

# NORMAL Job Aid Training



**Counseling Users on Menstrual Changes Related to Contraceptive Use**

# NOTES

This book belongs to (Full Name):

Date of training:

NOTES:

# ✓ TRAINING AGENDA

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- **Introduction** *(15 minutes)*
- **Health Concepts** *(45 minutes)*
  - **Family planning methods review**
  - **Menstrual cycle review**
  - **Bleeding changes**
  - **Q&A**
- **NORMAL Tool** *(50 minutes)*
- **Q&A** *(10 minutes)*
- **BREAK** *(10 minutes)*
- **Practice with the Tool** *(80 minutes)*
- **Action Planning** *(20 minutes)*
- **Training Evaluation and Closing** *(10 minutes)*

**TOTAL: 4 hours**

# ❖ ACTIVITY

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- Split the training group into teams of 2 or 3 people. These are the teams you will work with for all activities in this training.
- First decide on a team name together.
- Next, introduce yourselves to the other member(s) in your group, including:
  - *Name*
  - *Where you are from*
  - *A “fun fact” about yourself*
  - *Your favorite thing about doing health-related work*
- After 3 minutes, introduce your team member(s) to the larger group (DO NOT introduce yourself. Introduce another person on your team – this will be a test of how well you paid attention during your group activity!)



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# Family Planning Methods

A review of the methods and how they work

## ❖ ACTIVITY

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- When the trainer says “START” use the space below to write down as many family planning methods as you can think of in 30 seconds!



# ❖ ACTIVITY

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- Who was able to remember the most methods?
- How many did the training group think of in total?
- LET'S REVIEW THE METHODS TOGETHER



# ✓ Short Term Family Planning Methods

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# ✓ Short Term Family Planning Methods

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**Male Condom**



**Female Condom**



**Injectables**






**Standard Days & Breastfeeding Methods**



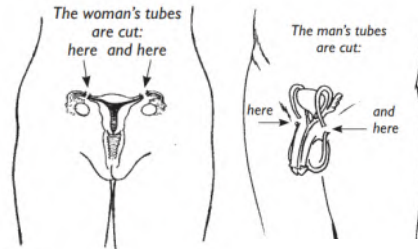
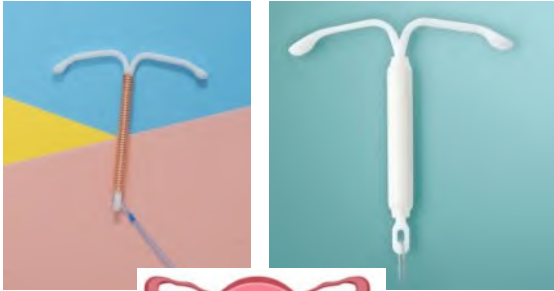
**Pills**

This training and the NORMAL tool will focus on methods that impact menstruation and bleeding, like pills and injectable contraceptives.

METHOD	DESCRIPTION
<p><b>PILLS</b>  <b>Combined Oral Contraceptive</b>            (e.g. Microgynon or Femiplan)</p> 	<ul style="list-style-type: none"> <li>• Has two hormones (oestrogen and progestin)</li> <li>• Prevents release of egg (ovum), and blocks sperm from meeting egg</li> <li>• Usually take 3 weeks of pills with hormones and 1 week of “sugar pills” (no hormones)</li> </ul>
<p><b>PILLS</b>  <b>Progestin-Only or Mini pill</b>            (e.g., Microlut)</p> 	<ul style="list-style-type: none"> <li>• A pill with progestin hormone in it; blocks sperms from reaching the egg (ovum) by making cervical mucus thick and suppresses ovulation in some cycles</li> <li>• Most effective when used while breastfeeding</li> </ul>
<p><b>Injectable contraceptive</b>            (e.g. Depo Provera )</p> 	<ul style="list-style-type: none"> <li>• Injections every 2 months (NETEN) or 3 months (DMPA)</li> <li>• Works primarily by preventing eggs from leaving the ovaries</li> </ul>

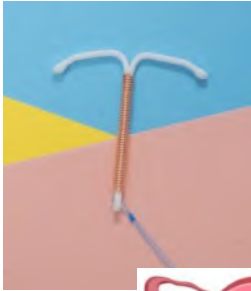
# ✓ Long-Acting and Permanent Methods

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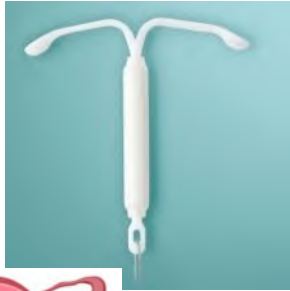


# ✓ Long-Acting and Permanent Methods

## Copper IUD



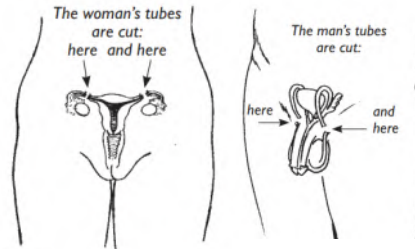
## Hormonal IUD



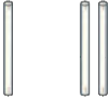


## Implants



## Sterilization



This training and the NORMAL tool will focus on methods that impact menstruation and bleeding, including implants, hormonal IUD, and copper IUDs.

METHOD	DESCRIPTION
<b>Implants</b> 	<ul style="list-style-type: none"> <li>• Small rod or rods placed under the skin of the upper arm</li> <li>• Steadily releases hormone progestin into your bloodstream, which prevents the release of an egg each month</li> </ul>
<b>Copper IUD (Intrauterine device)</b> 	<ul style="list-style-type: none"> <li>• A small, flexible “T”- shaped plastic device wrapped in copper wire that is inserted in the womb by a trained provider</li> <li>• Copper creates an environment that is not good for sperm, which prevents fertilization and pregnancy</li> </ul>
<b>Hormonal IUD</b> 	<ul style="list-style-type: none"> <li>• A small, flexible “T”- shaped device that is placed in the womb by a trained provider</li> <li>• Steadily releases hormone progestin, which prevents sperm from reaching an egg</li> </ul>

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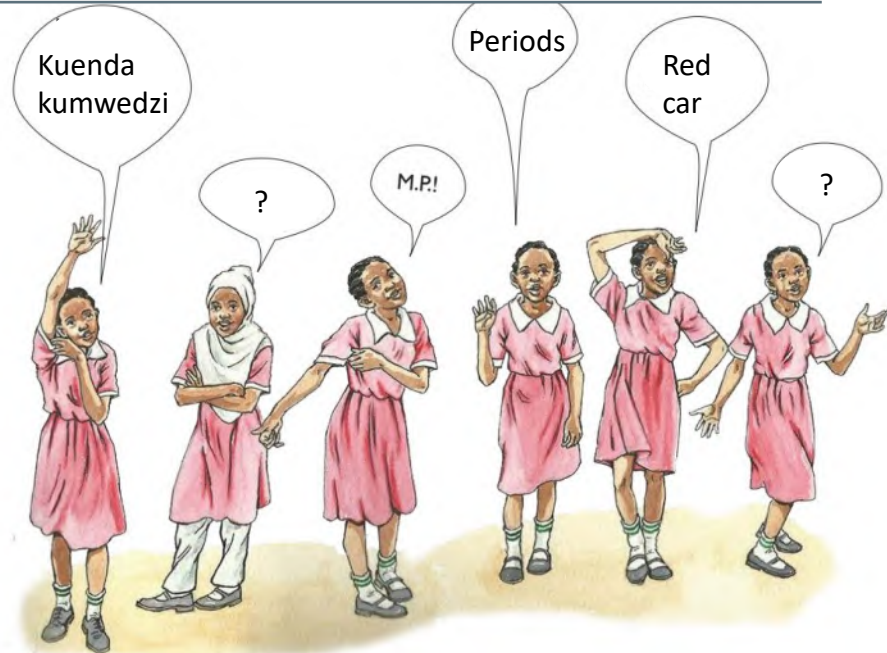
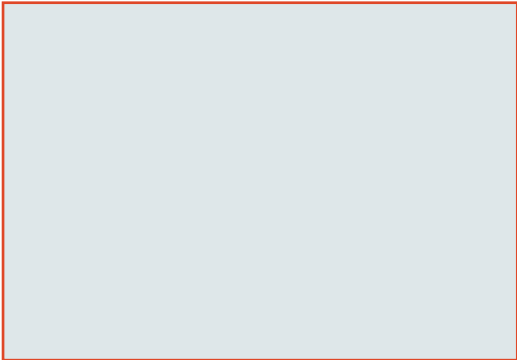
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# The Menstrual Cycle

A review of the average cycle and bleeding days

## ❖ ACTIVITY

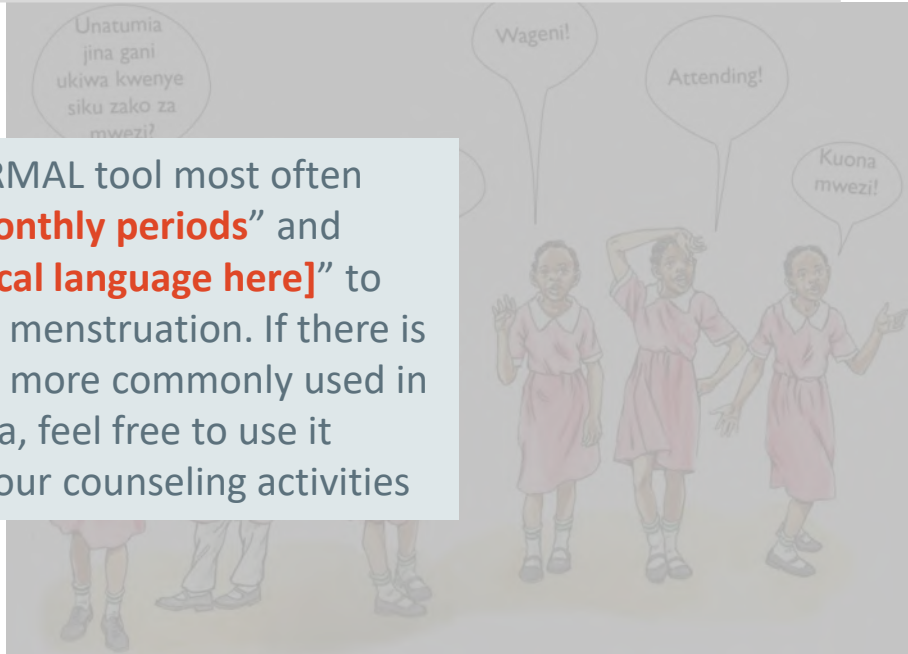
- What words/phrases do people in your community use to describe menstruation?



## ❖ ACTIVITY

- What words/phrases do people in your community use to describe menstruation?

The NORMAL tool most often uses “**monthly periods**” and “[**add local language here**]” to describe menstruation. If there is a phrase more commonly used in your area, feel free to use it during your counseling activities





## ❖ ACTIVITY

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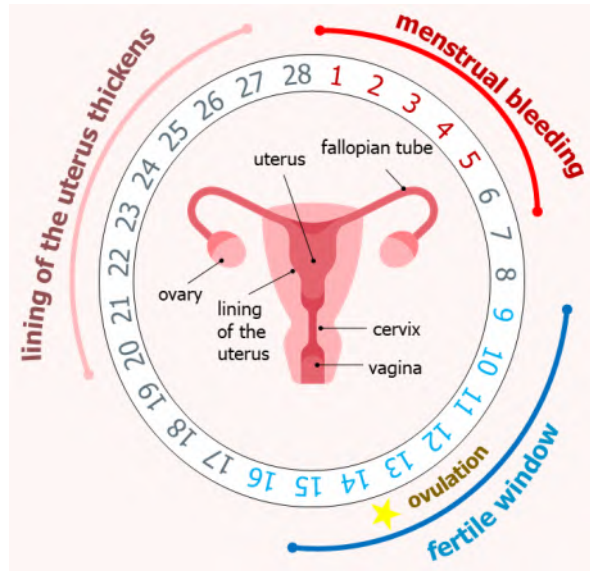
*Work in your groups to answer the following questions:*

- How many days are in a typical menstrual cycle?  
\_\_\_\_\_
- How many days do women\* typically bleed during a menstrual cycle?  
\_\_\_\_\_
- How much blood (teaspoons) does a woman\* usually lose over the course of one menstrual cycle?  
\_\_\_\_\_



# ✓ Menstrual Cycle

- A typical menstrual cycle is **28 days** but can range from 21-40 days
- Women and girls typically bleed for **3-7 days**
- Women/girls lose about **6-8 teaspoons** during a cycle



Fertility is usually a seven-day window within the cycle before and a day after ovulation (release of an egg into fallopian tube).

REMEMBER: Cycles vary widely person to person and that is completely normal.

## ❖ ACTIVITY

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*Work in your groups to answer the following questions:*

- When does a menstrual cycle begin and end?
- What causes the bleeding of a monthly period?
- Other than bleeding, what are other symptoms of menstruation?



# ✓ More Than Blood

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- The menstrual cycle starts on **the first day of bleeding** and ends at **the start of the next period**
- Bleeding is the **shedding of the thick lining** of the uterus that develops over the course of this cycle
- Other symptoms during or before menstruation can include abdominal cramping, bloating, mood swings, headaches, and fatigue

**Pre-menarche:** before the first period

**Menarche:** the first period

**Perimenopause:** the 4-8 years of transition before menopause

**Menopause:** when periods naturally stop

REMEMBER: Excessive pain or bleeding that interferes with daily life could be an indication of a menstrual disorder.

**Guide those with such symptoms to a healthcare provider.**

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# Bleeding Changes

A review of vocabulary and definitions

## ❖ ACTIVITY

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- Have the women you work with ever asked you about the bleeding changes they are experiencing while using family planning? If yes, discuss in your group and list those changes here.



# ✓ Defining bleeding changes

DESCRIPTION	DEFINITION	FOR EXAMPLE...
<b>Normal bleeding</b> <i>[Add local language or phrase here]</i>	Menstrual cycle stays the same as it was before starting to use contraceptive method.	...if a woman usually has a 25 day cycle with 3 days of bleeding this may stay the same while using contraceptives.
<b>Lighter bleeding</b> <i>[Add local language or phrase here]</i>	Less blood than a typical menstrual cycle for that user	...if a woman usually fills up 5 pads a day, she may only need 1-2.
<b>Shorter bleeding</b> <i>[Add local language or phrase here]</i>	Fewer days of bleeding than a typical menstrual cycle for that user	...if a woman usually bleeds for 5 days, she may only bleed for 1-2.
<b>Heavier bleeding</b> <i>[Add local language or phrase here]</i>	More blood or more clotting than a typical menstrual cycle for that user	...if a woman usually fills up 3 pads during the day, she may need 5-6.
<b>Longer bleeding</b> <i>[Add local language or phrase here]</i>	More days of bleeding than a typical menstrual cycle for that user	...if a woman usually bleeds for 4 days, she may now bleed for 6-7 days.

# ✓ Defining bleeding changes

DESCRIPTION	DEFINITION	FOR EXAMPLE...
<b>Spotting</b> <i>[Add local language or phrase here]</i>	Bleeding in between typical bleeding periods.	...a woman who usually has menstrual bleeding on day 1-5 of her 28-day cycle, may see a very small amount of bleeding on a few other days as well.
<b>Bleeding when you don't expect it</b> <i>[Add local language or phrase here]</i>	Random bleeding episodes that start earlier or later than usual or that start and stop several times during the same month.	...a woman who usually has menstrual bleeding on day 1-5 of her 28-day cycle, bleeds for 3 days, stops bleeding for 2, and then bleeds again for 1 day.
<b>Paused bleeding</b> <i>[Add local language or phrase here]</i>	No bleeding for an extended or long time.	...a woman who bleeds regularly every month stops having any bleedings while she uses her contraceptive method.



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# Questions?

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# The NORMAL Tool

A job aid for counseling clients on bleeding changes during family planning

## ❖ ACTIVITY

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- Below write down two reasons women in your community stop using contraceptives or do not use them consistently. Share your answers with your group.

1)

2)



## ➤ Why NORMAL?

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- Menstrual changes are very common for women who are using certain family planning methods
  - Including: hormonal contraceptives (pills, injectables, implants, hormonal IUD) and the copper IUD
  - Bleeding changes can include, lighter bleeding, shorter bleeding, heavier bleeding, longer bleeding, unexpected bleeding, or a pause in bleeding
- Bleeding changes can impact women's lives and relationships
- Counseling women about these bleeding changes can help them anticipate lifestyle changes and choose the best method to meet their needs

# Changes to your monthly periods are **NORMAL** while using family planning

It is common to have changes to your menstruation (monthly periods)\* when you use some family planning methods.\*\*

Review this guide as part of family planning counseling when you choose a method.



\*See the back page for more information about your monthly periods

\*\*Normal changes in your monthly periods can include lighter bleeding or less bleeding, shorter bleeding, heavier bleeding or more bleeding, longer bleeding, bleeding when you don't expect it, or a pause in your bleeding. Paused bleeding is when your bleeding stops for some or all of the time you're using a family planning method.

**Talk to your doctor if you have any questions or concerns at any point.**

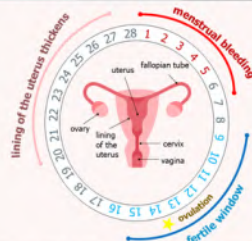
<b>N</b>	It is <b>NORMAL</b> and safe to have changes in your monthly periods when you use some family planning methods.**	
<b>O</b>	Lighter bleeding or a pause in bleeding** can provide <b>OPPORTUNITIES</b> by giving you strength and freedom to go on with your daily activities.	
<b>R</b>	Your monthly periods and fertility will <b>RETURN</b> after you stop using family planning.	
<b>M</b>	Different family planning <b>METHODS</b> can cause different bleeding changes. Talk to your doctor about what you want.	
<b>A</b>	<b>ABSENCE</b> of monthly bleeding by itself does not mean you are pregnant.	
<b>L</b>	Talk to your doctor if changes to your monthly periods <b>LIMIT</b> your activities. There may be treatments that can help.	

## Different family planning methods can cause different menstrual changes

Below are some common bleeding changes, but **everyone is different**. You may experience none of these changes, some of them, or all of them.

	<b>INJECTABLES</b>	<ul style="list-style-type: none"> <li>Bleeding when you don't expect it</li> <li>Spotting (dots of blood)</li> <li>Less bleeding (lighter bleeding)</li> <li>More bleeding (heavier bleeding)</li> <li>Paused bleeding (bleeding stops for some or all of the time while using the method)</li> </ul>
	<b>IMPLANTS</b>	<ul style="list-style-type: none"> <li>Bleeding when you don't expect it</li> <li>Spotting (dots of blood)</li> <li>Less bleeding (lighter bleeding)</li> <li>More bleeding (heavier bleeding)</li> <li>Paused bleeding (bleeding stops for some or all of the time while using the method)</li> </ul>
	<b>PILLS</b> (Progestin-Only Pills)	<ul style="list-style-type: none"> <li>Shorter bleeding</li> <li>Less bleeding (lighter bleeding)</li> <li>Spotting (dots of blood)</li> <li>Paused bleeding if breastfeeding</li> <li>Bleeding when you don't expect it</li> <li>Longer bleeding</li> </ul>
	<b>PILLS</b> (Combined Oral Pills)	<ul style="list-style-type: none"> <li>Shorter bleeding</li> <li>Less bleeding (lighter bleeding)</li> <li>Spotting (dots of blood)</li> </ul>
	<b>COPPER IUD</b>	<ul style="list-style-type: none"> <li>No change in bleeding</li> <li>More bleeding (heavier bleeding)</li> <li>Longer bleeding</li> </ul>
	<b>HORMONAL IUD</b>	<ul style="list-style-type: none"> <li>Bleeding when you don't expect it</li> <li>Spotting (dots of blood)</li> <li>Less bleeding (lighter bleeding)</li> <li>Less frequent bleeding</li> <li>Paused bleeding (bleeding stops for some or all of the time while using the method)</li> </ul>

If your bleeding stops while you are using family planning, this is **NORMAL**. There can even be benefits to your health or life.



### WHAT IS YOUR MONTHLY PERIOD?

- A monthly period (menstruation) is normally 3-7 days when the lining of the uterus in the form of blood flows from the uterus out the vagina each month.
- You usually lose about 6-8 teaspoons of blood during the monthly period.
- Cramps, headaches, or sore breasts are all common during and just before bleeding starts.
- Use of the family planning methods above can change the menstrual cycle (pictured here). This is normal and does not cause health problems. For example, some methods keep the lining of the uterus from growing.

Talk to your doctor if you have any questions or concerns.

This is what a 28-day menstrual cycle looks like. Yours may be longer or shorter; this is normal.

*If available, add local  
language tool here*

*If available, add local  
language tool here*

## ❖ ACTIVITY

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- Work in your groups to review 1-2 of the letters on the first page of the tool.
  - For example: Group 1 will review **N** & **O**, Group 2 will review **R** & **M**, Group 3 will review **A** & **L**
- In your groups discuss the *meaning* of the letters you have been assigned.
- Next, discuss any *challenges* you might face in explaining these concepts to your clients.
- Finally, each small group should present a few key points from their discussion to the larger groups.



**N**

It is **NORMAL** and safe to have changes in your monthly periods when you use some family planning methods.\*



\*Normal changes in your monthly periods can include lighter bleeding or less bleeding, shorter bleeding, heavier bleeding or more bleeding, longer bleeding, bleeding when you don't expect it, or a pause in your bleeding (for example, while you're using family planning you may completely stop bleeding for a few months before it returns again).



O

Lighter bleeding or a pause in bleeding\* can provide **OPPORTUNITIES** by giving you strength and freedom to go on with your daily activities.



## ❖ ACTIVITY

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- Letter “O” in the NORMAL tool says that lighter bleeding or a pause in bleeding can provide OPPORTUNITIES. List some of these opportunities below:



## ACTIVITY

### **OPPORTUNITIES with less or paused bleeding:**

- Heavy blood loss can lead to a condition called anemia, which can reduce energy and strength. Some family planning methods can prevent or stop this heavy bleeding and give a client more strength.
- Less or paused bleeding can also lessen the symptoms of menstrual disorders, like cramping or irregular periods.
- More strength (and less bleeding and pain) can give clients more freedom to participate in daily activities such as:
  - Household duties (cooking, fetching water and wood, etc.)
  - Farm work
  - Business activities and participation in women's groups
  - Traveling



**R**

Your monthly periods and fertility will **RETURN** after you stop using family planning.



**M**

Different family planning **METHODS** can cause different bleeding changes. Talk to your doctor about what you want.



**A**

**ABSENCE** of monthly bleeding by itself does not mean you are pregnant.



L

Talk to your doctor if changes to your monthly periods **LIMIT** your activities. There may be treatments that can help.



## ❖ ACTIVITY

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- Below write down three of the most common family planning methods used by women in your community.

1)

2)

3)

- Write an “X” next to the methods that cause changes in menstruation and/or bleeding.







## INJECTABLES

- Bleeding when you don't expect it
- Spotting (dots of blood)
- Less bleeding (lighter bleeding)
- More bleeding (heavier bleeding)
- Paused bleeding (bleeding stops for some or all of the time while using the method)



## IMPLANTS

- Bleeding when you don't expect it
- Spotting (dots of blood)
- Less bleeding (lighter bleeding)
- More bleeding (heavier bleeding)
- Paused bleeding (bleeding stops for some or all of the time while using the method)



**PILLS**  
(Progestin-Only Pills)

- Shorter bleeding
- Less bleeding (lighter bleeding)
- Spotting (dots of blood)
- Paused bleeding if breastfeeding
- Bleeding when you don't expect it
- Longer bleeding



**PILLS**  
(Combined Oral Pills)

- Shorter bleeding
- Less bleeding (lighter bleeding)
- Spotting (dots of blood)



## COPPER IUD

- No change in bleeding
- More bleeding (heavier bleeding)
- Longer bleeding



## HORMONAL IUD

- Bleeding when you don't expect it
- Spotting (dots of blood)
- Less bleeding (lighter bleeding)
- Less frequent bleeding
- Paused bleeding (bleeding stops for some or all of the time while using the method)

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# Questions?

## ➤ Discussion: Common Issues

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- Menstrual stigma
  - In many communities, women will feel ashamed of their periods/menstruation and may be uncomfortable discussing it. Encourage clients and remind them that menstruation is a normal and healthy process.
- Fertility
  - Some women will have concerns about their ability to get pregnant and have children after using family planning methods. Changes in menstrual bleeding may increase these concerns. It is important to reassure clients that, after they stop using their contraceptive method, their menstrual cycle and fertility will return to what is typical for them.

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# BREAK

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# Practice with NORMAL

Role play activities

# ❖ PRACTICE ACTIVITY 1

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In your groups of 2-3, role play a client-community health worker discussion using the NORMAL tool:

- One person should act as a woman who is either interested in using a family planning method or already using one but is concerned about bleeding changes.
- The other person should use the NORMAL tool to counsel her about bleeding changes that may occur while using certain family planning methods.
- Think and act as if it is a real situation, asking questions and pointing out concepts that are not clear.
- After about 15 minutes, switch roles and practice again.





## ❖ PRACTICE ACTIVITY 2

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- The trainer will ask for one training participant to come to the front of the room and role play a specific letter in the tool together.
  - The trainer will act as a woman seeking advice and the participant will counsel her.
- After a few minutes, the trainer (acting as the woman) will ask a question related to the tool and the volunteer should do their best to answer the question correctly and with compassion.
- After the answer is complete, discuss the role play as a larger group.
  - Did the volunteer answer well? What could they have done differently? How can you answer difficult questions from clients? What if you don't know the answer to something?



## ❖ PRACTICE ACTIVITY 2 *(continued)*

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- Repeat this exercise using different letters. Each time the question asked by the trainer will be different.
- Remember to use these discussion questions after each role play:
  - Did the volunteer answer well? What could they have done differently? How can you answer difficult questions from clients? What if you don't know the answer to something?

Feel free to adjust this activity to fit your needs. Instead of role plays in front of everyone, this could be done in small groups, with participants moving from group to group in order to participate in each role play. Always be sure to debrief all together once the activity is finished.



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# Action Planning

Who, What, Where, When

## ❖ ACTIVITY

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- Make a concrete plan for how and when you will use the NORMAL tool during your daily health work activities. Consider the following:
  - Who will be your target audience? Women who are already using a family planning method? Women who are considering new methods? Both?
  - How many clients will you reach using the NORMAL tool this week? This month? This year?
    - How will you track and record these numbers?
  - What location and situation will be best for using the NORMAL tool? Group education sessions? One-on-one counseling? At the clinic? In homes?
- Use the action planning tools in the next few pages to write a detailed plan for yourself.



## ➤ To keep in mind as you plan:

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### Discreet users

- Women have the right to keep their healthcare decisions private. If they wish to keep their family planning methods private from the people they live with (i.e. partners or parents/guardians), consider the following:
  - Plan sessions with women in a way that keeps interactions private. For example, choose an appropriate location for sessions that is not at (or near) women's homes.
  - It is also important that discreet users do not bring the NORMAL tool home where it could be found. Be sure to discuss this with your clients.
  - **DISCUSS: Do you think this will be an issue for women in your community?**

# NORMAL ACTION PLAN

My overall goal:

WHAT? (The steps I need to take to achieve my overall goal)	WHERE? (Location of each activity)	WHEN? (Dates and times)	RESOURCES (Material/support needed)



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# Training Evaluation

Please fill out a training evaluation. Please be as truthful and detailed as possible!

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# Closing

Thank you for your participation!



# ✓ REVIEW

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- Any final questions?
- Logistics
  - Timeline
  - Communications
  - Expectations
  - Resources
- **REMEMBER:** Menstrual changes are completely **NORMAL** while using family planning methods! Being informed about these changes can help women better prepare and make choices about family planning methods that better fit their lives
  - **N**ormal, **O**pportunities, **R**eturn, **M**ethods, **A**bsence, **L**imit

# Thank you!



These materials are made possible by the generous support of the American People through the United States Agency for International Development (USAID) with funding provided to FHI 360 through the *Envision FP* project.





# NOTES

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