

Chapter 7

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Protecting Women's Health with Family Planning



Access to family planning is a critical part of any effort to improve the health of women, and is part of their right to health. Women are healthier when they can decide for themselves when to have sex and if and when to have children. Family planning with birth control or contraception enables women to make those decisions.

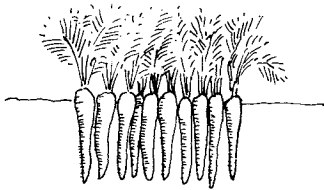
Family planning is not new. Women have always used abstinence (no intercourse) and breastfeeding to prevent pregnancy. Some women use knowledge of their monthly cycles and fertile times to prevent pregnancy or to help them get pregnant. Today, there are many different contraceptive methods. These include barrier methods such as the male or female condom; hormonal methods, such as birth control pills, injections, and implants; IUDs (intrauterine devices); and permanent sterilization. Using any of these methods is sometimes called “birth control,” “child spacing,” or “contraception.”

Starting conversations about family planning

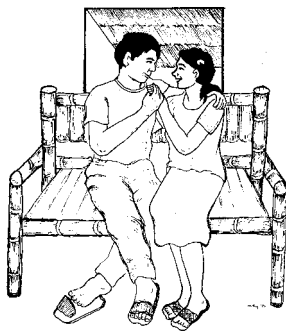
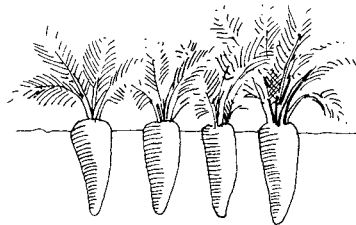
People are often shy or embarrassed to talk about family planning because a conversation about family planning is also a conversation about sex. Focusing instead on how family planning can benefit the health of mothers and children, and on the benefits to the entire family, can be an easier way to get started.

Activity

Use drawings to discuss benefits of family planning



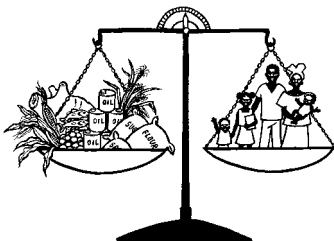
Spacing plants so they are not too close together is better for the soil and helps them grow better. The same is true for mothers and children. Spacing children is healthier for the entire family.



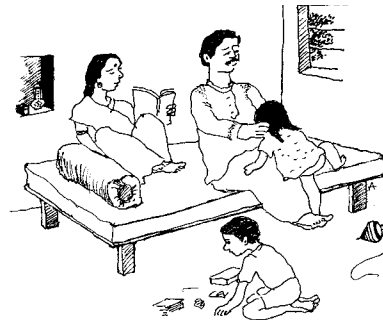
A woman and her partner can enjoy sex without fear of pregnancy.



Waiting to have children gives young people time for schooling.



Fewer children means more food for everyone.



Parents have more time to relax and help educate their children.

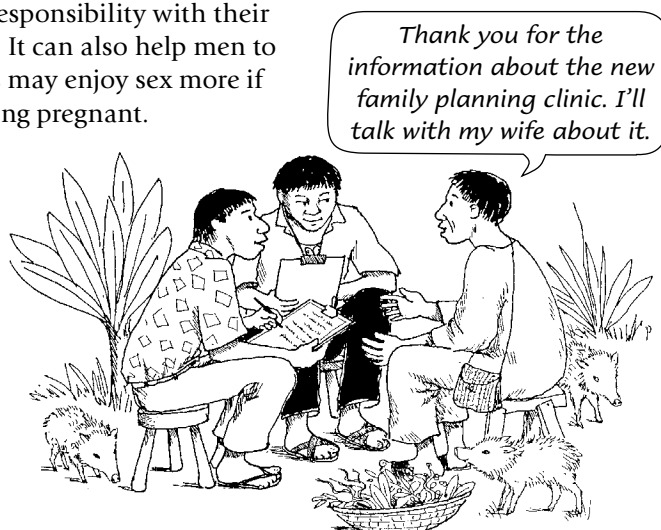
Activity**Use drawings to discuss benefits of family planning***(continued)*

- 1 Show the group these images without the captions (you can adapt them to local situations). Ask the group to discuss what health or other benefits of family planning the image represents.
- 2 Build on the group's ideas with questions such as:
 - What difference does birth control make for a young woman who goes to school? For a woman who has a job and takes care of her house and family?
 - What difference does family planning make for a family that struggles to have enough food? or lives in a small space and cannot afford to move?
 - What difference does family planning make for providing decent housing, clean water, sanitation, and schools for everyone in the community?
- 3 Ask participants to make their own drawings of other benefits of family planning. Encourage them to think about how family planning can make a difference in a woman's life, her family, and the whole community.

Involving men

Most men want to have healthy partners and children, but some men may not want to talk about family planning because they do not know much about it, or they may have heard too many negative things about birth control. Having a chance to talk and learn about family planning helps men respect women's decisions about having children and encourages them to share responsibility with their partners for using birth control. It can also help men to say how they and their partners may enjoy sex more if they are not worried about getting pregnant.

This next activity has a group play a game to show the story of 2 different families and how they grow. This is a fun activity that is good for involving men in a discussion.



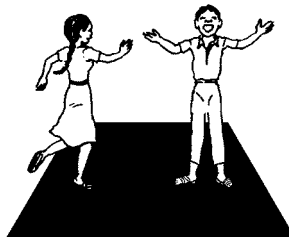
Activity

Story game: A tale of 2 families

- 1 Draw 2 equal-sized shapes on the ground, big enough for 4 people to stand inside. Ask the group to pretend that these shapes are the homes of 2 brothers.
- 2 Ask volunteers to pretend that they are the 2 married couples, and give them names. In our story, one couple is Juan and Rosa, and the other is Pedro and Alma. Ask each couple to stand in one of the "homes." Explain that the brothers got married on the same day. Play music and ask the couples to dance in their homes to celebrate!



Juan and Rosa



Pedro and Alma

- 3 Now, tell the story of each growing family with volunteers play-acting each child. For example:

Each couple had a baby after their first year of marriage, and both babies were girls. (Ask 2 volunteers to play the roles of the babies and to stand inside the homes. You can give them each a doll or a child's toy as a prop.)

Juan and Rosa talked about having more children and decided that they wanted to wait. They went to their neighborhood clinic to ask about birth control. A health worker explained the different family planning methods provided at the clinic, and answered Juan and Rosa's questions about other methods such as fertility awareness. Juan and Rosa decided that Rosa would get an injection every 3 months to keep from getting pregnant. Rosa went to work part time while her mother helped take care of the baby.

Alma and Pedro decided not to use any birth control method after their baby was born. They believe that having children is God's will, and Pedro hopes to have a son soon. They both want Alma to take care of the baby all the time, so she does not have a paid job. One year later, Pedro and Alma have another baby, a girl. (Ask 1 volunteer to step into Alma and Pedro's home as baby number 2.)

Pedro and Alma have another baby the next year, and this time it is a boy. (Ask another volunteer to step into Alma and Pedro's home as baby number 3.)

Activity

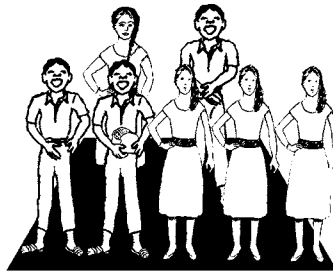
Story game: A tale of 2 families *(continued)*

With 3 children under 3 years old, Alma does not want more, but she is afraid to discuss this with Pedro. In their 5th year of marriage, she and Pedro have another child. (Ask another volunteer to step into Alma and Pedro's home as baby number 4.)

Juan and Rosa decide to have another baby when their first child is 3 years old. (Ask another volunteer to step into Juan and Rosa's home as their second baby.)

In their 6th year of marriage, Pedro and Alma have another baby. (Ask 1 more volunteer to step into Pedro and Alma's home as baby number 5.)

At their sixth anniversary they plan a party together and prepare a meal. (You can give each family a loaf of bread and ask them to share it.)



4 Once the story game has finished, you can lead a group discussion about people's ideas about birth control, or about family size and what influences people's decisions. Here are some questions you could ask:

- Why do some people prefer large families and other people prefer to have only 1 or 2 children?
- Who decides when and how many children to have? How does this decision affect the woman? How does it affect the man?
- How do people feel about having boys or girls? How do peoples' attitudes about gender affect their decisions about having children?
- How does family size affect the family's ability to have enough food and make sure all the children grow up healthy?

5 To conclude you can ask the group for their ideas on how family planning makes it possible for women and couples to decide when and how many children to have.

Couples need to talk about it

Talking with a partner about using birth control is usually easier if women practice, using role plays. Having women practice playing the men's roles makes this activity a lot of fun.

Activity

Practice talking about birth control

- 1 First, ask the group to think of different reasons men may not want to discuss birth control, or what they might say about not using family planning.
- 2 Then ask a few pairs of women to prepare role plays in which the woman talks about her desire to use birth control and tries to convince the man to cooperate.



- 3 After each role play, ask the women who watched it which arguments they thought were most useful. What other arguments can they think of to help persuade the man? Here are some examples:
 - Sex is so much better if I am not worried about becoming pregnant.
 - If we wait to have another child, I will be able to contribute more to the family.
 - If I get pregnant now, you will have to quit school and work full time.
 - You do not need many children to be proud — think of how proud you will be when your children fare well in the world, because we were able to send them to school.
 - Having children every year will make me old before my time. Isn't it better for me to stay strong and healthy?

Women's group changes men's opinions in Nepal

Women in Nepal formed Community Action Groups where they met to talk about their health and find solutions to community problems. They helped each other improve their reading and writing skills, and they set up savings programs so women could get loans when their families needed money for medical expenses and other emergencies. Men became supportive of these groups because they saw that helping women benefitted the whole family.

The women also began to learn about family planning, and soon some of the men were also talking about the benefits of child spacing with other men at gathering places such as tea stalls, local festivals, and bus stops. As word spread about condoms and child spacing, it became more common and acceptable for women to plan their families with their husbands.



Before we had to ask a family member for permission to do even the smallest things, such as selling a hen.

But now we can make decisions about things that affect us and our families, such as how many children to have and whether they should go to school.



Adolescents' needs for birth control

Adolescents face many challenges when wanting to prevent unintended pregnancy. Young women are often pressured to have sex or to have a baby before they are ready. Some young women feel ready to have sex but not ready to become mothers. Adolescents often cannot get contraceptives when they need them. And it can be especially difficult for young women to insist that their partners use condoms.

Parents are often uncomfortable talking with their daughters about sex, pregnancy, and birth control. Religious or cultural beliefs that disapprove of unmarried women having sex also make it difficult for young women to learn how to prevent pregnancy. But talking openly with adolescents about family planning does not encourage them to have sex before they are ready. Instead, such conversations can help promote mutual trust, respect, and understanding. Knowing about family planning gives young women more confidence in their relationships and control over their own lives. For more ideas, see Chapter 4: Sexuality and Sexual Health.

Activities that encourage dialogue between young people and adults can eventually lead to community solutions to help prevent early and unintended pregnancies.

Activity**A fishbowl to help youth and adults talk about birth control**

A fishbowl activity can be a good way for youth and adults to listen to each other's concerns and points of view. You can adapt the activity, A fishbowl about birth experiences (page 234). For example, begin by having a group of young women, or a mixed group of young men and women, sit together in a circle with a group of adults sitting in a circle around them.



- 1** Ask the youth inside the circle to talk about why access to birth control is important for young women's health now and in the future. Encourage them to discuss their experiences (or the experiences of other young people) and any difficulties in trying to obtain and use family planning.
- 2** Next ask the adults to talk about what they heard. Give them a chance to ask the youth questions and have the youth respond.
- 3** After a few minutes, have the groups change places, and ask the adults to talk about their experiences and any difficulties in trying to use family planning.
- 4** Ask the youth to talk about what they heard and give them a chance to ask the adults questions.
- 5** To conclude, ask each group questions that will help them reflect on each others' experiences. What did they learn that they did not know before? What are some things that both groups have in common? What are some of the differences around access to and use of family planning?

Promote youth-friendly services

By working to make health services friendly to youth, you can increase the likelihood that young women and men will have access to information about birth control, sexual health, and preventing STIs. For example, you can:

- make services available at places where youth already go, such as schools, markets, and community centers.
- reserve “youth only” hours in a clinic in the late afternoon, evening, or weekends.
- reassure young people that health workers will treat them with respect and will not share their information with others.
- train young people as peer counselors.
- ask youth to decorate the space, provide music during “youth only” hours, and make the space their own.
- make services and birth control free or as low-cost as possible.

Encourage youth to participate and lead activities and events. For example, a youth group could organize a dance or a neighborhood clean-up to bring people together in a fun activity where health services could also be available. Young people have great ideas and a lot of energy. They may come up with ideas jarring to adults, but they will almost certainly reach more young people. There are more ideas for youth-friendly services in Chapter 4: Sexuality and Sexual Health and Chapter 5: Preventing Sexually Transmitted Infections.

The following activity can help promote discussion between young people and adults about the needs of adolescents and obstacles to care, and then imagine changes for health services to meet the needs of all youth.



Youth are more likely to use services that reflect their interests and needs, located at places they feel comfortable, and during hours convenient to them.

Activity

Crossing the river to health

- 1 Create an imaginary river in the middle of the space where you are gathered using stones, rope, or a long piece of cloth. Ask young people to sit on one side of the river and adults to sit on the other side. Ask everyone to think about why adolescents need complete sexual and reproductive health services, including access to pregnancy prevention and abortion services, and also orientation about sexuality and life choices, and why the river separates the adults and young people.

We already have women's bodies, but we do not want to get pregnant. We need to know how to take care of ourselves as women.

We need to be able to talk with adults who will not judge us. We need information and straight answers to our questions.

No one has told us how to talk with young people about these matters. I don't even know if it is legal.



There are so many risks these days, I don't know what to tell my kids.

- 2 Point out that access to health services can save young women's lives, but sometimes getting health care can be as difficult as crossing a raging river. Sometimes adults need to toss a lifeline to help youths get across.

Ask the group to think about the obstacles or reasons why adolescents cannot or will not visit health centers to get sexual health services such as birth control, condoms, or STI tests. For each obstacle, ask "But why?" to encourage the group to think of more obstacles.

No services after school hours

Parents' permission required

No privacy

No free tests for STIs

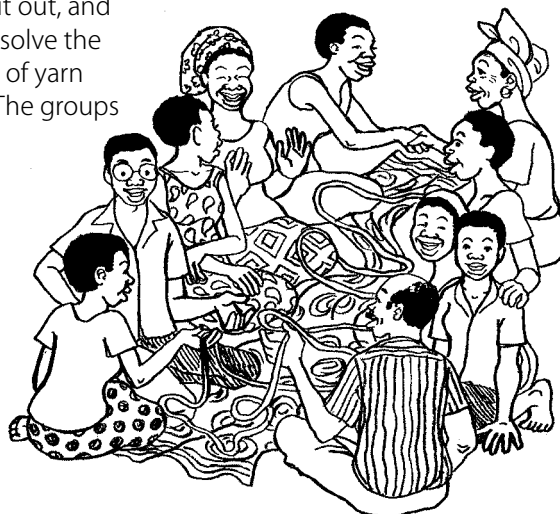
Youth don't know they have reproductive rights

Activity**Crossing the river to health** *(continued)*

3 When all of the obstacles have been written on cards, form 2 groups and give half of the cards to each group. This time the groups should be mixed between adults and youth, gathered on either side of the imaginary river.

4 Ask a group to read out loud one of its obstacle cards to the group on the other side of the river. The other group has to come up with a solution or "lifeline." When they have a good solution they call it out, and if the other group agrees that it will solve the problem, then they can throw a ball of yarn across the river to the other group. The groups on either side of the river take turns calling out obstacles and coming up with solutions. Everyone who has spoken holds onto their part of the yarn. By the time the game is completed, the yarn will cross back and forth across the river, like a web or bridge!

As the groups name solutions, you can write them on a large piece of paper that everyone can see.



5 When solutions for all of the obstacle cards have been identified, ask for any new ideas for solutions and then come to a close. Ask everyone to reflect on the meaning of the bridge that is being formed.

6 Then ask the whole group to talk about what is needed so all young people can use all the services at the health center. Review the different solutions and give the group time to talk about which solutions would work best or be most needed. Encourage both adults and youth to think about how they could take action to work for change.

Methods for preventing pregnancy

Women who want to prevent pregnancy can make better decisions about using birth control when they can choose from several methods. They also need correct and clear information about how to use each method and how well the method prevents pregnancy if used correctly. Men are also more supportive of family planning when they know about different methods and how to use them.

In order to use birth control methods correctly, women and men both need to understand their bodies and their sexuality. The first step is learning how women's and men's genital organs work, how women's fertility is related to monthly bleeding, and what happens during intercourse. For more information, see Chapter 4: Sexuality and Sexual Health, and *Where Women Have No Doctor*, Chapter 4.

Any woman who has started monthly bleeding can use contraception. Different women prefer different methods for different reasons at different times in their lives. For example, a woman may prefer one method when she is younger and before she has any children, another method while she is "spacing" the children she wants to have, and another method when she has decided not to have any more children.

Unfortunately, many women are unable to prevent pregnancy when they want to because they do not have correct information about family planning, or they cannot get services that provide methods of birth control.



Different methods for different needs

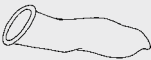


The best family planning method is one that is effective and is the one a woman is most comfortable using. The information on the next 4 pages shows the different types of methods to help a woman decide which one might be best for her.

All birth control methods are more effective when they are used correctly the entire time a woman wants to prevent pregnancy. This can mean using a condom correctly each time she has sex, or always taking a pill at the same time every day. An experienced health worker can help a woman decide which method to use.



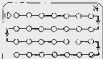
Different methods prevent pregnancy in different ways

Barrier methods block a man's sperm from reaching a woman's egg. These methods are used each time a woman has sex. They do not cause any changes in a woman's fertility or monthly bleeding.


Condoms are the only method that both prevent pregnancy and also provide good protection against STIs including HIV. You can combine condoms with hormonal or other more effective methods of birth control.

BARRIER METHODS		
Family planning method	Protection from pregnancy	Other important information
Condom for men 	Good	Most effective when used with spermicide and a water-based lubricant. Available in most places at low or no cost.
Condom for women 	Good	Do not use together with a male condom.
Diaphragm, cervical cap 	Good	Most effective when used with spermicide. Effective only when using the correct size. Requires health worker examination. With regular use, will need replacement after about 5 years.



Hormonal methods temporarily stop a woman's ovaries from releasing eggs. When a woman stops using a hormonal method, her ovaries will produce eggs again, and she can get pregnant unless she starts using a different method. Hormonal methods can help with irregular bleeding and pain during a woman's monthly bleeding. Talk with an experienced health worker about how to use correctly and possible side effects.

HORMONAL METHODS		
Family planning method	Protection from pregnancy	Other important information
Implants 	Best	Effective for 3 to 5 years. Must be inserted and removed by a trained health worker.
Injections 	Very good	Effective for 1, 2, or 3 months, depending on the type.
Birth control pills 	Very good	Most effective when taking 1 pill each day at the same time without missing any pills.





IUDs (intrauterine devices) are small plastic devices inserted in a woman’s womb. IUDs prevent a man’s sperm from fertilizing (joining with) a woman’s egg. An IUD can stay in place for years. When it is removed, the woman will be able to get pregnant.

IUDS		
Family planning method	Protection from pregnancy	Other important information
IUD 	Best	Effective for 5 to 12 years, depending on the type. Must be inserted and removed by a specially trained health worker.

Permanent methods are operations that make it impossible for a woman’s egg to be fertilized by a man’s sperm. The operation for a man is called “vasectomy.” The operation for a woman is often called “sterilization” or “tubal ligation.”

PERMANENT METHODS		
Family planning method	Protection from pregnancy	Other important information
Vasectomy 	Best	A woman or man will never be able to have babies after these operations, but these operations do not affect a man’s or a woman’s sexuality, pleasure, or ability to have sex.
Sterilization (tubal ligation) 	Best	

Natural methods are ways of avoiding intercourse (penis inside the vagina) when a woman may be fertile. **Sex without intercourse** always prevents pregnancy.

NATURAL METHODS		
Family planning method	Protection from pregnancy	Other important information
Sex without intercourse (penis not inside vagina at all) 	Best	Sexual touch rarely passes any STIs. Oral sex is less likely to pass STIs. Anal sex easily passes HIV and other STIs. Always use a condom with anal sex.
Breastfeeding (during the first 6 months only) 	Very good	To use this method, a woman must give her baby only breast milk, not even water, for the first 6 months, and her monthly bleeding must not have returned yet.
Fertility awareness 	Good	A woman must know when she is fertile, and she must not have sex with intercourse during her fertile time. Some women use a condom or diaphragm on their fertile days instead of avoiding sex.
Pulling out (withdrawal) 	Least	Can be hard to do effectively. Even if the man pulls out, some liquid from the penis may enter the vagina during sex, which can cause pregnancy.

Here are some examples of situations and methods that women might prefer:



I want to keep having normal monthly bleeding.

You might **prefer**: Barrier methods, IUD
You might **avoid**: Implants, injections



I do not want to have to do something every day.

You might **prefer**: Implants, injections, IUD
You might **avoid**: Pills, natural methods



I don't want my parents to know I am using birth control.

You might **prefer**: Injections, barrier methods
You might **avoid**: Pills, implants



I do not want to put things in my vagina or my womb.

You might **prefer**: Hormonal methods, men's condom, natural methods
You might **avoid**: Diaphragm, female condom, IUD



I want to be able to have sex anytime without interruption.

You might **prefer**: hormonal methods, IUD
You might **avoid**: Barrier methods, natural methods



I do not want any more children.

You might **prefer**: Sterilization, implants, injections, IUD
You might **avoid**: Natural methods, barrier methods, pills



I want to have a child within a year.

You might **prefer**: Barrier methods, pills, natural methods
You might **avoid**: Implants, injections, IUD, sterilization



I think my partner has sex with others and may infect me with an STI.

You might **prefer**: Male or female condom
You might **avoid**: Having sex without a condom



I am breastfeeding my baby. I do not want to have another child for at least 2 years.

You might **prefer**: Male or female condom, diaphragm, implants, IUD, mini-pill, progestin-only injection

You might **avoid**: Combined pill, monthly injections until baby is 6 months old or your monthly bleeding returns



My partner does not want to be involved in using a family planning method.

You might **prefer**: Female condom, diaphragm, hormonal methods, IUD

You might **avoid**: Male condom, natural methods

Emergency contraception

A woman can use emergency contraception (also called EC and in some places by the brand name, *Plan B*) to prevent pregnancy **after** having intercourse without using a birth control method, or if the method was used incorrectly. For example, EC can be used if a condom package has a small hole or tear that might have damaged the condom. Or if the condom broke during sex. Or if a woman forgot to take her pill for more than one day.

Plan B is a high dose of the same hormones in birth control pills, taken once, up to 5 days after having intercourse. It is also possible to take a certain number of some kinds of regular birth control pills if *Plan B* is not available. The other EC method is an IUD inserted by a specially trained health worker within 5 days after having intercourse.

All women should know about EC and be able to use it if they need to. Many women — especially adolescents — are pressured or forced into having sex without their consent or any kind of planning. EC can also help a woman prevent pregnancy after being raped. Unfortunately, information about EC is not available in many places. If information about EC is not well known in your community, talk with health workers, teachers, and community leaders who are interested in preventing unintended pregnancies, especially among adolescents.

For more information about emergency contraception, see pages 335 to 336 in Where to get more information and Chapter 13: Family Planning in *Where Women Have No Doctor*.

We made an action plan to make sure all women in the community, and health workers who may treat women after rape, know how to safely use regular birth control pills for emergency contraception.



Facts and myths about family planning

Myths, rumors, or false information about some types of birth control may make people too afraid to try them, even if they want to. People need correct information so they can choose a method and use it with confidence. You can use examples like the ones on this page to create skits, role plays, or games that help people sort out the truth from the rumors they hear.

myth: Some people say that birth control pills make women sick.

fact: Many women never feel sick because of their birth control pills, but some women get headaches or feel nauseous when they first start taking pills. This feeling usually goes away after taking pills for 2 months. A woman can often change to another kind of pill that does not cause any feeling of illness.

myth: Some people say family planning methods make women less able or unable to get pregnant later, after they stop using them.

fact: The only family planning method that makes women sterile (permanently unable to get pregnant) is an operation that “closes the tubes” or that removes the womb. Most women can get pregnant right away after they stop using any other kind of birth control. Some women may not be fertile for a few months after they stop taking a hormonal method.

myth: Some people say women cannot get pregnant during their monthly bleeding.

fact: Women can get pregnant any time during their monthly cycle, especially if their monthly bleeding does not happen regularly every 28 days.

myth: Some people say rinsing out the vagina, taking hot baths or showers right after having sex, or having sex standing up can prevent pregnancy.

fact: None of these work at all to prevent pregnancy.

myth: Some people say that a having a vasectomy makes a man weak and unable to please his partner when they have sex.

fact: A vasectomy only stops the man from releasing sperm. It does not affect his feelings or his ability to have sex.

Fun ways to share information about family planning

A group discussion about birth control methods can help everyone understand which methods might be best for women in different situations. Sometimes, simply discussing different methods in groups that include youth, elders, or mothers-in-law helps overcome common obstacles to using family planning.



An activity such as Sexy bingo (page 86) can help people feel more comfortable talking about family planning in a group.

Demonstrating different methods

One way to learn about birth control is to invite a health worker to demonstrate different methods that are available in your community. Everyone can look at and touch all the different items and share what they know about each of them and how they work. The health worker can talk about how each method works to prevent pregnancy and can answer questions. The health worker can also ask the group to think about which type of family planning might be best for specific situations.



For reliable information about family planning methods, see pages 335 to 336 in Where to get more information and Chapter 13: Family Planning in *Where Women Have No Doctor*.

Board games

A board game can be a fun way for a group to discuss both the facts about birth control methods and the reasons why different women may prefer different methods. The discussion that happens during the board game will help the group:

- test what they know about different family planning methods.
- explore the reasons why women may prefer different methods.
- practice giving advice to women about birth control options.
- find out what women want to learn more about.

Activity

A family planning board game

To prepare:

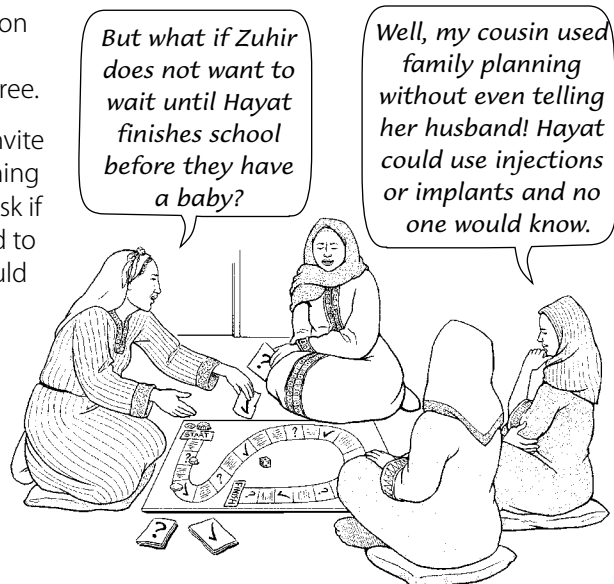
The sample board game on the next 2 pages shows examples of health fact questions and discussion questions. When you make your own health fact questions, be sure to include myths and misunderstandings that are common in your community (see page 195 for ideas).

To play:

When a team or player lands on a discussion question (marked with a "?"), ask them to suggest to the whole group 1 or 2 solutions to the situation on the card, and then explain why they think one solution may be better than others. Invite others in the group to make suggestions too.

When they land on a fact question (marked with a "✓") have them answer and ask others if they agree.

After playing the board game, invite the players to talk about something they learned from the activity. Ask if there are other questions related to birth control that the group would like to discuss or learn more about. Use their responses to plan other activities.

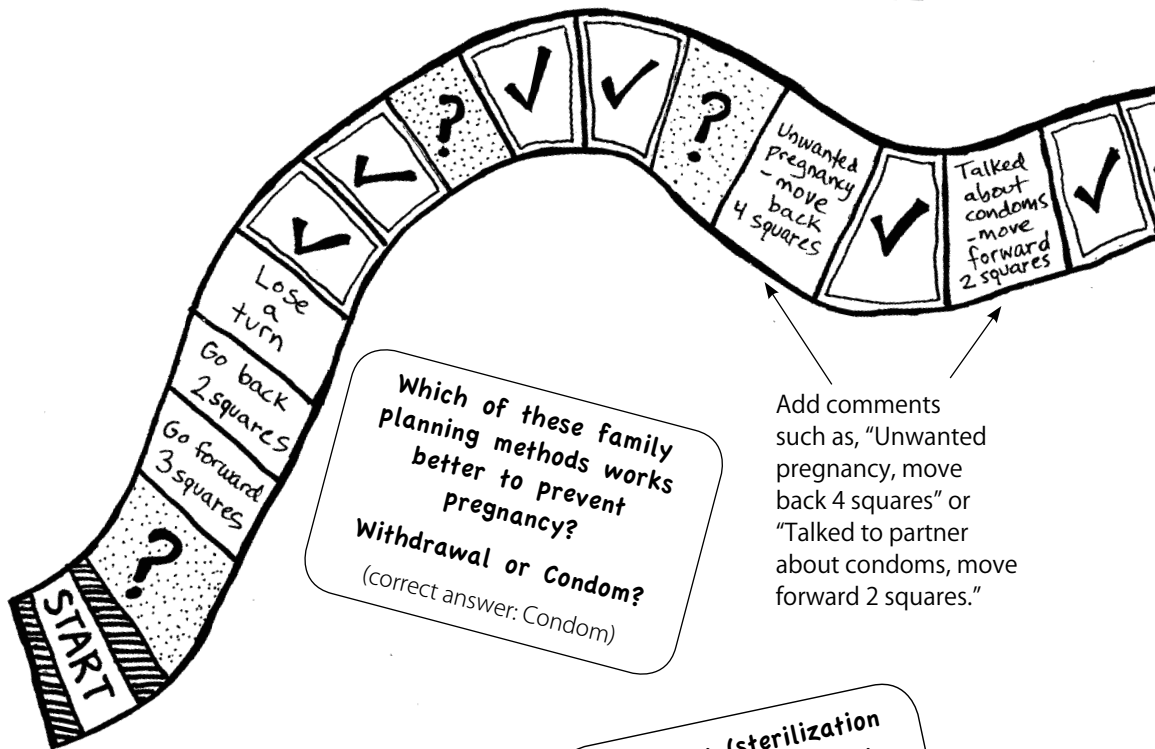
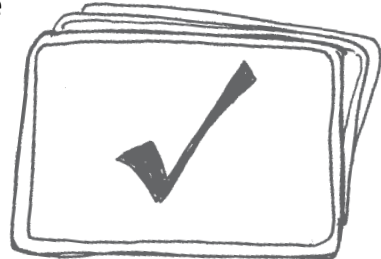


Activity

A family planning board game *(continued)*

Questions for the family planning board game

Health fact questions can help the group learn basic information about different methods for preventing pregnancy. (Answers are shown here, but do not put them on your cards. Instead, write them on a separate sheet of paper to help you remember.)



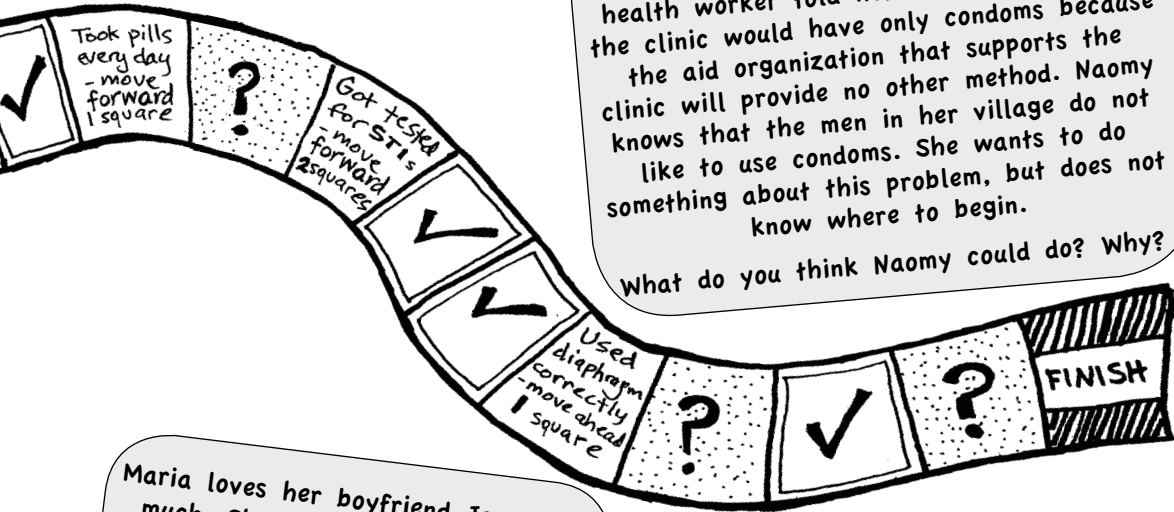
Which of these family planning methods works better to prevent pregnancy?
Withdrawal or Condom?
 (correct answer: Condom)

Add comments such as, "Unwanted pregnancy, move back 4 squares" or "Talked to partner about condoms, move forward 2 squares."

A woman cannot get pregnant if she has sex during her monthly bleeding.
True or false?
 (correct answer: False)

Vasectomy (sterilization for men) takes away men's desire or ability to have sex?
True or false?
 (correct answer: False)

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.



Naomy uses a birth control pill. But her clinic ran out of their supply of pills. The health worker told her that from now on the clinic would have only condoms because the aid organization that supports the clinic will provide no other method. Naomy knows that the men in her village do not like to use condoms. She wants to do something about this problem, but does not know where to begin.

What do you think Naomy could do? Why?

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 birth control methods they should use in the future. But Jorge told her it was a woman's responsibility to use birth control, not a man's.

What do you think Maria should do? Why?

Lata and Raj recently married. Before they were married, Raj had sex with many different women. Lata thinks he still has sex with sex workers when he goes out with his friends. Lata has insisted on using condoms with Raj to protect herself from STIs and pregnancy. But now she wants to have a baby with Raj.

What do you think Lata should do now that she wants to have a baby? Why?

Make family planning accessible

What would it look like for a community to have fully accessible family planning? All women and men, including adolescents, would have easy access to reliable information about all types of birth control methods. Family planning services would be affordable, and available to all women — married and unmarried — who want to use these services. Family planning services would make different methods available, so a woman could use the type of birth control method she prefers and that best suits her needs. Finally, both information and services would reach everyone including youth, unmarried women, and those who live far away from a health center.

The next pages give some ideas about ways to organize action to make family planning accessible to every woman in the community.



Learn about women's experiences

To help make family planning more accessible in your community, you can begin by asking women about their experiences using birth control. If some women have had positive experiences, it can be helpful for other women to learn about them. Hearing from women who are satisfied with the method they use helps get rid of myths and fears about contraceptives. This can encourage other women to learn more and to consider if family planning fits their own situations.

Learn about the difficulties women and adolescents have had getting access to family planning information and birth control methods. You can begin gathering information about obstacles by asking about what types of methods are available and what they cost. Where do people get information about family planning and family planning services?

Here are some other questions that you can use to learn from women's experiences:

- Are services offering birth control methods easy to get to and easy to use?
- Is it difficult for married women to get information and supplies for birth control? Why?
- Is it difficult for adolescents or unmarried women to get information and supplies for birth control? Why?
- How do most men feel about family planning? Are they willing to use contraceptives? If not, why not?
- How does the government promote or discourage family planning?



Be sure to talk with many different kinds of people when getting this information.

Discuss obstacles to family planning

After learning about women's experiences, it will probably be clear that there are many reasons why women cannot or do not use family planning!

A Problem Tree activity is a good way to help a group discuss obstacles to family planning, and look at the underlying or root causes that prevent full access to birth control. Clarifying the root causes and seeing how they are related then makes it easier to identify which issues are most important to address and the best actions to take.



The Problem Tree can be used in all sorts of ways. It can be a poster that is used over and over in later meetings and talks. It can be done as a handout that each person completes for themselves. I like to hang the completed Problem Tree as a work of art on the clinic wall that women have created together. Some people create companion healthy trees; you could call them Solution Trees. These trees show solutions to the problem in the roots and good consequences in the leaves.

Activity

A Problem Tree to discuss obstacles to family planning

To prepare:

Draw the tree on a big piece of paper, cloth, a chalkboard, or even in the dirt. Leave the branches and roots simple and blank. Prepare pieces of paper (1/2 sheet is a good size) to write ideas about causes or obstacles and also consequences of the lack of family planning. Some people use sticky notes because they are easy to move around.

Write the health problem, in this case, "No Family Planning" on the trunk.



- 1 **Introduce the tree and the idea of root causes.** If the group is unfamiliar with the idea of root causes, you might use the example of weeds and the importance of pulling weeds out at the roots to clear a garden.
- 2 **Discuss underlying or root causes.** Ask the group to talk about the different causes or obstacles they have found for why women are not able to use birth control to prevent unintended pregnancies. (If the group has difficulties with this, you can also prepare a story that illustrates some of the causes or obstacles to accessing family planning in your own community, and ask the group to reflect on the story.) Write people's ideas about causes or obstacles on pieces of paper that you can stick on or around the roots with masking tape, or place on the ground near the roots. Give everyone a chance to name something that causes or leads to lack of access to family planning.
- 3 **Group the root causes.** Read out loud all the different causes or obstacles that the group has thought of. Ask the group to talk about the ideas and put the ones that most relate to each other together on the different roots. Looking at the groups of obstacles you can then help the group see different categories of root causes. Label the roots with the names of these categories.

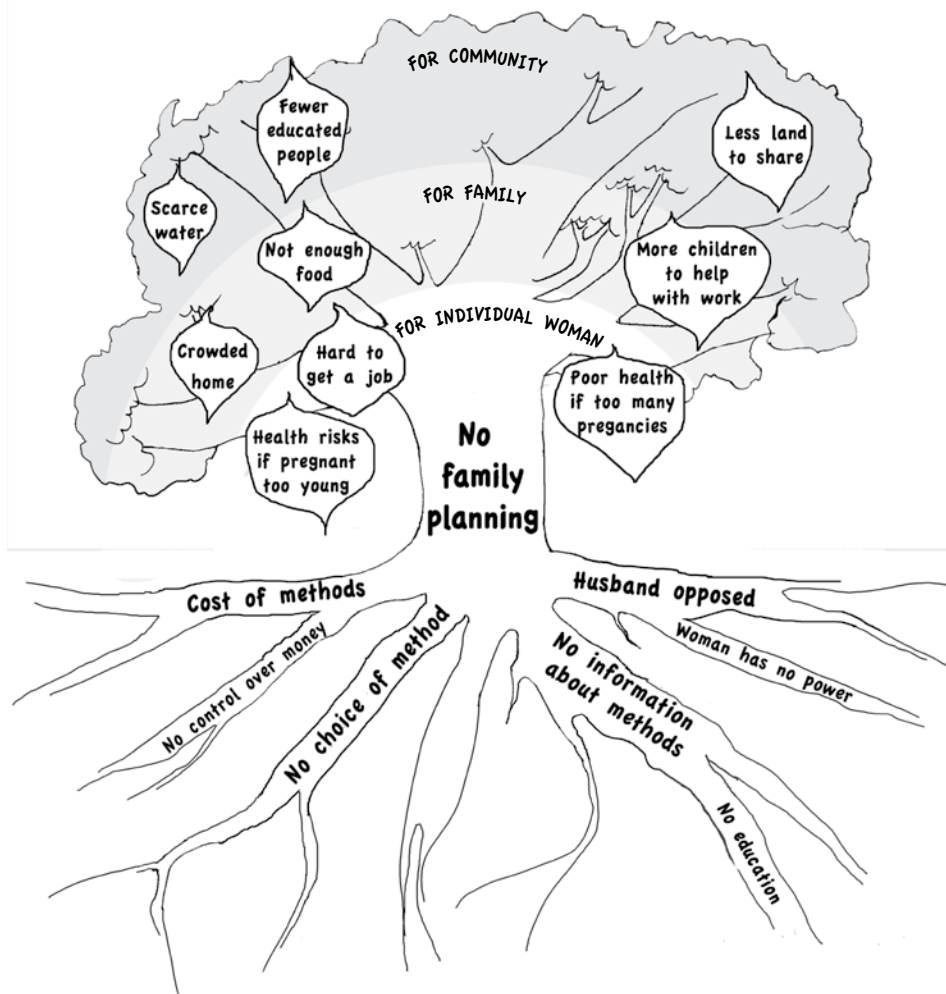
Another way to do this is to label the roots ahead of time. As people name different obstacles to family planning, put them near the root that they most relate to. (See page 204 for types of root causes you can use.)

Activity

A Problem Tree to discuss obstacles to family planning

(continued)

- 4** **Look at the consequences.** You can continue the activity and ask the group to name the different consequences of the lack of access to family planning for women, their families, and the community. These can be written as leaves and then placed on the branches of the tree. You can ask people to organize the branches by putting related ideas close together.



Root causes of lack of access to family planning

Grouping the different obstacles or reasons together into categories (using the Problem Tree or some other activity) can help the group begin to think about ways to improve access to family planning.

Political obstacles. If the government does not encourage family planning, services are usually limited and fewer methods are available. Community leaders that disapprove of family planning can make access difficult.

Economic obstacles. Birth control methods may cost more than women can afford to pay. Women may also be discouraged from using family planning if the community considers that children — especially boys — have economic value for the family.

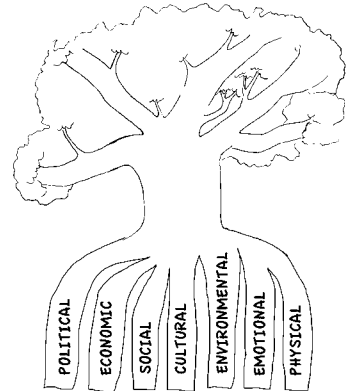
Social obstacles. Rigid gender roles often mean that women cannot make decisions about their own health, and men may believe that using birth control makes them less masculine. Adolescents may not be able to talk with their parents, teachers, and health workers, and so do not get information about sexuality, sexual health, and preventing pregnancy.

Cultural or religious obstacles. Strong opposition by religious groups can make it difficult for people to get reliable information and contraceptives. Health workers may not understand or respect cultural and community traditions about family planning.

Environmental obstacles. If health services are far away or difficult to reach, women may not have regular or reliable access to family planning methods. In communities where infant mortality is high, women may feel they need to have more babies in hopes that at least some will survive.

Emotional obstacles. Women may lack self-esteem or a sense of control over decisions that affect their lives. Women may not trust health workers to treat them well and to respect their privacy.

Physical or biological obstacles. Women with health problems, for example high blood pressure, may not have access to the methods that are best for them.



Identify solutions to improve access

Having looked at the underlying causes, a group can then come up with solutions or actions that can improve access to contraceptives for all women. To select actions on which to focus organizing, it helps to think about all possible actions that can be taken at the level of individual women, their families, and the broader community.

Activity**A yarn toss to brainstorm solutions**

To introduce the activity, ask the group to look at the Problem Tree activity (pages 202 to 203) to see the obstacles or reasons why women do not use family planning, including the root causes. Explain that this activity will help brainstorm solutions that can be taken on individual, family, and community levels (referring to the branches of the Problem Tree). For this activity, you will need to remove the “consequences” leaves from the Tree first so you can replace them with “solutions.”

- 1** Ask the group to stand in a circle. The facilitator should stand outside the circle. To begin, ask one person to hold the end of a ball of yarn, and ask that person to name one of the obstacles to family planning. Then ask for someone else in the group to think of a solution to that obstacle.
- 2** The first person holds onto the yarn end and tosses the ball of yarn to the person who has an idea for a solution. Ask that person to describe the solution and to say if it can be taken at the individual, family, or community level. Ask if anyone else has an idea that could be used to address the obstacle at another level (individual, family or community) not already mentioned. The second person holds onto the yarn, and tosses the ball to the next person who then shares an idea.
- 3** As solutions are being named, write them on pieces of paper (which can be cut into the shape of leaves if you want). Tape them onto the tree in the areas of branches that represent individual, family, or community levels of action.
- 4** Ask for someone else to identify another obstacle to family planning. Then ask others to share ideas for solutions to that new obstacle. Continue the activity until the group has created a web of yarn and everyone in the group has named either an obstacle or a solution.
- 5** To conclude, reflect with the group on the range of possible actions they can take on all 3 levels, and on the meaning of the web they have created. Place the yarn web on the ground and gather around the solutions (leaves) on the tree. You can then use Voting with dots (page 225) to select which actions to work on first, and the activity Make an action plan (page 26).



Change attitudes about family planning

In many cases, an action plan will include strategies to change negative ideas about family planning. This is especially important when there are political obstacles, myths, and cultural or religious reasons why family planning is not available to all women.

Challenge myths

Many negative ideas about family planning come from myths or beliefs about contraceptives that are not true. Providing accurate information about different birth control methods can help people question their beliefs and think about the benefits of family planning. The information in this chapter can help.

Who has the power to influence?

Different attitudes and political views can interfere with women's right to plan their families and prevent unintended pregnancies. This next activity, a role play, can be used to look more closely at who really has the power to influence women's choices. You can also use this activity to spark debate, raise questions about different attitudes to family planning, and discuss how to most effectively challenge or address negative attitudes.

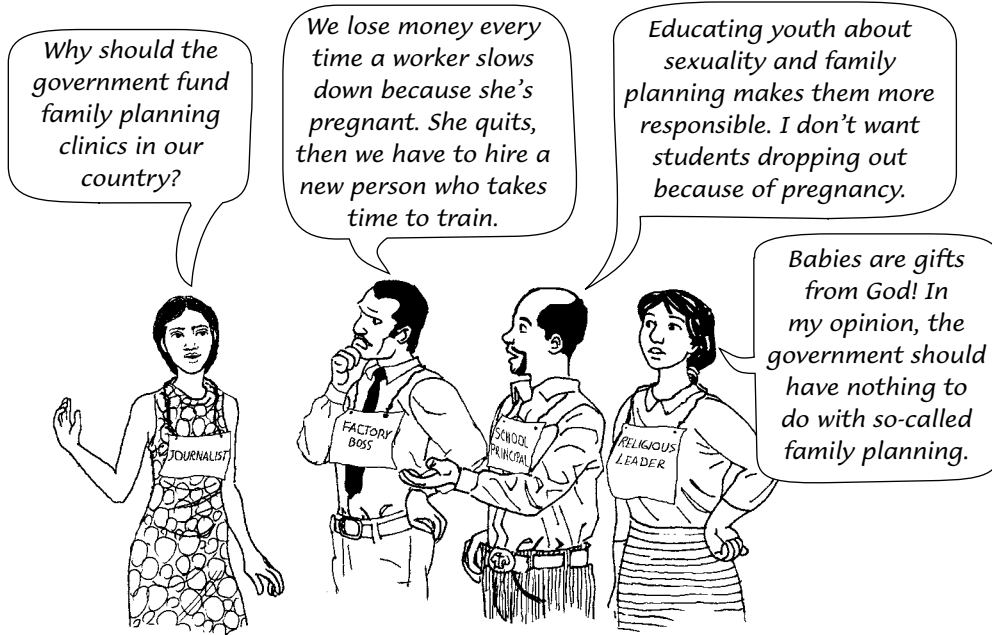
Activity

Role play a panel discussion on family planning

- 1 Make a list of political obstacles to family planning, and a list of attitudes and beliefs that can positively or negatively influence women's access to family planning. Choose 3 to 5 obstacles from these lists to use in the role play.
- 2 Ask 3 to 5 people to play the roles of people who have specific points of view for or against family planning. Explain to the actors that their role is not to imitate a real person but instead to speak as someone from a particular group or institution that has promoted a certain point of view. Ask these participants to sit at a table or stand in a row and identify each person with a prop or a sign.
- 3 Ask 2 to 3 people to play the roles of journalists who will ask the panel questions about family planning. Prepare some questions with the journalists before the role play starts.

Activity**Role play a panel discussion on family planning** *(continued)*

- 4 Have the journalists start the activity by taking turns asking their prepared questions.



- 5 Give the audience a chance to ask questions or make comments to the panel.

- 6 After the role play, have all the actors remove their signs or props and return to the group. Ask the group to reflect on the activity. These are some questions you might use to guide the discussion:

- Which points of view support family planning only for some women? Which women are not included? Why?
- Which attitudes put women's needs first? How do these attitudes affect women's ability to make their own decisions about using birth control?
- How can we respond to opinions that question or oppose family planning?
- How can we take action with these new ideas to work for change?

Find leaders who can be allies

Use an activity like Make a power map (page 284) to help identify those with the power to influence attitudes and access to family planning, and to develop strategies for how to enlist support and work with allies. Here are some examples of ways that groups have successfully worked with religious and community leaders to make contraceptives more widely available.

Work with religious leaders. Some people use religious teachings or writings to say that family planning is wrong. But many religions in the world support child spacing, especially because this protects the health and lives of women and children. This is true for people of many faiths, including Muslims and Catholics.

You can often build support for family planning by asking religious leaders who believe in its value to speak about this in the community. When people hear that family planning does not go against their religious teachings, it can be a big relief. Finding ways to work within people's religious faith to support their choice to use family planning is usually more helpful than expecting people to ignore or change their beliefs.

Integrate family planning with indigenous culture and traditions

Indigenous communities may distrust family planning services because some programs have pressured indigenous and poor women to use certain methods or to be sterilized. But indigenous leaders are finding ways to integrate family planning into community health services in a way that encourages women to choose birth control methods they are comfortable with.

One example is a clinic in Ecuador called Jambi Huasi, which means "House of Health" in the local Quechua language. Health workers in the clinic speak Quechua, and they understand and respect traditional healing ceremonies and beliefs. The clinic has a local healer on staff and a medicinal plant garden. The pharmacy dispenses both traditional and Western medicine. Jambi Huasi integrates family planning into a broad range of services for women, children, and families. Couples have begun to space their pregnancies for health reasons, and the numbers of women and children who have died has dropped dramatically. Because cultural traditions are respected, women are using the services with confidence.



Building respect with community leaders opens up discussions about family planning

The Community-based Health Planning and Service project in Ghana, Africa wanted to make primary health care more accessible in Navrongo, a remote, rural community. To do this, they worked closely with traditional social organizations and also brought nurses from the district health centers to live and work with the community. The project organized discussion groups of peers who would be comfortable speaking honestly in front of each other about common health issues — young men, older men, young women, older women, and community leaders. Family planning was one of the many topics they discussed.

When asked what would make family planning more usable, women said they wished for more privacy when it was provided, and wanted help putting men more at ease about it. Men spoke about the status of having many children, loss of control of their household when they are not consulted about spacing children, and fears that a woman using family planning will leave her husband.



The organizers also learned that people might be more willing to use family planning if they lost fewer children to illness. This was already a main goal of the health project. And when the nurses treated men for illnesses, they gained their trust and were able to explain birth control options and respond to the men's concerns. The relationships nurses built with families also helped them intervene in conflicts between men and women arising from family planning use.

The Navrongo project relied on the participation of community leaders — chiefs, elders, heads of households, and the leaders of community groups. This respect meant that the chiefs and elders welcomed members of the project to attend traditional *durbars*, or public meetings, where matters of collective concern are discussed. There organizers could explain to concerned men how modern birth control methods help people with their traditional desire to space births. And many local leaders told men not to quarrel with their wives who used family planning.

Working through the *durbars*, the project facilitated many more community discussions on health. The project also asked community leaders to invite women to attend the *durbars*, traditionally a male-dominated forum. At first women were reluctant, but the project increased their participation by inviting women's groups, such as choirs or church groups, market associations, and political networks. This enabled women to participate in other community discussions as well.