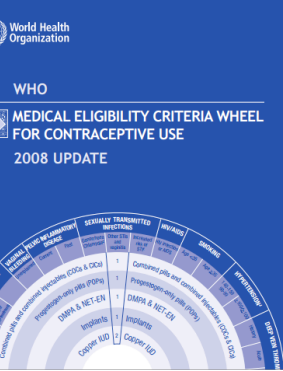



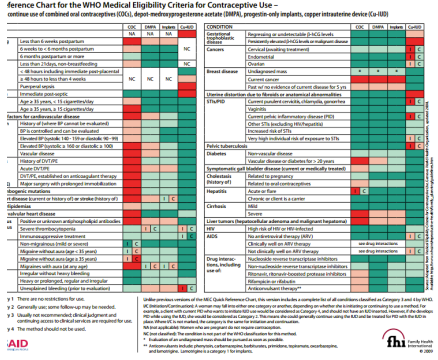
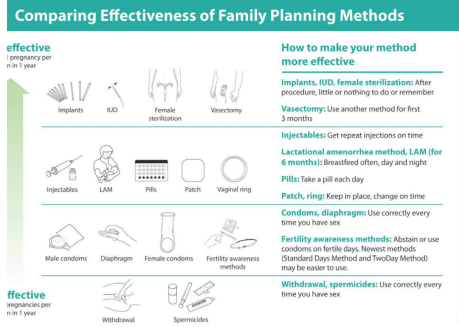
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<p>Medical Eligibility Wheel for Contraceptive Use (WHO, 2008 update)</p> 	<ul style="list-style-type: none"> ○ Wheel containing the medical eligibility criteria for starting use of six contraceptive methods (Combined pills - low dose combined oral contraceptives, combined injectable contraceptives, progestogen-only pills, progestogen-only injectable depo-dedroxyprogesterone acetate, (DMPA) and norethisterone (NET-EN), progestogen-only implants, copper-bearing IUD) based on the Medical Eligibility Criteria for Contraceptive Use, 3rd edition and its 2008 update. Tells family planning providers if a woman presenting with a known medical or physical condition is able to use various contraceptive methods safely and effectively. ○ Primarily for use by doctors and nurses/midwives, but also appropriate for all cadres trained in the provision of the noted methods. ○ Available in English, French, Russian and Spanish. ○ World Health Organization Cost: Packs of 20 wheels CHF 60.00/USD 70.00; developing countries CHF 42.00 http://www.who.int/reproductivehealth/publications/family_planning/9789241547710/en/index.html 	<ul style="list-style-type: none"> • Very easy to use. 	<ul style="list-style-type: none"> • Requires literacy.
<p>Decision-making tool for family planning clients and providers (WHO, 2005)</p>	<ul style="list-style-type: none"> ○ 244-page flipchart to be used as a decision-making aid for clients, a job-aid and reference manual for providers; and a resource for training providers. With one page for the client and a corresponding page for providers, it contains pictures, key points and detailed 	<ul style="list-style-type: none"> • Adaptation guide, training guide, and CD-ROM with additional information 	<ul style="list-style-type: none"> • Fairly long. • Requires training providers in its use

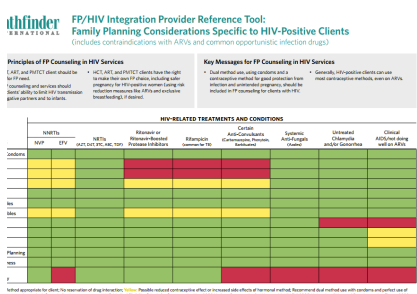
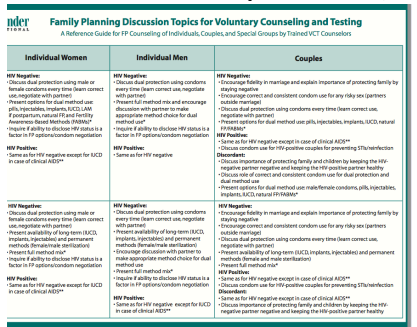
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
	<p>reference information covering 14 family planning methods. Includes medical eligibility criteria, side effects, when to start and how to use each method.</p> <ul style="list-style-type: none"> ○ Primarily for use by doctors and nurses/midwives. ○ Available in Chinese, English, French, and Spanish languages. ○ World Health Organization <p>Available for download: http://www.who.int/reproductivehealth/publications/family_planning/9241593229index/en/index.html</p>	<p>available on website.</p> <ul style="list-style-type: none"> • Promotes dual method use. • Client drives the flow of counseling. • Easy to use, with simple language and illustrations. • Paper on evaluation of the tool available here: http://www.guttmacher.org/pubs/journals/3116205.html#7 	
<p>Quick Reference Chart for the WHO Medical Eligibility Criteria For Contraceptive Use — to initiate and continue use of combined oral contraceptives, DMPA, implants, and copper IUDs (Family Health International, 2009)</p>	<ul style="list-style-type: none"> ○ Quick reference guide in the form of a chart that summarizes the WHO's 2008 medical eligibility criteria for combined oral contraceptives, the injectable contraceptive DMPA, progestin-only implants, and copper IUDs. ○ Primarily for use by doctors and nurses/midwives. ○ Available in English, Spanish, and French. ○ Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 <p>Available for download:</p>	<ul style="list-style-type: none"> • Uses colors. • Chart form easy to use. • Unlike previous versions of the MEC Quick Reference Chart, includes a complete list of all conditions that the WHO classifies as Category 3 (usually not 	<ul style="list-style-type: none"> • Text heavy. • Small print.

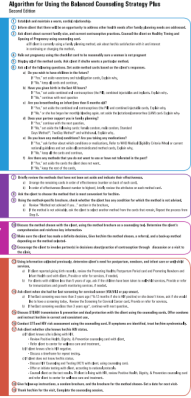
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
 <p>Reference Chart for the WHO Medical Eligibility Criteria for Contraceptive Use - continue use of combined oral contraceptives (COCs), depot medroxyprogesterone acetate (DMPA), progestin-only implant, copper intrauterine device (Cu-IUD)</p> <p>This chart provides a systematic way to determine if a client is eligible for various contraceptive methods based on their medical history and current health status. It includes categories for different methods and lists various medical conditions with their corresponding eligibility status (e.g., 1, 2, 3, 4, M, U).</p>	<p>http://www.fhi360.org/en/RH/Pubs/servdelivery/quickreferencechart.htm</p>	<p>recommended) and Category 4 (should not be used).</p>	
<p>Comparing the Effectiveness of Family Planning Methods (Family Health International, USAID, 2007)</p>  <p>The infographic compares the effectiveness of various family planning methods, measured by the number of pregnancies per 100 women in 1 year. It lists methods like implants, IUD, female sterilization, vasectomy, injectables, LAM, pills, patch, vaginal ring, condoms, diaphragm, female condoms, fertility awareness method, withdrawal, and spermicides. It also provides instructions on how to make each method more effective.</p>	<ul style="list-style-type: none"> ○ Chart presenting contraceptive options for pregnancy prevention on a continuum of effectiveness. ○ Applicable to all cadres. ○ Available in English, French, and Spanish languages. ○ Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 Available for download: http://www.fhi360.org/NR/rdonlyres/ebrix34v4ltkpve23ajfowame5hqqdm2youb6puzqqbbfj3vmtdgsiazhaylskijepyoehpqee4ab/EffectivenessChart2.pdf 	<ul style="list-style-type: none"> • Brief and simple messaging. • Clear illustrations. 	<ul style="list-style-type: none"> • Does not provide information on protection against STIs.
<p>Reference Guide for FP Counseling of Individuals, Couples, and Special Groups by Trained VCT Counselors (Pathfinder, No Date)</p>	<p>HIV/AIDS Specific Job Aids</p> <ul style="list-style-type: none"> • One-page chart with information to help voluntary counseling and testing (VCT) counselors for HIV integrate family planning messages into counseling sessions for people living with HIV. • Primarily for trained VCT counselors. 	<ul style="list-style-type: none"> • Chart is easy to use • Includes specific information for counseling 	<ul style="list-style-type: none"> • Heavy text. • No images.

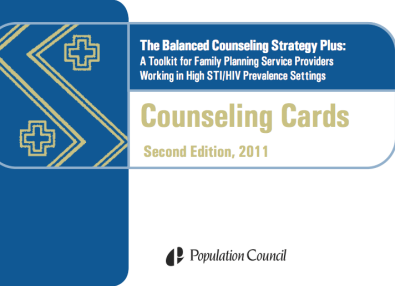
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<div style="text-align: center;">  </div>	<ul style="list-style-type: none"> • Available in English. ○ Pathfinder International 9 Galen St., Suite 217 Watertown, MA 02472 1.617.924.7200 Available for download: http://www.pathfind.org/site/PageServer?pagename=Pubs_Job_Aids 	<p>individuals, couples, and special groups.</p>	<p>Cons</p>
<div style="text-align: center;">  </div>	<ul style="list-style-type: none"> ○ Two-page chart with information to help guide VCT counselors or those counseling clients living with and without HIV in discussing FP, according to cadre and FP goals. ○ Primarily for trained VCT counselors. ○ Available in English. ○ Pathfinder International 9 Galen St., Suite 217 Watertown, MA 02472 1.617.924.7200 Available for download: http://www.pathfind.org/site/PageServer?pagename=Pubs_Job_Aids 	<ul style="list-style-type: none"> • Chart is easy to use. • Includes specific information for counseling individual men, individual women, and couples, and is specific to HIV status. • Also includes information specific to adolescents, pregnant/postpartum women, pre-nuptial couples, men and women with multiple partners, and women who have 	<ul style="list-style-type: none"> • Heavy text. • No images.

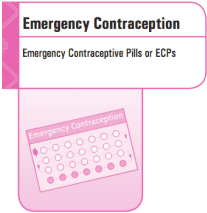
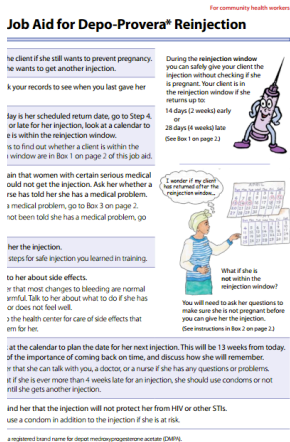
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
		<ul style="list-style-type: none"> • experienced miscarriage or induced abortion. 	
<p>Algorithm for The Balanced Counseling Strategy Plus: A Toolkit for Family Planning Service Providers Working in High STI/HIV Prevalence Areas (Population Council, 2008)</p> 	<ul style="list-style-type: none"> ○ One page flyer that summarizes the 19 steps during a family planning counseling session to implement the Population Council’s <i>Balanced Counseling Strategy Plus</i>, a toolkit for family planning service providers working in high HIV/STI prevalence settings. These steps are organized into four stages: pre-choice, method choice, post-choice, and STI/HIV counseling. To be used with counseling cards (below). ○ Primarily for use by doctors and nurses/midwives, although simple enough to be used by other cadres. ○ Available in English. ○ Population Council One Dag Hammarskjold Plaza, 9th Floor, New York, NY 10017 +1 212 339 0500 PDFs available for download on website in A3 and A4 size. To obtain Microsoft Word versions of BCS+ files to modify or revise according to local setting, contact: publications@popcouncil.org http://www.popcouncil.org/publications/book/2011_BalancedCounselingStrategyPLUS.asp 	<ul style="list-style-type: none"> • Generic enough to be revised according to national and/or regional guidelines. • Simple guide walks user through steps in counseling. 	<ul style="list-style-type: none"> • Requires literacy.
<p>Counseling Cards for The Balanced Counseling Strategy Plus: A Toolkit for Family Planning Service Providers Working in High STI/HIV Prevalence Areas (Population Council, 2008)</p>	<ul style="list-style-type: none"> ○ Cards to be used during an FP counseling session. Twenty-six total cards: <ul style="list-style-type: none"> ○ First card contains six questions that the service provider asks to rule out the 	<ul style="list-style-type: none"> • Generic enough to be revised according to national and/or 	<ul style="list-style-type: none"> • Requires literacy.

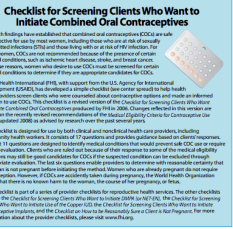
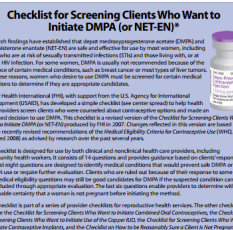
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
 <p>The Balanced Counseling Strategy Plus: A Toolkit for Family Planning Service Providers Working in High STI/HIV Prevalence Settings</p> <p>Counseling Cards Second Edition, 2011</p> <p>Population Council</p>	<p>possibility that a client is pregnant.</p> <ul style="list-style-type: none"> ○ Next 16 cards contain information about a different family planning method. ○ Next 3 cards provide advice on pregnancy and the postpartum period. ○ Last 6 cards provide essential information for counseling on preventing, detecting, and treating STIs and HIV. ○ Primarily for use by doctors and nurses/midwives, although simple enough to be used by other cadres. ○ Available in English. ○ Population Council One Dag Hammarskjold Plaza, 9th Floor, New York, NY 10017 +1 212 339 0500 PDFs available for download on website. To obtain Microsoft Word versions of BCS+ files to modify or revise according to local setting, contact: publications@popcouncil.org <p>http://www.popcouncil.org/publications/books/2011_BalancedCounselingStrategyPLUS.asp</p>	<p>regional guidelines.</p> <ul style="list-style-type: none"> • Simple explanations of each method yet fairly comprehensive • Not too text-heavy. 	
<p>Method Brochures for The Balanced Counseling Strategy Plus: A Toolkit for Family Planning Service Providers Working in High STI/HIV Prevalence Areas (Population Council, 2008)</p>	<ul style="list-style-type: none"> ○ Method brochures on each of the 16 methods represented by the counseling cards (above). The brochures provide counseling to clients on the method they have chosen and should be given to clients for later reference. ○ Primarily for use by doctors and nurses/midwives, although simple enough to be used by other cadres. ○ Available in English. ○ Population Council 	<ul style="list-style-type: none"> • Client can take home. • Simple explanations of each method yet fairly comprehensive. • Generic enough to be revised according to 	<ul style="list-style-type: none"> • Requires client literacy.


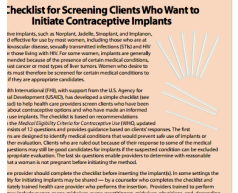
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
 <p>Emergency Contraception Emergency Contraceptive Pills or ECPs</p> <p>Balanced Counseling Strategy Plus (2nd Ed.)</p>	<p>One Dag Hammarskjold Plaza, 9th Floor, New York, NY 10017 +1 212 339 0500</p> <p>PDFs available for download on website. To obtain Microsoft Word versions of BCS+ files to modify or revise according to local setting, contact: publications@popcouncil.org</p> <p>http://www.popcouncil.org/publications/books/2011_BalancedCounselingStrategyPLUS.asp</p>	<p>national and/or regional guidelines.</p>	
Method Specific Job Aids			
<p>Job Aid for Depo-Provera/DMPA and NET-EN Reinjection (Family Health International, 2009)</p>  <p>Job Aid for Depo-Provera® Reinjection</p> <p>For community health workers</p> <p>he client if she still wants to prevent pregnancy, she wants to get another injection. k your records to see when you last gave her lay to her scheduled return date, go to Step 4 or late for her injection, look at a calendar to e is within the reinjection window. is to find out whether a client is within the window are in Box 1 on page 2 of this job aid.</p> <p>ain that women with certain serious medical could not get the injection. Ask her whether a rse has told her she has a medical problem. a medical problem, go to Box 3 on page 2. ot been told she has a medical problem, go her the injection. steps for safe injection you learned in training.</p> <p>to her about side effects. n that report changes to bleeding are normal rmal. Talk to her about what to do if she has r does not feel well. e the health center for care of side effects that em for her.</p> <p>at the calendar to plan the date for her next injection. This will be 13 weeks from today. f the importance of coming back on time, and discuss how she will remember. n that she can talk with you, a doctor, or a nurse if she has any questions or problems. f if she is ever more than 4 weeks late for an injection, she should use condoms or not rill she gets another injection.</p> <p>ind her that the injection will not protect her from HIV or other STIs. use a condom in addition to the injection if she is at risk.</p> <p><small>a registered brand name for depot medroxyprogesterone acetate (DMPA).</small></p>	<ul style="list-style-type: none"> ○ Two-page flyer to use as guide on Depo-Provera/DMPA and NET-EN reinjection procedures and FAQs. Intended as companion pieces to the Checklist for Screening Clients Who Want to Initiate DMPA (or NET-EN, listed below). ○ Different versions meant for community health workers (CHWs) and clinicians; for clinicians, a different version is also available that is adapted to policies and guidelines of specific countries (Kenya DMPA, Kenya NET-EN, Senegal DMPA, South Africa DMPA, and South Africa NET-EN). ○ Available in English, French, and Spanish languages (CHWs); English, French, Spanish, and Hindi languages (clinicians). ○ Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 	<ul style="list-style-type: none"> • Step-by-step guide. • Good visual interest (some pictures and colors). 	<ul style="list-style-type: none"> • May be too text-heavy. • Requires some literacy.

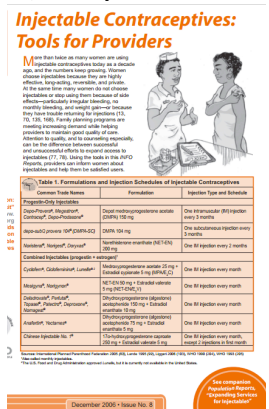
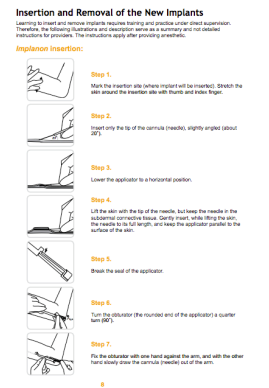
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<p style="text-align: center;">Checklist for Screening Clients Who Want to Initiate Combined Oral Contraceptives (Family Health International, 2008)</p> 	<p style="text-align: center;">http://www.fhi360.org/en/RH/Pubs/servdelivery/reinjection_job_aids.htm</p> <ul style="list-style-type: none"> ○ Three-page flyer to use as a checklist to screen women who have made an informed decision to use combined oral contraceptives. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>. ○ Applicable to all cadres. ○ Available in English, French, Hindi, and Spanish. ○ Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 Available for download: http://www.fhi360.org/NR/rdonlyres/e37xubhms7todjt77ld2ap4mdq3ig2xgnxvrg3vysdwgypkysyuiufasqjdwmdmq3mun62unkisvbg/COCchecklistenrh1.pdf 	<ul style="list-style-type: none"> • Colorful. 	<ul style="list-style-type: none"> • Text heavy. • Lengthy.
<p style="text-align: center;">Checklist for Screening Clients Who Want to Initiate DMPA (or NET-EN) (Family Health International, 2008)</p> 	<ul style="list-style-type: none"> ○ Three-page flyer to use as guide for screening clients who want to initiate Depo-Provera/DMPA and NET-EN and FAQs. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>. Intended as companion pieces to the Job Aid for Depo-Provera/DMPA and NET-EN Reinjection, listed above. ○ Applicable to all cadres. ○ Available in English, French, Spanish, and Hindi languages. Country-adapted versions available for Kenya and Uganda. ○ Family Health International 2224 E NC Hwy 54 	<ul style="list-style-type: none"> • Colorful, 	<ul style="list-style-type: none"> • Text heavy and somewhat lengthy,


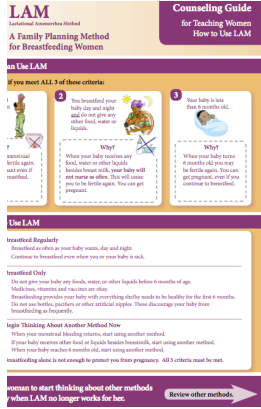
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
	<p>Durham, NC 27713 USA 1.919.544.7040</p> <ul style="list-style-type: none"> http://www.fhi360.org/en/RH/Pubs/servdelivery/checklists/dmpachecklists/index.htm 		
<p>Checklist for Screening Clients Who Want to Initiate Use of Copper IUD (Family Health International, 2008)</p>  <p>Checklist for Screening Clients Who Want to Initiate Use of the Copper IUD</p> <p>Intending over the next 12 months to use a copper intrauterine device (IUD) as a method of family planning. This checklist is intended for use by health workers in low resource settings. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>. It is available in English, French, Hindi, and Spanish.</p> <p>Current Pregnancy</p> <p>Have you been told that you have not had a period for 3 months or longer, or that you are pregnant, or that you are having a pregnancy test? If you are pregnant, or if you are having a pregnancy test, you should not use a copper IUD. If you are not pregnant, you should use a copper IUD.</p> <p>Medical Eligibility for the IUD</p> <p>Are you eligible to use a copper IUD? If you are eligible, you should use a copper IUD. If you are not eligible, you should not use a copper IUD.</p>	<p>Three-page flyer to use as a checklist to screen women to determine if they may use a Copper IUD. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>.</p> <ul style="list-style-type: none"> Applicable to doctors and nurses/midwives. Available in English, French, Hindi, and Spanish languages. Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 Available for download: http://www.k4health.org/toolkits/iud/checklist-screening-clients-who-want-initiate-use-copper-iud 	<ul style="list-style-type: none"> Colorful. 	<ul style="list-style-type: none"> Text heavy. Lengthy.
<p>Checklist for Screening Clients Who Want to Initiate Contraceptive Implants (Family Health International, 2008)</p>  <p>Checklist for Screening Clients Who Want to Initiate Contraceptive Implants</p> <p>Intending over the next 12 months to use a contraceptive implant as a method of family planning. This checklist is intended for use by health workers in low resource settings. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>. It is available in English, French, Hindi, and Spanish.</p> <p>Current Pregnancy</p> <p>Have you been told that you have not had a period for 3 months or longer, or that you are pregnant, or that you are having a pregnancy test? If you are pregnant, or if you are having a pregnancy test, you should not use a contraceptive implant. If you are not pregnant, you should use a contraceptive implant.</p> <p>Medical Eligibility for the Implant</p> <p>Are you eligible to use a contraceptive implant? If you are eligible, you should use a contraceptive implant. If you are not eligible, you should not use a contraceptive implant.</p>	<p>Three-page flyer to use as a checklist to screen women to determine whether she may use contraceptive implants. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>.</p> <ul style="list-style-type: none"> Applicable to doctors and nurses/midwives. Available in English, French, and Spanish languages. Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 Available for download: http://www.fhi360.org/en/RH/Pubs/servdelivery/checklists/dmpachecklists/index.htm 	<ul style="list-style-type: none"> Colorful. 	<ul style="list-style-type: none"> Text heavy. Lengthy.

Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<p>Injectable Contraceptives: Tools for Providers (INFO Reports and Johns Hopkins Bloomberg School of Public Health, 2006)</p> 	<ul style="list-style-type: none"> ○ ery/checklists/implants/index.htm ○ 8-page flyer on injectable contraceptives that includes formulations and injection schedules of injectable contraceptives; checklist for giving intramuscular contraceptive injections; tips for counseling clients; and checklist for screening clients who want to initiate DMPA (or NET-EN). ○ Applicable to all cadres. ○ Available in English, French, and Spanish. ○ K4Health <p>Available for download: http://www.k4health.org/toolkits/community_basedfp/services_supervision/injectables_tool_for-providers_inforeport</p>	<ul style="list-style-type: none"> • Comprehensive information on injectables. • Includes pictorial instructions, checklists, tables, etc. 	<ul style="list-style-type: none"> • Lengthy.
<p>Insertion and Removal of New Implants (INFO Reports, 2007)</p> 	<ul style="list-style-type: none"> ○ Two-page flyer that gives instructions and diagrams for insertion and removal of Jadelle, Sino-implant (II), and Implanon. ○ Primarily for use by doctors and nurses/midwives. ○ Available in English, French, and Spanish. ○ INFO Project <p>Available for download: http://archive.k4health.org/toolkits/implants/training/insertion_illustrations</p>	<ul style="list-style-type: none"> • Clear step-by-step instructions. • Good pictures. 	<ul style="list-style-type: none"> • None identified.
<p>How to Use the FC2 Female Condom Flip Book (Support Worldwide, No Date)</p>	<ul style="list-style-type: none"> ○ Flip book explaining how to use FC2 female condom with supporting diagrams and text for each of the steps. ○ Applicable to all cadres. ○ Available in English, French, Portuguese, and 	<ul style="list-style-type: none"> • Comprehensive. • Many illustrations. • Could be adapted to 	<ul style="list-style-type: none"> • Lengthy.

Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
 <p style="text-align: center;">How to use FC2 Female Condom</p>	<p>Spanish.</p> <ul style="list-style-type: none"> Support Worldwide Available for download on website: http://www.supportworldwide.org/communication-materials/how-to-use-fc2-female-condom-flipbook/ 	<p>brochure format or used as Powerpoint presentation.</p>	
<p>Counseling Guide for Teaching Women How to Use LAM (Institute for Reproductive Health at Georgetown University, 2009)</p> 	<ul style="list-style-type: none"> Two-page flyer/poster designed for clinic level providers to assist them in counseling breastfeeding women how to use LAM as a family planning method. Explains who can use LAM, how to use LAM, who can not use LAM, and how to counsel a woman who cannot or chooses not to use LAM. Primarily for use by doctors and nurses/midwives, but could also be used by CHWs. Available in English, Hindi, French, Spanish, and Portuguese. Institute for Reproductive Health at Georgetown University Available for download: http://www.k4health.org/toolkits/lam/counseling-guide-teaching-women-how-use-lam 	<ul style="list-style-type: none"> Good visuals. Detailed explanation. 	<ul style="list-style-type: none"> Requires literacy.
<p>Guide to Effectiveness and Efficient Provision of Combined Oral Contraceptives, a Strategy Guide (Family Health International, USAID, 2008)</p>	<ul style="list-style-type: none"> Two-page flyer that assists health workers of all levels in the implementation of four evidence-based strategies recommended by the WHO to increase uptake and continuation of COCs, including quick start (women take 	<ul style="list-style-type: none"> Brief. Offers quick facts. Good visuals. 	<ul style="list-style-type: none"> Requires literacy.

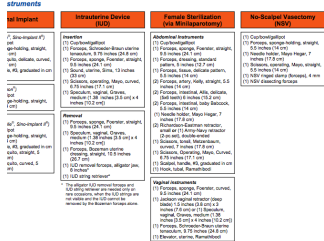

Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<p style="text-align: center;">Job Aid</p> <p>Guide to Effective and Efficient Provision of Combined Oral Contraceptives (COCs)</p> <p><small>(Designed to assist health workers of all levels in the implementation of the following evidence-based practices to increase uptake and continuation of COCs. This tool is to be used in combination with a need assessment for assessing clients who need to receive oral COCs.)</small></p> <p><small>Ask clients for clients who have made an informed choice to use COCs, follow these instructions:</small></p> <p><small>1. COC. Check for rule-out pregnancy and screen for other conditions to determine if the client is eligible for COCs. If the client is eligible, proceed to step 2. If not, consider alternative provision of FP.</small></p> <p><small>2. If the client is not pregnant and has no other conditions to determine if the client is eligible for COCs, provide a pack of pills for the client by discussing on the day of the week that has already passed (e.g., if you are starting on a Wednesday, a Sunday through Saturday pack from the first week of the pill pack).</small></p> <p><small>3. Give the pill pack, ask her to take her first pill. Observe the pill being taken.</small></p> <p><small>4. Instruct the client to follow the directions or arrows on the pack to take the rest of the pills.</small></p> <p><small>5. With 28 pills, instruct the client to start the next pack the day after she finishes her current pack with 7 pills, remind the client to wait 7 days after she takes the last pill from her pack and then start the next pack.</small></p> <p><small>6. If switching from injectable and is or near the due date for re-injection, she can begin a pill pack now. No back-up method is needed.</small></p> <p><small>7. If she has not had a menstrual period more than 5 days ago or if the client is unsure when she last had a period, remind her that she must use condoms or abstain from sex for the next 7 days, condoms to use for the next 7 days.*</small></p> <p><small>8. Ask and be prepared with an alternative choice to use emergency contraceptive pills (ECPs), when available, in case a condom fails or is not used during the first 7 days of COC use.</small></p> <p>Visions of COCs <small>Emergency pills have not been ruled out but who are medically eligible to receive COCs, or more packs of pills from their provider in advance to start taking at the time of this emergency need for clients to return or reproduction to receive pills.</small></p> <p>Multiple Packs of COCs <small>3 to 12 packs of COCs during their visit rather than one pack. While it is recommended to provide 12 packs, individual countries must decide what is realistic based on supplies. For the previously used COCs, provide her with 7 packs of pills and other instructions on when to return for additional packs. Encourage the client to return to the facility any time she has questions or needs.</small></p> <p><small>* In a continuing or previous COC, use provides her with between 8 and 12 packs.</small></p> <p><small>© 2012 Family Health International</small></p>	<p>their first pill under observation during a clinic visit, regardless of where they are in their menstrual cycle), advance provision of COCs providing multiple packs of COCs, and managing missed pills.</p> <ul style="list-style-type: none"> ○ Primarily for use by doctors and nurses/midwives, but could also be used by CHWs. ○ Available in English. ○ Family Health International <p>Available for download on website: http://www.fhi360.org/NR/rdonlyres/ezhosksq3ie556eqflvsft4i2txl4vh7jbvvdxdxryzj766jjooqhpnhjp5cdfo2bbpeg5gl6m42g/QuickStartCOCgeneric1.pdf</p>		
<p>Key Reminders About Hormonal Family Planning Methods (K4Health, JHU-CCP, 2012)</p> <p>Key Reminders About Hormonal Family Planning Methods</p> <p><small>Considered the most common method of family planning, hormonal methods use hormones to prevent pregnancy. They include:</small></p> <ul style="list-style-type: none"> • Oral Contraceptive Pills (OCPs) • Intrauterine Devices (IUDs) • Implants • Injectable Contraceptives • Contraceptive Patches • Vaginal Rings • Contraceptive Sponges • Diaphragms • Cervical Caps • Contraceptive Creams • Contraceptive Gels • Contraceptive Gels • Contraceptive Gels <p><small>© 2012 K4Health</small></p>	<ul style="list-style-type: none"> ○ Adapted from <i>Family Planning: A Global Handbook for Providers</i>, this one-page sheet provides important but hard-to-remember details about providing hormonal methods, including when to start the methods, their effectiveness, medical eligibility, correcting mistakes such as missed pills, and managing common side effects. ○ Primarily for use by doctors and nurses/midwives, but applicable to all cadres trained in the provision of contraceptive methods. ○ Available in English. ○ K4Health/JHU-CCP <p>Available for download: http://www.k4health.org/resources/key-reminders-about-hormonal-family-planning-methods</p>	<ul style="list-style-type: none"> • Covers key concepts of multiple hormonal methods. • Mixture of images and charts. 	<ul style="list-style-type: none"> • None noted.

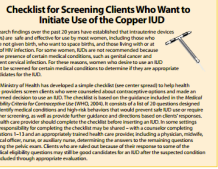

Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<p style="text-align: center;">World Health Organization (WHO) Eligibility Criteria for Vasectomy Procedures (EngenderHealth, 2003)</p> <p style="text-align: center;"><u>Appendix</u></p> <p><small>Health Organization (WHO) Eligibility Criteria Vasectomy Procedures</small></p> <p><small>Appendix</small></p> <p><small>In the inevitability or permanence of vasectomy procedures, special advice is given to ensure a voluntary informed choice of the method by the client. Pre-sterilization counseling must also be given in the case of young people, men and their partners, and women with unmet family planning needs. The medical and non-medical criteria for vasectomy procedures should be considered in the decision-making process. Medical conditions that would absolutely preclude a person's vasectomy, some conditions and circumstances that would necessitate the use of an alternative method of contraception, and the particular use of vasectomy procedures, the following categories have been developed:</small></p> <p><small>There is no medical reason to deny vasectomy to a person with the following conditions:</small></p> <p><small>The procedure is normally conducted in a routine setting, but with special precautions and preparation.</small></p> <p><small>Laboratory reference methods of contraception should be provided.</small></p> <p><small>The procedure should be undertaken in a setting with an experienced surgeon and staff. Appropriate medical and nursing support should be available. The client should be informed of the availability of surgical and non-surgical methods of contraception.</small></p> <p><small>Appropriate procedures and anesthesia regimens are also needed. Laboratory reference methods of contraception should be provided, if desired or if there is otherwise any delay.</small></p> <p><small>WHO, 2003</small></p>	<ul style="list-style-type: none"> ○ Three page guide outlining WHO eligibility criteria for vasectomy procedures in chart form. Could be printed/enlarged to poster size for display. ○ Primarily for use by providers who perform surgical vasectomy. ○ Available in English. ○ EngenderHealth ○ Available for download on the website (begins page 55): http://www.engenderhealth.org/files/pubs/family-planning/no-scalpel.pdf 	<ul style="list-style-type: none"> • Quick reference for eligibility, not offered in WHO medical eligibility wheel. 	<ul style="list-style-type: none"> • No visuals.
<p style="text-align: center;">World Health Organization (WHO) Screening Guidelines for Female Sterilization (EngenderHealth, 2003)</p> <p style="text-align: center;"><u>Appendix C</u></p> <p><small>Screening Guidelines for Female Sterilization</small></p> <p><small>Appendix C</small></p> <p><small>World Health Organization (WHO) Screening Guidelines for Female Sterilization</small></p> <p><small>In the inevitability or permanence of sterilization procedures, special advice is given to ensure that the client has made a voluntary informed choice. Pre-sterilization counseling must also be given in the case of young people and their partners, and women with unmet family planning needs. The medical and non-medical criteria for sterilization procedures should be considered in the decision-making process. Medical conditions that would absolutely preclude a person's sterilization, some conditions and circumstances that would necessitate the use of an alternative method of contraception, and the particular use of sterilization procedures, the following categories have been developed:</small></p> <p><small>There is no medical reason to deny sterilization to a person with the following conditions:</small></p> <p><small>The procedure is normally conducted in a routine setting, but with special precautions and preparation.</small></p> <p><small>Laboratory reference methods of contraception should be provided.</small></p> <p><small>The procedure should be undertaken in a setting with an experienced surgeon and staff. Appropriate medical and nursing support should be available. The client should be informed of the availability of surgical and non-surgical methods of contraception.</small></p> <p><small>Appropriate procedures and anesthesia regimens are also needed. Laboratory reference methods of contraception should be provided, if desired or if there is otherwise any delay.</small></p> <p><small>WHO, 2003</small></p>	<ul style="list-style-type: none"> ○ Nine page guide outlining WHO eligibility criteria for female sterilization/tubal ligation in chart form. Could be printed/enlarged to poster size for display. ○ Primarily for use by providers who perform surgical tubal ligation. ○ Available in English. ○ EngenderHealth ○ Available for download on the website (begins page 103): http://www.engenderhealth.org/files/pubs/family-planning/minilaparotomy-a.pdf 	<ul style="list-style-type: none"> • Quick reference for eligibility, not offered in WHO medical eligibility wheel. 	<ul style="list-style-type: none"> • No visuals. • May be too lengthy for poster display.
<p style="text-align: center;">Medical Instruments and Expendable Medical Supplies Needed to Provide Long-Acting and Permanent Methods of Contraception (EngenderHealth, 2010)</p>	<ul style="list-style-type: none"> ○ Two page list of medical instruments needed to provide four contraceptive methods: hormonal implants, IUDs, female sterilization, and no-scalpel vasectomy. Second page is a list of expendable medical supplies for each method. ○ Primarily for use by providers who perform implant insertion, IUD insertion, female 	<ul style="list-style-type: none"> • Quick reference. • Brief. 	<ul style="list-style-type: none"> • No visuals.


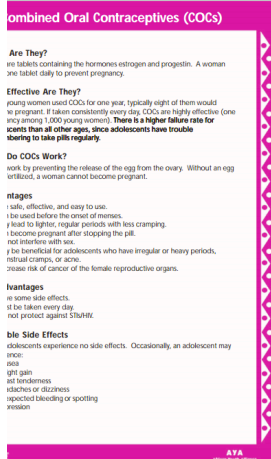
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
<p style="text-align: center;">Medical Instruments and Expendable Medical Supplies Needed to Provide Long-Acting and Permanent Methods of Contraception</p> 	<p>sterilization, and no-scalpel vasectomy.</p> <ul style="list-style-type: none"> Available in English. EngenderHealth <p>Available for download on website: http://www.engenderhealth.org/files/pubs/family-planning/LAPM-Equipment-List.pdf</p>		
<h3>Country-Specific Job Aids</h3>			
<p>Screening Checklists to Initiate Contraceptives in Kenya (Family Health International and Kenya Ministry of Health, 2008)</p> 	<ul style="list-style-type: none"> Three separate three-page flyers to use as checklist guides for screening clients who want to initiate implants, the copper IUD, or combined oral contraceptives in Kenya. Another two-page flyer is available on how to be reasonably sure a client is not pregnant prior to initiation. It is based on WHO's 2008 <i>Medical Eligibility Criteria for Contraceptive Use</i>. Applicable to doctors and nurses/midwives. Available in English and Kiswahili languages. Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 http://www.fhi360.org/en/CountryProfiles/kenya/toolsreports.htm#checklists 	<ul style="list-style-type: none"> Kenya-specific. Colorful. Comprehensive. 	<ul style="list-style-type: none"> May be slightly text heavy.
<p>Screening Checklists to Initiate Contraceptives in Uganda (Family Health International and Uganda Ministry of Health, 2008)</p>	<ul style="list-style-type: none"> Three separate three-page flyers developed with the Uganda Ministry of Health to use as checklist guides for screening clients who want to initiate implants, the copper IUD, or combined oral contraceptives in Uganda. 	<ul style="list-style-type: none"> Uganda-specific. Colorful. Comprehensive. 	<ul style="list-style-type: none"> May be slightly text heavy.

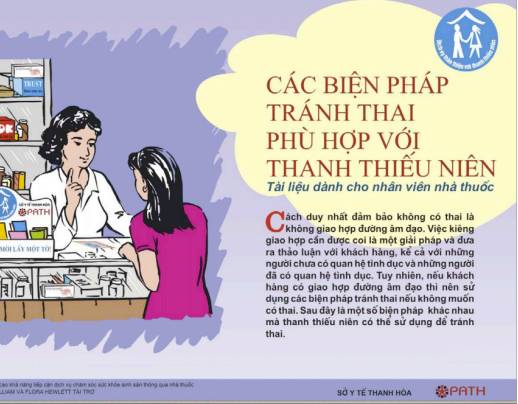
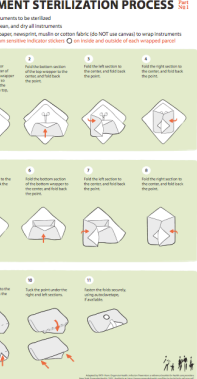
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
 <p>Checklist for Screening Clients Who Want to Initiate Use of the Copper IUD</p> <p>Most findings from the past 10 years have established that intrauterine devices (IUDs) are safe and effective for use by most women, including those who have never been pregnant. For women without IUDs, there are no contraindications to the use of IUDs. However, there are some contraindications to the use of IUDs, such as genital ulcers, such as syphilis, or a current or recent infection with chlamydia or gonorrhea. IUDs can be inserted for certain medical conditions to determine if they are appropriate for the IUD.</p> <p>Ministry of Health has developed a simple checklist for use by health providers to screen clients who want to initiate use of the copper IUD. The checklist is available in the patient education materials (PEMs) for the copper IUD. It consists of 10 questions designed to help health providers determine if their clients are eligible for the IUD. The checklist is available in the patient education materials (PEMs) for the copper IUD. It consists of 10 questions designed to help health providers determine if their clients are eligible for the IUD. The checklist is available in the patient education materials (PEMs) for the copper IUD. It consists of 10 questions designed to help health providers determine if their clients are eligible for the IUD.</p>	<p>Another two-page flyer is available on how to be reasonably sure a client is not pregnant prior to initiation.</p> <ul style="list-style-type: none"> ○ Applicable to doctors and nurses/midwives. ○ Available in English. ○ Family Health International 2224 E NC Hwy 54 Durham, NC 27713 USA 1.919.544.7040 http://www.fhi360.org/en/CountryProfiles/Uganda/index.htm#checklists 		
<p>CHW Postpartum Family Planning Counseling Flip Chart, Afghanistan (Health Services Support Chart, No Date)</p>  <p>میتود های تنظیم خانواده بعد از ولادت د زیرون خنده وروسته د کورنۍ د سبالتیا میتودونه Postpartum Family Planning Methods</p>	<ul style="list-style-type: none"> ○ Flip chart for CHWs in Afghanistan for postpartum counseling of women, including messages on LAM and transition to other methods. Unable to comment on content due to language. ○ Primarily for use by CHWs. ○ Available in Pashto and Dari. ○ Health Services Support Project Available for download: http://www.advancefamilyplanning.org/system/files/afghanistan.pppf_.pdf 	<ul style="list-style-type: none"> • Good visuals • Context specific 	
<p>Emergency Contraception Job Aid, Vietnam (PATH, 2004)</p>	<ul style="list-style-type: none"> ○ Two-page flyer/poster intended to remind pharmacy staff of the indications for use of emergency contraceptive pills, and to suggest steps in providing EC pills for young clients in Thanh Hoa. Unable to comment on content due to language. ○ Primarily for use by pharmacy staff. ○ Available in Vietnamese. ○ PATH 	<ul style="list-style-type: none"> • Very context specific. • Pharmacy staff are important cadre. 	


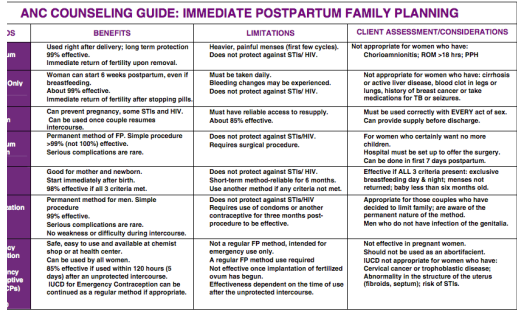
Family Planning Job Aids for Low Resource Settings

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 <p>VIÊN TRÁNH THAI KHẨN CẤP (VTTKC) Tài liệu dành cho nhân viên nhà thuốc</p> <p>Các trường hợp chỉ định dùng VTTKC: Khi một người phụ nữ nói chị ấy muốn tránh thai và:</p> <ul style="list-style-type: none"> Chị ấy đã có quan hệ tình dục không sử dụng biện pháp tránh thai trong vòng 72 giờ hoặc 3 ngày trở lại. Chị ấy đã có quan hệ tình dục trong vòng 72 giờ hoặc 3 ngày trở lại và cho rằng biện pháp tránh thai mà chị ấy dùng không có hiệu quả. Có thể là: <ul style="list-style-type: none"> Bao cao su bị thủng hoặc tuột Quên uống thuốc tránh thai từ hai viên liên tiếp trở lên và không sử dụng bao cao su Sử dụng thuốc tiêm tránh thai nhưng tiêm muộn hơn 2 tuần Tình nhâm ngày rụng trứng khi sử dụng biện pháp tránh thai Vòng tránh thai bị tuột ra hoặc đã tháo <p>Chị ấy bị cưỡng hiếp</p> <p>SỞ Y TẾ THÀNH HỒA PATH</p>	<p>PO Box 900922 Seattle, WA 98109 publications@path.org Available for download: http://www.path.org/publications/detail.php?i=1128</p>		
Adolescent Specific Job Aids			
<p>Adolescent Cue Cards (Pathfinder and African Youth Alliance, 2003)</p>  <p>Combined Oral Contraceptives (COCs)</p> <p>Are They? are tablets containing the hormones estrogen and progesterin. A woman one tablet daily to prevent pregnancy.</p> <p>Effective Are They? young women used COCs for one year. Typically eight of them would be pregnant. If taken consistently every day, COCs are highly effective (one in a million young women). There is a higher failure rate for teens than all other ages, since adolescents have trouble taking pills regularly.</p> <p>Do COCs Work? work by preventing the release of the egg from the ovary. Without an egg released, a woman cannot become pregnant.</p> <p>Advantages safe, effective, and easy to use. used before the onset of menses. lead to lighter, regular periods with less cramping. become pregnant after stopping the pill, not interfere with sex. be beneficial for adolescents who have irregular or heavy periods, menstrual cramps, or acne. reduce risk of cancer of the female reproductive organs.</p> <p>Disadvantages some side effects. if not taken every day, not protect against STIs/HIV.</p> <p>Common Side Effects adolescents experience no side effects. Occasionally, an adolescent may experience: weight gain headaches nausea or dizziness irregular bleeding or spotting breast tenderness</p> <p>AYA</p>	<ul style="list-style-type: none"> Eight two-sided cards that cover one contraceptive method each (COCs, injectables, EC, LAM, IUD, female condom, male condom, and Norplant), with information and tips specific to adolescents. Applicable to all cadres. Available in English and Portuguese languages. Pathfinder International 9 Galen St., Suite 217 Watertown, MA 02472 1.617.924.7200 Available for download: http://www.pathfind.org/site/PageServer?pagename=Pubs_Job_Aids 	<ul style="list-style-type: none"> Youth-friendly. Colorful. Fairly comprehensive 	<ul style="list-style-type: none"> Text-heavy. No images.
<p>Contraceptive Choice for Young People (PATH, 2004)</p>	<ul style="list-style-type: none"> Two-page flyer/poster intended to remind pharmacy staff of key points about ongoing contraceptive methods for their discussions with young clients. Primarily for use by pharmacy staff. 	<ul style="list-style-type: none"> Very context specific. Pharmacy staff is an important cadre. 	<ul style="list-style-type: none"> Not adaptable.

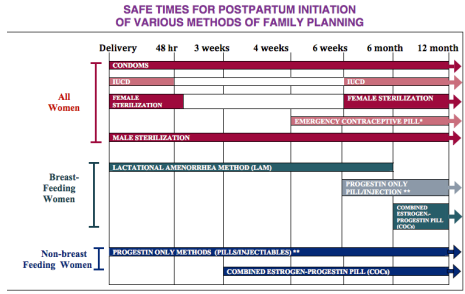
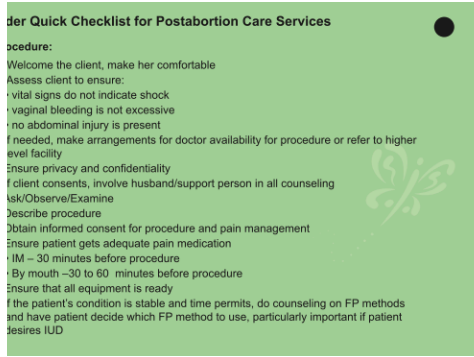
Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
	<ul style="list-style-type: none"> ○ Available in Vietnamese language. ○ PATH PO Box 900922 Seattle, WA 98109 publications@path.org Available for download: http://www.path.org/publications/detail.php?i=1129 		
Related Topics			
<p>Instrument Sterilization Process Poster (PATH, on behalf of Inter-Agency Working Group on Reproductive Health in Crises, 2010)</p> 	<ul style="list-style-type: none"> ○ Two-page poster that gives guidance on how to correctly sterilize instruments used for IUDs, implants, and permanent methods, including wrapping and use of a pressure-type steam sterilizer. ○ Primarily for use by doctors and nurses/midwives. ○ Available in English language or without text. ○ Inter-Agency Working Group on Reproductive Health in Crises Available for download: http://iawg.net/resources/jobaids.html#instrument 	<ul style="list-style-type: none"> • Clear instructions. 	<ul style="list-style-type: none"> • None noted.
<p>Contraceptive Myths and Realities Database (IPPF, 2012)</p>	<ul style="list-style-type: none"> ○ A database with counseling messages to counter more than 60 myths about contraceptive methods including combined oral contraceptives, female sterilization, implants, injectables, IUDs, male condoms, 	<ul style="list-style-type: none"> • Available for specific use in multiple countries. • Simple and easy 	<ul style="list-style-type: none"> • Web-based format may not be applicable to all contexts.

Family Planning Job Aids for Low Resource Settings

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	<p>vasectomy, and withdrawal. User simply chooses a method from a drop-down box, the myth/misperception, a country of origin and/or keywords, and information to help the provider dispel the myth appears.</p> <ul style="list-style-type: none"> ○ Applicable to all cadres. ○ Available in English. ○ International Planned Parenthood Federation <p>The entire database is available as a webpage, in Word document format, or PDF format. Available for download: http://www.ippf.org/Templates/Myths.aspx?NRMODE=Published&NRNODEGUID=%7b476CAE21-4E6C-4CDF-8C04-EB3A0EE218DF%7d&NRORIGINALURL=%2fen%2fResources%2fContraception%2f&NRCACHEHINT=Guest</p>	<p>to use.</p> <ul style="list-style-type: none"> • Available in multiple formats for use where there is no internet access. 	<ul style="list-style-type: none"> • Does not include myths about LAM and female condom.
<p>ANC Counseling Guide: Immediate Postpartum Family Planning (India Ministry of Health and Family Welfare, 2010)</p> 	<ul style="list-style-type: none"> ○ Two charts on two pages. The first is a chart outlining the benefits, limitations, and client considerations for each of seven methods. The second page is a chart showing a 12-month timeline and corresponding appropriateness of each method for three categories of women: all women, breastfeeding women, and non-breastfeeding women. ○ Primarily for doctors and nurses/midwives. ○ Available in English. ○ India Ministry of Health and Family Welfare <p>Available for download: http://rajswasthya.nic.in/Safe%20Motherhood%20day%2011.04.12/Job-aids-cg/ANC%20Counseling%20Guide%20Family%20Planning%20-English.pdf</p>	<ul style="list-style-type: none"> • Specific to postpartum initiation. 	<ul style="list-style-type: none"> • Needs adaptation to different settings for use.

Family Planning Job Aids for Low Resource Settings

Job Aid	Description/Key Messages	Pros	Cons
 <p>SAFE TIMES FOR POSTPARTUM INITIATION OF VARIOUS METHODS OF FAMILY PLANNING</p> <p>All Women</p> <ul style="list-style-type: none"> CONDOMS: Delivery to 12 months IUD: 6 weeks to 12 months FEMALE STERILIZATION: 6 weeks to 12 months EMERGENCY CONTRACEPTIVE PILLS* MALE STERILIZATION: 6 weeks to 12 months <p>Breast-Feeding Women</p> <ul style="list-style-type: none"> LACTATIONAL AMENORRHEA METHOD (LAM): Delivery to 6 months PROGESTIN ONLY PILL/INJECTION** COMBINED ESTROGEN-PROGESTIN PILL (COC) <p>Non-breast Feeding Women</p> <ul style="list-style-type: none"> PROGESTIN ONLY METHODS (PILLS/INJECTABLES)** COMBINED ESTROGEN-PROGESTIN PILL (COC) <p><small>This is to be used only in emergency. For a regular contraceptive use, take advice from ANM/Doctor at government health centre. This is available in private sector. This job aid has been developed under USAID supported MCHOP Program and adapted by the Government of Rajasthan.</small></p>			
<p>Provider Quick Checklist for Postabortion Care Services (USAID, no date)</p>  <p>Provider Quick Checklist for Postabortion Care Services</p> <p>Procedure:</p> <ul style="list-style-type: none"> Welcome the client, make her comfortable Assess client to ensure: <ul style="list-style-type: none"> vital signs do not indicate shock vaginal bleeding is not excessive no abdominal injury is present If needed, make arrangements for doctor availability for procedure or refer to higher level facility Ensure privacy and confidentiality If client consents, involve husband/support person in all counseling Ask/Observe/Examine Describe procedure Obtain informed consent for procedure and pain management Ensure patient gets adequate pain medication IM – 30 minutes before procedure By mouth –30 to 60 minutes before procedure Ensure that all equipment is ready If the patient's condition is stable and time permits, do counseling on FP methods and have patient decide which FP method to use, particularly important if patient desires IUD 	<ul style="list-style-type: none"> ○ Five page checklist for PAC services. Includes a checklist of interventions provided before, during, and after the procedure, including signs of shock, infection, and abdominal injury. The final page is a chart showing a list of contraceptive methods and the appropriate time to start each. ○ Applicable to all cadres that provide PAC. ○ Available in English, French, Spanish, and Russian. ○ USAID Postabortion Care Working Group Available for download: http://www.postabortioncare.org/materials/materials2.shtml 	<ul style="list-style-type: none"> • Specific to PAC clients. • Simple guidance. 	<ul style="list-style-type: none"> • Last page is relevant to FP only.