

**Step 4: Design Message Strategy**

<b>PRIMARY AUDIENCE 1: CAREGIVERS OF CHILDREN UNDER FIVE</b>
<b>OBJECTIVES</b>
<p>By 2015, increase the percentage of caregivers, at all levels of parity and marital status, who:</p> <ol style="list-style-type: none"><li>1) Give ORS and zinc to children at the first sign of diarrhea;</li><li>2) Know where to access quality treatment for diarrhea;</li><li>3) Ask for (or willingly accept) ORS and zinc when treatment is sought at a pharmacy or drug shop;</li><li>4) Do not give antibiotics or anti-diarrhea medicine to their children without a prescription;</li><li>5) Perceive ORS and zinc as effective treatment for diarrhea; and</li><li>6) Take their children to a qualified health care provider to treat the diarrhea if it continues or becomes more severe,</li></ol>
<b>POSITIONING</b>
<ul style="list-style-type: none"><li>• ORS and zinc together are the best treatment for children’s diarrhea because they speed recovery, restore energy and keep children healthy.</li><li>• ORS and zinc can give caregivers peace of mind – there is no better treatment for diarrhea.</li><li>• Diarrhea can be very dangerous. Caregivers can trust that ORS and zinc saves lives and can get their children back to health.</li></ul>
<b>KEY PROMISE</b>

**PRIMARY AUDIENCE 1: CAREGIVERS OF CHILDREN UNDER FIVE**

- ORS and zinc rehydrate children, restore energy and strength, and prevent future episodes of diarrhea.
- ORS and zinc is the best treatment for childhood diarrhea. ORS helps give your child strength and energy to get better. Zinc helps stop the diarrhea and protects your child from diarrhea for months. Together, ORS and zinc gives your child what he/she needs to get better and thrive.

*Evidence from Kenya, India and Mali, among other countries, suggests that the preventive benefits of zinc are attractive to caregivers, and that caregivers consider rehydration an important benefit of ORS. (Global Evidence Review, Diarrhea and Pneumonia Working Group, 2012)*

**SUPPORT STATEMENT**

WHO and UNICEF (and the Ministry of Health) recommend ORS and zinc as the first line treatment for diarrhea in children under five.

*Evidence from Bangladesh shows that having a respected local agency/champion was an important factor in the uptake of zinc. (Global Evidence Review, Diarrhea and Pneumonia Working Group, 2012)*

**KEY MESSAGES**

The most successful messages associated with increased use of ORS and zinc focused on confirming the benefits of ORS and zinc treatment that caregivers desire for their children. Messages designed to reduce barriers to treatment (affordability, availability) were less commonly used, although they did contribute to increased use. In Bangladesh in particular, the source of the message – highly respected, local organizations – appeared to positively impact uptake of ORS and zinc. Research from Niger, Uganda, Kenya and Nigeria indicated that traditional and religious beliefs impact care seeking and treatment decisions; yet there is no information about the effectiveness of messages designed to overcome strongly held religious or traditional beliefs. Intervention campaigns that focus solely on knowledge of symptoms or treatment have shown to be less successful. *(Global Evidence Review, Diarrhea and Pneumonia Working Group, 2012)*

Some of the most common messages used globally include: ORS and zinc restore your child to health, ORS and zinc reduce the time to recovery,

### PRIMARY AUDIENCE 1: CAREGIVERS OF CHILDREN UNDER FIVE

ORS and zinc are available nearby, affordability of ORS and zinc, ease of use of ORS and zinc, mothers in my community use ORS and zinc to treat diarrhea.<sup>1</sup>

#### Illustrative Messages for Caregivers of Children Under Five:

- ORS and zinc are the first medicines to give a child with diarrhea.
- ORS and zinc replenish fluids so that children have energy and appetites.
- ORS and zinc help children recover quickly from diarrhea.
- Mothers in my community use ORS and zinc to treat diarrhea.
- ORS is a proven method to rehydrate children with diarrhea, and zinc is an effective new medicine.
- ORS and zinc are available nearby.
- ORS and zinc is an affordable treatment for diarrhea.
- ORS and zinc are easy to give to children.
- ORS and zinc help children recover quickly from diarrhea.

In 2013, the Diarrhea and Pneumonia Working Group collaborated with McCann Global to develop materials to promote ORS and zinc based on the research studies included in the Global Evidence Review. Examples of materials can be found at [www.zinc-ors.org](http://www.zinc-ors.org). The Working Group recommends using and evaluating these messages and materials for ORS and zinc demand generation initiatives. The key messages are:

- For all cases of childhood diarrhea, start with ORS and zinc.
- ORS and zinc speed recovery, restore strength (energy and appetite), and help keep children thriving.
- ORS and zinc – Together they are proven to keep children strong and thriving.

<sup>1</sup> All data is taken from the 2013 Global Evidence Review compiled by the Diarrhea & Pneumonia Working Group.

**PRIMARY AUDIENCE 2: NON-CLINICAL PROVIDERS****OBJECTIVES**

By the year 2015, increase the percentage of non-clinical providers who:

- 1) Demonstrate accurate knowledge of correct diarrhea treatment with ORS and zinc, including the benefits and correct dosage and duration.
- 2) Correctly recommend and sell ORS and zinc as the first line treatment for uncomplicated diarrhea without other accompanying treatments.
- 3) Refer caregivers to qualified providers for severe/complicated diarrhea.
- 4) Effectively counsel caregivers on the benefits, dosage, duration, and effectiveness of ORS and zinc, and have the confidence to explain to caregivers that ORS and zinc alone are the best treatment for diarrhea.
- 5) Are willing to forego the additional profit from extra medicines since the providers are recognized for contributing to improved health in their communities.

**POSITIONING**

For non-clinical providers, it may be necessary to conduct additional research around provider biases and other drivers to provider behavior that could be used to inform the audience profile and strategic design. Generally, for non-clinical providers, the positioning statements address the key benefit of ensuring their reputations for providing correct medicine that works while earning a profit. ORS and zinc make a child feel better, and prescribing them gives the provider an opportunity to explain that they are effective to restore energy, prevent future episodes and counsel caregivers on danger signs. Earning a profit is important to drug shop owners, so developing a long term relationship with customers by providing effective yet affordable medicine will ensure they are profitable in the long term (Global Evidence Review, 2013).

**PRIMARY AUDIENCE 2: NON-CLINICAL PROVIDERS****Illustrative Positioning Statement:**

ORS and zinc is the best treatment for diarrhea. Non-clinical providers who prescribe only ORS and zinc to treat childhood diarrhea gain respect from customers and develop long-term relationships with customers who trust their advice and the services they provide. They feel pride in providing the best treatment for diarrhea.

**KEY PROMISE**

Non-clinical providers who offer correct, effective diarrhea treatment with ORS and zinc will be seen as knowledgeable and trustworthy, and their business will continue to be profitable, as customers will return regularly to seek advice and medicines.

**SUPPORT STATEMENT**

WHO and UNICEF (and the Ministry of Health) recommend ORS and zinc to treat diarrhea in children.

**KEY MESSAGES**

Key messages for non-clinical providers should be focused on knowledge of effective treatment in line with national guidelines, confidence in providing counseling, making appropriate referrals to qualified providers, and emphasizing how a good reputation benefits their work. Non-clinical providers, especially pharmacists and drug shop owners, are motivated both by reputation and by profit. Communication 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 2: NON-CLINICAL PROVIDERS**

In 2013, the Diarrhea and Pneumonia Working Group collaborated with McCann Global to develop materials to promote ORS and zinc based on the research studies included in the Global Evidence Review (*Global Evidence Review, Diarrhea and Pneumonia Working Group, 2012*). The Working Group recommends using and evaluating these messages for ORS and zinc demand generation initiatives. The key messages for frontline workers include:

- For all cases of childhood diarrhea, start with ORS and zinc.
- ORS and zinc speed recovery, restore strength (energy and appetite), and help keep children thriving.
- For childhood diarrhea, Antibiotics- Rarely, Antimotility drugs – Never
- Give the child ORS and zinc, and give the mother peace of mind.
- ORS treats dehydration, which is the main cause of death from diarrhea in children.
- Antibiotics are only recommended for children with bloody diarrhea and episodes of cholera.
- Antimotility drugs are dangerous. Don't use them.
- WHO/UNICEF and the Ministry of Health strongly discourage the use of antimotility drugs (such as tincture of opium, loperamide, or other opiate derivatives) in infants and children.

Additional illustrative messages include:

- ORS and zinc rehydrate children, restore energy and prevent future episodes of diarrhea.
- ORS and zinc are real medicines for the treatment of childhood diarrhea.
- ORS and zinc reduce the length of the illness and the amount of diarrhea, while giving the child energy and strength.
- Most cases of diarrhea are caused by viruses or other pathogens and are not affected by antibiotics.
- Doctors and clinics prescribe ORS and zinc for un-complicated diarrhea.
- Anti-diarrheal medicines are dangerous for young children and should not be offered.
- Customers have confidence in providers who offer correct treatment and referrals and will recommend that provider to their family and friends.
- Experienced providers are able to influence caregivers' knowledge and perceptions of correct diarrhea treatment when they prescribe ORS and zinc.
- Trained providers are best placed to influence community/caregiver behaviors to use ORS and zinc to treat diarrhea.
- ORS and zinc alone are sufficient to treat uncomplicated diarrhea.
- ORS and zinc alone are effective to reduce the severity and duration of most diarrhea and prevent future episodes.

### PRIMARY AUDIENCE 3: COMMUNITY HEALTH WORKERS

#### OBJECTIVES

By the year 2015, increase the percentage of community health workers who:

- 1) Demonstrate accurate knowledge of correct diarrhea treatment with ORS and zinc, including the benefits and correct dosage and duration.
- 2) Correctly recommend and sell ORS and zinc as the first line treatment for uncomplicated diarrhea without other accompanying treatments
- 3) Refer caregivers to qualified providers for severe/complicated diarrhea.
- 4) Effectively counsel caregivers on the benefits, dosage, duration, and effectiveness of ORS and zinc, and have the confidence to explain to caregivers that ORS and zinc alone are the best treatment for diarrhea.

#### POSITIONING

##### Illustrative Positioning Statement:

- Respected community health workers treat childhood diarrhea with ORS and zinc, which will restore children's energy and prevent future episodes.

For CHWs, the positioning statement addresses the key benefit of ensuring their reputations for providing correct medicine that works. ORS and zinc make a child feel better, and prescribing them gives the provider an opportunity to explain that they are effective to restore energy, prevent future episodes, counsel caregivers on danger signs and make referrals to clinics and other providers.

Additional factors that the evidence suggests could be used for positioning statements include:

- Pride in community health role and providing effective solutions to clients

**PRIMARY AUDIENCE 3: COMMUNITY HEALTH WORKERS**

- Prestige in having the latest knowledge and information about diarrhea treatment
- Recognition from qualified providers that they are offering the best solution for severe diarrhea treatment and referrals

**KEY PROMISE**

Community health workers who offer correct, effective diarrhea treatment with ORS and zinc will be seen as knowledgeable leaders in their community, and their neighbors will return regularly to seek advice and medicines.

**SUPPORT STATEMENT**

WHO and UNICEF (and the Ministry of Health) recommend ORS and zinc to treat diarrhea in children because ORS rehydrates the child and zinc improves the child's ability to fight diseases.

**KEY MESSAGES**

Key messages for CHWs should be based on formative research in each context and should focus on knowledge of effective treatment in line with national guidelines, highlight confidence in providing counseling and referrals to qualified providers and emphasize how a good reputation benefits their work.

Messages based on data from the Global Evidence Review:

- ORS and zinc rehydrate the children, restore energy and prevent future episodes of diarrhea.
- ORS and zinc are “real medicines” for the treatment of childhood diarrhea.

### PRIMARY AUDIENCE 3: COMMUNITY HEALTH WORKERS

- ORS and zinc reduce the length of the illness and the amount of diarrhea, while giving the child energy and strength.
- ORS and zinc alone are sufficient to treat uncomplicated diarrhea.
- ORS and zinc alone are effective to reduce the severity and duration of most diarrhea and prevent future episodes.
- Most cases of diarrhea are caused by viruses or other pathogens, and are therefore not affected by antibiotics.
- Severe dehydration and complicated diarrhea can be fatal so providing referrals to qualified providers is an important part of counseling patients, even when selling ORS and zinc.
- Doctors and clinics prescribe ORS and zinc for un-complicated diarrhea.
- Anti-diarrheal medicines are dangerous for young children and should not be offered.
- Customers have confidence in providers who offer correct treatment and referrals, and they will recommend that provider to their family and friends.
- Experienced providers are able to influence caregivers' knowledge and perceptions of correct diarrhea treatment when they prescribe ORS and zinc.
- Trained providers are best placed to influence communities'/caregivers' behaviors to use ORS and zinc to treat diarrhea.

In 2013, the Diarrhea and Pneumonia Working Group collaborated with McCann Global to develop materials to promote ORS and zinc based on the research studies included in the Global Evidence Review. Examples of materials can be found at [www.zinc-ors.org](http://www.zinc-ors.org). The Working Group recommends using and evaluating these messages and materials for ORS and zinc demand generation initiatives. The key messages for frontline workers include:

- For all cases of childhood diarrhea, start with ORS and zinc.
- ORS and zinc speed recovery, restore strength (energy and appetite), and help keep children thriving.
- For childhood diarrhea, Antibiotics- Rarely, Antimotility drugs – Never
- Give the child ORS and zinc, and give the mother peace of mind.
- ORS treats dehydration, which is the main cause of death from diarrhea in children.
- Antibiotics are only recommended for children with bloody diarrhea and episodes of cholera.
- Antimoility drugs are dangerous. Don't use them.
- WHO/UNICEF and the Ministry of Health strongly discourage the use of antimotility drugs (such as tincture of opium, loperamide, or other opiate derivatives) in infants and children.

**INFLUENCING AUDIENCE 1: CLINICAL PROVIDERS****OBJECTIVES**

By 2015, increase the percentage of clinical providers who:

- 1) Correctly prescribe ORS and zinc as the first-line treatment for all cases of uncomplicated diarrhea (without accompanying antibiotics or other treatments)
- 2) Correctly state the treatment for mild to moderate diarrhea, including dosages and duration, as ORS and zinc
- 3) Report that ORS and zinc are effective medicines to treat mild to moderate diarrhea
- 4) Limit prescriptions of antibiotics for treatment of diarrhea for children under five to those exhibiting clinical symptoms
- 5) Do not prescribe anti-diarrheal medicine to treat diarrhea in children under five

**POSITIONING****Illustrative Positioning Statement for Clinical Providers:**

- Qualified doctors prescribe only ORS and zinc to treat mild to moderate childhood diarrhea
- ORS and zinc is the best treatment for diarrhea. Qualified doctors who prescribe only ORS and zinc to treat childhood diarrhea gain respect from their clients and develop long-term relationships with them. Their clients trust their advice and the services they provide. They feel pride in providing the best treatment for diarrhea.

The overall positioning for clinical providers will be based on promoting proud, professional providers. This will be operationalized as:

- Pride in position and providing long term solutions to clients
- Pride in having more skills
- Prestige in being seen as knowledgeable and helpful
- Satisfaction in helping women and families in improving their health
- (for private sector)—Satisfied clients will return and refer friends/family

**INFLUENCING AUDIENCE 1: CLINICAL PROVIDERS**

- (for public sector)—Providing quality services reduces patients returning with problems (thereby decreasing work load)

For providers, it may be necessary to conduct additional research around provider biases and other drivers to provider behavior that could be used inform the audience profile and strategic design. In countries or contexts where clinical providers are the first point of contact for caregivers seeking treatment for uncomplicated diarrhea, clinical providers should be considered a primary audience and the key positioning for clinical providers is very similar to that of non-clinical providers; that offering correct treatment for diarrhea (only ORS and zinc) will increase their prestige among the community, and will lead to repeat customers and sufficient profit.

**KEY PROMISE**

Respected doctors know that ORS and zinc are the best treatment for non-severe diarrhea because ORS and zinc rehydrate the child and prevent future episodes of diarrhea.

**SUPPORT STATEMENT**

WHO and UNICEF (and the Ministry of Health) recommend ORS and zinc to treat diarrhea in children.

**KEY MESSAGES**

Most messages on ORS and zinc for providers have focused on increasing knowledge and have often been in the form of trainings. The evidence suggests that even when providers know the correct treatment, they often prescribe additional medicines or do not follow the treatment guidelines. In Bangladesh, there is some evidence that mass media campaigns increased providers' use of ORS and zinc. The evidence suggests that there is a need for country-specific formative research to understand providers' motivations for prescribing ORS and zinc (for those who do)

### INFLUENCING AUDIENCE 1: CLINICAL PROVIDERS

and barriers for either not prescribing ORS and zinc or prescribing additional medicines (Global Evidence Review, 2013).

Messages based on data from the Global Evidence Review:

- ORS and zinc are real medicines for the treatment of childhood diarrhea, as ORS rehydrates and zinc improves the body's ability to fight disease.
- Most diarrhea is caused by viruses or other pathogens so antibiotics are only recommended for bloody diarrhea.
- WHO, UNICEF and the Ministry of Health strongly discourage the use of antimotility medicines for young children.
- Customers have confidence in providers who offer correct treatment and referrals, and they will recommend that provider to their family and friends.
- Experienced providers are able to influence caregivers' knowledge and perceptions of correct diarrhea treatment when they prescribe ORS and zinc.
- Trained providers are best placed to influence communities'/caregivers' behaviors to use ORS and zinc to treat diarrhea.
- ORS and zinc alone are sufficient to treat uncomplicated diarrhea.
- ORS and zinc alone are effective to reduce the severity and duration of most diarrhea and prevent future episodes.

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- For all cases of childhood diarrhea, start with ORS and zinc.
- ORS and zinc speed recovery, restore strength (energy and appetite), and help keep children thriving.
- For childhood diarrhea, Antibiotics – Rarely, Antimotility drugs – Never
- Give the child ORS and zinc, and give the mother peace of mind

**INFLUENCING AUDIENCE 2: FATHERS/MALE PARTNERS OF CAREGIVERS****OBJECTIVES**

By 2015, increase the percentage of fathers who:

- 1) Report that diarrhea can be a dangerous illness, which should be treated in a timely manner with ORS and zinc.
- 2) Agree that paying for ORS and zinc to treat diarrhea is what smart parents do.
- 3) Support their wives or partners to seek treatment for children's diarrhea.

**POSITIONING**

Evidence from Kenya and Mali suggests that positioning for fathers should focus on their roles as “protector” or “provider” for their families (Global Evidence Review, 2013).

**Illustrative Positioning Statement for Fathers:**

Good fathers want to give the best to their children. They know ORS and zinc is the best treatment for diarrhea, and they are proud to provide the money needed to purchase this best treatment so their children can get better and thrive.

**KEY PROMISE**

Fathers who ensure that their children's diarrhea is treated with ORS and zinc will have healthy, strong children and be seen as good providers

**INFLUENCING AUDIENCE 2: FATHERS/MALE PARTNERS OF CAREGIVERS**

for their families.

**SUPPORT STATEMENT**

ORS and zinc is the best treatment for childhood diarrhea. ORS helps give your child strength and energy to get better. Zinc helps stop the diarrhea and protects your child from diarrhea for months. Together, ORS and zinc gives your child what he/she needs to get better and thrive.

**KEY MESSAGES**

As with women, key messages for male partners should focus on the benefits. In line with the “Provider” and “Protector” positioning, key messages may include:

- Fathers in my community encourage their wives to use ORS and zinc for childhood diarrhea.
- Diarrhea is a dangerous illness for young children. Support your family to seek the best treatment for diarrhea – ORS and zinc.
- Effective medicines for diarrhea are affordable and available nearby. Provide for your family by buying ORS and zinc to treat diarrhea.
- Leaders in your community support their wives/families by seeking ORS and zinc treatment for children’s diarrhea.
- Encourage your spouse or partner to visit a retail outlet for ORS and zinc treatment when your children have uncomplicated diarrhea or a health facility when they have severe diarrhea or dehydration.
- There are new medicines that treat diarrhea better than before. Provide for your family by giving them the best treatment – ORS and zinc.

**INFLUENCING AUDIENCE 3: EXTENDED FAMILY/MOTHERS-IN-LAW****OBJECTIVES**

By 2015, increase the percentage of extended family/community members who:

- 1) Report that diarrhea can be a dangerous illness and children should receive ORS and zinc for treatment of diarrhea or dehydration.
- 2) Agree that ORS and zinc are effective, affordable treatment for diarrhea.
- 3) Support their families to seek treatment for children's diarrhea illnesses.
- 4) Support the use of ORS and zinc over other remedies or treatments for diarrhea.

**POSITIONING**

Positioning for extended family should focus on their roles as leaders for their families and communities, and that ORS and zinc will help them to fulfill their roles as wise advisors to their family/community.

**Illustrative Positioning Statement for Mothers-in-Law**

- Mothers-in-law/Grandmothers are trusted resources in their families. They are proud to learn and share with their families that the best treatment for diarrhea is ORS and zinc. They love their grandchildren and want the best for them.
- As trusted advisors for their families, mothers-in-law know they have an important role in sharing health information. Their community trusts them.

**KEY PROMISE**

Mothers-in-law gain respect and influence when they encourage the use of ORS and zinc that protect the health of children in their families.

**SUPPORT STATEMENT**

By recommending effective, proven medicines for diarrhea treatment, specifically ORS and zinc, mothers-in-law are providing the best treatment for their families.

**KEY MESSAGES**

As with caregivers, key messages for extending family should focus on the benefits of ORS and zinc. In line with the “Provider” and “Protector” positioning, key messages may include:

- Diarrhea is a dangerous illness for young children. Encourage young mothers in your family/community to visit a health care provider or retailer for ORS and zinc to treat diarrhea.
- The best medicines for diarrhea are affordable. Guide young mothers in your family by telling them to buy ORS and zinc to treat diarrhea.
- Support young mothers to seek treatment from providers/retailers for children’s diarrhea.
- There are new medicines that treat diarrhea better than before. Mothers-in-law protect their families by encouraging the use of ORS and zinc, which are the best treatment.