LONG-ACTING REVERSIBLE CONTRACEPTIVES IN CRISIS SETTINGS

RUMORS AND MISCONCEPTIONS VS. FACTS AND REALITIES OF LARCS

Instructions for Facilitator: Mix and Match Game:

- Cut out all the boxes (mix and match pieces) for "Rumors and Misconceptions" and "Facts and Realities to address Rumors and Misconceptions" (below).
- Divide participants into two groups. Give one group all of the "Rumors and Misconceptions" and the other group all of the "Facts and Realities to address Rumors and Misconceptions."
- · Ask the group that has the "Rumors and Misconceptions" to read one of the rumors out loud.
- Ask the other group to identify "Facts and Realities" that dispel the rumor or misconception.
- Continue in this way until matches have been identified and read aloud for all the rumors and misconceptions.
- Explain that participants can find all these rumors and misconceptions and the facts and realities to combat them in the following resources: Rumors and Misconceptions about IUDs and Rumors and Misconceptions about Contraceptive Implants.

RUMORS AND MISCONCEPTIONS ABOUT LARCS

The IUD might travel inside a woman's body to her heart or her brain.
 A woman cannot get pregnant after using an IUD.
 If a woman with an IUD becomes pregnant, the IUD gets embedded in the baby's forehead.
 The IUD deteriorates in the uterus after prolonged use.
 An IUD cannot be inserted until 6 weeks postpartum.
 Implants cause infertility.
 Implants move to other parts of the body like your heart or brain.
Implants stop monthly bleeding and dirty blood collects in your body.
Implant insertion is painful, and removal is difficult.
Implants cause abortion if you are pregnant at the time of insertion.

FACTS AND REALITIES TO ADDRESS RUMORS AND MISCONCEPTIONS ABOUT LARCS

There is no passage from the uterus to the other organs of the body. The IUD is placed inside the uterus and — unless it is accidentally expelled—stays there until a trained health care provider removes it. If the IUD is accidentally expelled, it comes out of the vagina, which is the only passage to the uterus.

The provider can teach the client how to feel for the string, if the client is comfortable doing so.

A woman's fertility returns to normal very soon after the IUD is removed. Studies have shown that most women who discontinue the IUD become pregnant as rapidly as those who have never used contraception.

The baby is very well protected by the sac filled with amniotic fluid inside the mother's womb. If a woman gets pregnant with an IUD in place, the health provider will remove the IUD immediately due to the risk of infection. If for some reason the IUD is left in place during a pregnancy, it is usually expelled with the placenta or with the baby at birth.

Once in place, if there are no problems, the IUD can remain in place up to 12 years. The IUD is made of materials that cannot deteriorate. The client can keep it longer, if she desires, without any risk.

A trained provider can insert the IUD immediately after delivery (within 10 minutes of delivery of the placenta), or during a cesarean section, or up to 48 hours following delivery. Postpartum insertion of an IUD has been shown to be safe, effective and convenient for women, just like the regular or interval IUD. Postpartum insertion appears to have a lower chance of perforation as the instrument used is blunt and the uterine wall is thick just after the pregnancy.

After the 48-hour postpartum period, a Copper T 380A may be safely inserted at four or more weeks postpartum.

It has been shown that IUDs do not affect breastmilk and can be safely used postpartum by breastfeeding women.

If placed correctly it is highly unlikely that they can move. They remain where they are inserted until they are removed. In rare cases, a rod may start to come out of the skin, usually during the first four months after insertion.

Implants stop working once they are removed. Their hormones do not remain in your body. The implant will not affect your ability to have another child. You can become pregnant again once your implant is removed.

Changes in menstrual bleeding—like spotting, prolonged bleeding or no menstrual bleeding—are common. These side effects are normal and are not a sign of sickness. Blood does not build up in your body.

Implants do not cause an abortion. There is good evidence that the implant will not harm a baby if you are already pregnant when the implant is put in. Your provider will check carefully to make sure you are not pregnant before the implant is inserted.

Health providers who insert implants have been specially trained to insert them. The provider will give you a small injection in your arm so that you do not feel the insertion. The incision is very small and does not require stitches. Removal of implant is easy if it is inserted correctly. Women are advised to go to the trained provider who inserted it for removal.

Adapted from USAID Maternal & Child Survival Program (MCSP), and Jhpiego. Long-Acting Reversible Contraception (LARC) Learning Resource Package, 2017.

This factsheet and its contents were referenced from the LARC Learning Resource Package from USAID's Maternal & Child Survival Program (MCSP) implemented by Jhpiego