

Planning Your Family

Thinking about the future

Why think about family planning right now?

Many new parents tell us they are not thinking about family planning right after their baby is born. But your healthcare provider wants to make sure you and your family have a healthy start to your new life. This is why your provider will ask you about your plans for *contraception* (birth control) before you leave the hospital. Most types of birth control can be safely started right away.

One reason to start using birth control right away is that problems can occur when a woman becomes pregnant too soon after giving birth. These problems include a higher risk of:

- Premature birth
- Bleeding behind placenta and other problems in pregnancy
- Low birth weight
- Birth defects
- Problems with parent-child relationships

We advise waiting at least 1 year between pregnancies for best health of mothers and their babies.

What does family planning involve?

The first step is to think about what you want for yourself and your family. Find time to talk with your sexual partner or partners about the future.



Your new baby will affect your plans for your family.



Talk with your partner about using 2 birth control methods at a time to increase your protection.

Some things to keep in mind as you plan are:

- Your overall health and how heavy your periods are
- How often you have sex
- Your ideal family size
- Protection against the spread of sexually transmitted infections

Which form of birth control is best?

Birth control methods have different success rates. When you hear someone say, “Condoms prevent pregnancy 82% to 98% of the time,” it means that:

- Condoms prevent pregnancies for 82 to 98 couples out of 100. The lower number (82%) tells how successful 100 couples were when using condoms for 1 year. The higher number (98%) is the expected success rates for 100 couples if they use condoms the right way every time they have sex.
- **Between 2 and 18 couples out of 100 will become pregnant if they use only condoms for birth control.**

This is why we advise using **2 birth control methods at a time**. Doing this will increase your protection. For example:

If a couple uses **both** a method that has a 95% prevention rate **and** a method that has a 90% prevention rate, the combined prevention rate is 99.5%. That means there are **only 5 pregnancies among 1,000 couples** who used both birth control methods for 1 year.

Here are some questions to help you decide which method of birth control to use:

When do you think you will want to have another baby? Or do you prefer not to have any more children?

There are different birth control methods to think about, depending on what you want. Some are permanent, and some can be reversed.

Many reversible methods are just as effective as permanent options. These methods may be a good option even if you do not plan to get pregnant again.



Talk with your provider about the best kind of birth control for you and your health.

Reversible Birth Control

If you use *reversible* birth control, you can stop using them and return to your natural chances of becoming pregnant. Some reversible birth control methods are:

- Intrauterine device (IUD)
- Implant (Nexplanon)
- Injection (Depo-Provera)
- Male and female condoms
- Diaphragms
- “Morning after” pill
- Oral contraceptives (the Pill)
- Vaginal ring (NuvaRing)
- Transdermal patch (Ortho Evra)
- Natural family planning (fertility awareness) methods
- Spermicides

Permanent Birth Control

People who want *permanent* birth control have decided they do **not** want to have more children. *Sterilization* surgeries work well to prevent pregnancy for the rest of your life.

- For females: Both a *tubal ligation* and a *hysteroscopic tubal occlusion (Essure)* prevent eggs from reaching the uterus.
- For males: A *vasectomy* prevents sperm from being released during ejaculation.

Vasectomy is usually safer and more effective than tubal ligation.

Can you handle the side effects of birth control? What if a certain type makes you sick?

There are many ways to prevent pregnancy. Your provider can help you find a safe method that works for you, with the least amount of side effects. Many types of birth control also have helpful effects, such as lighter periods or less cramping with periods.

If you smoke or have high blood pressure, migraines, or a history of blood clots:

- It may not be safe for you to use birth control that contains estrogen.
- Talk with your provider. Tell them about any health issues you have and any medicines you already take.

If you are breastfeeding:

- Birth control methods that contain the hormone *estrogen* may decrease your breast milk. Most birth control pills, the patch, and

the vaginal ring contain estrogen. Once breastfeeding is going well, most women find that birth control that contains estrogen does not affect their milk supply.

Doctors believe it is safe to use birth control methods that contain the hormone *progesterone* when you are breastfeeding. These include the mini-pill, Nexplanon, and Depo Provera. The tiny amount of progesterone that enters breast milk from these products does not seem to be a problem for babies.

There are very few studies about how progesterone affects milk supply. But, most reports say that progesterone does not affect milk production. To learn more, visit <https://toxnet.nlm.nih.gov/newtoxnet/lactmed.htm>.

- Any type of *intrauterine device* (IUD) is considered safe while you are breastfeeding.
- If you are concerned about your breast milk levels, talk with your doctor about when to start your birth control method.

How easy is it for you to use your birth control?

A birth control method that is easy for one person might be too involved for another. It can be hard to remember to take a pill every day, or to use condoms every time you have sex.

There are some types of birth control that you don't have to think about very often. These are called **highly effective reversible contraception** (*long-acting reversible contraception*, or LARC).

LARC is the most effective form of reversible contraception. Women who use LARC are much less likely to have an unplanned pregnancy than those who use other forms of reversible contraception.

LARC methods can be removed *at any time* if you decide that you want to get pregnant, or want to switch to a different form of birth control. They include:

- **Intrauterine devices (IUDs)**. These work for several years, depending on which type you choose:
 - *Hormonal IUDs* (Skyla, Kyleena, Mirena, Liletta) last between 3 and 7 years depending on the type. They contain a small amount of progesterone, which makes your periods lighter.
 - *Copper IUD* (Paragard) is the only IUD that does not contain hormones. These IUDs last for up to 12 years.

- **Implant (Nexplanon).** This implant lasts for 5 years. The manufacturer advises inserting Nexplanon 4 weeks after giving birth, but it is often inserted while you are still in the hospital. Talk with your doctor about this product, and visit the “Questions and Answers” page on the Nexplanon website: <https://nexplanon.com/questions>.

Nexplanon contains the hormone etonogestrel. A small amount of this hormone will pass into your breast milk. A 3-year study did not find any effects on the growth and development of children whose mothers had the Nexplanon implant.

Do you need protection from *sexually transmitted infections (STIs)* and the *human immunodeficiency virus (HIV)*?

During sex, *barrier methods* such as male and female condoms offer the best protection from these diseases. Whatever you choose as your preferred method of birth control, you must still use the male or female condom to protect yourself against STIs and HIV.

Choose Birth Control That You Will Use

The best way to prevent an unplanned pregnancy is to pick a method of birth control that you will use **the right way every time**. For many women, the easiest methods to use are LARC methods such as the IUD and implant (Nexplanon).

Remember that:

- **Half of pregnancies in the U.S. are unplanned.**
- **Half of the unplanned pregnancies in this country occur in women who are using birth control**

The Truth About How to Prevent Pregnancy

These statements **are true**:

- Usually the time during your period is a safe time to have sexual intercourse – but you **can** still get pregnant during this time.
- Unprotected sex “just one time” **can** make you pregnant.
- Urinating after sexual intercourse does **not** prevent pregnancy. But, it can help prevent urinary tract infections.
- *Douching* (rinsing your vagina), powders, deodorants, and other feminine hygiene products do **not** prevent pregnancy. They also



Half of all pregnancies in the U.S. occur in women who are using birth control.



Be sure both you and your partner know how to care for and use condoms.

do not have any health benefits. In fact, they can increase your risk of certain vaginal infections.

- You do **not** need to have an orgasm to get pregnant.
- You are **not** too old to get pregnant, unless you have gone through menopause (natural or surgical).
- You **can** get pregnant while breastfeeding.
- You **can** get pregnant soon after giving birth, even before your periods return.
- Many people who are “infertile” can still get pregnant.

Choosing When to Have Children

When you make choices based on the facts, you increase your chances of having the number of children you want, when you want to have them. Using birth control the right way takes some time – but most agree that it is much easier to make the commitment to birth control than it is to deal with an unplanned pregnancy.

To Learn More

Washington State Department of Health has a brochure called “Birth Control: Choosing the method that’s right for you.” It explains:

- 14 birth control methods used most often and how they work
- When to use it
- How to get it
- Positives and negatives
- Known side effects

The brochure is online in English and Spanish:

- **English:** http://here.doh.wa.gov/materials/birth-control-choosing-the-method-thats-right-for-you/14_BCmethods_E12L.pdf
- **Spanish:** http://here.doh.wa.gov/materials/birth-control-choosing-the-method-thats-right-for-you/14_BCmethods_S12L.pdf

Questions?

Your questions are important. If you have questions about family planning, ask your healthcare provider at your next visit or while you are in the hospital.

Now, please go back to the Table of Contents in this workbook and check the box so your nurses will know you have read this chapter.