

# FAMILY PLANNING

## Comprehensive study note

### 1. Introduction to Family Planning

Family planning refers to a conscious, voluntary decision made by individuals or couples to determine the number, timing, and spacing of their children, using methods to prevent or delay pregnancy. It allows couples to achieve their desired family size and improve the health and well-being of mothers, children, and families.

Family planning is a key component of reproductive health and a fundamental human right. It helps reduce maternal and child mortality, empowers women, supports education and employment, and contributes to poverty reduction and national development.

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### 2. Objectives of Family Planning

1. To assist individuals and couples in planning their families by preventing unintended pregnancies.
  2. To ensure healthy spacing and timing of births.
  3. To reduce maternal and infant mortality rates.
  4. To contribute to the health and socio-economic development of a country.
  5. To improve reproductive health and gender equity.
  6. To reduce the incidence of high-risk pregnancies.
  7. To promote responsible parenthood.
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### 3. Importance of Family Planning in Public Health

Family planning plays a crucial role in public health by:

1. Preventing unintended pregnancies and unsafe abortions.
2. Reducing maternal deaths by lowering pregnancy-related complications.
3. Decreasing neonatal and infant mortality.

4. Allowing women to recover between pregnancies and reducing anemia and other health issues.
  5. Reducing adolescent pregnancies which are associated with higher health risks.
  6. Contributing to population control and resource sustainability.
  7. Enhancing the status and decision-making capacity of women.
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## 4. Methods of Family Planning

Family planning methods are broadly classified into temporary and permanent methods.

### A. Temporary Methods

#### 1. Barrier Methods

- Male condom: Prevents sperm from entering the uterus. Also prevents sexually transmitted infections.
- Female condom: Worn inside the vagina for protection against pregnancy and STIs.

#### 2. Hormonal Methods

- Oral contraceptive pills (OCPs): Daily pills containing estrogen and progesterone to prevent ovulation.
- Emergency contraceptive pills (ECPs): Used within 72 hours after unprotected sex.
- Injectable contraceptives (e.g., DMPA): Given every three months to inhibit ovulation.
- Implants (e.g., Jadelle, Implanon): Inserted under the skin and effective for 3 to 5 years.

#### 3. Intrauterine Contraceptive Device (IUCD)

- Copper-T: A small T-shaped device inserted into the uterus, effective for up to 10 years.
- Hormonal IUCD (e.g., Mirena): Releases hormones and prevents pregnancy for several years.

#### 4. Natural Methods

- Calendar or rhythm method: Avoiding sex during the fertile window based on the menstrual cycle.
- Basal body temperature method: Monitoring body temperature changes to identify fertile days.

- Cervical mucus method: Observing changes in cervical secretions to avoid fertile days.
  - Lactational amenorrhea method (LAM): Temporary method based on exclusive breastfeeding within six months postpartum.
5. **Coitus Interruptus**
- Withdrawal of the penis before ejaculation. Less reliable and not recommended as a primary method.

## **B. Permanent Methods**

1. **Female sterilization (Tubal ligation)**
    - Fallopian tubes are cut or tied to prevent eggs from reaching the uterus.
    - Performed under local or general anesthesia.
  2. **Male sterilization (Vasectomy)**
    - Vas deferens are cut or sealed to prevent sperm from being released.
    - Simple outpatient procedure with minimal risks.
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## **5. Family Planning Services in Nepal**

Family planning services in Nepal are integrated into the national health system and delivered through the following:

1. Health Posts and Primary Health Care Centers.
2. Outreach clinics and mobile camps.
3. Female Community Health Volunteers (FCHVs).
4. Public hospitals and private institutions.
5. Integrated reproductive health services under the Reproductive Maternal Neonatal Child and Adolescent Health (RMNCAH) framework.

These services include counseling, method provision, follow-up care, side effect management, and referral services.

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## **6. National Family Planning Program in Nepal**

Nepal's Family Planning Program is coordinated under the Family Welfare Division of the Department of Health Services. It aligns with the National Health Policy and

supports the goals of reducing maternal and infant mortality and promoting reproductive rights.

### **Key Milestones:**

1. Family Planning was officially launched in 1959.
2. Integrated with the National Health System in 1968.
3. Supported by various development partners like UNFPA, USAID, and FPAN.
4. National Family Planning Costed Implementation Plan (FP-CIP) developed for 2015–2020 and extended further.

### **Strategic Goals:**

1. Increase modern contraceptive prevalence rate (mCPR).
2. Address unmet need for family planning.
3. Ensure access to quality services and supplies.
4. Reduce inequality in contraceptive use.
5. Promote informed choice and client-centered approaches.

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## **7. Indicators of Family Planning**

The following indicators help measure the success and reach of family planning services:

1. Contraceptive Prevalence Rate (CPR)
2. Modern Contraceptive Prevalence Rate (mCPR)
3. Unmet Need for Family Planning
4. Total Fertility Rate (TFR)
5. Age-Specific Fertility Rate (ASFR)
6. Method Mix (percentage of users using each method)
7. Discontinuation Rate
8. Demand Satisfied with Modern Methods

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## **8. Barriers to Family Planning**

Some key barriers that hinder access to and use of family planning methods in Nepal include:

1. Myths and misconceptions about side effects.
  2. Cultural and religious beliefs.
  3. Gender inequality and lack of decision-making power among women.
  4. Limited availability in remote areas.
  5. Poor counseling and follow-up services.
  6. Adolescent and youth-unfriendly services.
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### **9. Role of Public Health Officer in Family Planning**

Public Health Officers have a vital role in the promotion, planning, implementation, and evaluation of family planning services. Their responsibilities include:

1. Conducting awareness programs and community mobilization.
  2. Training and supervising health workers and FCHVs.
  3. Ensuring uninterrupted supply of contraceptives.
  4. Monitoring and evaluating service delivery.
  5. Advocating for family planning as a development agenda.
  6. Coordinating with NGOs and stakeholders.
  7. Addressing the unmet need and equity gaps.
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### **10. Rights-Based Approach in Family Planning**

Family planning must be based on the principles of reproductive rights, which include:

1. Right to access information and services.
  2. Right to informed choice and consent.
  3. Right to privacy and confidentiality.
  4. Right to be treated with dignity and respect.
  5. Right to non-discrimination.
  6. Right to quality care.
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