

Step 4: Design Message Strategy

PRIMARY AUDIENCE 1: PREGNANT WOMEN

OBJECTIVES

By 2015, increase the percentage of women (15-49) who:

- 1) Are aware that excessive bleeding after childbirth is dangerous but preventable
- 2) Are aware that misoprostol after birth can prevent excessive bleeding
- 3) Are motivated and have the self-efficacy (awareness, knowledge, and confidence) to ask an ANC provider or CHW about PPH and misoprostol
- 4) Have taken misoprostol correctly to prevent excessive bleeding
- 5) Would recommend misoprostol to a relative or friend to prevent excessive bleeding after childbirth

POSITIONING

Knowledgeable mothers who deliver at home ask for misoprostol so they can live to raise their children.

KEY PROMISE

Taking misoprostol immediately after childbirth can prevent excessive bleeding and could save your life. Saving your own life is the best way to

PRIMARY AUDIENCE 1: PREGNANT WOMEN

help your baby live and be healthy.

SUPPORT STATEMENT

Your newborn will have a better chance for a healthy life if you are alive and well and able to care for her/him.

KEY MESSAGES

Key messages for pregnant women should focus on the benefits of misoprostol and facility delivery. Key information should also be provided in a simple, easy-to-understand and non-threatening way.

- Far too many women die from heavy bleeding after childbirth. Make sure you are not one of them.
- Heavy bleeding after childbirth is very dangerous, and there are no warning signs.
- If possible, have your baby at a health facility or with a skilled attendant so you can get the best care available.
- Have a plan for the birth: Where will it happen? How will you get there? Who will help? What supplies are needed to make it clean and safe? What happens if there is an emergency?
- Well before your expected delivery date, ask your health care provider to explain about how misoprostol can prevent heavy bleeding after childbirth.
- If you plan to give birth at home, ask where you can get misoprostol and how to take it.
- Using misoprostol immediately after childbirth can save your life so you can raise your children.
- Take misoprostol tablets immediately after the baby (or all babies in the case of multiple births) is born, but before the placenta is delivered.
- Never take misoprostol tablets before the baby comes out.
- Misoprostol tablets are easy to use – just swallow them with a small amount of water.
- If you have shivering after taking misoprostol, cover yourself with a blanket.

PRIMARY AUDIENCE 1: PREGNANT WOMEN

- If you have fever after taking misoprostol and it doesn't go away in a few hours, take a paracetamol.

PRIMARY AUDIENCE 2: COMMUNITY-LEVEL PROVIDERS	
OBJECTIVES	
<p>By the year 2015, increase the percentage of community-level providers who:</p> <ol style="list-style-type: none">1) Believe that misoprostol can prevent and treat PPH at home births2) Believe that providing misoprostol to prevent and treat PPH makes them better health workers and community members3) Are confident that they can correctly teach pregnant women how to use misoprostol to prevent PPH4) Are confident that they can educate communities about PPH and the safety and effectiveness of using misoprostol to prevent it5) Know where to get misoprostol6) Correctly demonstrate how to counsel women about PPH and its prevention and treatment, including referral when bleeding is still excessive7) Correctly provide and report use of misoprostol for PPH during home deliveries8) Feel that they have support to provide misoprostol to women	
POSITIONING	
<p>Women trust community-level providers with their health and the health of their families. Community-level providers help save lives, improve community well-being, and increase their value to the community by providing and educating about misoprostol to prevent PPH.</p>	
KEY PROMISE	

PRIMARY AUDIENCE 2: COMMUNITY-LEVEL PROVIDERS

Misoprostol can help you save lives in your community by reducing PPH.

SUPPORT STATEMENT

Community-based workers and volunteers in many countries are successfully recommending and/or administering misoprostol to help families. It makes them proud and improves relationships with the community.

KEY MESSAGES

Key messages for community-based providers should focus on creating confident, capable providers that believe in the safety and effectiveness of misoprostol for the third stage of labor.

- Heavy bleeding after childbirth is a life-threatening condition and there are no warning signs.
- When a woman cannot use a skilled provider who has the first-line treatment, community-based providers like you can save lives and reduce suffering by providing misoprostol.
- Women in your community depend on you to protect their health and the health of their children.
- One of your most important jobs is to talk with pregnant women, their families, and community members about the risks of childbirth and opportunities for making birth safe.
- Misoprostol is easy to use.
- Misoprostol is a tablet—not an injection—that is swallowed AFTER DELIVERY OF THE BABY to prevent bleeding after childbirth that can lead to death.
- Misoprostol should never be taken before the baby comes out.
- Misoprostol is available at [the facility] or from community-based workers like you for women who deliver at home.
- To prevent excessive bleeding after childbirth: Immediately after the birth of the baby, check to make sure there is no twin. Before

PRIMARY AUDIENCE 2: COMMUNITY-LEVEL PROVIDERS

delivery of the placenta, the mother swallows 600mcg (3 tablets) of misoprostol with water.

- Monitor the woman closely. Expected symptoms are shivering; vomiting/ nausea; and fever. Symptoms typically resolve on their own in a short while. For chills, cover the woman with a blanket. For fever, apply cool, wet cloths.
- To treat excessive bleeding after childbirth if a mother has not already taken misoprostol, give her 4 tablets of misoprostol (800 micrograms) to swallow or let dissolve under her tongue) to stop the excessive bleeding. Refer her to a health facility immediately or monitor the mother closely and transfer her to the nearest facility if bleeding continues. (Adapt to national guidelines.)
- Emphasize to pregnant women that the facility is the safest place to deliver.

INFLUENCING AUDIENCE 1: MALE PARTNERS, MOTHERS, AND MOTHERS-IN-LAW

OBJECTIVES

By the year 2015, increase the percentage of partners, mothers, and mothers-in-law who:

- 1) Are aware that excessive bleeding after childbirth is a major killer of women
- 2) Have heard of misoprostol
- 3) Believe that misoprostol can prevent excessive bleeding after childbirth
- 4) Say they approve of the use of misoprostol to prevent PPH
- 5) Know that misoprostol should be taken right after the child is born
- 6) Encourage the pregnant woman to have misoprostol on hand during delivery
- 7) Encourage the pregnant woman to use misoprostol after birth and before delivery of the placenta

POSITIONING

Misoprostol is a smart, easy way to help protect your family—it can save the mother’s life, and the best way to ensure the baby survives and thrives is to ensure the mother is alive and healthy. There is nothing like a mother’s love and devotion to her child.

KEY PROMISE

Misoprostol and other modern care improve the newly-delivered mother’s chances of survival, which makes family life better for all. Misoprostol

INFLUENCING AUDIENCE 1: MALE PARTNERS, MOTHERS, AND MOTHERS-IN-LAW

can also save the family a lot of money that would need to be spent on emergency and long-term care if the mother has excessive bleeding.

When you help make this possible, you are even more respected and appreciated.

SUPPORT STATEMENT

In communities where misoprostol is being used, fewer women are suffering and dying from excessive bleeding after childbirth.

KEY MESSAGES

Key messages should focus on benefits and action steps.

- Many women die in childbirth due to excessive bleeding.
- If the mother is alive and healthy, the child is more likely to survive and grow up healthy. In fact, the whole family is likely to be healthier and do better.
- You have the power to help your family by ensuring that your loved one has misoprostol when it comes time for her to deliver.
- Encourage the pregnant woman to attend the ANC clinic to help ensure she and the child stay healthy.
- Before the baby is due, help decide where the woman will deliver, what supplies she needs, who will help, and how to get to the health center if needed.
- Encourage the woman to deliver at a health center or with a skilled birth attendant.
- Emergency treatment is difficult and expensive. It is much better to prevent emergencies.
- An inexpensive, easy-to-use drug called misoprostol can prevent excessive bleeding after childbirth.
- Although the health facility is the safest place to give birth, misoprostol can also be safely used at home.

INFLUENCING AUDIENCE 1: MALE PARTNERS, MOTHERS, AND MOTHERS-IN-LAW

- Be like others in your community who protect the health of the women in their family -- ensure she has misoprostol when it comes time for her to deliver.
- Knowledge is power. If you know what to expect during pregnancy and delivery, you can help ensure that mother and child are safe.

INFLUENCING AUDIENCE 2: FACILITY-BASED HEALTH PROVIDERS

OBJECTIVES

By 2015, increase the percentage of facility-based health providers who:

- 1) Are aware of that misoprostol can save lives when used for PPH prevention and treatment
- 2) Are aware of and understand the guidelines for preventing and treating PPH, including use of oxytocin as the preferred drug
- 3) Say they support the use of misoprostol as a second line drug for PPH prevention and a 3rd line drug for PPH treatment
- 4) Are motivated to maintain sufficient stocks of the drug
- 5) Are motivated and have the skills and self-efficacy to counsel patients on the benefits of the drug and administer it appropriately
- 6) Report they believe that community-level use of misoprostol is a safe and effective way to save lives and money
- 7) Permit or participate in distribution of misoprostol at ANC clinics or by CHWs and/or TBAs for PPH prevention and treatment
- 8) Ensure that misoprostol is available as second-line treatment for PPH prevention in facilities and for use at community level

POSITIONING

Facility-based providers can increase their influence and impact by facilitating community-level PPH prevention using misoprostol. Misoprostol saves lives, livelihoods, time, and money. It's good for women, good for families, good for communities, good for health workers, and good for society. It extends the reach of health providers beyond the facility and into homes and communities. You can save more than just the women at your clinic!

INFLUENCING AUDIENCE 2: FACILITY-BASED HEALTH PROVIDERS**KEY PROMISE**

Endorsing and facilitating community-based use of misoprostol will reduce the number of PPH cases that need to be referred to you and save the lives of women who would arrive too late or not at all. Clients and their families will appreciate your facility and increase their trust in it. You and your facility will be recognized for reducing the leading cause of maternal deaths in your country, and helping to reach MDG5 – improve maternal health. In addition, you can very easily save lives by using misoprostol in the active management of third stage labor when oxytocin is not available. Misoprostol is inexpensive and easy to store, and potential side effects are easily managed.

SUPPORT STATEMENT

WHO recommends the use of misoprostol as a second-line drug for prevention of PPH (WHO, 2009). In 2011, a WHO Expert Committee on the Selection and Use of Essential Medicines included misoprostol for prevention of PPH on its Model List of Essential Medicines. In 2006, the International Confederation of Midwives (ICM) and the International Federation of Gynecology and Obstetrics (FIGO) jointly called for “national regulatory agencies and policy makers to approve misoprostol for PPH prevention and treatment.” FIGO and ICM advocate the administration of misoprostol to reduce the occurrence of PPH “in situations where no oxytocin is available or birth attendants’ skills are limited.” Ten years of data from developing countries demonstrate the safety and usefulness of misoprostol for saving mothers’ lives. Data from Afghanistan, Indonesia, Nepal, and other countries also show that introduction of misoprostol for home births can actually increase the proportion of facility deliveries in the intervention areas, perhaps by improving linkages and trust between communities and facilities.

KEY MESSAGES

Key messages for facility-based providers should be focused on their highly influential role in health decision-making and on building confident,

INFLUENCING AUDIENCE 2: FACILITY-BASED HEALTH PROVIDERS

capable providers that believe in the safety and effectiveness of misoprostol for preventing and treating PPH.

- PPH is likely the number one or two cause of maternal deaths in your facility and community.
- Oxytocin is the 1st line drug for preventing and treating PPH.
- Misoprostol is a safe and effective 2nd line drug for preventing PPH and a 3rd line drug for treating PPH.
- Misoprostol comes in tablet form and is easy to administer. You can be confident about it being administered at the right dose and right time.
- Misoprostol can be stored at room temperature, preferably in double-aluminum blister packs.
- Discuss with women where they can obtain misoprostol to be prepared for delivery.
- Provide women with misoprostol during ANC so they have it during delivery.
- Use pictures (posters, pamphlets) and provide clear instructions to explain to pregnant women how and when to use misoprostol if they deliver at home. Have them repeat the instructions to you in their own words. Do this at every ANC visit, and provide them with the tablets before the last trimester.
- Community-based misoprostol can help improve facility statistics and lower costs.
- Studies and projects from at least 10 countries demonstrate that CHWs, TBAs, and other community-level workers can safely and effectively administer misoprostol at community level without direct supervision of a clinician and that women who receive it this way are highly satisfied with the outcome.
- Studies also show that programs that promote community-level use of misoprostol for PPH might actually increase the percentage of facility births by building linkages and trust with the health system. In this way, community-based misoprostol can be part of a transition strategy to increase facility births.
- Help your community bring down maternal mortality – make misoprostol for PPH available for all births.
- Using misoprostol when oxytocin is not available will help you save lives, save time, reduce emergency referrals, and increase community confidence in you and your facility.
- To prevent PPH, give 600mcg of misoprostol orally after ensuring the baby has been delivered and there is no twin and before delivery of the placenta.
- Monitor the woman closely. Potential side effects include shivering, fever, and vomiting/nausea. Symptoms typically resolve on their own, but you can manage shivering by placing a blanket on the woman. Manage fever with paracetamol and by placing a wet cloth on the forehead.

INFLUENCING AUDIENCE 2: FACILITY-BASED HEALTH PROVIDERS

- To treat PPH, administer 800mcg sublingually and refer the woman to a higher-level facility (Adapt to national guidelines.)
- Misoprostol should NOT be administered for the prevention of PPH while the woman is still pregnant. [If used to induce labor, guidelines call for a much smaller dose.]

INFLUENCING AUDIENCE 3: COMMUNITY LEADERS

OBJECTIVES

By 2015, increase the percentage of community leaders who:

- 1) Recommend that pregnant women attend ANC clinics
- 2) Recommend that women give birth at a health facility or with a SBA whenever possible
- 3) Have heard of misoprostol
- 4) Believe that misoprostol can prevent excessive bleeding after childbirth
- 5) Encourage families in the community to have misoprostol on hand at childbirth
- 6) Encourage TBAs to participate in training on misoprostol and safe birth

POSITIONING

Community leaders help their communities and extend their influence by encouraging ANC, skilled delivery, and misoprostol for PPH to improve family and community health.

KEY PROMISE

INFLUENCING AUDIENCE 3: COMMUNITY LEADERS

Supporting misoprostol use to prevent PPH will earn you respect and trust because it will save mothers' lives and make things easier for families. Misoprostol and other modern care can help prevent new mothers from bleeding to death after delivery or from losing so much blood that they become very weak for a long time. Having healthy mothers can help ensure having healthy children for a strong community.

SUPPORT STATEMENT

In communities where misoprostol is being used, fewer women are suffering and dying from excessive bleeding after childbirth. Community leaders play a role in making this happen.

KEY MESSAGES

Key messages for community leaders should focus on their role as well as misoprostol's benefits.

- An inexpensive, easy-to-use drug called misoprostol can prevent excessive bleeding after childbirth.
- Misoprostol can save lives, money, and families.
- You can help reduce the number of women in your community who die in childbirth.
- Teach your community about the benefits of misoprostol.
- Healthier, more economically stable families make better communities.
- Invite a health provider to come speak to your group about safe motherhood and listen to what challenges your community faces.
- Encourage the women in your community to attend ANC clinics.
- Encourage the women in your community to deliver with a skilled attendant.