EXPERIMENT: 03



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AIM OF THE EXPERIMENT: Family planning devices

REQUIREMENT: Data Collection

THEORY:

FAMILY PLANNING:

Family planning is the process of deciding how many children a person wants to have, including whether or not they want to have any at all, as well as when they want to have them. Marriage status, job or employment concerns, and financial circumstances are all factors that may affect family planning decisions. If one is sexually active, family planning may entail using contraception and other methods to regulate when children are born. Birth control is the use of various devices, drugs, agents, sexual practices, or surgical procedures to prevent conception or pregnancy.

OBJECTIVES/ADVANTAGES:

- ♣ Birth control can help people decide when they want to have children.
- ♣ There are many types to choose from, including different types of barrier, medications, and traditional methods that need no additional resources.
- ♣ Effectiveness varies and often depends on how carefully the method is applied.
- ♣ Only a male condom offers any protection against sexually transmitted infections (STIs).
- **1. NATURAL METHODS:** Traditional birth control does not involve any type of device or medication.

ABSTINENCE METHOD: Celibacy or sexual abstinence means avoiding sexual intercourse.

WITHDRAWAL METHOD: Also known as coitus interruptus, this is when the man removes the penis from the vagina so that ejaculation occurs outside of the vagina. In theory, this prevents the sperm from being deposited in the vagina.

- ♣ Withdrawal method is about 80 percent effective but this depends on how carefully and how consistently it is used.
- **2. DEVICES:** Barrier devices prevent the sperm from meeting the egg. They may be combined with spermicide, which kills the sperm.

MALE CONDOM: The male condom forms a barrier and prevents pregnancy by stopping sperm from entering the vagina. It is placed over the penis before sexual intercourse begins. A condom is made of polyurethane or latex.

- ♣ It can also help to prevent the spread of sexually transmitted infections (STIs).
- ♣ It is around 82 percent effective. Some 18 women in every 100 may conceive if their partner uses a condom.
- ♣ Condoms are available from drugstores, supermarkets, and many other outlets. Health providers also supply them, sometimes for free.

FEMALE CONDOM: The female condom, or femidom, is made of polyurethane. It has a flexible ring at each end. One fixes behind the pubic bone to hold the condom in place, while the other ring stays outside the vagina.

- ♣ Spermicides may be placed in the vagina before intercourse. A spermicide kills sperm chemically. The product may be used alone or in combination with a physical barrier.
- → The female condom is 79 percent effective. Around 21 women will become pregnant each year with this method.

♣ The femidom is less easy to find than the male condom.

SPONGE: A contraceptive sponge is inserted into the vagina. It has a depression to hold it in place over the cervix. Foam is placed into the vagina using an applicator. The foam is a spermicide that destroys the male sperm, and the sponge acts as a barrier to stop the sperm from reaching the egg.

- ♣ Between 12 and 24 women out of every 100 who use the sponge may become pregnant.
- ♣ It is less likely to work if a woman has already had a baby.

THE DIAPHRAGM: A diaphragm is a rubber, dome-shaped device that is inserted into the vagina and placed over the cervix.

- ♣ It fits into place behind the woman's pubic bone and has a firm but flexible ring that helps it press against the vaginal walls.
- ♣ Used with spermicide, it is 88 percent effective. Used alone, it is between 77 and 83 percent effective.

CERVICAL CAP: A cervical cap is a thimble-shaped, latex rubber barrier device that fits over the cervix and blocks sperm from entering the uterus. The cap should be about one-third filled with spermicide before inserting. It stays in place by suction.

♣ It is around 88 percent effective if used with spermicide, and 77 to 83 percent effective without.

THE INTRAUTERINE DEVICE (IUD): The intrauterine device (IUD), or coil, is a small, flexible T-shaped device that is placed in the uterus by a physician or nurse.

There are two types:

♣ A copper IUD releases copper, and this acts as a spermicide. It can last up to 10 years.

- ♣ A hormonal IUD contains progestin. It prevents the sperm from reaching and fertilizing the egg by thickening the cervical mucus and thinning the wall of the uterus.
- **4** It stays in place as long as pregnancy is not desired.
- ♣ Depending on the type, it will last for 3, 5 or 10 years. It is over 99 percent effective.

3. CONTRACEPTIVE PILL:

DAILY PILLS: The combined contraceptive pill is taken daily. It contains two hormones, estrogen and progestin. The hormones stop the release of the egg, or ovulation. They also make the lining of the uterus thinner.

♣ It is effective for between 91 and 95 percent of women on average.

EMERGENCY "MORNING AFTER" PILL CONTRACEPTION:

Emergency contraceptive pills, or the "morning-after pill," may prevent pregnancy after intercourse. It prevents ovulation, fertilization, or implantation of an embryo.

- ♣ It is different from medical methods of termination, because these
 act after the egg is already implanted in the womb.
- ♣ Emergency contraception can be used up to 72 hours after unprotected sex. It is 95 percent effective during the first 24 hours, falling to 60 percent by 72 hours.
- ♣ Emergency contraception should only be used when primary methods fail.

CONTRACEPTIVE PATCH: This is a transdermal patch that is applied to the skin. It releases synthetic estrogen and progestin hormones.

♣ The patch is worn each week for 3 consecutive weeks, generally on the lower abdomen or buttocks. No patch is worn in the fourth week, to allow for the menstrual period. The patches are readily available. ♣ It is estimated to be 91 percent effective.

INJECTIONS: The contraceptive injection, or "the shot," is a progestinonly, long-acting, reversible, birth-control drug. The name of the drug is Depo-Provera, also known as the Depo shot or DMPA.

- ♣ The shot is injected every 3 months at a doctor's office. It prevents pregnancy by stopping the woman from releasing an egg.
- ♣ It is 94 percent effective, and the chance of pregnancy increases as the shot wears off. It is important to remember to book another shot after 3 months to ensure its effectiveness.
- ♣ It does not protect against STIs.

4. PERMANENT CONTRACEPTION/SURGERY: Sterilization is a permanent method of sterilization.

IN FEMALES:

- ♣ Tubal ligation: This is a form of female sterilization. The surgeon will cut, block, or burn the fallopian tubes, or a combination of these methods, to seal them and prevent future fertilization.
- ♣ Tubal implant: A coil is placed in the female's fallopian tubes. Tissue grows around it, blocking the tubes. It can take 3 months to work.
- **♣** Female sterilization is over 99 percent effective.

IN MALES:

 ♣ Vasectomy: This is surgery to make a man sterile. The tubes through
 which sperm pass into the ejaculate are cut or blocked. It is over 99
 percent.

CONCLUSION: From the above experiment, we know about family planning devices and its uses.