Women's Health Exchange

A Hesperian Foundation publication for education and training

Family planning: let women choose!

Fatima's story

Fatima comes to the city every week to sell vegetables in the market. This week she also decides to visit a health clinic, hoping they can give her the same birth control pills that her sister takes. Fatima feels nervous while she waits at the clinic. Soon a health worker comes into the waiting room, smiles warmly, and asks Fatima to come with her to a room where they can talk privately.

Fatima tells the health worker that she would like to start using birth control pills."Have you ever used any method of family planning before?" the health workers asks. When Fatima says no, the health worker explains that there are different types of family planning methods available at the clinic. She asks Fatima if she would be interested in talking about them."You may prefer one of the other methods, depending on your health history and lifestyle." Fatima thinks about it and agrees. So the health worker explains how each method works, and together they discuss the benefits and difficulties of each one.

When the health worker asks, "Can I ask you some personal questions to help you think about what method will be best for you? I will keep everything you tell me private," Fatima looks doubtful. She does not even know this woman! "Why do you need to know?" The health worker explains that to choose the most satisfying and safe method, it can be helpful for Fatima to talk about her life, her health, and any



concerns or questions she may have about sex. "Okay, as long as you promise not to tell anyone," Fatima says.

They talk for a while about Fatima's health, her previous partners, and her husband. When Fatima says that her husband travels a lot for his work, the health worker gently asks if she thinks he might have sex with others when he is away. Fatima nods sadly and says, "Yes, he probably does." The health worker asks Fatima if she worries about getting HIV or another sexually transmitted infection (STI). Fatima says, "I do worry about HIV. I have even

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WHAT IS FAMILY PLANNING?

Issue No. 10, 2002

Family planning is a way to plan the number of children you want, and to decide when you want to have them. If you decide to wait to have children or if you do not want children, you can choose among many different methods to prevent pregnancy. Family planning methods are also called child spacing methods, contraception, or birth control.

tried to get my husband to use condoms, but he refuses. I told him that condoms can prevent pregnancy and HIV, but then he asks me how I know about all of this and accuses me of having sex with other men!"The health worker nods and says," You are not alone. Many women have this problem too."They talk about how difficult it is to keep a marriage strong. Then they discuss how Fatima could bring up the subject of HIV again with her husband by showing him a pamphlet from the clinic. The pamphlet explains signs of STIs and how certain kinds of sex are more risky for getting HIV or other infections. They also talk about ways to make condoms more acceptable to Fatima's husband. The health worker uses a banana to show Fatima how to put one on correctly. They joke and laugh as Fatima practices.

Then Fatima says, "Well, this has been helpful advice, but I think I would still

In search of safe womanhood

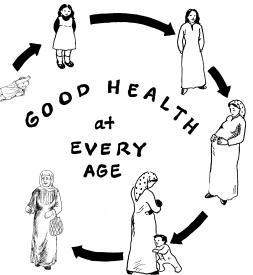
By Aruna Uprety, RHEST, Nepal

Nepal hopes to reduce maternal death and sickness in the coming years with a Safe Motherhood campaign. But if we do not work for safe womanhood, how can safe motherhood become a reality?

Starting in childhood, a woman must be given opportunities so that she can have dignity within her family and society. She should be able to decide when she wants to marry, whether she wants to be a mother or not, and which family planning method she wants to use. But for this to be true and it seems our lawmakers are far from understanding this — a woman must have the right to control her own body.

Some time ago, a group of women's health activists, lawyers, social workers, and members of government gathered to discuss the laws that harm women. We tried to focus on how these laws hurt the health and development of the whole country. But when we discussed the idea that women should be able to own property, some council members said, "This does not suit our social structure." When we discussed reproductive rights, some members of the government said, "If women are given reproductive rights, they will not want to be pregnant and our nation will have no people. Giving women reproductive rights means our society will be without morals." One member of government even said, "Once she is pregnant, a woman must give birth to the baby, no matter what." He believes that even if a woman would die because of the pregnancy, she should still have the baby.

Even though we have entered the 21st century, many people do not want to give up the old idea that a woman should always be under a man and cannot be independent or claim her own body.



I remember a few lines by a famous poet of India named Mahadevi Verma:

"Oh! Poor woman you have only this story to share: Breasts full of milk and eyes full of tears."

Written a long time ago, these lines are still very true for women, especially in Nepal, where women are deprived of their rights by society, culture, and the legal system. Birth rights for women are denied by the very laws that should uphold and cherish the rights of each citizen. At an international conference, our government said it would protect the rights of women. The government also said that women's rights are human rights. But I see little progress in fulfilling these commitments. It seems to me that until women have reproductive rights, women will be not safe in Nepal.

I ask this question again and again: "Is it possible for a woman to be a healthy and safe mother if she cannot enjoy life as a healthy woman? Can we have safe motherhood without safe womanhood?"

Contact information: Rural Health Education and Service Trust (RHEST) PO Box 355 Putali Sadak Medicare Complex Kathmandu, NEPAL tel: (977-1) 419899 email: bbs@healthnet.org.np

Women's rights save women's lives

The Safe Motherhood campaign is an international effort to reduce the number of maternal deaths. When the campaign started in 1987, about 500,000 women around the world died every year from problems in pregnancy and childbirth. Today, that number has increased to about 600,000. This means that every minute of every day, somewhere in the world a woman dies from a problem during pregnancy and birth.

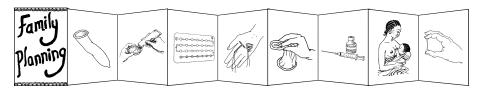
Why has the situation for women become worse instead of better? Many good Safe Motherhood projects have improved conditions for childbearing women. But the social conditions and health problems faced by women do not start when they become pregnant. Women (and men!) need access to clean water, good food, education, and good health services, including emergency care during birth. Women also need a higher status in their families and communities, and to have control of their bodies and lives. This includes access to family planning so that women can choose whether or not to have children and when to have them. For example, family planning can help prevent the health dangers a woman faces from too many pregnancies that happen either too soon or too late in her life.

Many Safe Motherhood programs are beginning to understand the importance of a broader approach to maternal health. Working for women's rights can save women's lives!

Training guide

A board game on family planning choices

No one family planning method is right for every woman. To help a woman choose the method that is best for her, she needs to know about all the available methods — how each method works, how well each method prevents pregnancy, and how well each method will protect her from sexually transmitted infections (STIs). With good information, a woman can choose a method that is right for her personal needs, relationships, and lifestyle.



A board game can be a fun way for a group to discuss both the facts about family planning methods and the reasons why different women may prefer different methods.

The discussion that happens during a board game will help your group:

- communicate basic information about different family planning methods.
- explore the reasons why women may prefer different methods.
- practice giving advice to women about family planning choices.
- find out what women want to learn more about.

You can play the board game with as few as 4 people or as many as 12. If the group is large, you may want to divide into small teams. Building the game may take an hour, so it helps to do this before the workshop. Playing the game will take about 2 hours. Some groups may want more time to discuss the questions more completely. (For instructions on how to

> build the game, see pages 4 to 5, and for how to play the game, see page 6.)

Board games make learning fun

A board game can be a helpful educational tool. A facilitator can organize a board game as a way to start a discussion on a new topic. The discussion during the activity can help the facilitator understand what information the group wants to know. It can also be a good way to review information the group has already learned. Board games are fun and useful for people of all ages.

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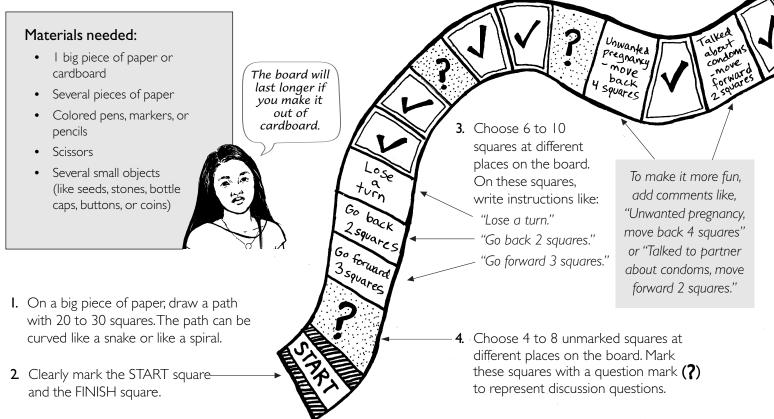
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Board game activities can be about many different topics, not just family planning. For an example of a board game on another topic, see the "Snakes and Ladders" game on page 11-27 (Chapter 11, page 27) of *Helping Health Workers Learn*. You can also contact the organization Teaching-aids At Low Cost (TALC) to learn more about their HIV/AIDS awareness board game (see TALC's contact information on page 7).



Training

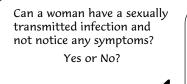
How to build the board game



Questions for the board game

Health-fact questions can help the group learn basic information about different family planning methods, how well they work, and whether they also prevent STIs. Here are some sample health-fact questions to help you make your own. (For more ideas, see pages 8 and 9.) On the bottom of each sample question is the correct answer: Be sure not to copy the correct answer on the actual card for your game!

Discussion questions describe real-life situations and look at some of the reasons why women might prefer different methods of family planning. There are no right or wrong answers to these questions. The purpose is to discuss the situation as a group. Here are some examples:



(correct answer: Yes)

If not treated, some sexually transmitted infections can make both men and women infertile (unable to have children).

True or False?

(correct answer: True)

Can a person ge transmitted infe than once?

Yes or

(correct answer

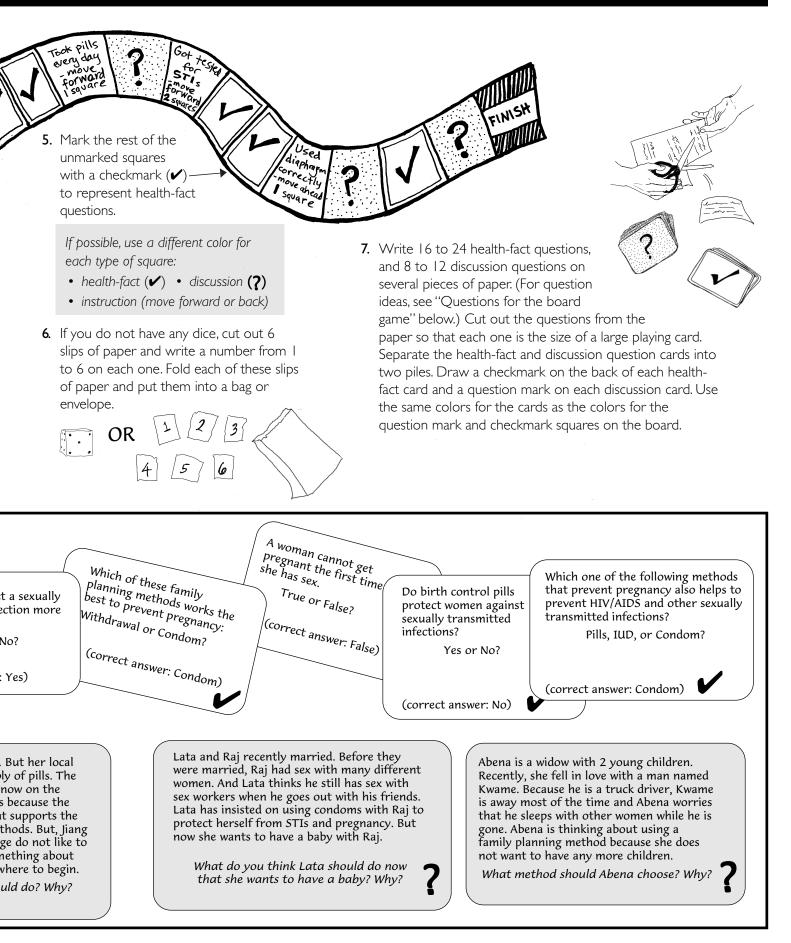
Maria loves her boyfriend Jorge very much. She has been with him for over a year and recently decided to have sex with him for the first time. They used the withdrawal method. Afterwards, Maria tried to ask Jorge about what family planning methods they should use in the future. But Jorge told her it was a woman's responsibility to use family planning, not a man's.

What do you think Maria should do? Why?

Jiang Li uses the birth control pill health clinic ran out of their supp health worker told her that from clinic would only provide condom international aid organization that clinic stopped providing other me Li knows that the men in her villa use condoms. She wants to do son this problem, but does not know y

What do you think Jiang Li co

guide



How to play the board game

I. Introduce the game.

The goal of the board game is to be the first to reach the FINISH square. Ask each player or team to select an object (a seed, stone, bottle cap, button, coin, etc.) to represent them on the board. Each player or team moves along the board by rolling a die (I dice) or choosing a slip of paper with a number on it. Based on the number a player rolls or chooses, she will move her object forward that same number of squares. Some squares represent a health-fact question or a question for discussion. Others give instructions to move forward or backward without asking a question.

Talk with the group about the purpose of the questions. (For examples of health-fact and discussion questions, see pages 4 to 5.) Health-fact questions are a way to share correct information about family planning. Therefore, a health-fact question usually has only one correct answer. Ask the women what they would like to do for answers that are not correct. Should that player or team get another turn? Should the player who gives the correct answer get an extra turn?

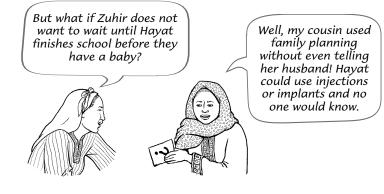
Discussion questions help the group think about creative and helpful solutions to problems that women might experience when trying to choose a family planning method. This means a discussion question does not have a correct or incorrect answer.

2. Play!

Place each object on the START square of the board game. Have the first team or player roll the die (or choose a number out of a bag) and let the game begin!

If a team or player lands on a health-fact square and does not answer the question correctly, talk about the correct answer before the game continues. Ask others in the group to help explain or, if necessary, you can provide the correct information.

If a team or player lands on a discussion question, encourage them to take the time they need to think about different solutions. After the player or team thinks of a solution, invite others in the group to share their solutions or suggestions.



On a big piece of paper, write down the issues, concerns, and comments that women raise while they discuss each question. Sometimes a discussion question may cause a lot of disagreement in a group. Include the disagreements in the list and plan to continue the discussion at the end of the activity.

3. Discuss the game.

Talk about any questions, comments, or concerns that came up during the game. Also, ask the group to think about the discussion questions. Did the questions describe problems similar to those in the community? If so, how might the group's solutions actually help other women?

Invite the players to talk about something they learned from the activity. Ask if there are other issues and information related to family planning that the group would like to discuss or learn more about. Use their responses to plan other activities that focus on the women's interests and needs.



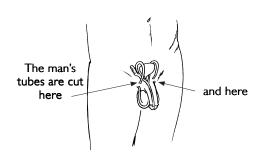
New developments in family planning

Almost all family planning methods are for women! To give people more choices, we need more research on methods for men.

The male condom is the most well-known method of family planning a man can use. But there is another method. It is an operation called a *vasectomy* and makes a man *sterile*, or unable to make a woman pregnant. This operation is permanent, so it is only good for those men who are certain they do not want any more children. The operation can be done in any health center where there Family planning should be the responsibility of both men and women. So why aren't there more family planning methods for men?



is a trained health worker and takes no more than 30 minutes. The tubes that carry the sperm from the testicles to the penis are cut. This does not change a man's ability to have sex or to feel sexual pleasure. He will ejaculate semen but there will be no sperm in the semen.



Sterilization is an operation that makes it almost impossible for a man or a woman to have any children. The operation for the man is called a vasectomy. The vasectomy operation is fast and safe. But now there is a more effective way for trained health workers to do this operation, called "fascial interposition." In this new type of vasectomy, the tubes inside the testicles are cut differently so there is even less chance of sperm remaining in the man's semen. The method is a simple way of improving the vasectomy surgery and is helpful in areas with limited resources.

For more information on vasectomy, contact:

EngenderHealth

440 9th Avenue New York, NY 10001 USA tel: (1-212) 561-8000 fax: (1-212) 561-8067 email: info@engenderhealth.org website: www.engenderhealth.org EngenderHealth provides reproductive health education materials, technical assistance, and health worker training in communities with few resources.

Resources for family planning and reproductive health

Association for Reproductive

and Family Health (ARFH) P.O. Box 30259 Secretariat, Ibadan Oyo State NIGERIA tel: (234-02) 810-2760 fax: (234-02) 810-1669 email: arfh@skannet.com.ng

International Planned Parenthood Federation (IPPF)

Arab World Regional Office 2 Place Virgile Notre Dame Tunis 1082 TUNISIA tel: (216-7) 184-7344 fax: (216-7) 178-8661 email: awro@ippf.intl.tn website: www.ippf.org IPPF has offices around the world. See their website for more information.

Family Health International

Asia Regional Office Arwan Building, 8th floor 1339 Pracharat I Road Bangsue, Bangkok 10800 THAILAND tel: (66-2) 587-4750 fax: (66-2) 587-4758 email: ane@fhibkk.org website: www.fhi.org

TALC (Teaching Aids At Low Cost)

P.O. Box 49 St. Albans Herts AL1 5TX ENGLAND tel: (44-172) 785-3869 fax: (44-172) 784-6852 email: talc@talcuk.org website: www.talcuk.org

TALC supplies low-cost health books, slides, other teaching aids, and equipment all over the world by mail order.

GAN (Global Action Network)

website: www.GlobalActionNetwork.org The GAN website is a way for women who are interested in reproductive health to connect with other women around the world, to learn about leadership opportunities, and to share information and resources.

You can also refer to Chapter 13:"Family Planning," in Where Women Have No Doctor: A health guide for women, published by the Hesperian Foundation. For our contact information, see page 12.

DIFFERENT METHODS

Before you choose a family planning method, try to learn as much as possible about the advantages and disadvantages of each method. It may help to think about the following questions:

- How well does the method prevent pregnancy?
- Does it protect against sexually transmitted infections (STIs)?
- Does it have any side effects (health problems or discomforts)?

The chart is organized by type of method, how effective each method is against pregnancy and STIs, and if a method may have side effects. It is important to know that no method is completely effective against pregnancy or STIs. But some methods work better than others. Also, certain methods can be used together to provide effective protection against both pregnancy and STIs.

					1		
	Barrier Methods				Hormonal methods		
	Condom for men	Condom for women	Diaphragm	Spermicide	Implants	Injections	The Combined pill
				Steamenter &	A CONTRACTOR		
Protection against pregnancy	***	☆☆	**		****	☆☆☆☆	<u>፟</u> ፞፞ፚ፟ፚ፝ፚ
Protection against STIs	GOOD	GOOD	Some	Some	NONE	NONE	NONE
Possible side effects				skin allergy	nausea, headaches, changes in monthly bleeding	nausea, headaches, changes in monthly bleeding	nausea, headaches, changes in monthly bleeding
Important information	Most effective when used with spermicide and lubricant (cream or gel that makes dry things wet).	Less effective when the woman is on top of the man during sex.	Effective only when used with spermicide.	More effective when used with another barrier method, like diaphragm or condom.	This method may be dangerous for women with certain health problems. Talk with a health worker.	This method may be dangerous for women with certain health problems. Talk with a health worker.	This method may be dangerous for women with certain health problems. Talk with a health worker.

Chosing the best method for you

The best family planning method is the one you are most comfortable using. To choose the best method for you, it can be helpful to think about your day-to-day life, your relationships, concerns, needs, and desires. Here are some ways to think about different methods based on your personal needs.



DIFFERENT WOMEN FOR

Here are the main types of family planning methods:

Barrier methods prevent pregnancy by keeping the man's sperm from reaching the woman's egg.

Hormonal methods prevent pregnancy by keeping the woman's ovary from releasing an egg. They also keep the lining of the womb from supporting a pregnancy.

Natural methods help a woman know when she is fertile (the time in a woman's cycle when she can get pregnant), so

Breastfeeding

Natural methods

Natural family

natural method

The Mini-pill

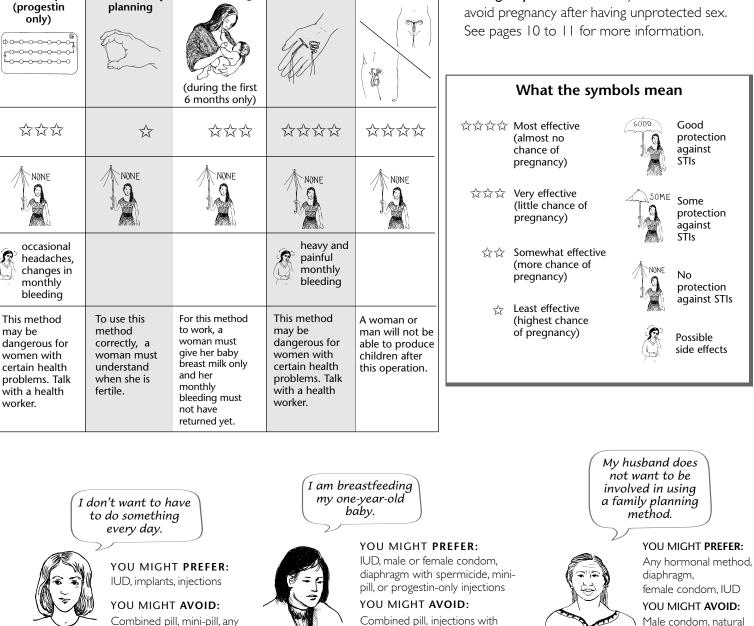
she can avoid having sex at that time. Breastfeeding, during the first 6 months only after birth, is also considered a natural method. It can prevent pregnancy by keeping the ovaries from releasing an egg.

IUDs (IUCD, Copper-T, the Loop) prevent pregnancy by keeping the man's sperm from fertilizing (joining with) the woman's egg.

> Permanent methods are operations that make it impossible for a man to release sperm or for a woman to release an egg.

Emergency methods are ways for women to avoid pregnancy after having unprotected sex. See pages 10 to 11 for more information.

family planning



estrogen

Permanent

methods

Sterilization

IUDs

IUD

Emergency Contraception (EC)



Emergency contraception (EC) is a way for women to avoid pregnancy after having unprotected sex. There are many reasons why a woman may want to use emergency contraception. For example:

- she was raped.
- her partner did not let her use a family planning method.
- the condom tore during sex.
- she and her partner forgot to use their usual family planning method.
- she and her partner did not use a method correctly.



How does EC work?

Depending on when a woman takes EC pills during her monthly cycle, the pills may:

- stop or delay the release of an egg from the ovary.
- prevent the sperm from reaching the egg.
- stop a fertilized egg from attaching to the uterus.

Birth control pills can be used for EC

Birth control pills, as a regular family planning method, have been available for almost 40 years. Millions of women all over the world know about and use birth control pills.

What most women do not know, however, is that these same pills can also be taken in a higher dose *after* unprotected sex (no later than 72 hours) to prevent a pregnancy. This means even women who do not use the pills as their regular family planning method can use them in an emergency.

When birth control pills are used as a regular family planning method, they prevent pregnancy *before* having sex. When they are

If a woman is already pregnant when she takes EC pills, her pregnancy will not stop and her developing baby will not be harmed.

used as emergency contraception, they prevent pregnancy after having sex. Each type or brand of birth control pill has a different amount of hormone (chemicals that occur normally in a woman's body). So for birth control pills to work effectively as emergency contraception, it is important to find out the exact number of pills to take for a specific brand.



For more information about using birth control pills as emergency contraception to prevent pregnancy, see Issue No. 2 of the *Women's Health Exchange* newsletter, and page 224 of the book *Where Women Have No Doctor.* For organizations to contact, see the resources listed on page 11.



Things to know when you take EC pills

- EC pills work best if you take them as soon as possible after having unprotected sex, especially within 24 hours. The longer you wait, the less effective they are. Do not wait longer than 3 days (72 hours) to take them. (If you have no other choice, you can try to take them on the 4th or 5th day after sex, but they are much less likely to work.)
- Take the 1st dose of pills as soon as possible after sex and wait 12 hours later to take the 2nd dose. The dose (the number of pills you need to take) depends on the brand of the birth control pill. (For more information, see the resource section below.)
- EC pills should not be used as a regular family planning method because they are not always effective against pregnancy, they do not protect against STIs, and they can cause side effects like headaches and nausea.
- If you cannot swallow pills, or have problems with nausea and vomiting, the pills can be put into your vagina where they will be absorbed into your body.
- If possible, take anti-nausea medicine with the pills to avoid vomiting and having to take them again.
- EC pills *do not* protect you against sexually transmitted infections (STIs).
- An intrauterine device (IUD) can also prevent a pregnancy if inserted into your womb up to 5 days after unprotected sex. Only use an IUD for emergency contraception if you want to continue using the IUD as your regular family planning method.

The new EC pill



There is now a new type of emergency contraception pill. Because it contains a larger amount of hormone in a single pill, women can take fewer pills than if they used regular birth control pills. Also, the new pill is more effective and causes fewer side effects. However, the new EC pill is not available in every community, and it is more expensive.

The drug companies made this new pill because the demand for emergency contraception became very strong in the last few years. Drug companies are trying to make as much money as possible from this new pill. But if more and more people demand that their local pharmacy or health clinic carry the new EC pill at a lower cost, it will probably be cheaper in the future. Until the new pill is more widely available and less costly, women can always use regular birth control pills as emergency contraception.

JOINING FORCES FOR EMERGENCY CONTRACEPTION

Several organizations from around the world have joined together to create a group called Latin America Consortium for Emergency Contraception (LACEC). The LACEC works to make emergency contraception (EC) legal, encourage the Ministry of Health in each country to include EC in its family planning programs, to educate people on the benefits of EC, and to make EC available and affordable in more communities. The LACEC will be having a meeting in the fall of this year.

For more information on LACEC's meeting or on emergency contraception, contact:

Pacific Institute for Women's Health 3450 Wilshire Boulevard, Suite 1000 Los Angeles, CA 90010 USA tel: (1-213) 386-2600 fax: (1-213) 386-2664 email: piwh@piwh.org website: www.piwh.org

Resources for emergency contraception

These organizations have offices in countries around the world. If possible, check their websites for more information. International Planned Parenthood Federation (IPPF) Regent's College Inner Circle, Regent's Park London NWI 4NS ENGLAND tel: (44-20) 7-487-7900 fax: (44-20) 7-487-7950 email: info@ippf.org website: www.ippf.org PATH-Kenya A.C.S. Plaza, 4th floor Lenana and Galana Road Nairobi, KENYA tel: (254-2) 577177 fax: (254-2) 577172 email: info@path-kenya.org.ke website: www.path.org

Population Council

JI Mega Kuningan Barat, Kav E4.3 No. I Menara DEA building 3rd floor, Suite 303 Jakarta 12950, INDONESIA tel: (62-21) 576-1011 fax: (62-21) 576-1013 email: pcjkt@cbn.net.id website: www.popcouncil.org

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Fatima's story ... continued from page 1

like to try the birth control pill." After the health worker explains how to take the pill correctly, she says, "But I am concerned about your health. How about taking home a bag of free condoms just to try?" Fatima smiles and says, "Can I take the banana too?" And they have a good laugh together. Fatima leaves the clinic with a 3-month supply of pills, and a bag of condoms. The health worker asks Fatima to come back to the clinic in a month so they can decide how well this method is working for Fatima.

This story was modified and reprinted with the permission of the Population Council, from Julie Becker et al., "Introducing Sexuality within Family Planning: The Experience of Three HIVISTD Prevention Projects from Latin America and the Caribbean," from Quality/Calidad/Qualite, No. 8 (1997) page 3.

Thinking about Fatima's Story

Fatima came to the clinic wanting birth control pills. After discussing all the methods the clinic had available, the health worker respected Fatima's decision to try the one she had originally wanted. But she made sure that Fatima had the information and supplies she needed to make this method as safe as possible. Unfortunately, respectful and supportive care like this is rarely available to women. To make good care available to women everywhere, many things need to happen.

First, women must have control over what happens to their own



bodies. This includes choosing for themselves whether or not they want to use family planning. It is important that they feel supported in making this decision by their husbands, partners, and other family members. Ideally, the decision to use family planning would not just be the woman's responsibility (it takes two people to have sex!). Unfortunately, many women, like Fatima, must make the decision to use family planning alone.



But many clinics are not able to offer a lot of different methods because:

• Some methods are too expensive.

- The clinic may be pressured to promote only 1 or 2 methods favored by their funders.
- International aid organizations and drug companies sometimes only support clinics that use the methods they think are best (even if women do not like them).

More family planning methods must be made safe, available, and cheap or free for all women!

Even with limited resources, there are many things



a health worker can do to improve health care for women, such as:

- Give the information that a woman wants and needs, even if the clinic or program does not think it is the "right" method.
- Discuss a woman's day-to-day life, her relationships, her needs, and concerns.
- Talk about sex in a way that makes a woman feel more comfortable sharing her experience.
- Keep everything she says private.
- Understand the reasons why it may be difficult for a woman to make decisions about family planning.
- Respect a woman's personal choices.

Whenever possible, a woman should be able to consult with a female health worker, and to have follow-up visits with the same woman. When a woman's choice in family planning is respected, she is more likely to use family planning correctly. Most importantly, she is able to take charge of her own health.

The Women's Health Exchange is a

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The Hesperian Foundation is a non-profit organization committed to improving the health of people in poor communities throughout the world by providing tools and resources for informed self-care. We believe that people can and must take the lead in their own health care.

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