



**California Health Care Foundation**  
HEALTH CARE THAT WORKS FOR ALL CALIFORNIANS

# **Engaging Consumers to Reduce Unnecessary C-Sections: Sneak Peak at Progress So Far**

## **Briefing for Maternity Care Stakeholders**

**Stephanie Teleki, PhD**  
**Eric Antebi**  
**California Health Care Foundation**

**November 17, 2017**

# BACKGROUND

Smart Care California requested help with public education materials to unify message and approach.

Materials would need to:

- Be simple.
- Be suited for wide distribution.
- Sync with CMQCC provider toolkit.
- Include video and print content, for online and offline distribution.

SMART CARE CALIFORNIA

Workgroup Meeting Materials

Focus Area: Opioids

Focus Area: C-Sections

Focus Area: Low Back Pain

# GOALS

To develop consumer education materials (video and print) about C-section for wide distribution that will:

- Educate women about C-sections
- Motivate consumers to take practical and meaningful action to reduce the likelihood of unnecessary surgery
- Encourage informed, shared decision-making between pregnant women and their providers



# PARTNERS



**California  
Health Care  
Foundation**

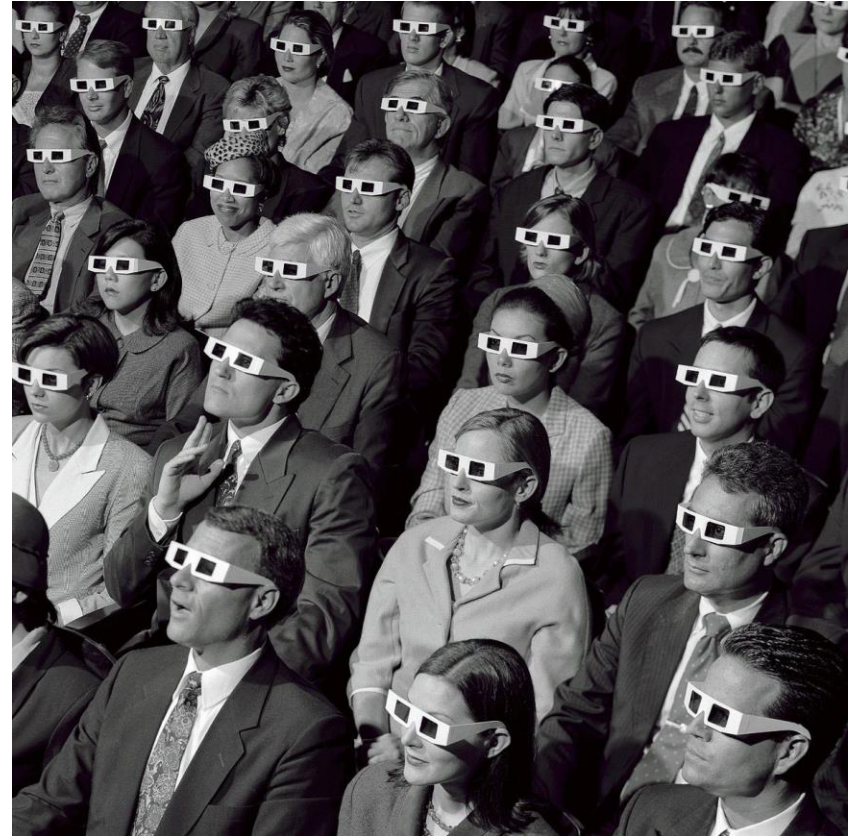
# AUDIENCES

## *Primary*

- First-time, low-risk pregnant women in CA
- Across income, racial, ethnic, and geographic segments (oversampled Black, Latina and Medi-Cal)

## *Secondary*

- Providers (hospitals, physicians, L&D nurses, midwives) key to making consumer education work



# RESEARCH TO DATE

24 individual provider interviews (OBs, family practitioners, labor nurses, nurse-midwives) (Spring, 2017)

9 focus groups, with total of 78 consumers, to develop messages and approach (Early Summer, 2017)

- Medi-Cal and private insurance
- English and Spanish
- Locations: Fresno, L.A., Oakland
- African-American, Latino, white

27 individual interviews with consumers (19 Medi-Cal, 8 commercial) to test video prototypes (Late Summer, 2017)

# RESEARCH TO DATE

Vetted findings and prototypes with several key stakeholders (fall 2017), including:

American Congress of Obstetricians and Gynecologists

Association of Women's Health, Obstetric and Neonatal Nurses

California Department of Health Care Services

California Department of Public Health

California Hospital Association

California Medical Association

California Nurse-Midwives Association

CalPERS

Covered California

Hospital Quality Institute

Pacific Business Group on Health

# **KEY INSIGHTS FROM RESEARCH & TESTING**



# INSIGHT #1: Self-care is a challenge

Women are often family caregivers.

Self-care is a luxury they don't often get to practice.

They aren't thinking of baby as family member yet.

Need to give self-care greater urgency and activate caregiving for baby.



## INSIGHT #2: C-sections are scary

Women are AFRAID to have to a C-section.

Fear is a strong motivator that can be used to connect with women, but too much fear can be paralyzing.

**Top statement we tested in focus groups:**

*Because a C-section is a major surgery, it takes longer to heal and there is a possibility of more complications compared to a vaginal birth. The most common complications include infection, heavy blood loss, and a blood clot in the legs or lungs.*



# INSIGHT #3: Shocked by too many C-sections

Target women are SURPRISED to learn about increase, hospital variation.

**Opportunity:** This motivates them to take action.

**Challenge:** It also prompts them to ask WHY this is happening.



# INSIGHT #4: Empowerment message is effective

Health care system is intimidating.

Medi-Cal woman often lack sense of agency or ability — in health care and in general.

Our job is to build confidence!

**Top empowerment statement we tested:**

*Your voice matters — for you and your baby!*



# INSIGHT #5: Behavior change should be meaningful and practical

Recommended behaviors to target based on literature, and our research (provider and consumer feedback):

1. Mindset to avoid C-section
2. Educate yourself about how to avoid C-section
3. Talk with your team (esp. doctor, nurse, family)



# KEY MESSENGERS



**Labor and delivery nurse**  
**(trusted)**



**New mom**  
**(relatable)**

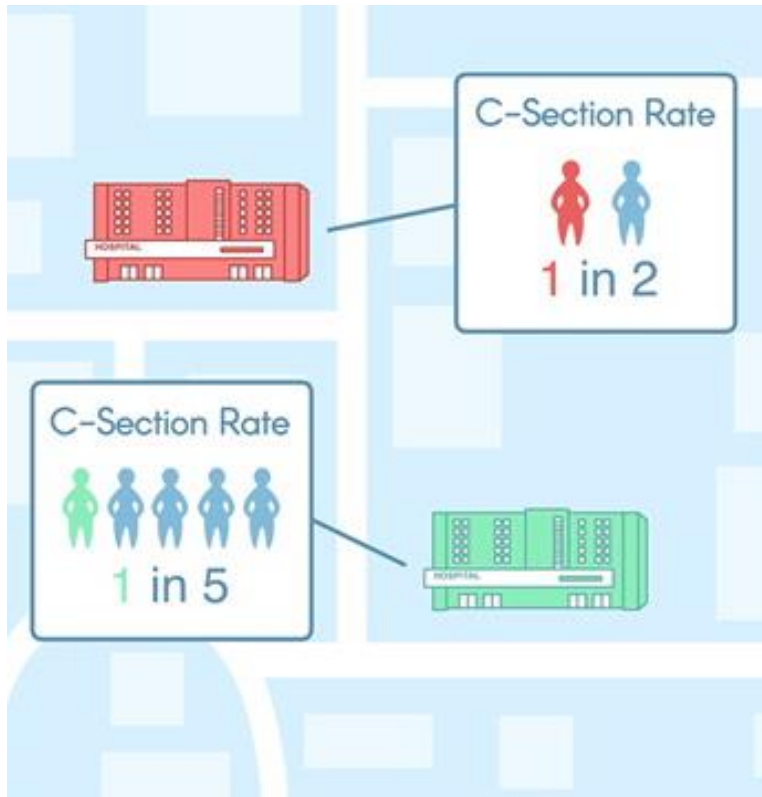


# FORMAT: Many reasons to use animation

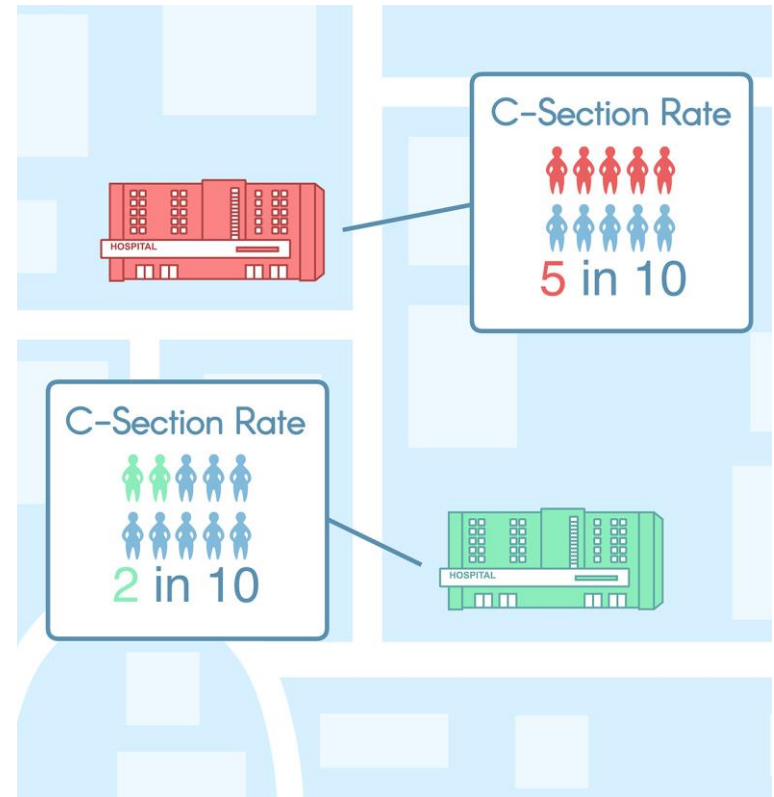
- Distinctive look and feel
- Communicates complex ideas in less time
- Age and ethnicity can be more ambiguous, and that helps audiences generalize.
- Ability to create print products in same visual style
- More practical and cost-effective compared to live video



# COMMUNICATING DATA: Testing two options



**Option A**



**Option B**



# NEXT STEPS

Test rough cut and print versions via 1:1 interviews with target moms (early November)

Conduct webinar with broader group of stakeholder groups (early November)

Secret shopper testing (December)

Finalize video and print products (December)

Dissemination (early 2018)

**QUESTIONS/COMMENTS?**