





DO YOU KNOW YOUR FAMILY PLANNING CHOICES?

Your Family Planning provider can help. Please ask!

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Combined Oral Contraceptives (COCs)

- Effective and reversible without delay.
- Take one pill every day and start new pack without any gap between packs for greatest effectiveness.
- Unexpected bleeding or spotting may occur, especially at first. Not harmful. Monthly bleeding becomes lighter and more regular after a few months.
- Some women may have mild headaches, weight change, nausea, upset stomach, especially at first. These often go away.
- Safe and suitable for nearly every woman. Serious side-effects are very rare.
- Can be used at any age and whether or not a woman has had children.
- Help prevent menstrual cramps, heavy bleeding, anemia (low blood iron), and other conditions.

Female Sterilization

- Permanent method of contraception for women who do not want any more children.
- Very effective (but not 100% effective).
- Involves physical exam and safe, simple surgery. The woman usually stays awake. Pain is blocked.
- Involves a safe, simple procedure, either through "minilap" or laparoscopic method. ■ No long-term side effects. No effect on sexual ability or feelings. Can be done right after childbirth upto 7 days and then anytime after 6 weeks, as well as at other times.



- Effective and safe.
- One injection every 3 months (13 weeks) with DMPA. Come back as much as 4 weeks late for DMPA and still get next injection.
- Spotting and irregular bleeding often occur in the first several months, then often monthly bleeding stops. Other side effects may include gradual weight gain or mild headaches, but these are not harmful.
- Ensure Privacy. Others cannot tell that a woman is using it.
- Can be used at any age and whether or not a woman has had children.
- When injections stop, a woman can become pregnant again. However, there may be a slight delay in return to fertility and this may vary from 3 to 6 months.
- Safe during breastfeeding, beginning 6 weeks after childbirth.



- Good choice for breastfeeding mothers who want pills, immediately after childbirth (MEC 2015).
- Very effective during breastfeeding and reversible without delay.



- Help prevent pregnancy and some sexually transmitted infections (STIs), including HIV/AIDS, when used correctly every time.
- For protection from STIs/HIV, some couples use condoms along with other family planning methods.
- Easy to use with a little practice.
- Effective if used correctly every time. Often not used every time, however.
- Some people object that condoms interrupt sex, reduce sensation, or embarrass them.
- Talking with partner can help.



- One or several small rods or capsules placed under the skin of a woman's upper arm. Little to do once implants are in place.
- Very effective for 3 to 7 years, depending on which implant.
- Can be used at any age and whether or not a woman has had children.
- A woman can have a trained provider take out the implants at any time. Then she can become pregnant with no delay. Unexpected light bleeding or spotting may occur or monthly bleeding may stop. Not harmful.



- [/]■ Small, flexible device with either copper or hormone, placed inside the womb.
- Very effective, reversible, long-term. Copper TCu-380A IUD can be used for 10 years and Cu-375 for upto 5 years.
- Copper IUD can be inserted right after childbirth, as well as at other times by a trained provider.
- Some pain during insertion. With copper IUD monthly bleeding may be heavier and longer, especially at first. With hormonal IUD no heavier bleeding and helps prevent anemia.
- Serious complications are rare. Pelvic infection occasionally occurs if a woman has certain sexually transmitted infections when the IUD is inserted.
- Can come out on its own, especially at first.
- A woman can become pregnant with no delay after the IUD is removed.
- Do not cause cancer or birth defects or increase the risk of miscarriage when a woman becomes pregnant after the IUD is removed.



A natural family planning method based on fully or nearly fully breastfeeding, for up to 6 months after childbirth.

Vasectomy

- Permanent method of contraception for men who do not want any more children.
- Does not protect from pregnancy immediately. There is a 3-month delay before the method takes effect. The couple must use condoms or another contraceptive method for three or more months, till semen analysis shows azoospermia after the vasectomy.
- Very effective after 3 months (but not 100%) effective).
- Safe, simple, convenient surgery. Done in a few minutes. Pain is blocked.
- Pain, swelling, or bruising can last a few days. A few men have lasting pain.
- No effect on sexual ability or feelings.
- Some Methods Are Not Advised If You Have Certian Health Conditions Methods not advised Condition Smoke cigarettes and also age 35 or older Combined oral contraceptives pills (COCs). If you smoke heavily, monthly injectables. COCs, monthly injectables. If severe high blood pressure, Known high blood pressure 2- and 3-month injectables. COCs, monthly injectables. Fully or nearly fully breastfeeding in first 6 months 2- and 3-month injectables. Breastfeeding in first 6 weeks
- . . .

- Take one pill every day and at the same time for greatest effectiveness.
- If not breastfeeding, spotting and unexpected light bleeding are common. Not harmful.
- Safe and suitable for nearly all women including those with high BP or migraine headaches.

Centchroman \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \circ \circ \circ \circ

- Non-hormonal pill. Good choice for breastfeeding mothers who want to take pills.
- Maybe started immediately after childbirth.
- Effective and reversible without delay.
- Take one pill twice a week for first three months and thereafter once a week.
- Menstrual disturbances like prolonged cycles and scanty bleeding may occur in some women.

- Do not move to other parts of the body.
- Safe during breastfeeding, even immediately after childbirth.



- A woman learns to tell the fertile time of her monthly cycle.
- During the fertile time a couple avoids vaginal sex, or they use another method such as condoms.
- Can be effective if used correctly. Usually only somewhat effective, however.
- Requires partner's cooperation.
- No physical side effects.
- Certain methods may be hard to use during fever or vaginal infection, after childbirth, or while breastfeeding.

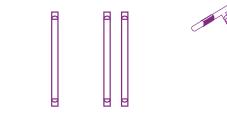
- A breastfeeding woman uses LAM when:
 - Her baby gets little or no food or drink except breast milk, and she breastfeeds often, both by day and night, and
 - Monthly bleeding has not returned, and
- Her baby is less than 6 months old.
- Before she can no longer use LAM a woman should plan for another method.



- Help prevent pregnancy when taken within 3 days of unprotected sex or a mistake with a family planning method.
- Safe for all women.
- They do not disrupt existing pregnancy or harm the baby if a woman is already pregnant.
- Some women may experience nausea or vomiting or a change in time of expected monthly bleeding.
- Regular family planning methods are more effective. Please consider a regular method.

Comparing Effectiveness of Family Planning Methods

More effective Less than 1 Pregnancy per 100 womes in one year



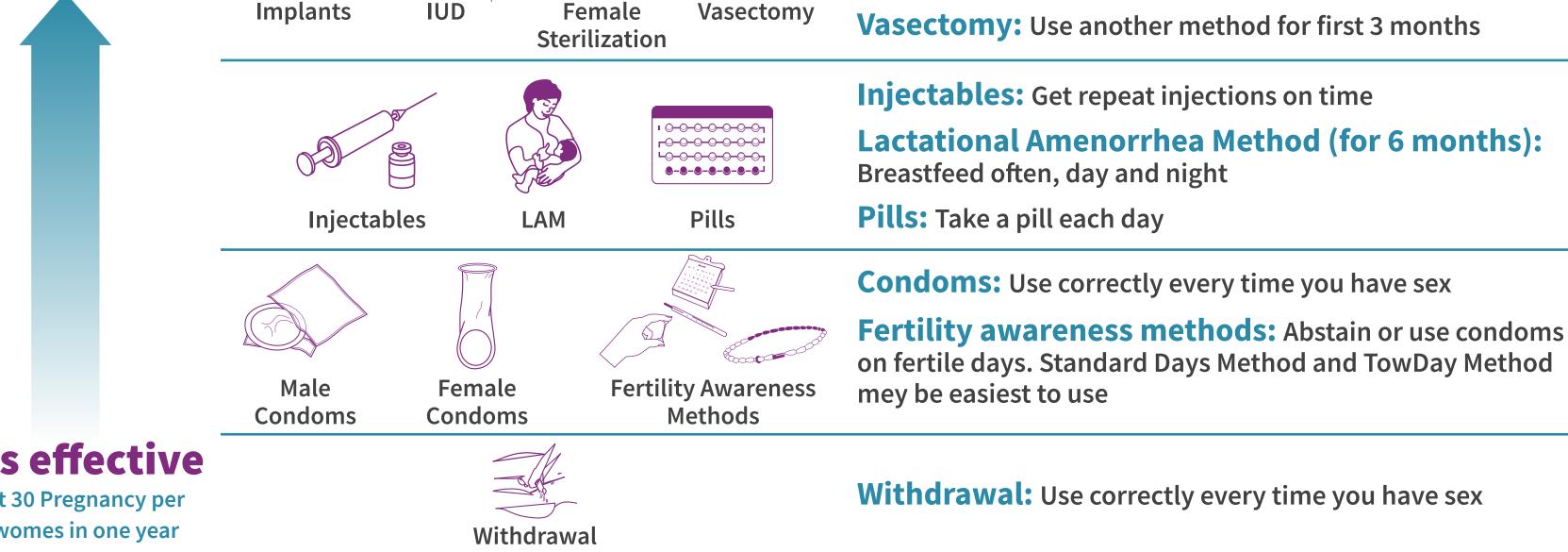
IUD Female

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How to make your method more effetive

Implants, IUD, female sterilization: After procedure, little or nothing to do or remember

| First 21 days after childbirth, not breast feeding | COCs, monthly injectables. (COCs and monthly injectables are not advised for first 6 weeks after delivery if there are special reasons that you might develop blood clot in a deep vein (VTE). These clots are more likely for several months following he birth of a child.) | |
|---|---|-------------|
| Certain uncommon serious diseases of the heart, blood vessels, or liver, or breast cancers | COCs, injectables, POPs, implants. Ask your provider | |
| Migraine headaches (a type of severe headache) and also age 35 or older | COCs, monthly injectables. Ask your provider | |
| Migraine aura (sometimes see a growing bright spot in one eye), at any age | COCs, monthly injectables. Ask your provider | |
| Gall bladder issues | COCs. Ask your provider | |
| Certain uncommon conditions of female organs | IUD. Ask your provider | |
| Sexually transmitted infections of the cervix or very high individual risk of getting those infection; pelvic inflammatory disease (PID); or untreated AIDS | IUD. Use condoms even if also using another method. Women with HIV including women with AIDS and those on treatment, can generally use any family planning method they choose. (This includes the IUD for woman with actual AIDS if she is on treatment and doing well.) | Les Abou |
| Known pregnancy | No method needed. | 100 \ |



Note to providers: Also consult national standards for specific guidance

For more information about these family planning methods, health care providers can consult Family Planning: A Global Handbook for Providers. Health care providers can obtain the handbook and more copies of this wall chart from K4Health, Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs, 111 Market Place, Suite 310, Baltimore, Maryland 21202, USA; email orders@jhuccp.org. This chart updates and replaces previously published editions. This wall chart was made possible by support from the United States Agency for International Development, Global, GH/PRH/PEC, under the terms of Grant No. GPO–A–00–08–00006–00. Revision © 2010 Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs

