

## Closing Thoughts

Focusing part of your SBCC effort on reducing AMA and HP pregnancy can be a novel way to help women, their partners and their communities find value in modern contraception. It can be a way to break down barriers and begin a fruitful dialogue on improving family health and welfare by making conscious decisions about the number and timing of pregnancies. In developing and implementing your SBCC strategy, remember to make sure that:

- The motivations and concerns of both primary and important influencing audiences are taken into account
- All statistics used are relevant to your audience and environment and are up to date
- Images or photographs will be understood and recognized by your audiences (by pretesting them before printing)
- Addressing difficult topics (such as limiting births) is balanced with providing information that is important and relevant to your audiences
- Culture and religion are respected
- Messages are consistent and credible
- Language is appropriate for your audiences
- A variety of complementary communication approaches are used

We wish you the best in this effort and, as mentioned earlier, we invite you to share your tools and experiences on **Springboard** ([www.healthcomspringboard.org](http://www.healthcomspringboard.org)) or on the **HealthCOMpass** ([www.thehealthcompass.org](http://www.thehealthcompass.org))!

## Glossary

**Anemia:** A condition when mothers have decreased iron in their red blood cells. It is fairly common, but if left untreated can lead to preterm delivery, low fetal birth weight, sickness and even death in the mother or child. It may also increase the chance of the infant being anemic later in life.

**Birth and chromosomal abnormalities:** For example, Down Syndrome.

**Caesarean delivery:** Surgical removal of the baby from the mother's abdomen may be required if vaginal delivery is considered too difficult or dangerous, or due to the above or other pregnancy or delivery complications. Caesarean deliveries require rapid and major abdominal surgery, which can increase the likelihood of infection, surgical errors, blood loss for the mother and such complications can result in maternal death.

**Diabetes:** Gestational diabetes is a condition occurring when a mother has high levels of sugar (glucose) in her blood that her body is not processing properly. It can cause high blood pressure and preeclampsia, early delivery or miscarriage. Gestational diabetes can also result in overweight babies, which create other complications in childbirth for women and health complications for the child.

**Fetal (especially respiratory) distress:** This includes any indication that the fetus is not doing well inside the mother, during pregnancy or birth, and can signal or cause a number of other health conditions in the infant.

**Fetal malpresentation:** Also known as abnormal position of the fetus in the birth canal.

**Intra-uterine fetal death:** The loss of the baby after 20 weeks of pregnancy, usually due to one or more fetal or maternal health complications listed here.

**Low or elevated birth weight:** When the baby is too small or too large, this can increase the chance of sickness and even death in the mother or baby, during or after delivery.

**Macrosomia:** Large birth weight of an infant, macrosomia can be the result of gestational diabetes and can cause many birth complications, including the baby becoming wedged in the birth canal. This is dangerous for the mother and for the baby.

**Maternal hypertension:** Also known as high blood pressure during a mother's pregnancy, maternal hypertension can lead to preterm birth, poor development of the fetus and stillbirth. It can also increase the need for delivery interventions, such as Cesarean sections.

**Maternal mortality:** A complication of many of the previous conditions is the death of the mother.

**Placental complications:** The location of the placenta can move at or before childbirth (placenta abruption), or can block the birth canal of the baby (placenta previa). These complications can present danger to the mother and make delivering the baby more difficult, and can also endanger the baby.

**Preeclampsia:** A condition some women develop during pregnancy. Signs and symptoms include high blood pressure, high level of protein in urine, and often swelling of feet, legs and hands. This condition usually appears after the 20th week of pregnancy. If not diagnosed, it can lead to eclampsia putting mother and infant at risk of illness and death.

**Postpartum hemorrhage:** Excessive bleeding after natural or Caesarean delivery is the leading cause of maternal death.

**Preterm delivery:** When a baby is born early or before it is fully developed, it can be dangerous to the mother and the infant. Preterm delivery may be caused by a number of health conditions already listed here, such as preeclampsia, anemia and others.

**Stillbirth:** When a baby is carried to term, but is dead at birth.

## References

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