

FAMILY PLANNING GUIDE

ARE YOU PLANNING TO BE PREGNANT WITHIN THE NEXT YEAR?

IF NOT, HOW ARE YOU PREVENTING PREGNANCY?

About this Guide

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This guidebook is designed to provide resources to individuals who want to have children soon, sometime in the future, or not at all.

Family Planning is the practice of controlling the number of children in a family and the time between births.

Part 1: Pre-pregnancy readiness checklist and resources

Part 2: Family planning information and resources

Disclaimer: This book is meant only to provide information and is not a substitute for advice from a medical professional.

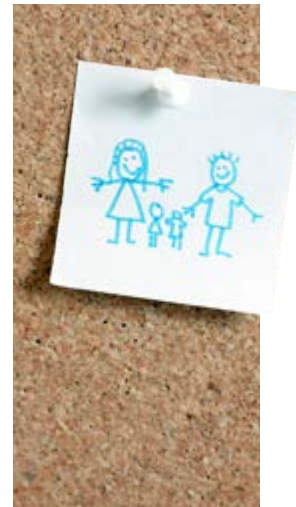


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Are you looking to get pregnant within the next year?

► Schedule a preconception check-up with an ob/gyn, midwife, family practice doctor, family nurse practitioner or reproductive health specialist.

- Even if you've been pregnant or had children before, schedule a preconception checkup. This checkup can happen anytime, even up to a year before you want to get pregnant.
- During your preconception checkup, your provider can make you aware of unknown health conditions and help you manage existing health conditions that could lead to pregnancy complications.
- Go over any medications and over-the-counter drugs you are currently taking or planning to take to ensure they are safe.
- Ask your provider if you should start taking prenatal vitamins and/or folic acid to promote good health for you and your developing baby.
- Talk with your provider about vaccine recommendations.

► Make Sure You are Up-to-Date on Your Recommended Vaccinations

- Your immune function can be lowered during pregnancy, so it's important to make sure you are doing everything in your power to stay healthy prior to becoming pregnant.
- Consider getting a flu shot.
- Get your chicken pox and rubella (measles) shots prior to pregnancy.
 - Unfortunately, you won't be able to get these shots once you are pregnant because they are not safe for a developing baby.
 - It is recommended to get tested for immunity and, if needed, get vaccinated at least one month before trying to conceive.

► Continue (or Begin) Regular STI testing

- STI testing should be a routine part of maintaining sexual health, but is especially important prior to pregnancy.
- People carrying STIs like chlamydia and gonorrhea often do not have any outward symptoms. Undiagnosed gonorrhea and chlamydia can damage the reproductive system and cause infertility, premature delivery, miscarriage and illness in your newborn.
- Syphilis, another STI, is linked to preterm labor and fetal distress as well as serious health problems for the baby after they're born.
- HIV can be passed along to a newborn during any stage of pregnancy, during labor and delivery, and even through breastfeeding, but early diagnosis and treatment can lower your risk of transmitting this illness to your newborn.
- Hepatitis B can cause chronic hepatitis B and lifelong health problems in an infant and can be transmitted to your newborn during delivery.
- You can be safely vaccinated against hepatitis B before and during pregnancy.
- Continue practicing safe sex before and during pregnancy.



► Exercise, Sleep, and Eat Well to Promote Proper Health

- Keeping active before and during pregnancy can help you reduce stress and maintain an optimal weight, reducing your risk of gestational diabetes, preeclampsia, and other health complications.
- Eating a variety of whole grains, vegetables, fruits and lean proteins will promote the health of your immune system.
- Making sure to hydrate properly is also important, at least 8 cups a day!



► Start Tracking your Cycle

- This helps you understand the best time to successfully get pregnant (or not!).
- Keeping track of your cycle is also an excellent tool to help you identify physical signs and symptoms your body may begin showing you during different stages of your menstrual cycle.
- It helps you notice things that are not regular for you, which can help alert you to a possible pregnancy.
- There are many period-tracking apps, but you can also do this using a normal calendar.

► Make a “Quit” Plan

- Illicit drug use, smoking cigarettes, alcohol consumption, and vaping are activities that should come to an end once you suspect you are pregnant.
- If you partake in any of these activities, it may be a good idea to figure out how you will stop once you become pregnant.
- It is also recommended to reduce caffeine intake to 200mg/day or less.

► Birth Spacing

- Taking time between pregnancies for your body to recover is very important for your health, and the health of future children.
- Beginning pregnancy within six months of a previous birth has been associated with increased risk of premature birth, low birth weight, complications with your placenta, congenital disorders, schizophrenia, and maternal anemia.
- It is recommended to wait 18-24 months after giving birth before conceiving another child.
- These recommendations don't apply to those who have had a miscarriage; in these cases, if and when you feel ready, there is no need to wait.

► Look into Genetic Testing and Family History

- It might be a good idea to learn about any genetic conditions in your family history that could be passed along.
- Genetic testing may be necessary, so let your care provider know if you are concerned about a family history of birth defects.
- If you have medical insurance, take a look at your insurance plan to understand what prenatal care is and is not covered.

► Health Care Coverage and Options

Many of the services outlined in this guide will require you to have some degree of health insurance.

If you find yourself in need of health insurance, the Tennessee Medicaid Presumptive Eligibility program makes immediate, temporary TennCare coverage available based on medical conditions and eligibility criteria. The program offers a prenatal component that provides some of the previously mentioned prenatal services to pregnant individuals needing health insurance coverage.

► Eligibility and Sign-up

To qualify for Presumptive Eligibility you must:

- Be a U.S. citizen or eligible immigration status
- Be a Tennessee resident
- Be pregnant
- Make under 195% of the federal poverty level income based on household size. 2023 federal poverty level income guidelines are found at www.healthcare.gov/glossary/federal-poverty-level-fpl/
- Have a Social Security number

For those interested in signing up:

For more information on Presumptive Eligibility, contact the Knox County Health Department at 865-215-5000. Keep in mind only one policy can be

given per pregnancy, however coverage extends at least 1-year postpartum and potentially beyond, depending on eligibility.

Individuals in need of coverage but find they do not qualify for Presumptive Eligibility can apply for TennCare and CoverKids at the Knox County Health Department or online through TennCare Connect at <https://tenncareconnect.tn.gov/>.

CoverKids has less strict eligibility criteria than the Presumptive Eligibility program and may be a better fit. CoverKids is for pregnant women who are not eligible for TennCare but must meet the income guidelines and do not have insurance that will cover any prenatal care.



► Pregnancy Resource: Doulas

What is a doula?

A doula is a trained professional who provides continuous physical, emotional, and informational support to their client before, during, and for a period after childbirth to help them achieve the healthiest, most satisfying experience.



► Pregnancy Resource: Midwives

What is a midwife?

Midwives are health care providers who deal specifically with pregnancy, childbirth, newborn care and postpartum health. Midwives tend to be more holistic and supportive of natural approaches to childbirth.

People tend to opt for a midwife in addition to or in place of a physician when they want a nonmedicated or home birth.

► Pregnancy Prevention

Many women do not consider their short- and long-term reproductive goals, but it is beneficial to think through choices to maximize the likelihood of achieving what you want with the healthiest outcomes.

Family planning is defined as planning intended to determine the number of and spacing between one's children by using effective methods of birth control.

The current rate of unintended pregnancy is 49%. Approximately 50% of unintended pregnancies occur in a month in which the woman used some form of contraception. This can be explained by:

- Inconsistent or improper use
- Discontinuation because of side effects
- Uncertainty about pregnancy desires
- Method failure
- Partner sabotage (reproductive coercion)

Family Planning methods for pregnancy prevention

► Methods of Birth Control

Low maintenance

Birth control implant
Non-hormonal IUD
Hormonal IUD

Used on a schedule

Birth control shot
Vaginal ring
Birth control patch
Birth control pill

Used every time

Condom (male and female)
Diaphragm
Birth control sponge
Spermicide and gel
Cervical cap



Lifestyle

Fertility awareness
Pull-out method
Breastfeeding as birth control
Abstinence

Permanent

Voluntary sterilization
Vasectomy

► Risks and Complications

How sure are you that you will be able to use your chosen birth control method?

- Unfortunately, with all methods of birth control, there are potential risks and complications.
- Even so, they are still very necessary if you plan on being sexually active.
- It's important to do your own research on whichever type of birth control method you choose, and be aware when your body is telling you something is off.

► Risks and Side Effects

Spermicides

May make STIs more likely, and 29% of people who use it get pregnant . . . during the first year of use. They can also cause irritation.

Diaphragms

They must be fitted by a doctor and cannot be used during your period due to increased risk of toxic shock syndrome.

Birth control sponge

Can be difficult to insert and cannot be used during your period.

Birth control pill

Has been associated with a variety of potential complications such as blood clots, increased blood pressure, weight gain, nausea, depression, anxiety, and headaches.

Birth control patch

Can cause skin irritation, blood clots, nausea, and other complications similar to the pill.

Birth control ring

Also causes similar complications as the pill.

Birth control shot

May cause spotting, can delay return to normal fertility after stopping injections.

IUD

May cause irregular bleeding , and more painful periods.

Method	Name	Description/Brand Name	Effectiveness	Details	Cost/Availability
Low Maintenance, Long-Acting and Reversible	Arm implant	Small rod that a doctor or nurse surgically inserts into your arm. Brand name is Nexplanon.	99%	Lasts 3 years and can be removed sooner. Does not protect against STIs, including HIV.	\$0-\$1,300 (free at KCHD Women's Health Clinic)
	Non-hormonal intrauterine device	Small device placed in your uterus (aka IUD). Brand name is Paragard.	99%	Lasts 10 years and can be removed sooner. Does not protect against STIs including HIV.	\$0-\$1,300 (free at KCHD Women's Health Clinic)
	Hormonal intrauterine device	An IUD, a small device that releases a tiny amount of the hormone progestin into your body over several years. Brand names are Mirena, Liletta, and Skyla.	99%	Lasts 3-8 years and can be removed sooner (free at KCHD). Does not protect against STIs including HIV.	\$0-\$1,300 (free at KCHD Women's Health Clinic)
Used on a Schedule	Birth control (depo) shot	An injection you get every three months to prevent pregnancy.	96%	Does not protect against STIs including HIV.	\$0-\$150 (free at KCHD Women's Health Clinic)
	Vaginal ring	Flexible ring placed inside vagina. Depending on type of ring, it's changed either about once a month, or worn for three weeks, removed for one week then cycle repeats.	93%	Does not protect against STIs including HIV.	\$0-\$200 (based on sliding fee scale at KCHD)
	Birth control patch	Patch is worn on your body (belly, butt, arm, or back) and must be switched out weekly or as directed, to be most effective.	93%	Does not protect against STIs including HIV.	\$0-\$150 (Available by prescription only)
	Birth control pill	Medication taken every day, preferably at the same time each day. There are two types of birth control pills, but they come in many different strengths.	93%	Does not protect against STIs including HIV.	\$0-\$50 (based on sliding fee scale at KCHD)
Used Every Time	Condom	A thin stretchy covering worn on the penis during sex is one of the few contraceptive methods that also protect against STIs.	87%	Offers protection against STIs including HIV and can be used with other forms of birth control.	\$0-\$40 (free at KCHD Women's Health Clinic)
	Internal condom	Small plastic pouches placed inside your vagina, creating a barrier (aka a female condom).	79%	Does offer protection against STIs including HIV. Can be used with other forms of birth control.	\$0-\$3
	Diaphragm	Shallow, bendable cup placed inside your vagina and worn during intercourse. This method works best when used with a spermicide cream or gel.	87%	Does not protect against STIs including HIV.	\$0-\$75
	Spermicide	Over-the-counter contraceptive cream, gel, film, foam, or suppository that you put inside your vagina at least 10-15 minutes before intercourse.	70%	Can be used with other forms of birth control. Does not protect against STIs including HIV.	\$0-\$270
	Sponge	Made from soft, squishy plastic that you place deep in your vagina before intercourse. Can be used along with condoms and spermicide.	78% - 86%	Can be difficult to insert. May cause vaginal irritation. Does not protect against STIs including HIV.	\$0-\$15
Lifestyle Methods	Fertility awareness	Involves tracking ovulation and avoiding sex on fertile days. Can be done by checking your temperature, vaginal discharge, and/or charting your menstrual cycle.	77% - 98%	Most effective when all three tracking methods are combined, aka using the "symptothermal method."	\$0-\$20
	Withdrawal	The withdrawal method is when the penis is pulled out prior to ejaculation.	78%	Even pre-ejaculate can contain semen, so this method works best when combined with another birth control method.	No cost
Permanent Methods	Sterilization (tubal ligation)	Surgical procedure permanently prevents pregnancy.	99%		\$0-\$6,000
	Vasectomy	Male version of sterilization. It's a surgical procedure that blocks sperm from leaving the body.	99%		\$0-\$1,000

► Emergency Methods

- The **emergency contraception pill**, aka the morning-after pill, can be used to stop pregnancy after having sex without using a method of birth control.
- There are two types: Ella, which contains ulipristal acetate, and other brands like Plan B One Step, Take Action, My Way and others that contain levonorgestrel.
- The pill is most effective if taken within 72 hours after having sex, but Ella can be taken up to five days after unprotected sex while other brands can be taken up to three days after unprotected sex.
- 75% effective but is not effective for women over 165 lbs.
- Can cost \$0-\$50 (free at KCHD Women's Health Clinic).
- **IUD** as discussed before can also be used as emergency contraception if put in within five days of unprotected sex.
- 99% effective
- Can cost \$0-\$1,300 (free at KCHD Women's Health Clinic).



Breastfeeding as birth control

- Nursing every four hours in the day and every six hours in the night can be very disruptive to everyday life.
- Takes a great deal of time and energy
- Only prevents pregnancy for about six months postpartum



Pull-out method as birth control

- Is not a reliable way to prevent pregnancy because it takes a great deal of control and timing.
- Is only recommended to use in conjunction with another more effective means of birth control.
- A partner can still release prior to ejaculation, which can result in pregnancy.
- Sperm on the skin in nearby areas is still able to work its way into the uterus.

Fertility awareness as birth control

- Ovulation cycles must be tracked properly in order to work.
- Every body is different and can be unpredictable. Some months you may ovulate earlier or later than expected, throwing off your ability to track.

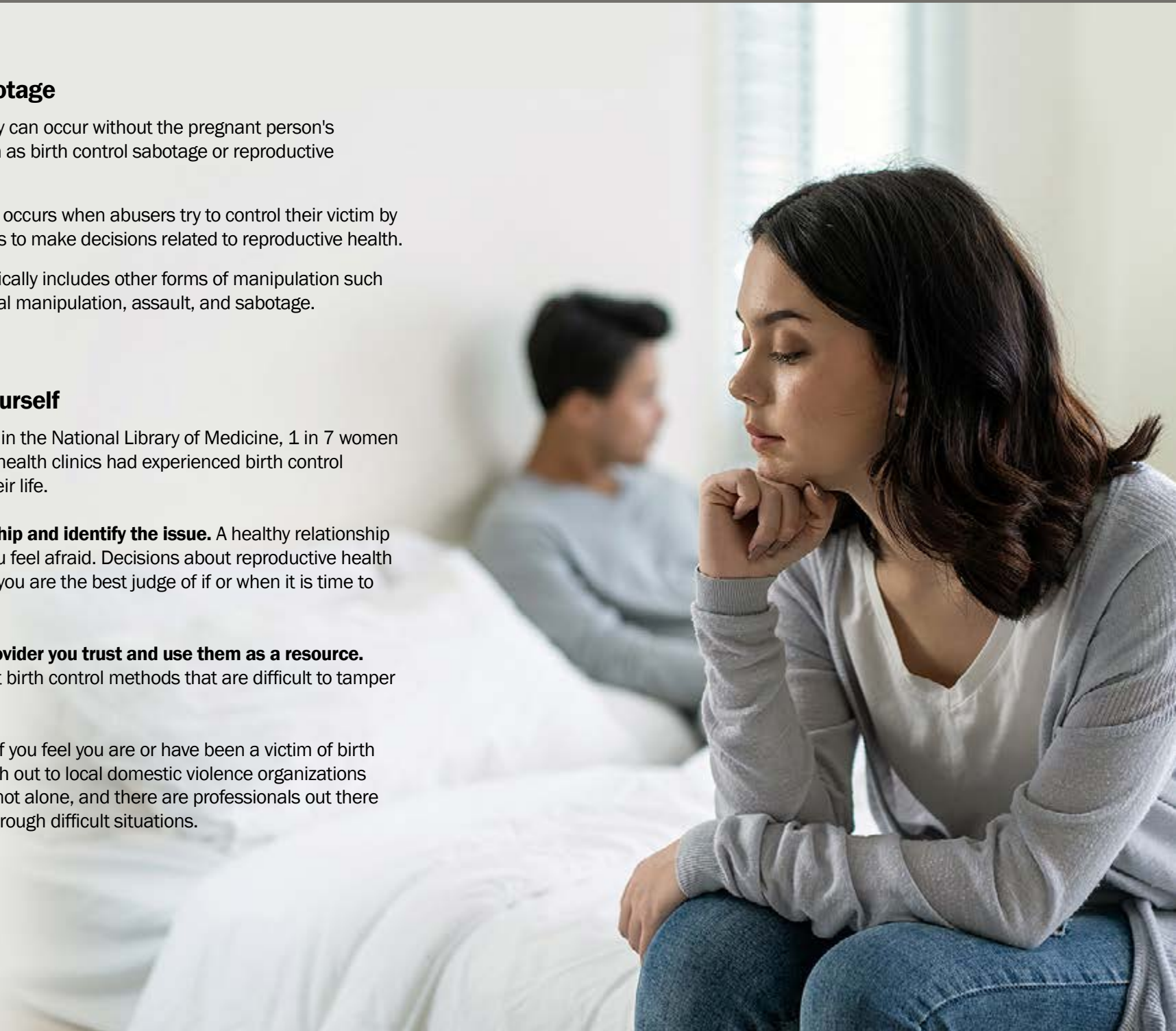
► Birth Control Sabotage

- Sometimes, pregnancy can occur without the pregnant person's consent. This is known as birth control sabotage or reproductive coercion.
- Reproductive coercion occurs when abusers try to control their victim by restricting their abilities to make decisions related to reproductive health.
- This form of abuse typically includes other forms of manipulation such as blackmail, emotional manipulation, assault, and sabotage.

► How to Protect Yourself

In a recent study published in the National Library of Medicine, 1 in 7 women ages 16-29 who attended health clinics had experienced birth control sabotage at one point in their life.

- **Assess your relationship and identify the issue.** A healthy relationship should never make you feel afraid. Decisions about reproductive health are yours to make, so you are the best judge of if or when it is time to take a step.
- **Find a health care provider you trust and use them as a resource.** A provider can suggest birth control methods that are difficult to tamper with.
- **Get outside support.** If you feel you are or have been a victim of birth control sabotage, reach out to local domestic violence organizations for guidance. You are not alone, and there are professionals out there trained to guide you through difficult situations.



► References

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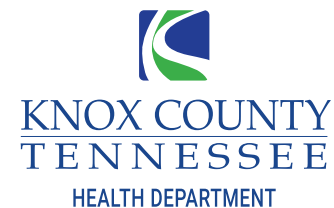
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