recommended first line treatment for pneumonia in children under five. * Amoxicillin is affordable, effective treatment for pneumonia in children under five. * Cough, fever and fast or difficult breathing are symptoms of pneumonia in children under five, which can be treated effectively with amoxicillin. * When children present with a fever, providers should check for signs of pneumonia, as the symptoms are similar to malaria but the treatment is different. (In areas with endemic malaria) * Providers must carefully counsel caregivers to complete the full course of amoxicillin. * Providers who offer amoxicillin, the correct treatment for pneumonia in children under five, will earn the confidence and trust of their clients. * Providers must always counsel caregivers to seek treatment immediately if children have a cough and fast or difficult breathing.   There is a need for country-specific formative research to understand providers’ motivations and barriers for prescribing amoxicillin for pneumonia in order to develop relevant messages that resonate with the intended audience. | |

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| **INFLUENCING AUDIENCE 1: EXTENDED FAMILY MEMBERS AND COMMUNITY MEMBERS** | |
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| **OBJECTIVES** |  |
| By 2015, increase the percentage of extended family/community members who:   1. Recognize cough, fever and fast breathing as symptoms of pneumonia in children under five; 2. Believe that childhood pneumonia is a serious illness and children should be taken to a health care provider for treatment immediately; 3. Support their families to seek treatment for children’s pneumonia; 4. Support the use of amoxicillin for childhood pneumonia over other remedies or treatments. | |
| **POSITIONING** |  |
| Extended family members / Community leaders gain respect and influence when they protect the health of children in their communities, so they encourage mothers of young children to immediately seek treatment from trained healthcare providers when the children have a cough, fever and fast or difficult breathing. | |
| **KEY PROMISE** |  |
| You can help keep your family’s/community’s children healthy and strong by seeking prompt care when they have a cough, fever and fast or difficult breathing, which are signs of pneumonia. | |
| **SUPPORT STATEMENT** |  |
| For family members:  Fast breathing and fever can be confused with malaria but may be signs of a more serious condition called pneumonia.  For community leaders:  By recommending effective, proven treatment for childhood pneumonia, community leaders are reiterating what national health experts are recommending. | |
| **KEY MESSAGES** |  |
| Key messages for extended family and community members should focus on the benefits of treatment seeking. Key messages may include:   * Respected community leaders / knowledgeable mothers-in-law encourage caregivers to visit a health facility when young children have a cough, fever and fast or difficult breathing, which are signs of pneumonia. * Cough, fever and fast breathing are signs of a serious but treatable illness for young children. Encourage young mothers in your family/community to visit a health care provider for treatment. * There are effective medicines to treat pneumonia in children under five. * Effective medicines for pneumonia in children under five are affordable. Guide young mothers in your family/community by telling them to visit a provider. * Support young wives/families to seek treatment from providers for childhood pneumonia. | |