

FAMILY PLANNING

INTRODUCTION: Family planning is not a new concept. From available records, it is known that family planning has been in practice since ages. Family planning is as old as mankind. The use of preventive method of decreasing the population can be found in all ages of human history. Each year, more than half of the pregnancies in women are unintended. Although, unintended pregnancies occur in women of all ages, incomes and ethnic groups. The highest rates occur among adolescents, lower income women. Family planning has been identified as a high priority. Now, what is family planning?

FAMILY PLANNING

This can be defined as a way of thinking and living that which is adopted voluntarily upon the basis of knowledge, attitude and responsible decision making by individuals or couples in order to promote the health and welfare of the family and contribute to the advancement of the community.

AIMS

1. To offer family advice of parenthood whether in a planned programme or individual basis.
2. To promote and maintain good physical and mental health during child bearing.
3. To create an awareness of family planning and the influence it has on the family.
4. To correct misconceptions.

HEALTH BENEFITS OF FAMILY PLANNING

Reduces maternal and infant morbidity and mortality rate.

Reduces the risk that may be associated with pregnancy.

Helps the mother to recover very well after the birth of the baby.

Improves good feeding of the child.

Helps childless couple to have children.

It gives knowledge about reproductive system.

It offers mothers the opportunity to have smaller families which results in a better ability to provide adequate nutrition for them and their families.

Family planning health education gives mother knowledge of material and infant welfare/health which may increase utilization and improve maternal outcome.

For infant, adequate spacing prevents depletion of maternal nutritional status which can decrease the incidence of premature death.

Helps to decrease adolescent pregnancy.

SOCIO-ECONOMIC BENEFITS

- 1 Increases financial potential for families such as improved job opportunities.
- 2 Helps government provide adequate amenities to citizens such as housing.
- 3 Decreases unwanted pregnancies.

MYTHS ON FAMILY PLANNING

- 1 Myth: Family planning causes promiscuity.

Solution: Promiscuity in either men or women reflects individual decision and value. Family planning does not change your value, does not encourage /discourage promiscuity.

2. Myth: Pills causes cancer.

Solution: Many studies have been done on the pill and cancer. None has shown that the pill causes cancer. In fact, the pill provides protection against two cancers, which are:

- i. Cancer of the ovary and
Cancer of the womb.

3. Myth: Tubal ligation makes a woman weak.

Solution: Women who have tubal ligation are strong like other women.

5. Myth: Vasectomy causes weight gain.

Solution: Vasectomy does not cause gain.

METHODS OF FAMILY PLANNING

1. Natural
2. Chemical/Hormonal contraception.

3. Mechanical Barriers.
4. Surgical

NATURAL METHOD

It is use of physical sign and symptoms and cycle data to determine when ovulation occurs, the same method can be used to help couple get pregnant by detecting ovulation.

EFFECTIVENESS OF NATURAL FAMILY PLANNING

The success depends on;

1. The accuracy of the method in identifying the woman actual fertile days.
2. Ability to be able to correctly identify the actual fertile time.
3. Couples ability to follow rules of the method.

TYPES OF NATURAL FAMILY PLANNING

1. BASAL BODY TEMPERATURE METHOD;

- i. Take temperature in the morning before getting out of bed, before eating or drinking.
- ii. Take temperature at the same time every morning in the same route, orally for 5mins, or rectally for 2mins.
- iii. Record the reading, chart and do this for 3 to 6 months consecutively.
- iv. Temperature will increase by 0.20c to 0.5⁰c as soon as you have ovulated.

2. CALENDAR METHOD

- i. Record the first day of each menstrual cycle for 6 to 12 months.
- ii. Determine the beginning of the fertile period by subtracting 18days from the shortest cycle
- iii. Determine the end of the fertile period by subtracting 11days from the longest cycle.
- iv. Abstain from intercourse during this period every month.

WARNING: - If your period is irregular, do not use this method of contraception.

3. CERVICAL MUCUS(BILLINGS METHOD)

Billings's method is based on changes that take place in quantity and quality of the cervical mucus during the menstrual cycle. Prior the ovulation, the mucus becomes thin, clear, plenty in amount and slippery. It is easily stretched out between the fingers like egg white. After ovulation it becomes thick again and does not flow.

4. COITUS INTERRUPTUS

This is when the penis is withdrawn from the vaginal just before ejaculation.

5. ABSTINENCE

This means avoiding sexual intercourse.

ADVANTAGES OF NATURAL FAMILY PLANNING

1. No physical side effect.
2. It is cheaper.
3. It is acceptable to many religious groups that oppose conventional method.
4. It encourages couples to communicate about family planning and sexuality.

DISADVANTAGES

1. It requires high motivation for success.
2. It is suitable for women with irregular menses.
3. It requires a long time of practice.
4. No protection against HIV/AIDS.
5. It is difficult to use after child birth until menstrual cycle becomes regular again.

ORAL CONTRACEPTIVE PILLS

These are synthetic female hormone oestrogen and progesterone which are taken by women for contraceptive reasons. They are usually taken for 21 to 28 days.

TYPES

1. Combined (Standard):- It is about 90% to 95% effective, it regularizes irregular period.
2. Minipills (Progestin only):- Are usually packed in 28days. It is good and acceptable where combined pills are contraindicated.

NOTE: It can be used by lactating mothers. It decreases menstrual cramp.

ADVANTAGES OF ORAL CONCEPTIVE PILLS

1. Highly effective 90 to 95% if used correctly.
2. Easily reversible.
3. Use is not related to sexual intercourse(client dependent)
4. Well researched.
5. Offers some protection against cancer of the womb and ovaries.

DISADVANTAGES

1. Pills must be taken every day.
2. Does not protect against STI, HIV/AIDS.
3. May cause some side effect such as weight gain, amenorrhea, and weight loss.

INJECTABLES

ADVANTAGES

1. Prevents endometrial cancer.
2. Provides privacy.
3. It is convenient and easy to use.
4. Suitable for breast feeding mothers.
6. Long acting.
7. Highly effective.
8. It is safe.

DISADVANTAGES

1. Requires frequent visit to the clinic i.e., 2 to 3 months of interval.
2. Menses may cease for several months.
3. Return of fertility may be delayed.
4. May cause weight gain.
5. Does not protect against HIV/AIDS.
6. Since they are long acting, cannot be easily removed from the body in case of complications.
7. Medical practitioner dependant.

WHEN CAN IT BE TAKEN?

1. When one is not pregnant.
2. Immediately after stopping another method.
3. Six weeks after child birth.

IMPLANTS

It is a hormonal contraceptive method made up of salicytic capsule inserted under the skin of the left upper inner arm side of the woman.

TYPES

1. Uniplant—1 capsule lasting for one year.
2. Norplant—6 capsules lasting for five years
3. Jadelle-----2 capsules lasting for five years.
4. Implant----1capsule lasting for three years

ADVANTAGES

1. Highly effective 99.8%
2. Provides privacy

DISADVANTAGES

1. Requires skilled practitioner.
2. It may cause weight gain.
3. Do not protect against HIV/AIDS.
4. Insertion and removal involves minor surgical procedure.
5. Amenorrhea may occur in less than 10% users.

INTRA-UTERINE CONTRACEPTIVE DEVICE

It is also called intra-uterine device. It is a small plastic object inserted into the womb to prevent pregnancy.

ADVANTAGES

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| 1. It is reversible. | 3. Long lasting up to 10years. |
| 2. Highly effective up to 99%. | 4. Easily available. |

DISADVANTAGES

1. Increase risk of infection
2. There is slight risk of ectopic pregnancy

BARRIER METHODS

This prevents spermatozoa coming into contact with the ovum thus preventing pregnancy.

They comprise male and female condoms, caps and diaphragms, which are usually used with spermicides.

ADVANTAGES

1. Reasonably cheap.
2. Availability
3. No prescription is required.
4. Protects against HIV/AIDS.
5. They give non-systemic effect.
6. Can be worn by client without discomfort.

DISADVANTAGES

1. Can be messy.
2. Can be difficult to hide from partners.
3. Decreases sexual enjoyment.
4. It interrupts foreplay.
5. It may burst or slide off a flaccid penis during withdrawal.

POST PRESCRIPTION INSTRUCTION

1. Condom should be worn over an erect penis.
2. Condom should be stored in a cool, dry place and away from bright light and always be at hand.
3. Do not inflate it.
4. Put it on before genital contact.
5. If necessary lubricate it with jelly but not Vaseline because it can produce heat.
6. After ejaculation, while the penis is still erect, hold the rim of the condom firmly against the base of the penis during withdrawal.
7. Remove the condom taking care not to spill the sperm on the vulva.
8. Use new condom at each time of penetration.

DISADVANTAGES OF FEMALE CONDOM

1. Excessive unpleasant noise during intercourse.
2. Limited supply in Nigeria.
3. It is expensive.
4. It has to be held in place during intercourse.

VOLUNTARY SURGICAL CONTRACEPTIVE

This is a permanent method of contraception which prevents unwanted pregnancy.

TYPES

1. Vasectomy in male.
2. Bilateral tubal ligation in female.

EFFECTIVENESS

99%

ADVANTAGES

1. Provides permanent contraception.
2. It is cost effective.
3. It is a client dependent method.
4. Does not affect the menstrual cycle.
5. Enhances enjoyment of sex by reducing worry of pregnancy.

DISADVANTAGES

1. It requires minor operation.
2. It requires special skill for operation.
3. It does not protect against STI, HIV/AIDS.
4. The reversal is expensive.