Radio Production Guide: Pregnancy Wellness
**Defining pregnancy wellness**

- **Wellness**: the quality or state of being in good health, especially as an active goal. *(Merriam-Webster Dictionary)*

- **Pregnancy wellness**: the quality or state of being in good health throughout a pregnancy for the mother and baby.

- **Antenatal (or prenatal)**: before birth; during or related to pregnancy.

- **Perinatal**: the time period immediately before and after birth.

- **Postnatal**: occurring or being after birth.

- **Antenatal care** is the healthcare you can receive during a pregnancy to make sure you and your baby are as well as possible. You can start getting antenatal care as soon as you know you’re pregnant. The doctor, nurse or midwife providing your antenatal care will:
  - check the health of you and your baby give you useful information to help you have a healthy pregnancy (including advice about healthy eating and exercise).
  - discuss your options and choices for your care during pregnancy, labour and birth.
  - answer any questions you may have.

- **Pregnancy** officially starts when a fertilised egg implants in the lining of the uterus (womb).

- **Placenta** is a temporary organ that transfers oxygen and nutrients from the mother to the fetus, and also releases carbon dioxide and waste products from the fetus. *(NHS Choices)*

**Pregnancy facts: Did you know?**

- **Pregnancy lasts an average of 280 days (40 weeks) from the first day of your last menstrual period (LMP). Your last menstrual period is considered the first week of pregnancy, even if you weren’t actually pregnant yet. The expected delivery date is calculated using the first day of your last period.** *(Healthline)*

- **Pregnancy tests and ultrasound are the only way to confirm a pregnancy.** With that said, there are early signs and symptoms of pregnancy that you can look out for, including:
  - Missing your period
  - Mild cramping and spotting
  - Fatigue
  - Nausea
  - Tingling or aching breasts
  - Frequent urination
  - Bloating

- **Hormones rise and fall dramatically during pregnancy.** Hormonal changes, which begin in the first trimester, will lead to many changes throughout the body. These changes help prepare the mother’s body for pregnancy, childbirth and breastfeeding. **Estrogen and progesterone** are the chief pregnancy hormones.

  - **Estrogen**:
    - The increase in estrogen during pregnancy enables the uterus (womb) and placenta to:
      - improve the formation of blood vessels.
      - transfer nutrients.
      - support the developing baby.
    - The rapid increase in estrogen levels during the first trimester may cause some of the nausea associated with pregnancy.

  - **Progesterone**:
    - The changes in progesterone cause a loosening of ligaments and joints throughout the body. This happens so that the body can adjust to carrying a growing baby and also in preparation for birth.
    - Progesterone is also important for transforming the uterus from the size of a small pear — in its non-pregnant state — to a uterus that can accommodate a full-term baby. *(Healthline)*
Perinatal, postnatal or postpartum depression (PND) is a common, serious and treatable mental health disorder during pregnancy or early parenthood. Becoming a parent brings a wide range of emotions, from joy and excitement to stress and anxiety. The physical changes you go through can also affect your mood and feelings, and it’s common to experience more ups and downs that usual. With that said, keep in mind:

- PND is more than just a low mood – it’s a serious condition that affects your physical and mental health.
- Up to 30% of new mothers in South Africa (an estimated minimum of 50,000 mothers per year) are clinically ill with depression or anxiety disorders.
- If untreated, PND may continue as a chronic low-grade depression, becoming more acute with subsequent births.
- Since pregnancy and the first year after birth are critical developmental periods, if a primary caretaker is suffering from PND, or unable to attend to the needs of the child, there will be long-term consequences for the child.
- It’s important to know the difference between feeling exhausted and being depressed. Here are some common symptoms of depression:
  - Seeing yourself and your life in a negative way - “I’m a failure”, “I’m doing a bad job”, “My life is terrible”.  
  - You feel hopeless, and can’t see how things will ever get better. 
  - Even with rest, your thoughts and feelings remain negative. 
  - You can’t get joy out of anything – even things you used to like. 

If you are experiencing these thoughts and feelings it’s important to seek support. See the resource box.

(Post Natal Depression Support Association, South Africa)

**Pregnancy facts: Did you know?**

- There is no shame in experiencing depression during pregnancy – acknowledging how you are feeling and seeking help to ensure your emotional well-being is one of the greatest gifts you can give your child.

(Post Natal Depression Association, South Africa)

### Tips for a healthy pregnancy

**Tip #1: If you suspect you may be pregnant, take a pregnancy test as soon as possible**

- Pregnancy tests are free at public health facilities but check for availability, especially in rural areas. When you visit a clinic, a doctor or nurse will test your urine or blood for a pregnancy hormone called HCG (human chorionic gonadotropin).
- Home pregnancy tests are an easy and exact way to find out if you’re pregnant. This method tests your urine for HCG. They’re typically affordable and available at drug and grocery stores. Follow the instructions carefully. Incorrect use can reduce the accuracy of the test.
- Many women in South Africa visit antenatal care clinics late because they discover they are pregnant late into their pregnancies.

(The Conversation)

**Tip #2: Once a pregnancy is confirmed as early as possible and if you choose to continue the pregnancy, NOW is the time to begin antenatal care**

- Once you visit a clinic to begin antenatal care, your doctor or nurse will start by checking your health and testing for health issues, including HIV, diabetes and high blood pressure, to determine the best care for your pregnancy.
- Your doctor or nurse will give you more information about pregnancy wellness and create a timetable for your regular check-ups.
  - The Department of Health advises at least 8 antenatal care visits in order to reduce the rate of infant and maternal mortality in South Africa.

(Department of Health SA)

If you’re feeling nervous, be sure to let your doctor know! Antenatal care is about supporting your needs.

**Tip #3 Find your support network**

Pregnancy is a journey best made with the support of friends, family and/or community members. Consider the following:

- Who are the people I trust and can rely on for emotional support?
- Identify the people you may be able to rely on for emotional support.
- Moving around will be more difficult in the later stages of pregnancy. Are there people who may be able to assist you in regular tasks or accompany you to doctor’s visits?

**Tip #4 Do your best to eat a balanced and nutritious diet for you and your baby**

- Nutrition during pregnancy and in the first years of a child’s life provides the essential building blocks for brain development, healthy growth and a strong immune system.

(ThousandDays)

- A balanced pregnancy diet includes protein (eggs, lean meat), vitamin C, calcium, fruits and vegetables (broccoli and dark leafy greens), whole grains, iron-rich foods, adequate fat and folic acid. Learn more about nutritious foods for a healthy pregnancy here.

(Healthline)

- Most nutrients should come from food, but supplements also play an important role. Discuss which antenatal supplements to take with your doctor or nurse.
- Stay well hydrated by drinking plenty of water.
- Do not smoke, drink alcohol or take any illegal drugs while pregnant or breastfeeding. Taking these substances can lead to fetal abnormalities and serious health issues for your baby.

(Western Cape Government)
**Tips for a healthy pregnancy**

**Tip #5: When something goes wrong, seek help**

- According to the World Health Organisation, for every 100,000 live births in South Africa in 2015, 138 women died due to pregnancy and childbirth complications. (In Sweden, fewer than five women die for every 100,000 live births.) Many of these deaths are preventable. (The Conversation)
- Always contact a health professional or your antenatal care provider if you have a concern during your pregnancy. Many issues that arise are treatable, but if undiagnosed and untreated they can lead to serious and even life-threatening complications.
- Pregnant people may experience problems, including anaemia, urinary tract infections, mental health conditions (including depression and anxiety), hypertension (high blood pressure), gestational diabetes mellitus and infections. (Center for Disease Control)
- **A miscarriage** is the loss of a pregnancy (fetus, placenta and amniotic fluid)
  - 15% of miscarriages occur within the first three months of pregnancy.
  - See a doctor if you experience cramping pain in the lower abdomen and bleeding from the vagina.
  - Learn more about the various kinds of miscarriages [here](#).

Remember: Early childbearing increases the risks for both mothers and their newborns. The younger the mother, the greater the risk to the baby. Antenatal care is especially important for young pregnant people. (WHO)

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**Prevention of mother-to-child transmission in antenatal care**

Testing for HIV at the beginning of antenatal care is very important to both the health of the mother and the baby. Here’s why:

- **HIV can be transmitted from the mother to the child during the pregnancy, birth and breastfeeding.** This is called **mother-to-child transmission (MTCT),** which accounts for the vast majority of new infections in children. (AVERT)
- **HIV is also the biggest contributor to maternal deaths in South Africa.** (The South African Medical Journal)
- In order to care for the wellbeing of both the child and the mother, **prevention of mother-to-child transmission (PMTCT) programmes provide antiretroviral treatment (ART) to pregnant women living with HIV to stop their infants from being infected.** (AVERT)
- When pregnant women attend a clinic in the first three months of their pregnancy, HIV can be detected early and they can begin treatment. This makes it less likely that their babies will contract HIV. It also helps to support their own immune systems, which decreases the chance for infections before or after birth. (The Conversation)
- Doctors and nurses will also provide information about safe childbirth practices and appropriate infant feeding.
- After the birth, doctors and nurses will encourage the uptake of infant HIV testing and other post-natal healthcare services.

Experiencing fear of an HIV positive result is understandable. Keep in mind that regardless of the outcome, testing for HIV is just another step in the direction of having a healthy pregnancy by getting the best care for you and your future child.

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**Remember your sexual and reproductive rights!**

Sexual rights are human rights that relate to sexuality. Reproductive rights relate to a person’s fertility, ability to reproduce, reproductive health and family planning.

These rights support you and all people to freely explore and express their sexuality in safe, informed and pleasurable ways.

For example, the Child Act in South Africa protects the rights of children from the age of 12 years old to get contraception, HIV treatment and have an abortion without the parents knowing.

Your sexual rights include:

- The right to equality
- The right to participation in decision-making
- The right to life and to be free from harm
- The right to privacy
- The right to personal freedom and to be recognized as an individual before the law
- The right to think and express oneself freely
- The right to health
- The right to know and learn
- The right to choose whether or not to marry or have children
- The right to have your rights upheld

(Exclaim! IPPF)

**Questions to consider:**

- Which of these rights supports a young person’s ability to choose whether or not to continue an unwanted pregnancy?

- Which of these rights protects a young pregnant person’s ability to access antenatal care?

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**Resources**

- **MAMA SMS** is an interactive mobi site available to all moms in South Africa with an Internet-enabled cellphone. Content is delivered to registered users based on their due date or the age of their baby, providing personalised, relevant and compelling information, life guides and live chats with experts. Register with your due date or your baby’s age, at askmama.mobi
- **MomConnect SMS programme** will send women stage based SMS messages to their cellphones, free of charge. For more information dial *134*550# from any South African phone. (Dialling this line is free of charge)
- **Learn more at the Post Natal Depression Support Association (PNDSA):** [http://www.pndsa.org.za/](http://www.pndsa.org.za/), where you’ll also find support and many helpful resources.
- **Learn more about post natal/postpartum depression from Marie Stopes South Africa here.**
Different ways to talk about pregnancy wellness

- How do people maintain a healthy pregnancy?
- What are your rights as a young pregnant woman?
- What kinds of support are available to young pregnant women in your community?
- What emotional and physical changes can pregnant women expect?

Choose an angle

Ways you can be healthy during pregnancy

Different ways to talk about: Maintaining a healthy pregnancy

- What are steps a pregnant person can take to get antenatal care?
- How can friends, family and community members support pregnant people?
- What are the ways a pregnant person can access emotional support in your community?
- How do pregnant people look after their physical well being?
- What should a pregnant person and their support network do if/when complications happen?
- How can pregnant people advocate for their rights?

Vox Pop
Vox Pop aim: To get many opinions on one topic.
Who do you talk to: Anybody from the community
Vox Pop question: What is pregnancy wellness?

Audio commentary
Audio commentary aim: To get people’s opinion about a topic that they care deeply about.
Who do you talk to: A local doctor, nurse or midwife who can talk about family planning, antenatal and postnatal care, sexual and reproductive health and HIV

Audio profile
Audio profile aim: To get a first person account of someone’s experience, passion and journey. Audio profiles often aim to inspire.
Who do you talk to: A mother in the community who can talk about her experience being pregnant and accessing antenatal care.

Questions to ask to get the person thinking before they record their profile:
- How did you learn that you were pregnant?
- At what stage in your pregnancy did you learn that you were pregnant?
- Did you have a plan in place in the event that you became pregnant?
- Can you describe your experience going to the clinic to access antenatal care?
- What physical changes did you experience during your pregnancy?
- Was pregnancy what you expected? Explain.
- Did you feel supported by friends and family during your pregnancy? Can you describe what that support looked like?

Please see interview questions in “How to present your show”
PSA

Voice 1: Hey Lesedi, I saw you duck into loo real fast this morning. You feeling ok?

Voice 2: Yea, just nauseous and kind of crampy... and I’m feeling a little nervous that I might be... pregnant.

Voice 1: Oh! Have you taken a pregnancy test?

Voice 2: No.

Voice 1: When was your last period?

Voice 2: That’s the thing - I’m not entirely sure... And I’m scared to think about it cause what if I am pregnant. What if it’s not the right time for me? What if I’m not ready? What if I get judgey looks? What if I ruin my child’s life?!

Voice 1: Whoa! Before you get ahead of yourself, take a pregnancy test. Once you know whether or not you’re pregnant, that’s when you can start making decisions about what’s next. How’s that sound?

Slogan: If you suspect you may be pregnant, take a pregnancy test. The sooner you know whether you are pregnant or not, the sooner you can make plans that support your choices and wellbeing.

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[INTRO:]

Host 1: It’s just gone [TIME] and you’re just in time for the [NAME OF SHOW] on [RADIO STATION]. My name is [NAME].

Host 2: And my name is [NAME], and today’s show is all about pregnancy wellness! Yes, my friends, you heard it. We’ll be talking about the care and support that goes into having a healthy pregnancy.

Host 1: That’s right, we’ll be taking a closer look at the health information and services people need to make informed decisions around having a healthy pregnancy. ‘Cause get this, in 2015 for every 100,000 live births in South Africa, 138 women died due to pregnancy and childbirth complications. Many of these deaths were preventable with proper care. At the end of the day, this is not only about preventing tragic outcomes, this is about accessing services that enhance the wellbeing of pregnant women and their future children.

Host 2: Today, we’ll be focusing on ways to have a healthy pregnancy. That means opening up conversations about when to take a pregnancy test and your options afterwards, how to begin and what to expect from antenatal care. We’re bringing you the much needed information to start open conversations on pregnancy wellness!

Host 1: Let’s hear more on what people think about pregnancy wellness.

[PLAY THE INTERVIEW]

[OUTRO:]

Host 1: Today, we’ve learnt so much about people accessing the information, care and support they need for a healthy pregnancy!

Host 2: Yes! It’s good to know that there are health services in place to support women’s decisions for their futures. Whether it means ending an unwanted pregnancy or setting up antenatal appointments for the wellbeing of the mother and the baby - the care is out there!

Host 1: Next week on [DAY] at [TIME] we’ll be talking all about [NEXT WEEK’S SHOW TOPIC]. Until then, it’s bye from us!
### Show outline

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### Ethics and consent

This is a sensitive topic, so make sure you inform your interviewees properly and get their full consent.

### Presentation tips

You must always introduce your show and radio formats. Then once you’ve played your formats, have a concluding statement for each one. Don’t forget a final conclusion for the very end of the show. Use links (facts, tips, did you knows, music) to glue it all together.