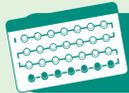


# Do You Know Your Family Planning Choices?

Your family planning provider can help. Please ask!



## Combined Oral Contraceptives

- Effective and reversible without delay.
- Take one pill every day and start new packs on time 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 have mild headaches, weight change, upset stomach, especially at first. These often go away.
- Safe for nearly every woman. Serious complications 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.



## Injectable Contraceptives

- Effective and safe.
- One injection every 3 months (13 weeks) with DMPA, every 2 months with NET-EN. Come back as much as 4 weeks late for DMPA, or 2 weeks late for NET-EN, and still get next injection.
- May be able to get injections outside the clinic, in the community.
- Spotting and irregular bleeding often occur in the first several months, then often monthly bleeding stops. Gradual weight gain, mild headaches. Not harmful.
- Private. 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. After 3-month injections it may take a few more months.
- Safe during breastfeeding, beginning 6 weeks after childbirth.
- Monthly injectables may be available. With monthly injectables such as Cyclo-Fem, monthly bleeding usually becomes lighter and shorter or less frequent. Spotting and unexpected bleeding can occur.



## Condoms

- 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.



## Intrauterine Device (IUD)

- Small, flexible device with either copper or hormone, placed inside the womb.
- Very effective, reversible, long-term. Copper TCU-380A IUD can be used at least 12 years.
- Copper IUD can be inserted right after childbirth, as well as at other times.
- 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.



## Female Sterilization

- Meant to be permanent. For women who are sure that they will not want more children. Think carefully before deciding.
- Very effective (but not 100% effective).
- Involves physical exam and safe, simple surgery. The woman usually stays awake. Pain is blocked.
- Pain and swelling can last a few days after procedure. Serious complications are rare.
- No long-term side effects. No effect on sexual ability or feelings.
- Can be done right after childbirth, as well as at other times.



## Progestin-Only Oral Contraceptives

- Good choice for breastfeeding mothers who want pills, beginning 6 weeks after childbirth.
- Very effective during breastfeeding and reversible without delay.
- Take one pill every day for greatest effectiveness.
- If not breastfeeding, spotting and unexpected light bleeding are common. Not harmful.



## Diaphragm With Spermicide

- Woman places diaphragm deep in vagina each time before sex. Can do this ahead of time.
- Effective if used correctly every time.
- Woman must have an internal examination to get diaphragm of correct size.
- Bladder infection is more common.



## Contraceptive Implants

- 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.
- Safe during breastfeeding, beginning 6 weeks after childbirth.



## LAM (Lactational Amenorrhea Method)

- A family planning method based on fully or nearly fully breastfeeding, for up to 6 months after childbirth.
- A breastfeeding woman uses LAM when:
  - Her baby gets little or no food or drink except breast milk, and she breastfeeds often, both 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.



## Vasectomy

- Meant to be permanent. For men who are sure that they will not want more children. Think carefully before deciding.
- Use another method for the first 3 months, until the vasectomy starts to work.
- 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.



## Fertility Awareness Methods Including Standard Days Method

- 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.

## Emergency Contraceptive Pills

- Help prevent pregnancy when taken within 5 days after unprotected sex or a mistake with a family planning method.
- Safe for all women.
- They do not disrupt pregnancy or harm the baby if a woman is already pregnant.
- Regular family planning methods are more effective. Please consider a regular method.

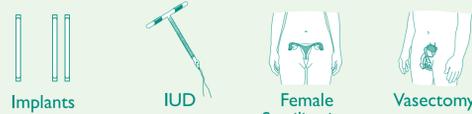
| Some Methods Are Not Advised If You Have Certain Health Conditions   |  |
|--|--|
| Condition  | Methods Not Advised  |
| Smoke cigarettes and also age 35 or older  | Combined oral contraceptive pills (COCs). If you smoke heavily, monthly injectables.   |
| Known high blood pressure  | COCs, monthly injectables. If severe high blood pressure, 2- and 3-month injectables.  |
| Fully or nearly fully breastfeeding in first 6 months  | COCs, monthly injectables.   |
| Breastfeeding in first 6 weeks   | 2- and 3-month injectables, implants, progestin-only pills (POPs).   |
| First 21 days after childbirth, not breastfeeding  | COCs, monthly injectables. (COCs and monthly injectables 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 the birth of a child.) Wait until 6 weeks after childbirth to fit diaphragm correctly. |
| Certain uncommon serious diseases of the heart, blood vessels, or liver, or breast cancer  | 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 disease   | 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 infections; pelvic inflammatory disease (PID); or untreated AIDS | IUD. Use condoms even if also using another method.<br>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 a woman with actual AIDS if she is on treatment and doing well.)   |
| Known pregnancy  | No method needed.  |

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

## Comparing Effectiveness of Family Planning Methods

**More effective**  
Less than 1 pregnancy per 100 women in one year



### How to make your method more effective

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

**Vasectomy:** Use another method for first 3 months

**Injectables:** Get repeat injections on time

**Lactational Amenorrhea Method (for 6 months):** Breastfeed often, day and night

**Pills:** Take a pill each day

**Patch, ring:** Keep in place, change on time

**Condoms, diaphragm:** Use correctly every time you have sex

**Fertility awareness methods:** Abstain or use condoms on fertile days. Standard Days Method and TwoDay Method may be easiest to use.

**Withdrawal, spermicides:** Use correctly every time you have sex

**Less effective**  
About 30 pregnancies per 100 women in one year

