



**POUR ELLE**

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**18<sup>TH</sup> GENERAL MEMBERSHIP MEETING OF THE  
REPRODUCTIVE HEALTH SUPPLIES COALITION**

# Buy quality oxytocin, keep it cold

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Reproductive Health  
**SUPPLIES COALITION**

**#ITSABOUTSUPPLIES #RHSUPPLIES2018**

# Advocating for quality oxytocin

**Need:** align partner asks of government decision-makers.

**How:** bring multisectoral technical experts together to craft recommendations around the latest oxytocin evidence.

**Outcome:** a package of evidence and advocacy resources to inform discussions with decision-makers.

# Process: Developing the resources

Bring technical experts together to achieve consensus on evidence-based recommendations and target audiences.

- Geneva, Oct 2017

Bring MH advocates together to craft messages based on the recommendations.

- DC, Nov 2017

Disseminate resources to intended users.

- Advocacy messaging framework, March 2018
- White paper and evidence summary, **TBD 2018**

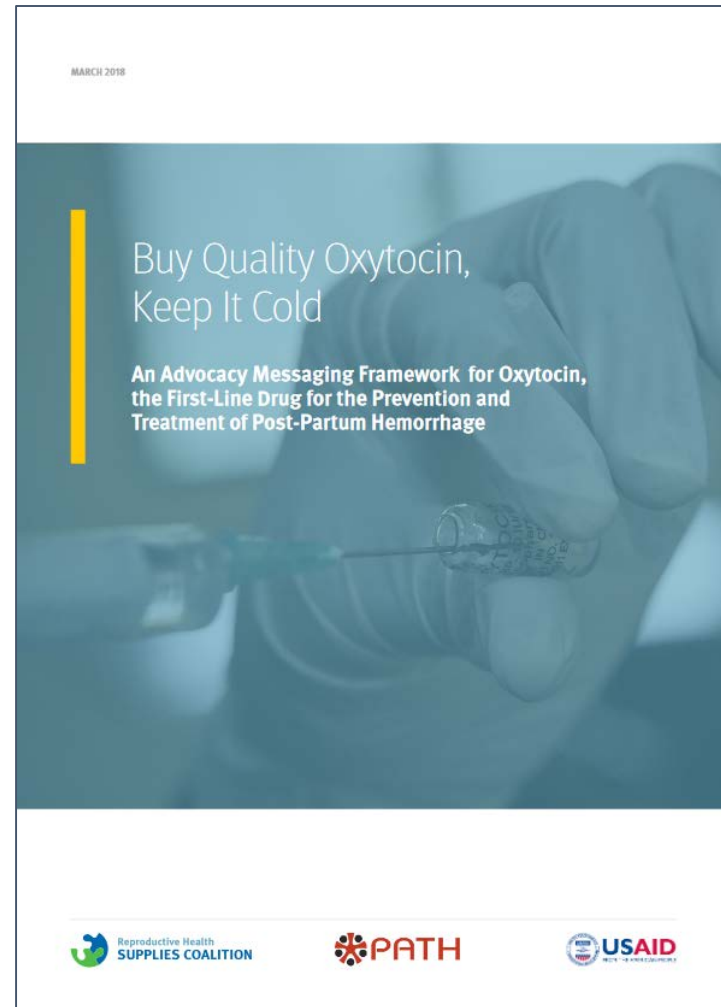
# The advocacy messaging framework

## What it is:

- A set of clear action-oriented, evidence-based advocacy messages, for use with decision-makers and influencers.

## What it is not:

- A summary of the evidence.
- A comprehensive review of challenges.



# Target audiences

- MNCH Program Leaders
- National Regulatory Authorities
- Public-sector Procurement Agents
- Supply Chain Managers

## Primary message

Country governments should commit to only purchasing and distributing quality oxytocin.

- Oxytocin should be quality-assured (e.g., approved by a stringent regulatory authority, prequalified by WHO, or recommended by an Expert Review Panel).
- Oxytocin that is procured should always be labeled for storage at 2-8° C.
- Oxytocin should be procured in 10 IU ampoules—many countries instead procure 5 IU ampoules, doubling the cost and risking potential misuse of the product.

# Discussion: Next steps and use

## Disseminate!

- Who intends to use the messaging framework and other resources in their work? How?
- How can the Caucus support application of this framework in your work, and the work of RHSC?
- How can we better engage EPI partners to advance these recommendations?



Thank you!