

---

# FAMILY PLANNING

# ALL YOU NEED TO KNOW

# OUR PARTNERS

---



**Universal Care for Africa**  
Foundation

*"Building a healthier community one individual at a time"*

**JOAN RUCHUU**

**REGISTERED NURSE**



**KARACARE**  
Pharmacy

**HELLEN KAMAU**

**DIGITAL STRATEGIST**

# Our discussion

---

- ◆ Definition: Family planning and contraception
- ◆ Objectives of Family Planning
- ◆ Oral Contraceptives
- ◆ Progestin only injectables
- ◆ Implants
- ◆ Copper Bearing Intrauterine Device
- ◆ Levonorgestrel intrauterine device
- ◆ Female Sterilization
- ◆ Vasectomy
- ◆ Condoms
- ◆ Fertility Awareness
- ◆ Withdrawal
  
- ◆ Emergency contacts
- ◆ Q&A



# Defining Family Planning

## Defining Contraception and Family Planning

### What is the definition of contraception?

Contraception is the intentional prevention of pregnancy by artificial or natural means.

### What is the definition of family planning?

Family planning allows individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births. It is achieved through use of contraceptive methods and the treatment of involuntary infertility.

– *World Health Organization,  
Department of Reproductive Health and Research*



# Objectives of family planning

---

To avoid unwanted pregnancies

To bring about wanted births

To regulate the intervals between pregnancies

To control the time at which birth occurs in relation to the ages of the parents

To determine the number of children in the family

To Reduce adolescent pregnancies

To Reduce risk of pregnancy-related complications

to Empowering people and enhancing health education



# ORAL CONTRACEPTIVES

---

COC's-combined oral contraceptives

Progestin-only pills

Emergency contraceptive pills(p2)



# 1.COC's-combined oral contraceptives

---

Work primarily by preventing the release of eggs from the ovaries (ovulation).

Take one pill every day. For greatest effectiveness a woman must take pills daily and start each new pack of pills on time.

Bleeding changes are common but not harmful. Typically, irregular bleeding for the first few months and then lighter and more regular bleeding.

Can be given to women at any time to start later. If pregnancy cannot be ruled out, a provider can give her pills to take later, when her monthly bleeding begins

Changes in bleeding patterns including: – Lighter bleeding and fewer days of bleeding – Irregular bleeding – Infrequent bleeding – No monthly bleeding

Headaches, Dizziness, Nausea, Breast tenderness, Weight change, Mood changes, Acne (can improve or worsen, but usually improves)

Other possible physical changes:

Blood pressure increases a few points (mm Hg). When increase is due to COCs, blood pressure declines quickly after use of COCs stops.

Take pills with food or at bedtime to help avoid nausea.



## 2. Progestin-only pills

---

Contain very low doses of a progestin like the natural hormone progesterone in a woman's body. Do not contain estrogen - so can be used throughout breastfeeding and by women who cannot use methods with estrogen.

Progestin-only pills (POPs) are also called "minipills" and progestin-only oral contraceptives.

Work primarily by:

- Thickening cervical mucus (this blocks sperm from meeting an egg)
- Disrupting the menstrual cycle, including preventing the release of eggs from the ovaries (ovulation) ó





# 3. Emergency contraceptive pills (p2)

---

**Can be used in the following situations:**

Pills that contain a progestin alone, or a progestin and an estrogen together—hormones like the natural hormones progesterone and estrogen in a woman's body.

Work primarily by preventing or delaying the release of eggs from the ovaries (ovulation).

They do not work if a woman is already pregnant

+Emergency contraceptive pills help to prevent pregnancy when taken up to 72 hours after unprotected sex. The sooner they are taken, the better.

Safe for all women—even women who cannot use ongoing hormonal contraceptive methods.



Sex was forced (rape) or coerced

Any unprotected sex

Condom was used incorrectly, slipped, or broke

Couple incorrectly used a fertility awareness method (for example, failed to abstain or to use another method during the fertile days)

– Man failed to withdraw, as intended, before he ejaculated

Woman has missed 3 or more combined oral contraceptive pills or has started a new pack 3 or more days late

IUD has come out of place

Woman is more than 2 weeks late for her repeat progestin-only injection or more than 7 days late for her repeat monthly injection



# PROGESTIN ONLY INJECTABLES

---

The injectable contraceptives depot medroxyprogesterone acetate (DMPA) and norethisterone enanthate (NET-EN) each contain a progestin like the natural hormone progesterone in a woman's body. (In contrast, monthly injectable contain both estrogen and progestin.)

Do not contain estrogen, and so can be used throughout breastfeeding and by women who cannot use methods with estrogen.

DMPA, the most widely used progestin-only injectable, is also known as "the shot," "the jab," the injection, Depo, Depo-Provera.

Agree on a date for her next injection in 3 months (13 weeks) for DMPA, or in 2 months (8 weeks) for NET-EN.

Discuss how to remember the date, perhaps tying it to a holiday or other event.

She may come up to 2 weeks early or 2 weeks late and still get an injection.

She should come back no matter how late she is for her next injection. If more than 2 weeks late, she should abstain from sex or use condoms, spermicides, or withdrawal until she can get an injection. She can also consider emergency contraceptive pills if she is more than 2 weeks late and she has had unprotected sex in the past 5 days



# PROGESTIN ONLY INJECTABLES

---

## Side Effects

Skin irritation or rash where the patch is applied  
Changes in monthly bleeding:  
Lighter bleeding and fewer days of bleeding  
Irregular bleeding  
Prolonged bleeding  
No monthly bleeding  
Headaches  
Nausea  
Vomiting  
Breast tenderness and pain Abdominal pain  
Flu symptoms/upper respiratory infection  
Irritation, redness, or inflammation of the vagina  
(vaginitis)



# Combined Vaginal Ring

---

A flexible ring placed in the vagina

Continuously releases 2 hormones—a progestin and an estrogen, like the natural hormones progesterone and estrogen in a woman's body—from inside the ring.

Hormones are absorbed through the wall of the vagina directly into the bloodstream.

The ring is kept in place for 3 weeks, then removed for the fourth week. During this fourth week the woman will have monthly bleeding.

Works primarily by preventing the release of eggs from the ovaries (ovulation).



©Artemida-psy / Shutterstock.com



# IMPLANTS

---

They are plastic rods or capsules, each about the size of a matchstick, that release a progestin like the natural hormone progesterone in a woman's body.

A specifically trained provider performs a minor surgical procedure to place the implants under the skin on the inside of a woman's upper arm.

Do not contain estrogen, and so can be used throughout breastfeeding and by women who cannot use methods with estrogen.

Types of implants:

Jadelle: 2 rods, effective for 5 years  
Implanon: 1 rod, effective for 3 years

Norplant: 6 capsules, labeled for 5 years of use

Sinoplant: 2 rods, effective for 5 years

Work primarily by:

Thickening cervical mucus (this blocks sperm from meeting an egg)

Disrupting the menstrual cycle, including preventing the release of eggs from the ovaries (ovulation)



# Copper-Bearing Intrauterine Device

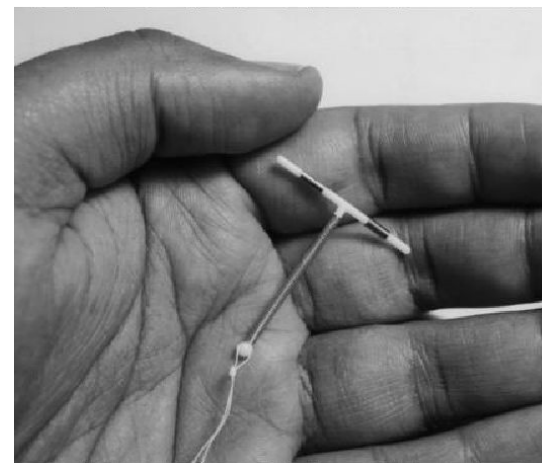
---

Small, flexible plastic frame with copper sleeves or wire around it. A specifically trained health care provider inserts it into a woman's uterus through her vagina and cervix.

Works primarily by causing a chemical change that damages sperm and egg before they can meet.

Its immediately reversible.

Bleeding changes are common. Typically, longer and heavier bleeding and more cramps or pain during monthly bleeding, especially in the first 3 to 6 months.



Some users report the following:

Changes in bleeding patterns including:

- Prolonged and heavy monthly bleeding
- Irregular bleeding
- More cramps and pain during monthly bleeding



# Levonorgestrel Intrauterine Device

---

Some people report;

The levonorgestrel intrauterine device is a T-shaped plastic device that steadily releases small amounts of levonorgestrel each day.

A specifically trained health care provider inserts it into a woman's uterus through her vagina and cervix. Also called the levonorgestrel-releasing intrauterine system, LNG-IUS, or hormonal IUD.

Works primarily by suppressing the growth of the lining of uterus (endometrium).

Changes in bleeding patterns, including:

Lighter bleeding and fewer days of bleeding

Infrequent bleeding

Irregular bleeding

No monthly bleeding

Prolonged bleeding

Acne, Headaches ,Breast tenderness or pain Nausea

,Weight gain ,Dizziness, Mood change



# Female Sterilization

---

Permanent contraception for women who will not want more children.

The 2 surgical approaches most often used: –  
Minilaparotomy involves making a small incision in the abdomen. The fallopian tubes are brought to the incision to be cut or blocked.

– Laparoscopy involves inserting a long thin tube with a lens in it into the abdomen through a small incision.

This laparoscope enables the doctor to see and block or cut the fallopian tubes in the abdomen.

Also called tubal sterilization, tubal ligation, voluntary surgical contraception, tubectomy, bi-tubal ligation, tying the tubes, minilap, and “the operation.”

Works because the fallopian tubes are blocked or cut. Eggs released from the ovaries cannot move down the tubes, and so they do not meet sperm.

Fertility does not return because sterilization generally cannot be stopped or reversed. The procedure is intended to be permanent. Reversal surgery is difficult, expensive, and not available in most areas. When performed, reversal surgery often does not lead to pregnancy





# Vasectomy

Why Some Men Say They Like

---

Vasectomy ;

Is safe,

permanent, and convenient

Has fewer side effects and complications than many methods for women

The man takes responsibility for contraception—takes burden off the woman Increases enjoyment and frequency of sex

Permanent contraception for men who will not want more children

Through a puncture or small incision in the scrotum, the provider locates each of the 2 tubes that carries sperm to the penis (vas deferens) and cuts or blocks it by cutting and tying it closed or by applying heat or electricity (cautery)..

Works by closing off each vas deferens, keeping sperm out of semen.

Semen is ejaculated, but it cannot cause pregnancy

Vasectomy is not fully effective for 3 months after the procedure. – Some pregnancies occur within the first year because the couple does not use condoms or another effective method consistently and correctly in the first 3 months, before the vasectomy is fully effective.



# Side Effects

---

Skin irritation or rash where the patch is applied

Changes in monthly bleeding:

Lighter bleeding and fewer days of bleeding

Irregular bleeding

Prolonged bleeding

No monthly bleeding

Headaches

Nausea

Vomiting

Breast tenderness and pain Abdominal pain

Flu symptoms/upper respiratory infection

Irritation, redness, or inflammation of the vagina  
(vaginitis)



# Male Condoms

---

## Why Some Men and Women Say They Like Condoms

Sheaths, or coverings, that fit over a man's erect penis.

Most are made of thin latex rubber.

Work by forming a barrier that keeps sperm out of the vagina, preventing pregnancy.

Also keep infections in semen, on the penis, or in the vagina from infecting the other partner

Help protect against:

Risks of pregnancy STIs, including HIV

May help protect against: Conditions caused by STIs:

- Recurring pelvic inflammatory disease and chronic pelvic pain - Cervical cancer - Infertility (male and female)

-Have no hormonal side effects

-Can be used as a temporary or backup method

Can be used without seeing a health care provider

Are sold in many places and generally easy to obtain

Help protect against both pregnancy and STIs, including HIV



# Female Condoms

---

Sheaths, or linings, that fit loosely inside a woman's vagina, made of thin, transparent, soft plastic film.

- Have flexible rings at both ends
- One ring at the closed end helps to insert the condom
- The ring at the open end holds part of the condom outside the vagina

Work by forming a barrier that keeps sperm out of the vagina, preventing pregnancy. Also keep infections in semen, on the penis, or in the vagina from infecting the other partner.



# Spermicides and Diaphragms

## 1.Spermicides

---

Sperm-killing substances inserted deep in the vagina, near the cervix, before sex.

- Nonoxynol-9 is most widely used.

Others include benzalkonium chloride, chlorhexidine, menfegol, octoxynol-9, and sodium docusate.

Available in foaming tablets, melting or foaming suppositories, cans of pressurized foam, melting film, jelly, and cream.

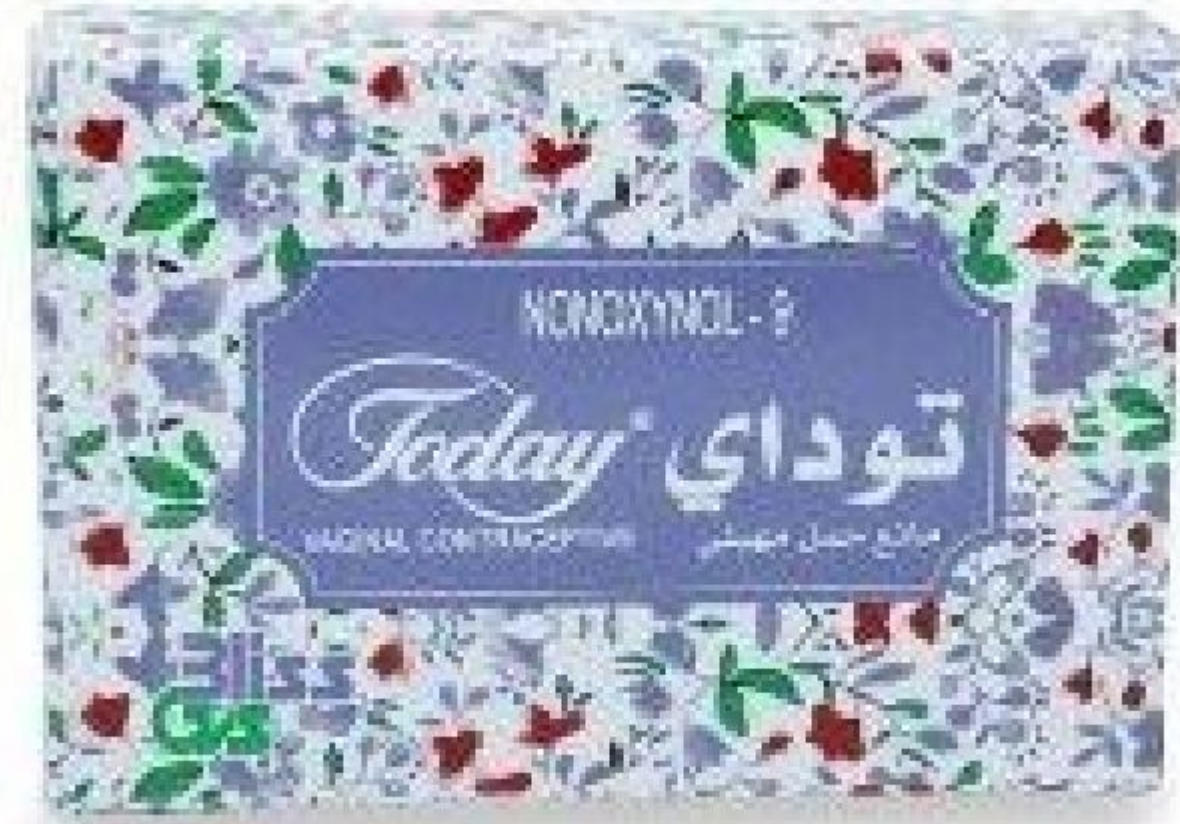
- Jellies, creams, and foam from cans can be used alone, with a diaphragm, or with condoms.

- Films, suppositories, foaming tablets, or foaming suppositories can be used alone or with condoms.

Work by causing the membrane of sperm cells to break, killing them or slowing their movement. This keeps sperm from meeting an egg.

Some users report the following: Irritation in or around the vagina or penis

Other possible physical changes: Vaginal lesions



## 2. Diaphragms

---

A soft latex cup that covers the cervix.

Plastic diaphragms may also be available.

The rim contains a firm, flexible spring that keeps the diaphragm in place.

Used with spermicidal cream, jelly, or foam to improve effectiveness.

Comes in different sizes and requires fitting by a specifically trained provider.

Works by blocking sperm from entering the cervix; spermicide kills or disables sperm. Both keep sperm from meeting an egg.

The diaphragm is placed deep in the vagina before sex. It covers the cervix. Spermicide provides additional contraceptive protection. A pelvic examination is needed before starting use.

The provider must select a diaphragm that fits properly. Require correct use with every act of sex for greatest effectiveness.



# Spermicides and Diaphragms

## 1.Spermicides

---

Why Some Women Say They Like Spermicide and diaphragm

- Are controlled by the woman
- Have no hormonal side effects
- Increase vaginal lubrication
- Can be used without seeing a health care provider
- Can be inserted ahead of time and so do not interrupt sex



# Cervical Caps

A soft, deep, latex or plastic rubber cup that snugly covers the cervix.

Comes in different sizes; requires fitting by a specifically trained provider.

The cervical cap works by blocking sperm from entering the cervix; spermicides kill or disable sperm. Both keep sperm from meeting an egg.





# Fertility Awareness Methods

“Fertility awareness” means that a woman knows how to tell when the fertile time of her menstrual cycle starts and ends. (The fertile time is when she can become pregnant.)

A woman can use several ways, alone or in combination, to tell when her fertile time begins and ends.

Calendar-based methods involve keeping track of days of the menstrual cycle to identify the start and end of the fertile time. – Examples: Standard Days Method and calendar rhythm method.

Symptoms-based methods depend on observing signs of fertility

– Cervical secretions: When a woman sees or feels cervical secretions, she may be fertile. She may feel just a little vaginal wetness.

– Basal body temperature (: A woman’s resting body temperature goes up slightly after the release of an egg (ovulation), when she could become pregnant.





Work primarily by helping a woman know when she could become pregnant. The couple prevents pregnancy by avoiding unprotected vaginal sex during these fertile days—usually by abstaining or by using condoms or a diaphragm.

#### Calendar based method

Keep track of the days of the menstrual cycle

Avoid unprotected sex on days 8–19

Use memory aids if needed The couple can use CycleBeads, a color-coded string of beads that indicates fertile and nonfertile days of a cycle, or they can mark

Keep track of the days of the menstrual cycle

Estimate the fertile time

Avoid unprotected sex during fertile time

Update calculations monthly



# Withdrawal method

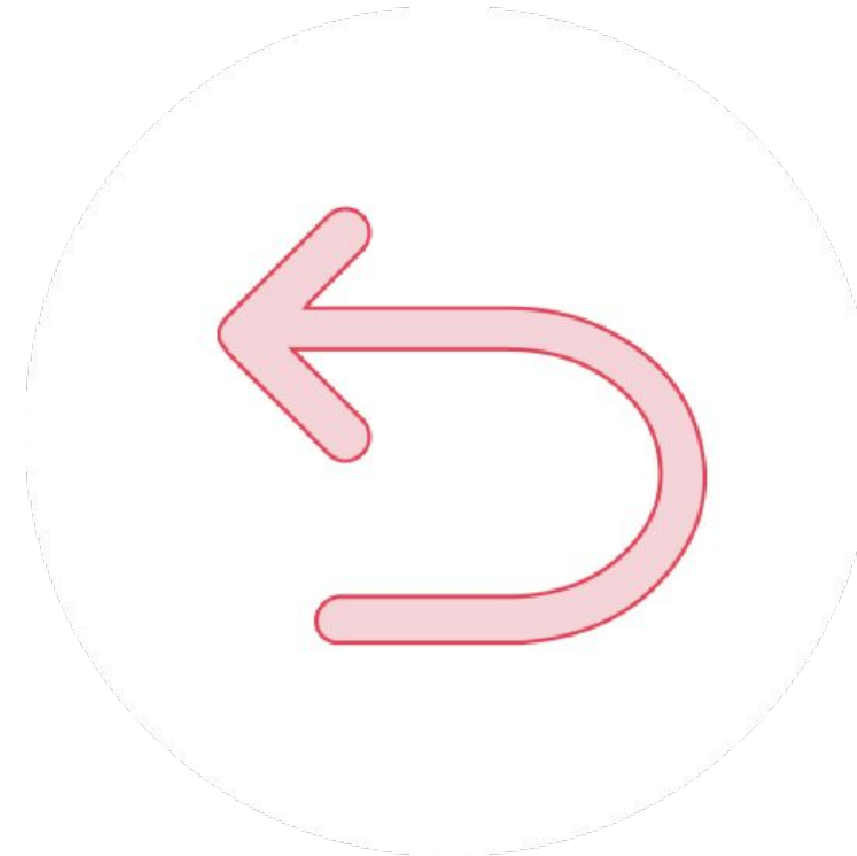
---



The man withdraws his penis from his partner's vagina and ejaculates outside the vagina, keeping his semen away from her external genitalia.

Also known as coitus interruptus and "pulling out."

Works by keeping sperm out of the woman's body



# Lactational Amenorrhea Method

---



A temporary family planning method based on the natural effect of breastfeeding on fertility. (“Lactational” means related to breastfeeding. “Amenorrhea” means not having monthly bleeding.)

The lactational amenorrhea method (LAM) requires 3 conditions. All 3 must be met:

The mother’s monthly bleeding has not returned  
The baby is fully or nearly fully breastfed and is fed often, day and night

The baby is less than 6 months old “Fully breastfeeding” includes both exclusive breastfeeding (the infant receives no other liquid or food, not even water, in addition to breast milk) and almost-exclusive breastfeeding (the infant receives vitamins, water, juice, or other nutrients once in a while in addition to breast milk).

“Nearly fully breastfeeding” means that the infant receives some liquid or food in addition to breast milk, but the majority of feedings (more than three-fourths of all feeds) are breast milk.



# Family Planning Serving Diverse Groups

---



## Adolescents

Unmarried and married youth may have different sexual and reproductive health needs. All contraceptives are safe for young people.

## Men

Correct information can help men make better decisions about their own health and their partner's health, too. When couples discuss contraception, they are more likely to make plans that they can carry out.

## Women Near Menopause

To be sure to avoid pregnancy, a woman should use contraception until she has had no monthly bleeding for 12 months in a row.





# The **QuickFix** Learning Hub

— PROMOTING FIRST AID AND HEALTH EDUCATION —

[www.thequickfix.org](http://www.thequickfix.org)

[train@thequickfix.org](mailto:train@thequickfix.org)



+254707079192



# The QuickFix Learning Hub

— PROMOTING FIRST AID AND HEALTH EDUCATION —

[www.thequickfix.org](http://www.thequickfix.org)

[train@thequickfix.org](mailto:train@thequickfix.org)



+254707079192