

















ANC First visit: Within 12 Weeks of Pregnancy Preferably as Soon as Pregnancy is Suspected

Family Planning Messages and Services

After all tasks such as registration, clinical examination, confirmation of pregnancy, microbirth planning and recognition of danger signs and care during early pregnancy are completed:

- Initiate discussion with husband and the pregnant woman about FP and identify their reproductive intentions.
- If they wish to have another child in the future, provide the following messages:
 - Three years spacing between two pregnancies is critical for the wellbeing of woman and the baby.
 - Temporary contraceptive options are available in case they wish to delay the next pregnancy.
- If they want to stop having children, advise that permanent family planning options such as male and female sterilization are available.

Immunization Messages and Services

After all tasks such as registration, clinical examination, confirmation of pregnancy, microbirth planning and recognition of danger signs and care during early pregnancy are completed:

- Explain importance of TT vaccination during pregnancy
- Provide first dose of TT
- Set date for second dose of TT

Taking cue from the TT immunization given to the woman, initiate discussion of child immunization and mention that details about child immunization as per the national immunization schedule will be discussed in subsequent visits.





ANC Second Visit: Between 14 and 26 Weeks

Family Planning Messages and Services

After completion of ANC tasks, discuss the following:

- Remind about FP discussion during last visit and discuss briefly appropriate family planning options for spacing or limiting pregnancies (depending on woman's/couple's reproductive intentions).
- Inform the couple that if not breastfeeding, fertility usually returns six weeks after delivery, so she will need to make a decision about family planning before or soon after the birth.
- Tell the couple there is a short term natural method of contraception called Lactational Amenorrhoea Method (LAM).
- Explain advantages of LAM and importance of exclusive breastfeeding.
- Inform about three criteria of LAM, which should be present all at once for LAM to be effective:
- Amenorrhoea: The woman should be amenorrhoeic, meaning that her menstrual bleeding should not have resumed after delivery. Whenever it resumes, she cannot use this method.

- Provide second dose of TT to the pregnant woman and counsel that the second dose will offer her protection during delivery and also to the newborn.
- Congratulate her for completing her TT immunization.
- Remind her about child immunization.
- Explain how it offers protection against life-thretening diseases
- Inform her that the child requires three vaccines immediately after birth: BCG, polio and Hepatitis B.
- Assure her that the discussion will be continued in the next visit.

ANC Second Visit: Between 14 and 26 Weeks

Family Planning Messages and Services

 Lactation: The woman should be exclusively breastfeeding her baby (i.e. the baby only receives breast milk without any additional food or drink, not even water), and breastfeeding on demand is followed that is as often as the child wants, day and night (with no more than four to six hours between the feeds).

Family Planning Messages and Services

 Six months: The woman cannot use this method for more than six months postpartum, even if she has not started menstruating again. As soon as the baby turns six months old, LAM is not considered effective. The woman should be counselled to decide in advance on what FP method she wants to use when LAM expires.









ANC Third Visit: Between 28 and 34 Weeks

Family Planning Messages and Services

After completion of ANC services, discuss the following:

- Remind of all appropriate postpartum FP options (for both breastfeeding and nonbreastfeeding women)
- Provide the following information on IUCD:
 - Copper-containing IUCDs can be inserted immediately or within 48 hours of childbirth (postplacental insertion: within ten minutes of the delivery of the placenta; immediate postpartum insertion: within 48 hours of the delivery) by a service provider who is trained specifically for postpartum IUCD insertion.
 - Explain that in cases of immediate postpartum insertion, woman should make an informed decision about using IUCD before she is in active labour.

- Show the MCH and/or MCP card to the pregnant woman and her family members.
- Explain how all vaccines required by the baby are listed in different boxes.
- Explain that it is the responsibility of the service provider as well as the family to ensure that all vaccines listed in the card are provided to the baby at the designated time.
- Explain other sections of the card depicting various antenatal services and identification of danger signs in mother and baby.











ANC Fourth Visit: Between 36 weeks and term

Family Planning Messages and Services

- Alternatively, IUCD can be inserted anytime starting at six weeks post-partum.
 Emphasize that the IUCD has the advantage of offering protection for five to ten years, depending on the type of IUCD inserted.
- The IUCDs are safe and reliable, and women will have to visit the subcenter or PHC or CHC for insertion anytime starting at six weeks after delivery if not inserted immediately or within 48 hours postpartum.
- If during earlier visit, the couple has expressed willingness for completing the family with this childbirth, provide information on male and female sterilization. However some critical messages relevant to this timing of visit are as follows:

Family Planning Messages and Services

For Male Sterilization:

- The husband can undergo NSV anytime even when the wife is pregnant.
- NSV is a simple procedure and does not require hospitalization or long rest.
- It provides lifelong and the effective protection from pregnancy, but it is not effective for the first three months after the procedure and the couple should use a backup contraceptive method (unless the man is sterilized three months prior to the delivery date)

For Female Sterilization:

- Inform that the woman can undergo sterilization after 24 hours but within seven days after childbirth
- This is easily possible in cases of institutional delivery.
- If not provided within the first week postpartum, this method can be provided anytime after six weeks of delivery.

ANC Fourth Visit: Between 36 Weeks and Term

Family Planning Messages and Services

- At this point of time the pregnant woman and her relatives will be apprehensive about safe delivery so just a give a gentle reminder that if the delivery will be conducted in the hospital and if she wants to initiate an IUCD, they can get an IUCD inserted within 48 hours of birth and then return home. This will eliminate chances of getting pregnant again soon after delivery. Female sterilization also can be done prior to hospital discharge.
- Also remind them about
 the importance of exclusive
 breastfeeding for the first six
 months which not only provides
 adequate nutrition to the baby,
 but also provides protection
 from pregnancy (if all three LAM
 criteria listed above are met).
 If she is not planning to rely on
 LAM, she should start using
 contraceptive methods preferably
 at four weeks, but not later than
 six weeks postpartum.

- Reassure the mother about safe delivery at your institution.
- Tell her that in cases of institutional delivery, the first three vaccines to the baby scheduled at birth will be provided in the institution.
- Remind that the mother and other family members must ensure that the remaining vaccines are provided to the baby as per the schedule explained earlier (show the card and remind again, as necessary).











During Intranatal Period: While Preparing and Accompanying the Woman and her Family to Identified Institution for Delivery

Family Planning Messages and Services

Provide psychological support to the woman assuring safe delivery at the institution by trained providers and:

- If the couple has opted for postpartum IUCD insertion or sterilization, reconfirm their commitment.
- Remind them that the procedure will be done at the institution itself and by the trained providers.
- Reemphasize that exclusive breastfeeding is helpful for the baby and can serve as a natural contraception for the first six months as long as a woman did not resume her periods since delivery.

Immunization Messages and Services

Provide psychological support to the woman assuring safe delivery at the institution by trained providers and:

- Remind the woman/family about child immunization immediately after baby is born.
 Reassure that zero dose for OPV, CG and first dose of Hepatitis B vaccines will be provided at the institution.
- Remind the woman that breastfeeding plays an important role in increasing the immunity of the child to some communicable diseases.











Immediately Before and After the Delivery

Family Planning Messages and Services

- Within one hour of childbirth, encourage and assist the mother to initiate breastfeeding.
- Inform MO about postpartum FP choices of the woman/couple, if they have already made an informed choice
- Prepare the woman for receiving FP services as scheduled by the MO at an appropriate time after the delivery.
- If the woman/couple has not made any choice of FP methods during the antenatal period, inform her/them about the FP options including LAM which can provide contraception for the first six months as long as a woman did not resume her periods since delivery and as long as she is exclusively breastfeeding.

- If institutional delivery, assist the family in getting zero dose for OPV, CG and first dose of Hepatitis B vaccines to the baby.
- If the woman is discharged from the hospital 48 hours after delivery, explain to them the remaining schedule of immunization as per the national immunization schedule.
- Assure the family that (Sahiyya) will remind them again when the vaccination will be available in their village through VHND.











PNC First Visit: Within 24 hours After Delivery

Family Planning Messages and Services

- If institutional delivery, ensure that breastfeeding has been initiated within an hour of birth or earlier.
- Explain about exclusive breastfeeding and its beneficial effect on the baby and for natural contraception (if all three criteria of LAM are met).
- Advise the couple regarding the return of fertility.
- Advise the couple on birth spacing or limiting the size of the family.
- If the woman/couple has earlier opted for postpartum IUCD, provide insertion within the first 48 hours.
- If IUCD cannot be offered on-site within 48 hours of delivery, inform that it could be inserted anytime starting at six weeks after delivery even at the sub center.
- If the couple has decided to select sterilization, inform them that NSV is very simple option for men, which is very effective starting at three months after the procedure. In case of female sterilization, the procedure can be done within the first seven days postpartum or delayed until six weeks. Provide information about the benefits, place, and other arrangements regarding both male and female sterilization.
- Advise the couple to abstain from sexual intercourse for about six weeks postpartum or, if she has perineal tears or wounds, abstain until they heal.

- If institutional delivery, provide zero dose for OPV, BCG and first dose of Hepatitis B vaccines
- If home delivery, inform
 the mother and the family
 about the nearest place of
 immunization and suggest they
 get the vaccination done as
 early as possible.
- Guide the family to the immunization site/center for immunization.
- Showing the MCP/MCH card, remind the family and mother about remaining schedule of immunization as per national guidelines (see table above).

PNC Second Visit: Third Day After Delivery

Family Planning Messages and Services

- If exclusive breastfeeding has been initiated, confirm that the infant only receives breast milk without any additional food or drink, not even water and breastfeeding on demand is followed that is as often as the child wants, day and night (with no intervals between feeding exceeding four to six hours).
- Inform the mother that whenever her menstrual bleedings begin again, or she stops exclusive breastfeeding, or her baby turns six months, she can conceive even after a single act of unprotected sex.
- Inform the couple about the various choices of contraceptive methods available and help them choose the method most suitable to them.
- Advise the couple to abstain from sexual intercourse for about six weeks postpartum or, if she has perineal tears or wounds, abstain until they heal.

- If immunization has not been done at birth or within the first 48 hours, provide it now or guide the mother and family to get it done at the nearest health center or VHND, whichever is earlier and convenient.
- Accompany the family for getting BCG, polio and Hepatitis B vaccine.
- Showing the MCP/MCH card, remind the family and mother about the remaining schedule of immunization as per the national guidelines.



PNC Third Visit: Seventh Day After Delivery

Family Planning Messages and Services

- If relies on exclusive breastfeeding, reconfirm that she doesn't introduce any other liquids and follows appropriate intervals during feedings.
- Inform the mother that whenever her menstrual bleedings begin again, or she stops exclusive breastfeeding, or her baby turns six months, she can conceive even after a single act of unprotected sex.
- Inform the couple about the various choices of contraceptive methods available and help them choose the method most suitable to them.
- Advice the couple to abstain from sexual intercourse for about six weeks postpartum or, if she has perineal tears or wounds, abstain until they heal.

- If immunization has not been done at birth or within the first 48 hours, provide it now or guide the mother and family to get it done at the nearest health center or VHND, whichever is earlier and convenient.
- Accompany the family for getting BCG, polio and Hepatitis B vaccine.
- Showing the MCP/MCH card, remind the family and mother about the remaining schedule of immunization as per the national guidelines.











PNC Fourth Visit: Six Weeks After Delivery

Family Planning Messages and Services

- If relying on exclusive breastfeeding, reconfirm that she doesn't introduce any other liquids, follows appropriate intervals during feedings and remains amenorrheic
- If couple gets ready to use any contraceptive then provide the sevice.
- If not relying on exclusive breastfeeding, encourage couple to start using a method now.

- Since this visit is due at six
 weeks after the delivery, it
 is time for the first dose of
 DPT, OPV and next dose
 of Hepatitis B. If the mother
 and child visit the clinic or
 subcenter where immunization
 is available, provide these
 vaccines. Else refer them to
 the nearest health center for
 vaccination.
- Remind the family that the second dose of DPT, OPV and Hepatitis B.
- Remind and request the Sahiyya in the village to accompany the family and guide them to the nearest center or VHND for completing the immunizations for three vaccines. Also remind her to stay in touch with the family for further immunization as per the schedule.
- Provide the family information about the nearest health center or VHND event where immunization services will be available in the near future or on the due date for that specific baby.

Ten Weeks After Childbirth

Family Planning Messages and Services

- If relying on exclusive breastfeeding, reconfirm that she doesn't introduce any other liquids, follows appropriate intervals during feedings and remains amenorrheic.
- If couple gets ready to use any contraceptive then provide the sevice.
- If not relying on exclusive breastfeedings, encourage couple to start using a method now.
- Need to emphasize of pregnancy, even if menses are not present.

- DPT, OPV and Hepatitis B
- Remind about next dose of vaccines.









Fourteen Weeks After Childbirth

Family Planning Messages and Services

- If relying on exclusive breastfeeding, reconfirm that she doesn't introduce any other liquids, follows appropriate intervals during feedings and remains amenorrheic.
- Emphasize the importance of using contraceptive methods for spacing or limiting the size of the family.
- If couple gets ready to use any contraceptive then provide the sevice.
- If not relying on exclusive breastfeedings, encourage couple to start using a method now.
- Need to emphasize of pregnancy, even if menses are not present.

- DPT, OPV and Hepatitis B
- Remind about next dose of vaccines.











Nine - Twelve Months

Family Planning Messages and Services

- If the woman has not adopted any FP method and is not pregnant, offer counseling as in the past visit including SDM and help her choose a family planning method as appropriate.
- Discuss the importance of healthy timing and spacing of pregnancies.
- Remind woman she can get pregnant even if her regular bleeding has not returned.
- If she has adopted any FP method, provide follow-up services. Check for side effects or complications and manage it appropriately. Provide a resupply of method if needed.

Immunization Messages and Services

 Remind family that measles and Vitamin A first dose must be given during this period.









Twelve - Twenty four Months

Family Planning Messages and Services

- If the woman has not adopted any FP method and is not pregnant, offer counseling as in the past visit including SDMand help her choose a family planning method as appropriate.
- Discuss the importance of health timing and spacing of pregnancies. Women who want another child may start trying to conceive when their youngest child is at least two years old
- Remind the woman she can get pregnant even if her regular bleeding has not returned (although most women resume regular menses when they stop breastfeeding or even before then).
- If she has adopted any FP method, provide follow-up services. Check for side effects or complications and manage it appropriately. Provide a resupply of method if needed.

Immunization Messages and Services

 Remind the family that DPT, OPV booster, (JE and MR if recommended in your area) must be given during this period.







Family Planning and Immunization Integrated Services

Methods Benefits Limitations

Lactational Amenorrhea Method

Method (LAM)

- · Good for mother and new born
- · Can be used right after delivery; no delay
- No additional supplies/materials/expense
- 98% effective if all three criteria met
 - 1. Exclusive breast feeding, day & night
 - 2. Monthly bleeding has not returned
 - 3. Baby is less than six months old

Transition to another contraceptive method if any of the three criteria expires

- Does not protect against STIs, including

 HIV/AIDS
- Short-term method can be used only for six months

Standard Days Method

Intra Uterine

Device

Contraceptive



- · Safe for nearly all women
- It is a simple and natural method to use does and not need external supplies.
- · Has no side effects or complications
- · 95% effective if used correctly
- Using the colored cycle beads, the woman can identify the days when unprotected intercourse should be avoided.
- · Safe for nearly all women
- Can be inserted right after delivery or within the first 48 hours
- Delay insertion until after six weeks postpartum, if not inserted during first 48 hours postpartum
- >99% effective
- Can provide protection for 5-10 years, but when removed, fertility return without delay.
 - Has no effect on breast feeding

- Postpartum women need to wait until they have three months in a row of regular menstrual bleeding before they can initiate SDM
- Less effective in women who have cycles shorter than 26 days or longer than 32
- Provides no protection from STI/HIV
- First few cycles of bleeding may be heavier, more painful than usual
- Does not protect against STIs, including HIV/AIDS
- Requires a trained provider to insert and remove.

Oral Contraceptive Pills (COCs)



- Safe for nearly all women
- · About 99% effective, if used correctly
- Must remember to take a pill every day
 No delay in return of fertility after stopping
- On cancer while positive information, mey harm some women.
- Make menstrual cycles regular and menstrual bleedings light
- Delay start until 6 months for breast feeding woman and 3 weeks for non-breast feeding woman

- · Require daily uptake
- Have common side effects, such as headaches, dizziness, nausea, breast tenderness (all diminish after the first three months of use)
- Provide no protection from STI/HIV
- Require access to re-supply

Emergency Contraceptive Pills(ECPs)



- Safe for all women
- Can prevent pregnancy, if taken within 72 hours after unprotected sexual intercourse
- . No delay in return of fertility after stopping
- To stay protected, the women should start using an other regular, appropriate contraceptive method immediately
- Not as effective as most of the regular contraceptive methods
- Does not protect against STIs, including HIV/AIDS









Methods Benefits Limitations

Condom



- Can protect against pregnancy and some sexually transmitted infections, including HIV
- transmitted infections, including HIV

 Can be used after delivery as soon as couple resumes
 - Safe for everyone and have no side effects
- 98% effective if used consistently and correctly (although correct and consistent use may be hard to achieve)
- Must have reliable access to resupply
- About 85% effective as commonly used
- Must be used correctly with every act of sexual intercourse to be effective
- · Requires partner cooperation

Female Sterilization



- Provides permanent protection for women and couples who are certain that they don't want any more children
- · Simple procedure, with no side effects.
 - >99% effective

intercourse

- Can be done immediately or within the first seven days postpartum. Also can be done any other time starting at six weeks postpartum
- Does not protect against STIs, including HIV/AIDS
- · Requires surgical procedure
- Cannot be reversed. If woman is unsure about ending fertility, she should choose another method

No-Scalpel Vasectomy (NSV) (For husbands)



- Provides permanent protection for men and couples who are certain that they don't want any more children
- Can be done any time, even when wife/partner is pregnant
- >99% effective
- Safe and simple surgical procedure

- Does not protect against STIs, including HIV/AIDS
- · Requires surgical procedure
- Not effective for the first 3 months after the procedure. During that time, couples should use other methods of contraception, such as condoms or pills











Immunization Programme

Vaccine	When to Receive		
For Pregnant women			
TT-1	Early in pregnancy at first contact		
TT-2	4weeks after TT-1*		
TT-Booster	If pregnancy occurs with in three years of last TT vaccinations*		
For infants			
BCG	At birth (for institutional deliveries) or along with DPT-1		
Hepatitis B 0	At birth for institutional delivery, preferably within 24 hours of delivery		
OPV-0	At birth, if delivery is in institution		
OPV1, 2 and 3	At 6 weeks, 10 weeks and14 weeks		
DPT1, 2 and 3	At 6 weeks, 10 weeks and 14 weeks		
Hepatitis B1, 2 and 3	At 6 weeks, 10 weeks and 14 weeks		
Measles	9–12 months		
Vitamin A (1st dose)	At 9 months, with measles		
For children			
DPT booster	1st booster at 16–24 months		
OPV booster	16-24 months 16-24 months		
JE	16–24 months		
MR	16&24 ekg		
Vitamin A (2nd to 9th dose)	2nd dose at 16 months, with DPT/OPV booster. 3rd to 9th doses are given at an interval of 6 month still 5 years of age.		
DPT booster	2nd booster at 5 years of age		
тт	10 years and 16 years		













