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.
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
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
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

C-Section Rate
1 in 2

C-Section Rate
1 in 5

Option B

C-Section Rate
5 in 10

C-Section Rate
2 in 10
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?