 **Where Women Have No Doctor - A Health Guide for Women**
(Hesperian Foundation, 1997, 600 p.)

➔  **Chapter 8: Growing Older**

 **(introduction...)**

 **The End of Monthly Bleeding (Menopause)**

 **Taking Care of Your Health**

 **Sexual Relations**

 **Common Health Problems with Aging**

 **(introduction...)**

 **Weak blood (anemia)**

 **Heavy monthly bleeding or bleeding in the middle of the month**

 **Breast lumps**

 **High blood pressure**

 **Problems passing urine and stool**

 **Fallen womb (prolapsed uterus)**

 **Swollen veins in the legs (varicose veins)**

 **Back pain**

 **Joint pain (arthritis)**

 **Weak bones (osteoporosis)**

 **Problems with seeing and hearing**



Anxiety and depression Mental confusion (dementia)



Working for Change

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 8: Growing Older



Figure

Today more and more people are living longer. Cleaner living conditions, *vaccinations* and better *nutrition* help prevent many diseases and modern medicines cure others.

◆ ***Everyone is the age of their heart.***

- Guatemalan proverb

But longer life has also brought difficulties. First, older people tend to have more health problems than younger people. Although most of these problems are not caused by age itself, the changes age makes in a person's body can make the problems more serious or difficult to treat.

Second, as the world changes and younger family members move away from their communities to earn a living, many older people are left to care for themselves. Or, if they do live with their children, older people may feel like a burden in a family or community that no longer values and respects age.

Older women are more likely to face these problems than older men, because women usually live longer and often reach old age without a partner. So in this chapter we describe how older women can take care of their health, treat common health problems of aging, and work to improve the difficult conditions under which many older women live.

The End of Monthly Bleeding (Menopause)

One of the main signs of growing older is that a woman's *monthly bleeding* ends. It may end suddenly, or it may stop gradually over 1 to 2 years. For most women this change happens between the age of 45 and 55.

Signs:

- **Your monthly bleeding changes. It may just stop, or you may bleed more often for a while. Or you may stop bleeding for a few months and then bleed again.**
- **At times you may suddenly feel very hot or sweaty (this is also called having 'hot flashes'). This can wake you up at night.**
- **Your vagina becomes less wet and smaller**
- **Your feelings change easily.**

These signs happen because a woman's *ovaries* stop making eggs, and her body makes less of the hormones *estrogen* and progesterone. The signs will start to go away as her body gets used to less estrogen.



hormones
Figure

How a woman feels about the end of her monthly bleeding sometimes depends on how she is affected by the changes in her body. It also depends on how her community thinks about and treats older women. She may be relieved not to have her monthly bleeding every month. But she may also feel sad that she cannot have any more children.

What to do during menopause:

If you are having signs that make you uncomfortable, try the following:

- Dress in clothes that you can take off easily when you begin to sweat.



Figure

- Get regular exercise.



Figure

- Avoid hot or spicy foods or drinks. They can cause hot flashes.



Figure

- Do not drink much coffee or tea. They contain *caffeine*, which can make you feel nervous and prevent you from sleeping.



Figure

- If you drink alcohol, drink only small amounts. Alcohol can increase bleeding and hot flashes.



Figure

- Stop smoking or chewing tobacco. It can cause unusual bleeding and make problems with weak bones much worse.



Figure

- Explain to your family that your feelings may change easily. It may also help to discuss how you feel with other women who are going through menopause.

- Ask about the use of traditional remedies in your community. Often women who have already been through menopause will know ways to help you feel better.

Medicines for problems during menopause

If a woman's signs of menopause are so severe that they stop her from doing her daily work or keep her from sleeping at night, she can try taking medicine for a few months to see if she feels better. This is called 'hormone replacement therapy', or HRT. The most common medicine is made from estrogen and progesterone. If a woman decides to take HRT, she should always take both hormones, unless she has had her womb removed by surgery. Estrogen taken by itself can cause *cancer* of the womb.

◆ *Although women sometimes feel uncomfortable during menopause, only a few need medical treatment.*



problems of the
womb, 380

depression, 419

breast cancer, 382

Figure

HRT can stop hot flashes and make the vagina more wet. If taken for a long time, HRT may also help reduce other health risks, such as weak bones and heart

disease, which come from having less estrogen in the body. But HRT can be costly, and may cause an increased risk of *gallbladder* disease. The medicine may also cause *side effects*, such as bleeding from the *vagina*, *cramping* pains, *nausea*, tender breasts, weight gain, and *depression*.

◆ *Taking hormones does not cause breast cancer. But if a woman already has cancer, hormones can make it worse.*

Before taking HRT, a woman needs to think about its risks and *benefits*. HRT is usually not recommended for women who have had trouble with *blood dots*, breast cancer, or liver or gallbladder disease. Be sure to talk to a health worker about the right dose.

◆ *Always take the lowest possible dose of the medicines.*

A woman can stop taking the medicine at any time, but she should do so slowly - or her signs may come back.

Taking Care of Your Health

Just as a girl's body changes when she becomes a woman, so a woman's body changes when her childbearing years end. Menopause and aging cause changes in bone strength, muscle and joint strength and flexibility, and overall well-being.

A woman can make a big difference in living her later years with energy and good health by:

Eating well. As a woman grows older she still needs *nutritious* food to keep her

body strong and to fight disease. Her need for certain kinds of food also increases. Because her body makes less estrogen, it helps to eat foods high in plant estrogens, such as soy beans, tofu (bean curd), lentils, and other beans. Since her bones become less dense as she ages, it helps to eat foods high in *calcium*, a *mineral* that makes strong bones.



**eating for good
health, 165**

calcium-rich foods, 168

Figure

Sometimes older people feel less like eating than they used to. This may be caused by changes in taste and smell, which make eating less pleasurable. Or changes in the body that come from aging can make a person quickly feel full after starting to eat. But this does not mean that older people need less nutritious food. They need encouragement to continue to eat well, and to eat a variety of foods.

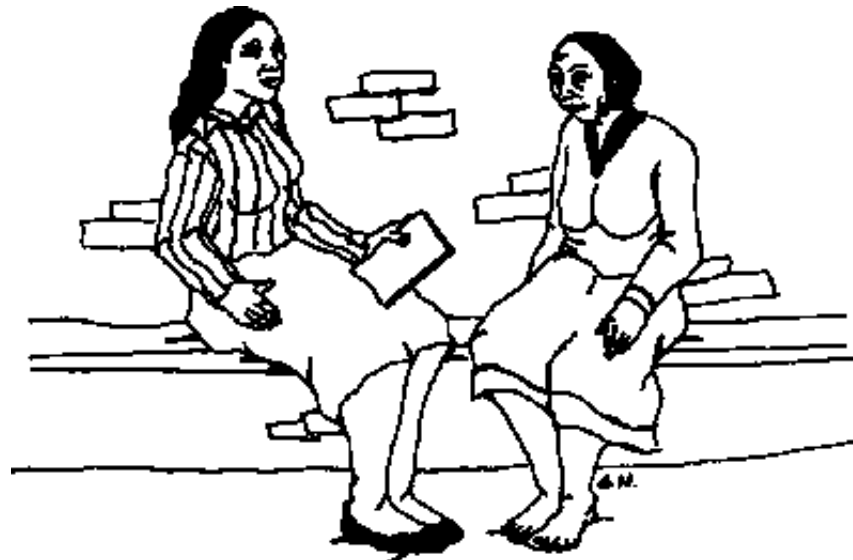
Drinking a lot of liquids. As a person ages, the amount of water in the body decreases. Also, some older people drink less to avoid having to pass urine during the night or because they are afraid of leaking urine. All these things can cause *dehydration*. To prevent this, drink 8 glasses or cups of liquid every day. To avoid getting up at night to pass urine, try not to drink anything for 2 to 3 hours before going to sleep.

Getting regular exercise. Everyday activities, such as walking, playing with grandchildren, going to the market, cooking, and farming can all help keep a woman's muscles and bones strong, and prevent stiff joints. Regular exercise will help maintain weight and prevent heart disease.



Figure

Treating illness early. Some people think that getting older means being sick much of the time. But this is not true. If a woman does not feel well, she may have an illness that can be treated, and that has nothing to do with age. She needs treatment as soon as possible.



Figure

Staying active. A woman will stay healthier and happier if she is active and productive. Try to take up an activity, join a group, or work on a community project. This may be a good time for a woman to work for better conditions in the community. Here is an example:

◆ Try to see a health worker if you feel ill and have been unable to treat the problem yourself.





Figure

Louise Waithira Nganga is a coffee farmer in Kandara town, in Kenya. In 1991, as a member of an organization planting trees in Kenya, she met a group of women farmers who complained about a coffee factory upstream. The fertilizers and chemicals the factory used to make coffee were getting into the river, and the women's cows were getting sick and dying from drinking the dirty water.

Soon many of the women began meeting to talk with Louise. They became aware of how the river also affected their health and their children's health. They decided to put pressure on the district officers to force the factory to keep waste out of the river

Louise, however, always insisted that rights and responsibilities go together. So she also helped the women realize how their own habits affected other people down the river. For example, when they cleaned their fertilizing machines or washed their clothes in the river, it was harmful for the health of the people downstream. As Louise said, "We must first be responsible ourselves so that we may, in clear conscience, demand our rights."

In 1993, Louise and her women farmers created an organization called Rural Women's Sanitation. Whenever the river is in danger from polluting factories, Louise is able to organize as many as 100 women, who 'pay a visit' to the local authorities, and inform them of the problem. Besides taking care of the river, the group is building latrines and demanding that local governments reclaim public wells that have been taken over by private owners.

Louise has stopped planting trees, but has no regrets. "There were more pressing problems that were part of Kandara soil itself." She tells her fellow women, "God will not come to earth to solve your problems. The government cannot know what your problems are. Only you can make sure they get solved."

Sexual Relations

◆ ***There is no reason based on age alone that a woman cannot enjoy sex for as long as she lives.***

For some women, menopause means freedom from the sexual demands of marriage. Other women become more interested in sex because they no longer fear an unwanted pregnancy. All women, though, continue to need love and affection.



Figure

As a woman grows older, some of the changes in her body may affect her sexual relations:

- **She may take longer to become excited during sex (this also happens to men).**
- **Her *vagina* may be more dry, which can make sex uncomfortable, or make her get an *infection* of the vagina or the urine system more easily.**



sexual pleasure, 192

infections of
the vagina, 264

infections of the urine
system, 366

Figure

◆ ***Do not use petroleum gel or oils that contain perfumes to increase wetness in the vagina. These can cause irritation.***

What to do:

- **Try to take more time before having sex, so your vagina can make its natural wetness. You can also use spit (saliva), oils made from vegetables (peanut oil, corn oil, olive oil), or other lubricants like spermicides during sex.**

IMPORTANT

DO not use oils for wetness if you are using condoms. Oil will weaken the condom and it may break.

- **If it is difficult for your partner to get or keep his *penis* hard (erection), try to learn what he likes. Touching him may help make him excited.**

- **To prevent urine problems, do not try to make the vagina dry before having sex. Pass urine as soon as possible after sex to flush out germs.**



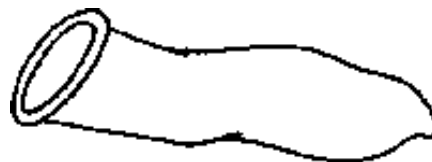
**dry sex
Figure**

Protecting yourself against pregnancy and sexually transmitted diseases (STDs)

You can still become pregnant until your monthly bleeding has stopped for one full year. To prevent unwanted pregnancy, you should continue to use a family planning method during that time.

If you are using a *hormonal method of family planning* (the pill, injections, or implants), stop using it around the age of 50 to see if you are still having monthly bleeding. Use another method of family planning until you have no monthly bleeding for one whole year (12 months).

Unless you are certain neither you nor your partner has an STD, including HIV/AIDS, be sure to use a condom each time you have sex - even if you can no longer become pregnant.



Figure

Common Health Problems with Aging

The following pages describe some of the most common health problems of older women. For other problems, like gallbladder problems, heart trouble, stroke, *thyroid gland* problems, sores on the legs from poor blood flow, and difficulty sleeping, see *Where There Is No Doctor* or another general medical book.

Weak blood (anemia)

Although many people think that anemia is a problem only of young women, it also affects many older women - most often because of poor nutrition or heavy monthly bleeding.

Heavy monthly bleeding or bleeding in the middle of the month

Between the ages of 40 and 50, many women have changes in their monthly bleeding. Some have heavier bleeding, or bleeding that lasts longer. Heavy bleeding that goes on for months or years can cause anemia.



Figure



heavy bleeding, 360

anemia, 172

fibroids, 380

polyps, 380

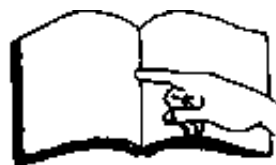
Figure

The most common causes of heavy monthly bleeding and bleeding that lasts longer are:

- **hormone changes**
- **growths in the *womb* (*fibroids* or *polyps*)**

Treatment:

- **Eat foods every day that are rich in *iron*, or take iron pills.**
- **Take 10 mg medoxyprogesterone acetate once a day for 10 days. If bleeding has not stopped at the end of 10 days, take the medicine for another 10 days. If you are still bleeding, see a health worker.**
- **Try to see a health worker for heavy bleeding that has lasted for more than 3 months, for bleeding in the middle of the month, or for bleeding that starts 12 months or more after menopause. A trained health worker will need to scrape out the inside of the womb (*D and C*) or do a *biopsy* and send the tissue to a laboratory to be checked for cancer.**



foods with iron, 167

iron pills, 73

cancer of
the womb, 381

Figure

If you have had pain and heavy monthly bleeding for years, see the chapter on

"Cancer and Growths."

Breast lumps

Older women often find lumps in their breasts. Most breast lumps are not dangerous, but some may be a sign of cancer. The best way to find lumps in your breasts is to examine your breasts yourself.



Figure

High blood pressure

High *blood pressure* can cause many problems, like heart disease, kidney disease, and strokes.

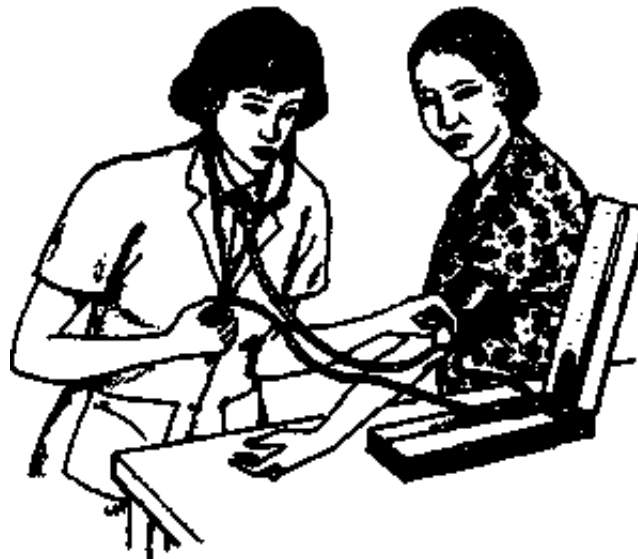
Signs of dangerously high blood pressure:

- **frequent headaches**

- **dizziness**
- **ringing sound in the ears**

◆ ***All these signs can also be caused by other diseases. For more information, see *Where There Is No Doctor* or another general medical book.***

If you are visiting a health worker for any reason, try to have your blood pressure checked at the same time.



Figure

IMPORTANT

High blood pressure at first causes no signs. It should be lowered before danger signs develop. People who are overweight or who think they might have high blood pressure should have their blood pressure checked regularly.

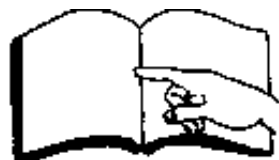


blood pressure Figure

Treatment and prevention:

- **Get some exercise every day.**
- **If you are overweight, try to lose weight.**
- **Avoid foods with a lot of fat, sugar, or salt.**
- **If you smoke or chew tobacco, try to stop.**

If your blood pressure is very high, you may also need to take medicine.



losing weight, 174 eating for good health, 165 Figure

Problems passing urine and stool

Many older women have problems with leaking urine or have difficulty passing *stool*. They may be too embarrassed to speak about these problems, especially to a male doctor. So they suffer alone.

Urine problems are often caused by a weakness in the muscle inside the vagina. The 'squeezing exercise' helps strengthen this muscle. Also, to help push the stool out during a bowel movement, a woman can put 2 fingers into her vagina and push toward her back.



leaking urine, 370

squeezing exercise, 371

Figure

An older woman may also have trouble passing stool because her intestines work more slowly as she ages. It helps to drink a lot of liquids, to eat foods with a lot of fiber (like whole grain breads or vegetables), and to get regular exercise.

Fallen womb (prolapsed uterus)

Sometimes, as a woman gets older the muscles that hold up her womb become weak. The womb can fall down into her vagina and part of it may even stick out between the folds of the *vulva*. In very bad cases, the whole womb can fall outside the vulva when a woman passes stool, coughs, sneezes, or lifts heavy things.



A fallen womb is usually caused by damage during childbirth - especially if the woman has had many babies or babies born close together. It can also happen if the woman pushed too early during her labor, or if the birth attendant pushed on the mother's belly from the outside. But both aging and lifting heavy things can make it worse. The signs often appear after menopause, when the muscles become weaker.

Signs:

- **You need to pass urine often, or it is difficult to pass urine, or urine leaks out of your body.**
- **You have pain in your lower back.**
- **You feel as though something is coming out of your vagina.**
- **All of the above signs disappear when you lie down.**

Treatment:

The 'squeezing exercise' can make the muscles around the womb and vagina stronger. If you have been doing this exercise every day for 3 or 4 months and it does not help, talk to a health worker. You may need a vaginal pessary (a piece of rubber shaped like a ring) that you put in the vagina to keep the womb in place. If

this does not work, you may need an operation.



squeezing exercise
Figure



Kinds of Vaginal Pessaries

Put the pessary high up in your vagina to hold your womb in place.

If pessaries are not available where you live, ask older women in your community what they use for this problem.

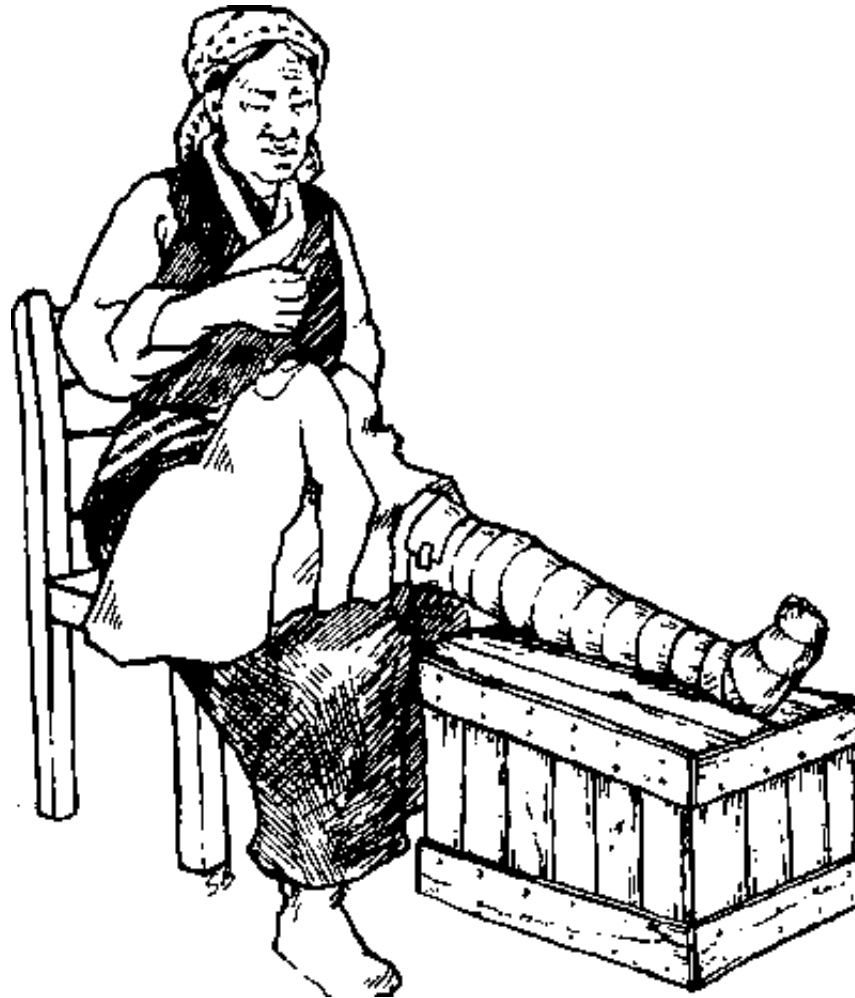
Swollen veins in the legs (varicose veins)

Varicose veins are veins that are swollen and often painful. Older women who have had many children are most likely to suffer from this problem.

Treatment:

There is no medicine for varicose veins, but the following can help:

- **Try to walk or move your legs at least 20 minutes every day.**
- **Try not to spend much time standing or sitting with your feet down, or with your legs crossed.**
- **If you have to sit or stand for a long time, try to take breaks to lie down with your feet above the level of your heart. Do this as often as possible during the day.**
- **When you have to stand for a long time, try to walk in place.**
- **Sleep with your feet up on pillows or on a bundle of cloth.**
- **To help hold in the veins, use elastic stockings, elastic bandages, or cloth that is not wrapped too tightly. But be sure to take them off at night.**



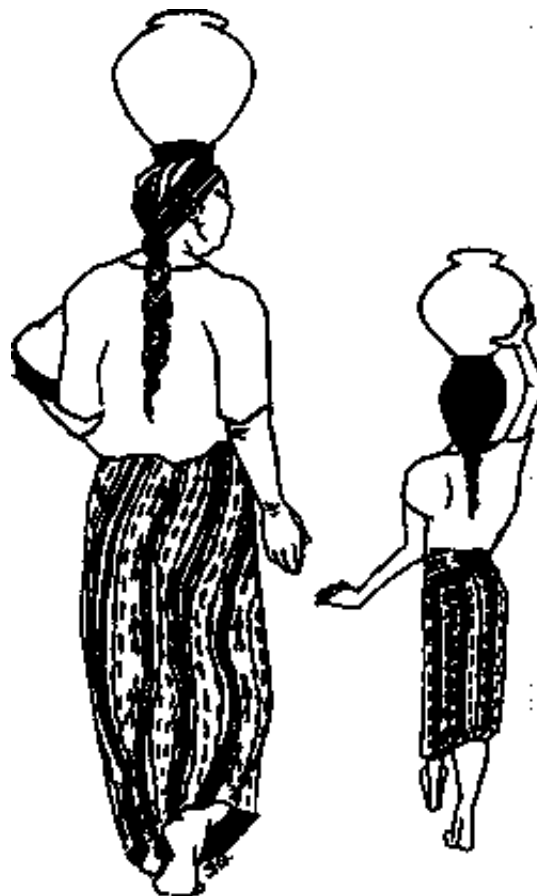
This woman is keeping her leg up as she sews.

Back pain

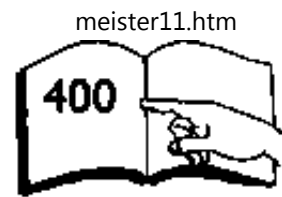
Back pain in older women is often caused by a lifetime of heavy lifting and carrying.

It can often be helped by:

- **exercising every day to strengthen and stretch the muscles in the back. It may be more enjoyable if you organize a group of women to exercise together.**
- **asking younger members of your family to help you, if you must continue to do hard work.**



Figure



**back exercises
Figure**

Joint pain (arthritis)

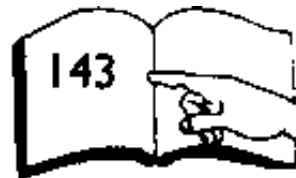
Many older women suffer from *joint* pain caused by arthritis. Usually it cannot be cured completely, but the following treatment may help.



Figure

Treatment:

- **Rest the place that hurts.**
- **Soak cloths in hot water and place them on the painful areas. Be careful not to burn your skin. (Some people with joint pain lose their sense of feeling from the skin on the painful areas.)**



**exercises to prevent
contractures
Figure**

- **Keep your joints moving by gently rubbing and stretching them every day.**
- **Take a mild pain medicine. Aspirin works best for arthritis. For very bad pain, take 600 to 1000 mg of aspirin up to 6 times a day, with food, milk, or a large glass of water. Ibuprofen also works well. Take 400 mg 4 to 6 times a day.**



**medicines for pain
Figure**

IMPORTANT

If your ears start to ring or you start to bruise easily, take less aspirin. Also, if you are having a lot of bleeding from your vagina, you should not take aspirin.

Weak bones (osteoporosis)

After menopause, a woman's body starts to make less estrogen, and her bones become weaker. Weak bones break easily and heal slowly.

◆ ***Weak bones are a major cause of disability for older women.***

A woman is more likely to get weak bones if she:

- **is over 70 years old.**
- **is thin.**
- **does not exercise.**
- **does not eat enough foods rich in calcium.**
- **has been pregnant many times.**
- **drinks a lot of alcohol.**
- **smokes or chews tobacco.**

◆ ***Both exercise and calcium make the bones stronger.***



Figure

Treatment:

- **Walk for 20 to 30 minutes every day.**
- **Eat foods rich in calcium.**

It may also help to take hormone medicines.



calcium-rich foods
Figure

Problems with seeing and hearing

As they get older, many women are not able to see and hear as well as they used to. Women with seeing or hearing problems are more likely to have accidents, and less likely to work outside the home or to take part in community life.

Problems with seeing



Figure

After the age of 40, it is common to have problems seeing close objects clearly. This is called being *farsighted*. Often eye glasses will help.

A woman should also watch for signs of too much pressure from fluid in the eye (glaucoma), which can damage the inside of her eye and lead to blindness. Acute glaucoma starts suddenly, with severe headache or pain in the eye. The eye will also feel hard to the touch. *Chronic* glaucoma usually is not painful, but a woman slowly starts to lose vision to the side. If possible, older women should get their eyes checked at a health center for these problems. For more information, see *Where There Is No Doctor* or another general medical book.

Problems with hearing



Figure

Many women over the age of 50 have hearing loss. Other people may overlook the problem since they cannot see it. Or they may start to leave the person out of conversations and social activities.

If you notice that you are losing your hearing, here are some things you can do:

- **Sit facing the person you are talking to.**

- **Ask family members and friends to speak slowly and clearly. But tell them not to shout. Shouting can make words even more difficult to understand.**
- **Turn off radios or televisions when participating in conversations.**
- **Ask a health worker if your hearing loss can be treated with medicines, surgery, or by using a hearing aid.**



Figure

Anxiety and depression

Older women sometimes feel anxious or depressed because their role in the family and community has changed, because they feel alone or worried about the future, or because they have health problems that cause pain and discomfort. For more information on anxiety and depression, see the chapter on “Mental Health.”

Mental confusion (dementia)

Some older people have difficulty remembering things and thinking clearly. When these problems become severe, it is called *dementia*.

Signs:

- **difficulty concentrating, or getting lost in the middle of a conversation.**
- **repeating the same thing over and over. The person will not remember having said the same thing before.**
- **difficulty with daily tasks. The person may have trouble knowing how to dress or prepare food.**
- **behavior changes. The person may become irritable, angry, or do sudden, unexpected things.**

These signs are caused by changes in the brain, and usually develop over a long period of time. If the signs begin suddenly, the problem probably has other causes, such as too much medicine in the body (toxicity), a serious infection, *malnutrition*, or severe depression. The confusion will often go away if these problems are treated.

Treatment:

There is no special treatment or cure for dementia. Caring for someone who is confused can be very hard on family members. It helps to share the responsibility

of care and get support from people outside the family when possible.



Figure

To help the person with dementia, try to:

- **make her surroundings as safe as possible.**
- **keep daily routines regular so she knows what to expect.**
- **keep familiar objects around the house.**

- **talk to her in a calm, slow voice. Give her plenty of time to answer.**
- **set clear limits without a lot of choices. Ask questions that can be answered "yes" or "no."**

Working for Change

It is traditional in most places for families to live together and for young people to care for their elders. But now many women and men work away from their communities, often traveling far from their homes to earn money to support their families. Older people are now often left to care for themselves.

Older women are more likely than men to live alone. Women usually live longer than men and often marry older men. In many places women whose partners have died are considered less important than married women. When an older woman lives in a community that no longer values elders, she - as well as her family - may feel that her health problems are not worthy of treatment. Or services to treat her health problems may not exist.

When an older woman is also very poor, the problems she faces are much worse. She may not have the money to pay for health care and medicines, to buy healthy foods, or to pay for a healthy place to live.



Figure

Income earning projects. One way that older women can improve their situation is by finding ways to earn money to support themselves and even help their families, such as:

- **raising animals, like chickens, goats, or cows, and then selling the eggs, milk, cheese, or meat.**
- **making bread or other food to sell.**
- **making traditional crafts or sewing things to sell.**

Six widows living in a small community in, EI Salvador decided they wanted to earn some money by raising chickens to sell for meat. None of them had ever raised chickens before, but they asked a group that supports cooperatives to help show them how.

After a local community association loaned them money, the group started to work. At night the women took turns sleeping in the chicken coop to keep animals and people from stealing the chickens. At dawn the women rose to kill and clean chickens. Every day the women walked for miles to other communities to sell the chickens, carrying them in baskets on their heads.

Men from their community - and even a specialist who worked with an agency - all told them their project would not be successful. But the women earned enough money to cover their costs, buy new chickens, and pay themselves each about \$45 a month. Although it was not much money, it was more than any of them had ever earned before. And they gained respect in their community because they had a successful business. As one of them said, "We never imagined that we could run our own business. Now look at us. We are the bosses!"

Community services for older women. By working together, older women can encourage their communities to:

- **create less costly housing for older women, or form groups that live together to cut down on living expenses.**
- **include older women in nutrition programs.**
- **train health workers in the special health needs of older women.**

Older women can teach others. Older women are the main keepers of traditional healing practices, and only they can pass on this knowledge to the next generation. To preserve these practices and remind others that older women have

important skills, women can teach these practices to their children and grandchildren. Older women can also help health workers learn traditional healing practices, so that health workers can use the best methods of both traditional and modern medicine.



Figure

◆ Older women have much wisdom and experience. Working together can make them very powerful.

Changing government policies and laws. Many governments provide monthly income (pensions), housing, and health care for older people. If your government does not, try to work together with other women to change these laws. This kind of change takes time. But even if a woman does not see the changes herself, she will know she has worked toward a better life for her daughters and grand-

daughters.

Accepting death

Every culture has a system of beliefs about death and ideas about life after death. These ideas, beliefs, and traditions may comfort a person facing death. But she also needs support, kindness, and honesty from her loved ones.

You can help a dying person most by listening to her feelings and needs. If she wants to die at home - surrounded by the people she loves - rather than in a hospital, try to respect her wishes. If she wants to talk about death, try to be honest. Anyone who is dying usually knows it, partly by what her body tells her and partly by the reactions she sees in those she loves. Let her talk openly about her fears, and about the joys and sorrows in her life. This way, when death comes, she may more easily accept it as the natural end of life.



[Home](#) > [ar.cn.de.en.es.fr.id.it.ph.po.ru.sw](#)

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

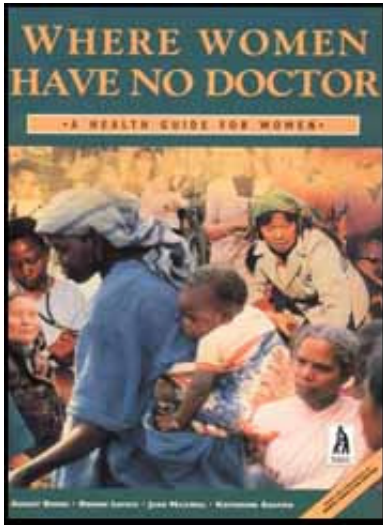
Chapter 9: Women with Disabilities

 ***(introduction...)***

 **Self-esteem**

 **Taking Care of Your Health**

 ***(introduction...)***



- 📄 **Knowing when you are sick**
- 📄 **Skin care**
- 📄 **Exercise**
- ☐ **Sexuality and Sexual Health**
- 📄 **(introduction...)**
- 📄 **Family planning**
- 📄 **Pregnancy and disability**
- 📄 **Personal Safety**
- 📄 **Working for Change**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 9: Women with Disabilities

In this chapter we use the word 'women with disabilities' rather than 'disabled women.' We do this to remind people that although a disability can prevent a woman from doing certain things, in other ways she is just like other women. She is a woman first.

No matter what causes a woman's disability, she can be just as productive as a woman without a disability. She just needs the opportunity to develop her skills to their fullest.

For more complete information on health care and disabilities, see the Hesperian Foundation book, *Disabled Village Children*. For information about ordering, see

the last page of this book.



Figure

About 1 out of every 10 women has a disability that affects daily living. She may have difficulties with walking, lifting, seeing, hearing or using her mind. Yet many of these women are never seen or heard. They are often hidden away and do not take part in community activities because they are thought of as less useful and of less value than women without disabilities.



1 out of every 10 women has a disability that affects daily living.

WHAT CAUSES DISABILITY?

Local customs and beliefs often give people false ideas about disability. For example, people may think a woman has a disability because she did something bad in a former life and is now being punished. Or they may think her disability is 'catching' (contagious), so they are afraid to be around her.

But disabilities are not caused by anything a person does wrong. In poor countries, many disabilities are caused by poverty, and sometimes by wars, which

few people can control. For example:

- **If a mother does not get enough to eat when she is pregnant, her child may be born with a disability (birth defect).**
- **If a baby or young child does not get enough good food to eat she or he may become blind or mentally slow.**
- **Poor *sanitation* and crowded living conditions, together with poor food and a lack of basic health services and *vaccinations*, can lead to many disabilities.**
- **In today's wars, more women and children are killed or disabled than are soldiers or other men.**

But even if these reasons for disability are eliminated, there will always be persons with disabilities - it is a natural part of life.

Self-esteem

The following letter came from a group of women with disabilities in Ghana, West Africa. But it could have come from any community, because all over the world, women - and especially women with disabilities - are taught not to value themselves.

Our Association was formed in 1989 by women with disabilities to help promote the welfare of the woman with a disability. We have 21 members with various disabilities (sight, hearing, speech, and movement). We hold a meeting once a month to talk about

our problems and to try to find solutions.

We all agree that women with disabilities are often *discriminated* against because:

- we are women.
- we have disabilities.
- we are mostly poor



Figure

We are: rejected as suitable marriage partners or regarded as the 'wrong' image in the work place. Girls and women with disabilities are often not able to get an education, even when education is available. For example, even in special schools for children with disabilities, boys usually receive priority.

We are unlikely to receive training for any kind of work. We experience abuse - physically, emotionally, and sexually. Unlike all men and women without disabilities, we are seldom allowed to make decisions at home or in the community.

But for each of us in the Association, the biggest problem is lack of self-esteem. We are

taught by society not to value ourselves. We are generally considered to be incapable of keeping a man and bearing children, and unable to do meaningful work. Therefore we are considered worthless. Even our extended families only want us if we prove valuable to them.

- *Doarmaa Ahenkro, Ghana*

If a woman grows up with the support of her family, school and community to live the best life she can, her feelings of self-worth will be very high, whether or not she has a disability. But if a woman grows up feeling she is worth less than others because she has a disability, she has to work hard to learn to value herself. This process is never easy, but it can be done by taking small steps.



Figure

The first step is to meet other people. If you are a woman with a disability, you might try sitting at the door of your home and greeting your neighbors. Then, if you are able, go to the market and talk to people there. As they get to know you, they will find out that women with and without disabilities are not really very different from each other. Each time you go out it will become easier to meet and talk with others.

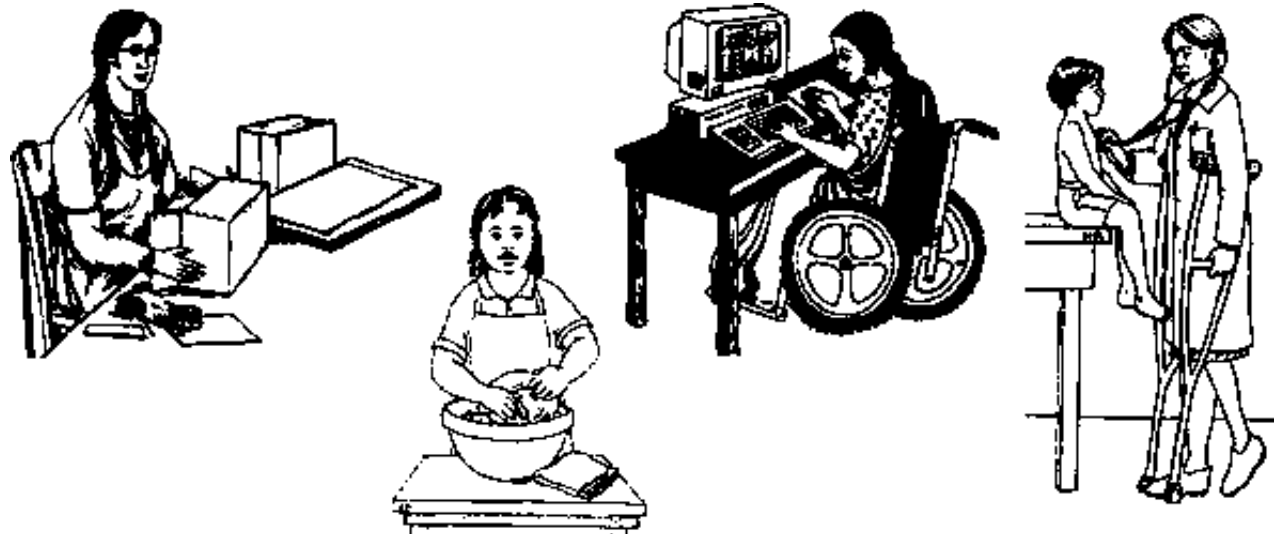
A second step is to start or join a group for women. Talking with others can help you begin to learn about your strengths and weaknesses. A group can provide a safe place for women to speak freely - if you all agree not to speak outside the group about anything that is said inside the group.



**support groups
Figure**

You can also join or start a group for women with disabilities and share your thoughts and experiences about the special challenges that come from having a disability. You can all support each other during both happy and difficult times.

You can support each other in learning how to become independent, too. All over the world women with disabilities are working as doctors, nurses, shop keepers, writers, teachers, farmers, and community organizers. With each other's help, you can begin to prepare for the future, just as any woman would.



Focus on what you can do, not on what you cannot do.

Taking Care of Your Health

If you have a disability, most of your health problems are probably no different from those of other women, and you can find information about them in other chapters in this book. But the following issues can be of special concern for women with disabilities, especially women with a loss of feeling in the body.

Knowing when you are sick

Some women with disabilities may find it difficult to tell when they have a health problem. For example, a woman who has an *infection* in her *womb* may not be able to feel pain from it. But she may notice an unusual *discharge* or smell from her *vagina* that an infection can cause.

As a woman, you know and understand your body better than anyone else. So if

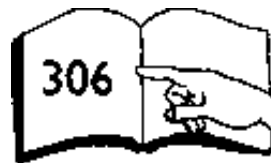
you have an unusual feeling, or body reaction, or a pain somewhere, try to find out as soon as possible what might be causing it. If necessary, ask a family member, friend, or health worker to help.

Skin care

If you sit or lie down all or most of the time, you can develop pressure sores. These sores start when the skin over the bony parts of the body is pressed against a chair or bed. The blood vessels get squeezed shut, so that not enough blood can get to the skin.

◆ *Pressure sores are one of the main causes of death in persons with spinal cord injury.*

If too much time passes without moving, a dark or red patch appears on the skin. If the pressure continues, an open sore can develop and work its way deeper into the body. Or the sore can start deep inside near the bone and gradually grow out to the surface. Without treatment, the skin can die.



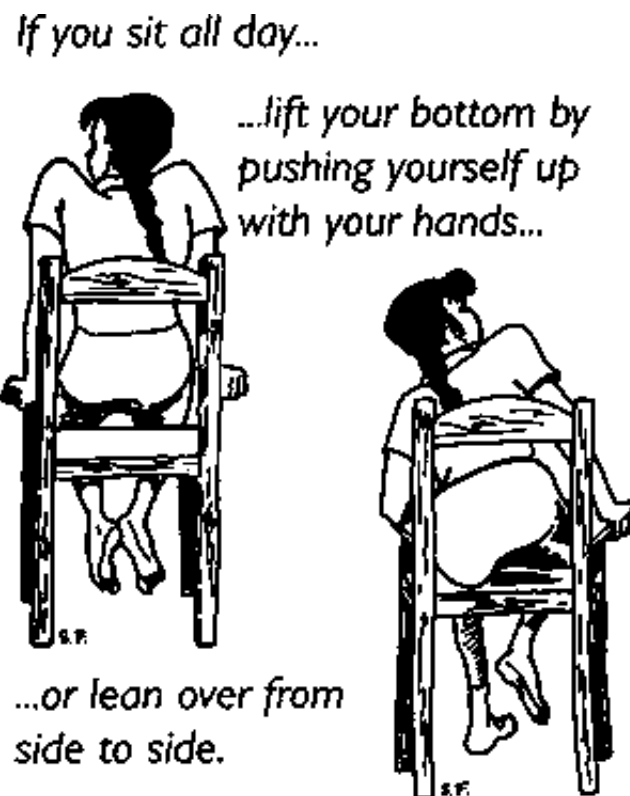
**wound care
Figure**

Treatment:

For information on how to treat pressure sores.

Prevention:

- **Try to move at least every 2 hours. If you lie down all the time, have someone help you change position.**



Figure

- **Lie or sit on a soft surface that reduces pressure on bony areas. A cushion or sleeping pad that has hollowed-out areas around the bony parts will help. Or make a simple cushion or sleeping pad from a plastic bag filled with uncooked beans and rice. It must be refilled with new rice and beans once a month.**

- **Examine your whole body carefully every day. You can use a mirror to look at your back. If you notice a dark or red place, try to avoid any pressure on this area until your skin returns to normal.**



Examine your skin every day.

- **Try to eat plenty of fruits, vegetables, and foods rich in *protein*.**



**eating for good health
Figure**

- **During monthly bleeding, do not use cloth or *tampons* inside your vagina to catch the blood. They can press against your bones from inside your body and cause a sore in your vagina.**



monthly bleeding Figure

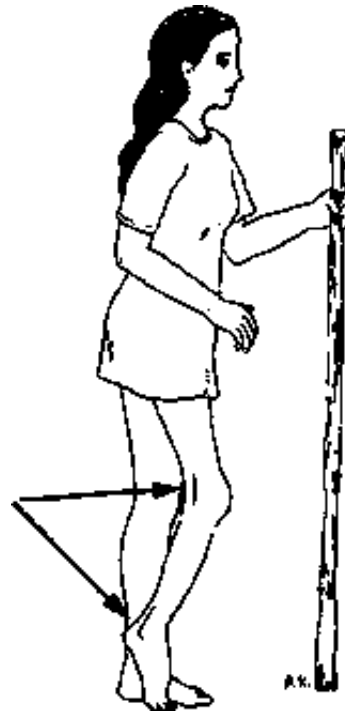
- **Try to bathe every day. Pat your skin dry, but do not rub it. Avoid lotions or oils, because they can make your skin soft and weaker. And never use alcohol on your skin.**



staying healthy Figure

Exercise

Some women - for example, those who suffer from *arthritis* or strokes, or who are in bed because of AIDS or old age - have difficulty moving their arms and legs enough to keep their joints flexible. When this happens, and an arm or a leg is kept bent for a long time, some of the muscles become shorter and the limb cannot fully straighten. Or short muscles may hold a joint straight so that it cannot bend. This is called a 'contracture'. Sometimes contractures cause pain.



Figure

To prevent contractures and keep your muscles strong, you need to find someone who can help you exercise your arms and legs every day. Try to make sure that every part of your body is moved. If you have had contractures for many years, it will be difficult to completely straighten your joints. But these exercises will prevent the contractures from getting worse and can make your joints a little less stiff and keep your muscles strong.

Examples of exercises that prevent some contractures and help keep muscles strong



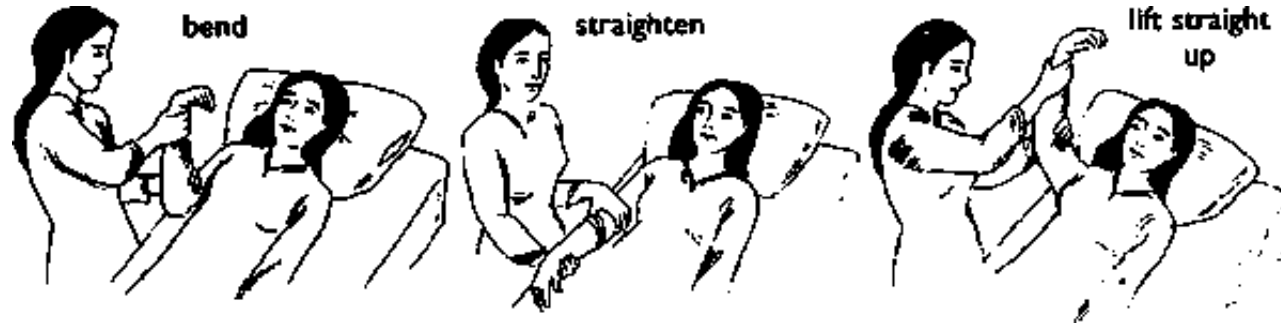
To exercise the front of the upper leg



To exercise the back of the upper leg



To exercise the lower leg



To exercise the arms

IMPORTANT

If a joint has been bent for a long time, be gentle. Do not try to force it straight

Sexuality and Sexual Health

Many people believe that women with disabilities cannot have, or should not have, sexual feelings. They are not expected to want to have close, loving relationships or to become parents. But women with disabilities do have a desire for closeness and sexual relations just like anyone else.

♦ *Be careful not to let other people take advantage of you. It can be difficult to protect yourself against violence and abuse.*

If you were born with a disability, or it happened when you were very young, you may have a hard time believing you are sexually attractive. Talking with other women who have disabilities about their own fears, and how they overcame them, is often the best way to learn to feel differently about yourself. But remember to have patience. It takes time to change beliefs you have held for a long time.



**violence
Figure**

If you are a woman with a new disability, you may already be used to thinking of yourself as a sexual person. But you may not realize that you can continue to enjoy sex. You may think you are not sexually attractive any more and feel sad

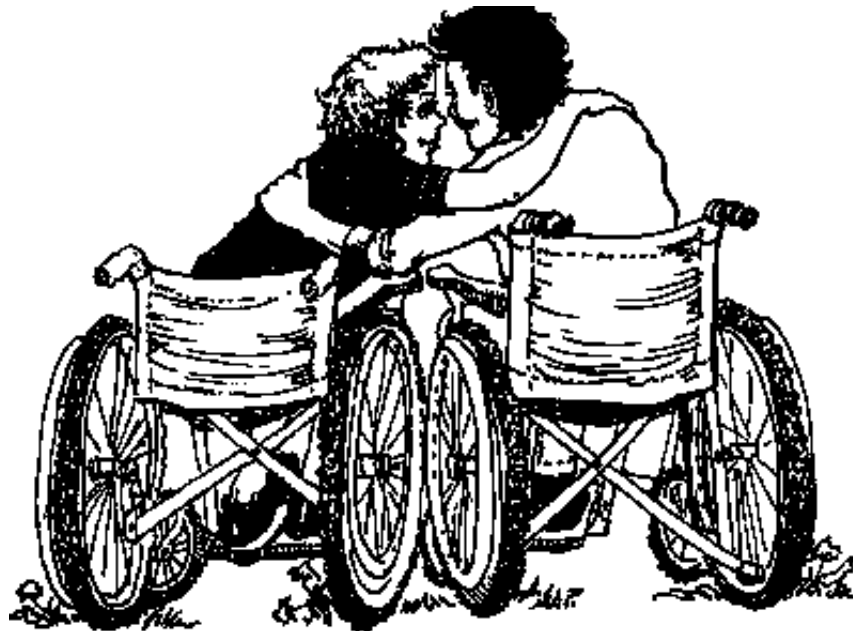
that sex may be different now.

All women with disabilities can be helped by reading the same information about sexuality that women who are not disabled read. Try to talk about sexuality with them and with trusted teachers, health care workers, and other women with disabilities.



**sexual health
Figure**

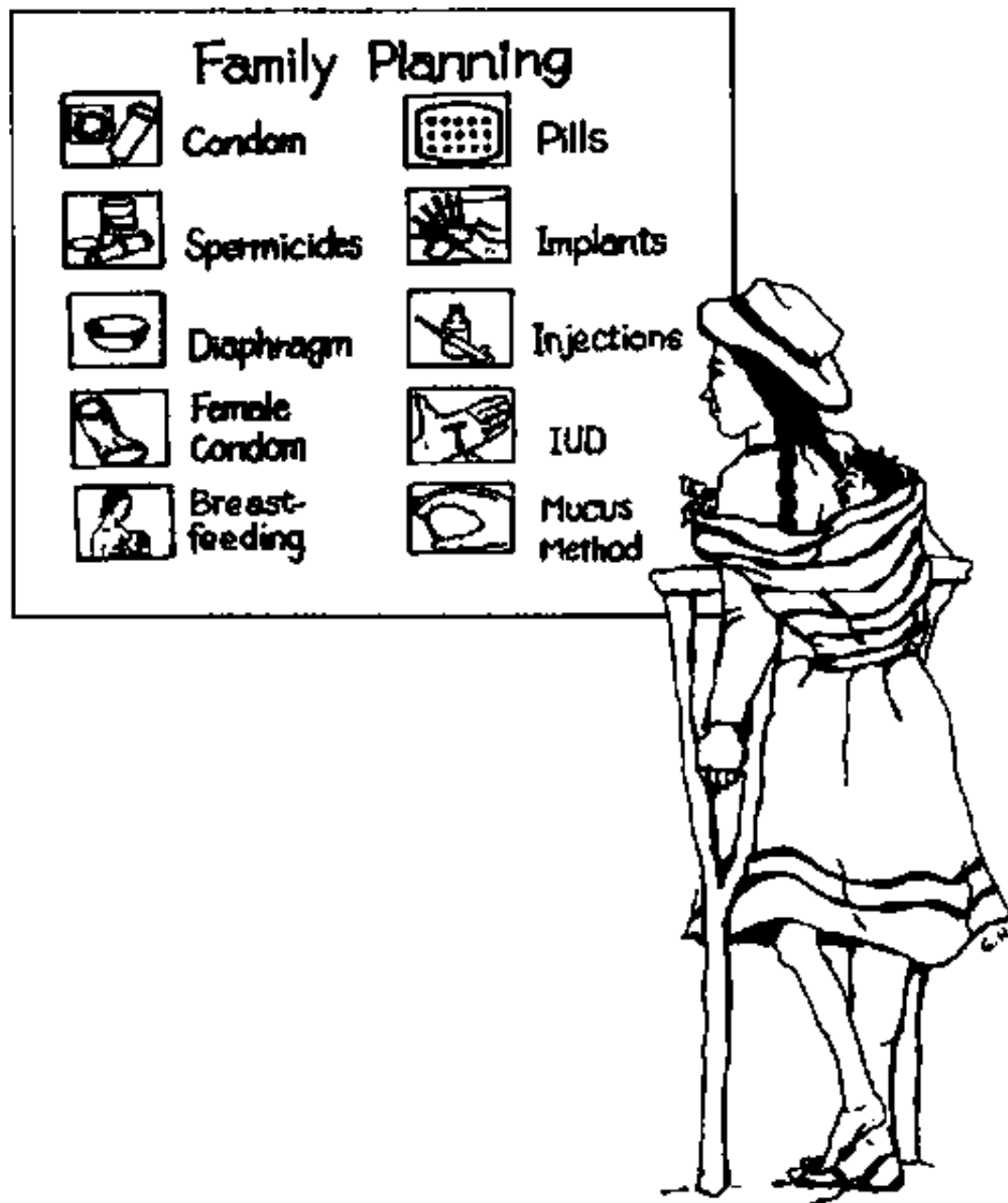
You and your partner will both need to experiment with how to please each other. For example, if you have no feeling in your hands or genitals, during sex you can find other body parts that will create sexual feeling, such as an ear, or breast, or neck. This can also help if a disability has made sex in the vagina uncomfortable. You can also try different positions, like lying on your side, or sitting on the edge of a chair. If you and your partner can talk together honestly, a satisfying sexual relationship can happen. But remember that you do not have to settle for less than you would like. You do not have to have sex with someone who does not care about you.



Figure

Family planning

Many girls with disabilities grow up with no information about sex or *family planning*. Yet most women with disabilities can become pregnant - even those with no feeling in the lower body. So if you plan to have sex and do not want to become pregnant, you will need to use a family planning method.



Figure

Here are some guidelines for deciding which family planning method might be best

for you:

If you have had a stroke, or cannot walk and you must sit or lie down all the time, do not use *hormonal methods*, such as birth control pills, injections, or implants. They can cause problems with blood clots.

If you have no feeling or only a little feeling in your belly, do not use an *intra-uterine* device (IUD). If it is not put in correctly, or if there is a possibility you might get a *sexually transmitted disease*, it can cause an infection. Without feeling you may not be able to tell that you are infected.

If you cannot use your hands well, it may be difficult for you to use *barrier methods*, such as the diaphragm, the female condom, or foam. If you feel comfortable asking your partner, he may be able to put them in for you.

If your disability changes over time, you may need to change your family planning method as your disability progresses.

◆ ***Condoms will help prevent both pregnancy and STDs, including HIV/AIDS.***



family planning
Figure

Pregnancy and disability



Figure

A woman with a disability can become pregnant and have a healthy baby. Here are some things to consider, especially if you cannot move your body very much, or if you use a walking aid:

- As your belly gets larger, your balance changes. Some women can use a stick or crutch to prevent falls. Some women may want to use a wheelchair while pregnant.
- Since many pregnant women have trouble with hard stools (constipation), you may need to do your 'bowel program' to remove the stool more often.
- During labor, you may not be able to feel the birth pains (*contractions*). Instead, watch for the shape of your belly to change, and use this to count the time between contractions.

- To prevent stiff joints (contractures) and to keep your muscles strong, exercise as much as you can.
- For more general information on pregnancy and birth, see **Pregnancy and Childbirth.**

Personal Safety

Since a woman with a disability may be less able to protect herself, she is more at risk for violent attack and abuse than a woman without a disability. But there are things a woman can do to defend herself. It may help to practice some of these things with a group of women with disabilities:

- **If you are in a public place and someone tries to hurt or abuse you, shout as loudly as you can.**
- **Do something he might find disgusting, such as drooling spit (saliva), or trying to *vomit*, or acting as though you are 'crazy'.**
- **Use your stick, crutches or wheelchair to hit or try to hurt the person.**
- **If the abusive person is someone in your family, try to talk about it with another family member you trust. It may also help to talk about it privately with a group of women with disabilities.**



Figure



**self defense
Figure**

Special care for women who have mental disabilities

Women and girls who have problems with understanding or learning (mental disabilities) may need special care, as it can be even more difficult for them to defend themselves.

If there is a girl or woman in your family with these problems, it is important to talk openly with her about abusive or harmful people. Talk about when it is OK for someone to touch another person in a sexual way and when it is not, and about what is safe and

unsafe in public and private situations. Let her know it is OK to tell you if anything she does not like happens to her Help her learn how to say "No." Teach her how to defend herself.

It is also a good idea to talk with persons with mental disabilities about sexually transmitted diseases (STDs) and pregnancy, and to give them what they need to protect themselves. But be careful not to treat girls and women with mental disabilities like prisoners. When it is safe, let them go outside, or to the market, or to work in the fields.

Working for Change

To build a better life, women with disabilities need health, education, and the ability to move around independently and earn a living. The first step toward achieving these things may be to form a group with other women with disabilities. Together you can decide what things in your community can be changed, in order to make life better for you all.

Here are some suggestions:

- **Start a *literacy* class for the women who cannot read or write.**
- **Try to get funds - either as a low-interest loan or through a donation - to begin an income-earning project so you can all make your own living.**
- **As a group, go to the local authorities and ask them to:**
 - **make the village water supply, schools, and health centers easier to get to, and easier for people who are blind and deaf to use.**

- help you start a library, and to find more information about disabilities.
- work with you to make disability aids and equipment available.

◆ *The particular tasks your group chooses are not as important as just working together. Start with what you as a group feel is most important, and work from there.*

To give you an idea of what a group working together can do, here is the rest of the letter from the women in Ghana:

Being in this Association gives us a new value, a way to be a part of something which counts, and a chance to organize ourselves for our rights.



Figure

Most members have learned skills such as weaving, sewing, candle making, shoe repairs, basket making, and typing. Some of our other activities are:

- Involving women with disabilities in community activities.
- Meeting with teachers and parents to choose materials with positive images of disability.
- Finding ways to support ourselves financially so we can obtain working tools, disability aids, and wheelchairs for our members.

Friendship and trust between women with disabilities gives rise to many new ideas. We run the Association by and for ourselves, and we are encouraged in our efforts. This helps to raise the image of all women with disabilities.

Just like the women in Ghana, working with others can help you achieve an independent, productive life. You do not have to stay inside your house unless you want to. Go after your dream, whether it is a job, a relationship, or motherhood!



[Home](#) > [ar.cn.de.en.es.fr.id.it.ph.po.ru.sw](#)

 **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**

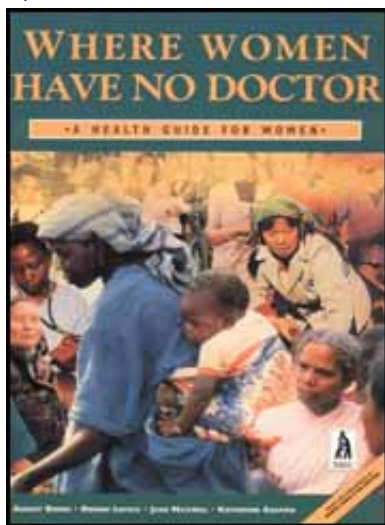
  **Chapter 10: Staying Healthy**













 ***(introduction...)***

 **Cleanliness**

 ***(introduction...)***

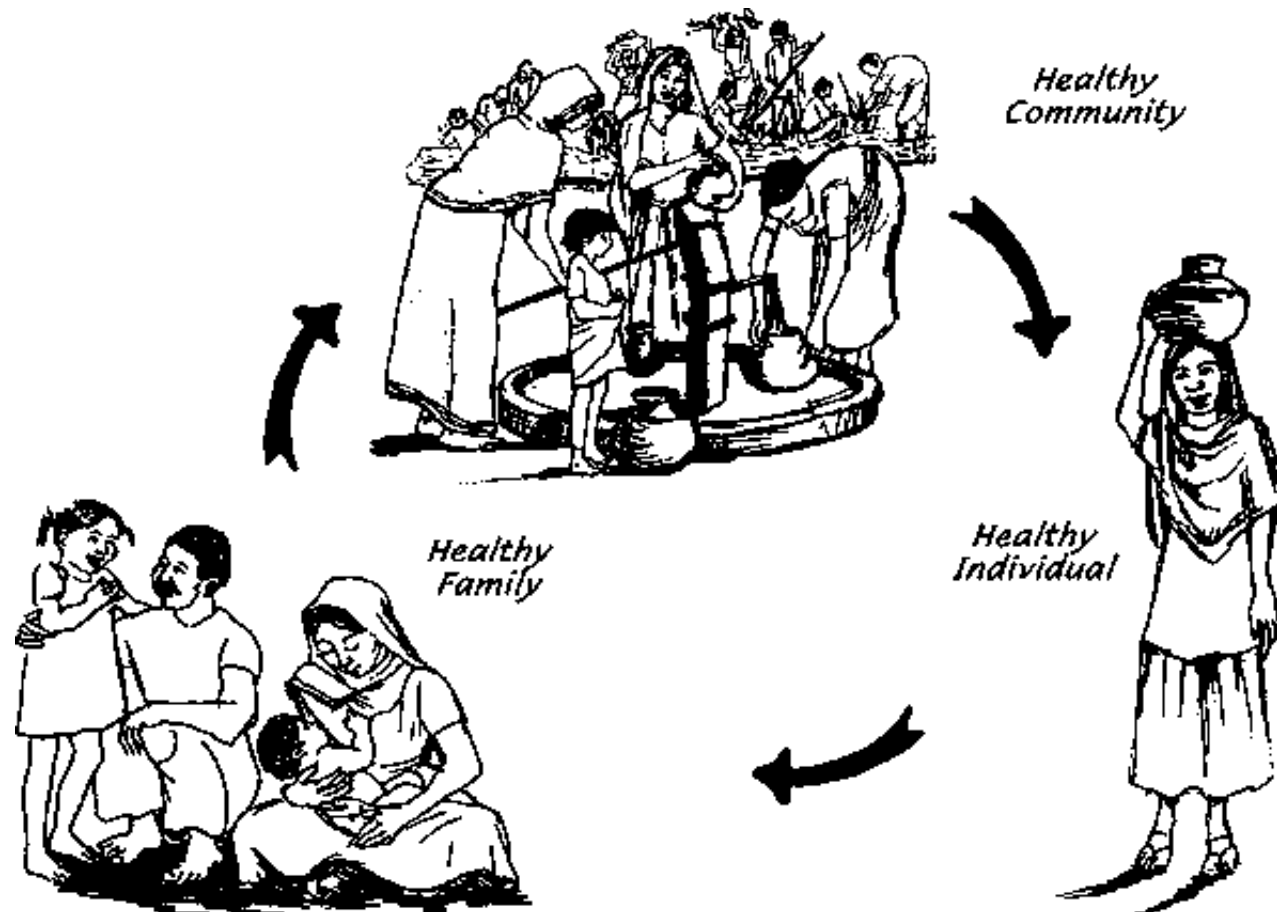
 **Cleanliness in the community (sanitation)**



-  **Cleanliness in the home**
-  **Personal cleanliness**
-  **Clean water**
-  **Food safety**
- Special Needs of Women**
 -  **Rest and exercise**
 -  **Regular health exams**
 -  **Safer sex**
 -  **Family planning**
 -  **Good care during pregnancy and birth**
 -  **Vaccinations against tetanus**
 -  **Regular breast exams**
- Working for Change**
 -  **Working toward a balance between treatment and prevention**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 10: Staying Healthy



Figure

Most of this book describes health problems and what to do about them. But many of these problems can be prevented (stopped before they start) by better *nutrition*, cleanliness, rest, and by meeting women's special health needs. So in this chapter we describe some of the things a woman, her family, and her community can do to prevent illness.

◆ *Healthy communities help women stay healthy. Healthy women can care for their families. Healthy families can contribute more to the community.*

It is not always easy for women to prevent illness. Although they do a lot to keep their families and communities healthy, many women have difficulty finding the time, energy, and money to pay attention to their own health needs. Since women are often taught to put the needs of others first, they have little time left for themselves after caring for their families. And the family's limited resources are often spent on the children and men first.



**eating for good health
Figure**

Yet, in the long run, it saves a lot of pain and stress to prevent health problems before they start rather than treating them later. Some of these things do not take much time or money. Others take some extra time, effort, and money - at least in the beginning. But since prevention builds the health and strength of a woman, her family, and her community, life will be easier and better later on.

Cleanliness

◆ *Different germs are spread in different ways. For example, tuberculosis (TB) germs are spread through the air. Lice and scabies are spread through clothes and bed covers.*

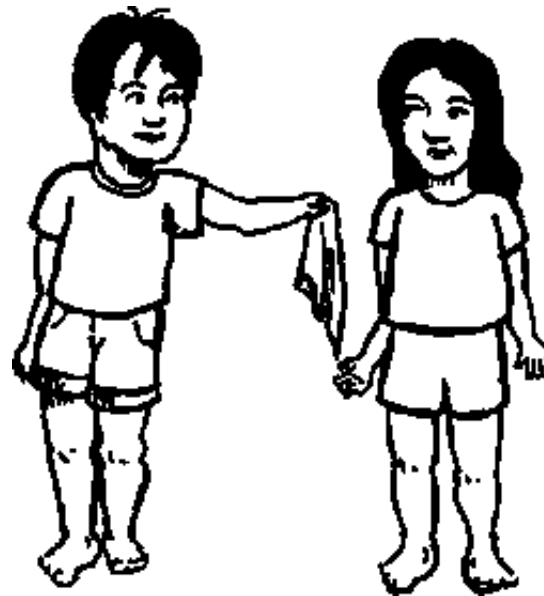
Many illnesses are spread by germs that pass from one person to another. Here are some of the most common ways that germs are spread:

- **by touching an infected person.**



Figure

- **through clothes, cloths, or bed covers.**



Figure

- **through the air. For example, when someone coughs, germs in small drops of spit (saliva) can spread to other people or objects.**



Figure

- **by eating *contaminated* food.**



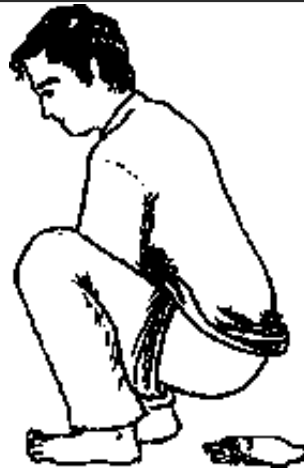
Figure

- **through insect bites or animal bites.**



Figure

Cleanliness in the community (sanitation), cleanliness in the home, and personal cleanliness are all important to prevent these sicknesses by stopping the spread of germs. For example:



1. A man infected with parasites has diarrhea outside.



2. A pig eats the man's stool.



3. One of the man's children plays with the pig and gets stool on himself.



4. Later, the child starts to cry and his mother comforts him and cleans his fingers with her skin. She also gets stool on her hands.



5. The mother prepares food for the family, forgetting to wash her hands first. She uses her soiled skirt to keep from burning her hands.



6. The family eats the food. Soon everyone has diarrhea.

What could have prevented the family's illness?

If the family had used any of these precautions, the spread of illness could have been prevented:

- if the man had used a latrine or toilet.
- if the pig had not been allowed to run free.
- if the mother had not used her skirt to wipe the child's hands and then

touched the food.

- **if the mother had washed her hands after touching her child and before preparing food.**

Cleanliness in the community (sanitation)

Many common health problems are best solved in the community. When the community works together to improve sanitation, everybody benefits. For example:

Work together to develop a source of clean water for drinking and cooking. The source should be close enough to the community for people to get water easily.

To keep drinking and cooking water clean:

- **do not let animals go near the water source. If necessary, build a fence to keep them out.**
- **do not bathe, or wash clothes, cooking pots, or eating utensils near the water source.**
- **do not pass stool or throw garbage (rubbish) near the water source.**



Clean drinking water can help prevent diarrhea and parasites.

Get rid of garbage in a safe way. If possible, bury, compost, or burn garbage. If you bury it, make sure the pit is deep enough to keep animals and bugs away. If the garbage is above ground, fence off the dump and cover the garbage with dirt to reduce flies. Also, find safe ways to get rid of dangerous and *toxic* materials. For example, do not burn plastic near the house, because the fumes can be toxic, especially to children, old people, and sick people.

◆ *Use composted food waste to fertilize your crops.*

Drain standing water in washing areas, and in puddles, tires, and open containers. *Malaria* and *dengue fever* are spread by mosquitos, which breed in water that is not flowing. If possible, use mosquito nets when sleeping.

Organize your community to build latrines (see how to build a latrine).

How to build a latrine

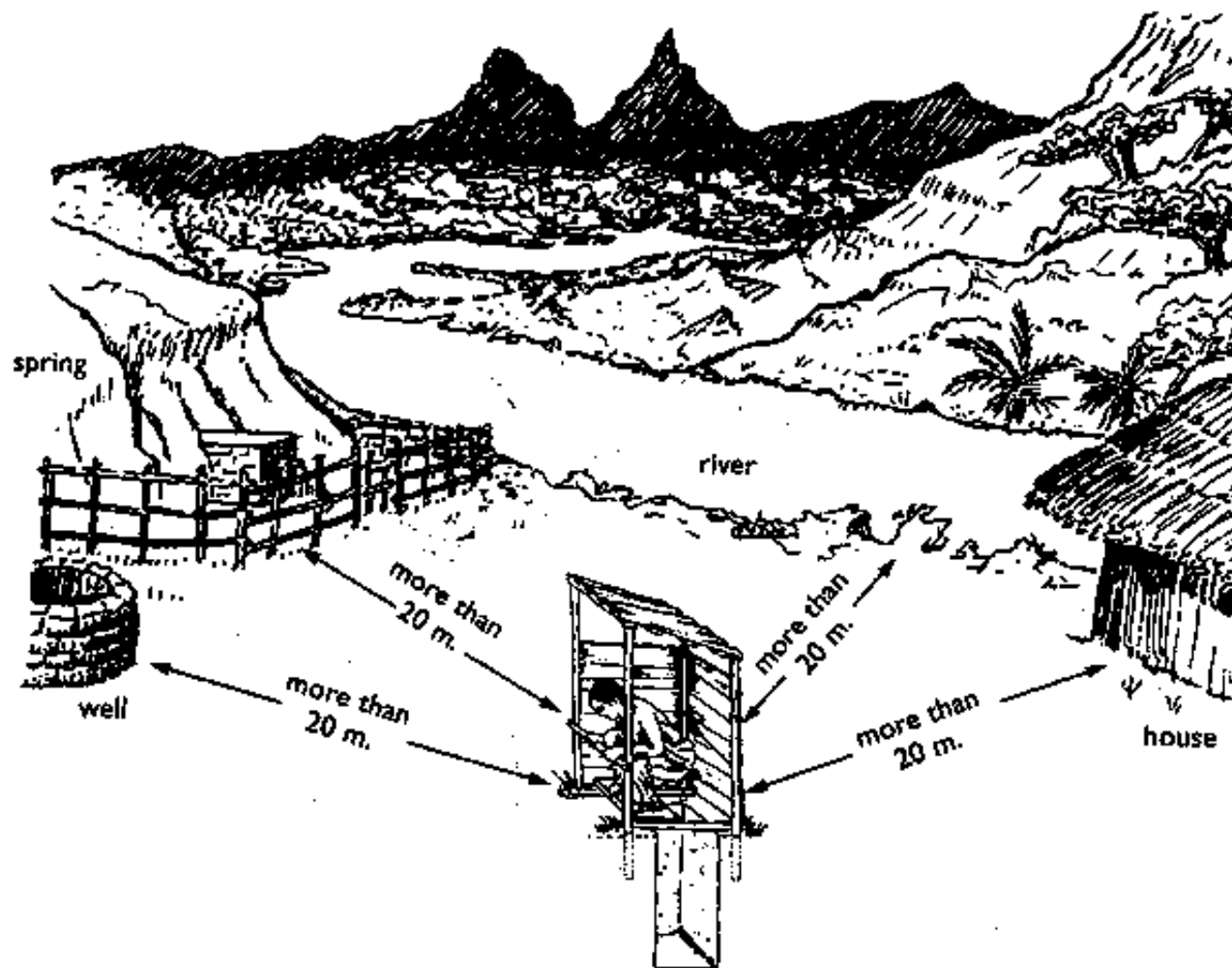
1. Dig a pit about 0 meter wide, 1° meters long, and 3 meters deep.
2. Cover the pit, leaving a hole about 20 by 30 centimeters.
3. Build a shelter and roof out of local building materials.



Figure

- ◆ ***For more information about building latrines, see [Where There Is No Doctor](#).***
- ◆ ***After using the latrine, throw a little lime, dirt, or ash in the hole to reduce the smell and keep flies away.***

To be safe, a latrine should be at least 20 meters from all houses, wells, springs, rivers, or streams. If it must be anywhere near a place people go for water, be sure to put the latrine downstream.

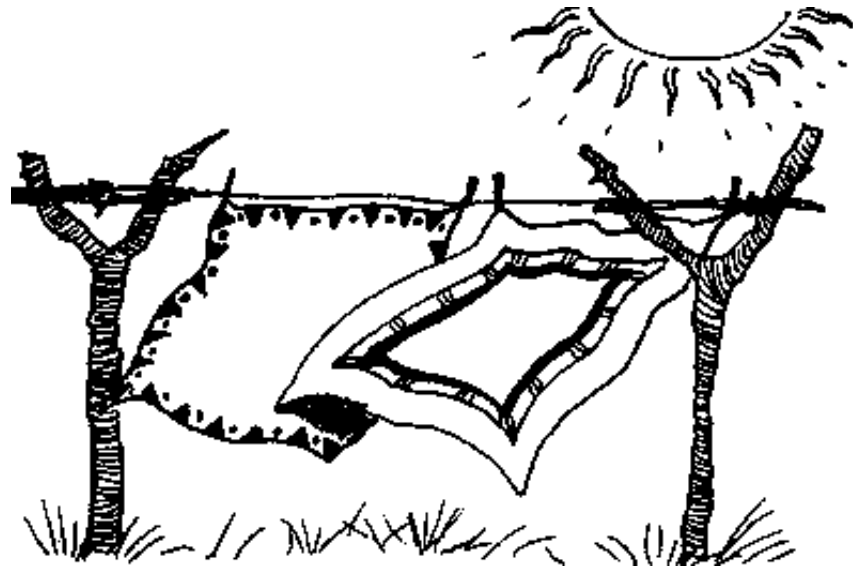


Figure

Cleanliness in the home

Since family members are in close contact with each other, it is very easy to spread germs and illness to the whole family. A family will have less illness if they:

- **wash cooking and eating pots and utensils with soap (or clean ash) and clean water after using them. If possible, let them dry in the sun.**
 - **clean the living space often. Sweep and wash the floors, walls, and beneath furniture. Fill in cracks and holes in the floor or walls where roaches, bedbugs, and scorpions can hide.**
 - **hang or spread bedding in the sun to kill parasites and bugs.**
- ◆ ***Sunlight kills many germs that cause illness.***



Figure

- **do not spit on the floor. When you cough or sneeze, cover your mouth with your arm, or with a cloth or handkerchief. Then, if possible, wash your hands.**

- **get rid of body wastes in a safe way. Teach children to use a latrine or to bury their stools, or at least to go far away from the house or from where people get drinking water.**

◆ ***If children or animals pass stool near the house, clean it up at once.***



Figure

Personal cleanliness

It is best to wash with soap and clean water every day, if possible. Also:

- **wash your hands before eating or preparing food, after passing *urine* or stool, and before and after caring for a baby or someone who is sick.**
- **wash the *genitals* every day with mild soap and water. But do not douche. The vagina cleans and protects itself by making a small amount of wetness or discharge. Douching washes away this protection and makes a woman**

more likely to get a vaginal infection.



**caring for yourself
during monthly
bleeding, 55**

**infections of the urine
system, 365**

Figure

- **pass urine after having sex. This helps prevent infections of the urine system (but will not prevent pregnancy).**
- **wipe carefully after passing stool. Always wipe from front to back. Wiping forward can spread germs and worms into the urinary opening and vagina.**



Figure

Protect your teeth

Taking good care of the teeth is important because:

- **strong, healthy teeth are needed to chew and digest food well.**
- **painful cavities (holes in the teeth caused by decay) and sore gums can be prevented by good tooth care.**
- **decayed or rotten teeth caused by lack of cleanliness can lead to serious infections that may affect other parts of the body.**
- **people who do not care for their teeth are more likely to lose them when they get old.**



Figure

Teeth should be cleaned carefully twice a day. This removes the germs that cause decay and tooth loss. Clean the surface of all front and back teeth, then clean between the teeth and under the gums. Use a soft brush, tooth stick, or finger wrapped with a piece of rough cloth. Toothpaste is good but not necessary. Salt, charcoal, or even plain, clean water will also work.



You can make a toothbrush to keep your teeth dean.

Clean water

Drinking water should be taken from the cleanest possible source. If the water is cloudy, let it settle and pour off the clear water. Then, before drinking, kill the harmful germs as described below. This is called purification.

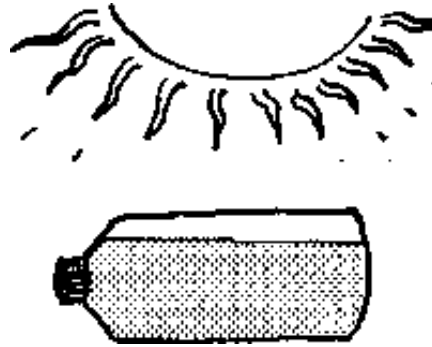
Store the purified water in clean, covered containers. If the container has been used for storing cooking oil, wash it well with soap and hot water before storing clean water in it. Never store water in containers that have been used for *chemicals, pesticides, or fuels*. Wash water containers with soap and clean water at least once a week.



Store water in covered jars and keep your living space clean.

Here are some simple and inexpensive ways to purify your water:

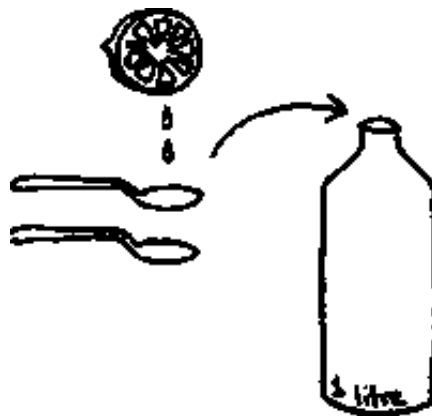
Sunlight. Sunlight kills many harmful germs. To purify water using sunlight, fill clean, clear glass or plastic containers with water, and leave them outside from morning to late afternoon. Be sure to place the containers in an open space where they will be in the sun all day. (If drinking water is needed right away, putting the containers in the sun for 2 hours in the middle of the day should be enough for purification.)



Figure

To avoid getting germs in the water, choose a spot away from children, dust, and animals. If you want the water to cool before using, bring the containers inside overnight. Water can be stored for a day or two in the same container. Sunlight purification works best in warm climates.

Lemon juice sometimes kills cholera (but not other germs). Add 2 tablespoons lemon juice to a liter (1 quart) of water and let it sit for 30 minutes.



Figure

Boiling water for 5-10 minutes will kill most germs. Because boiling water uses so

much fuel, use this method only if there is no other way to purify your water. If you want to kill all possible germs, you will have to boil the water for 20 minutes.

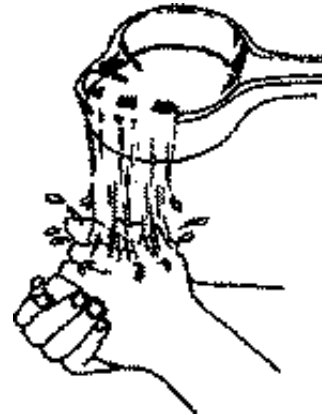


Figure

Food safety

Many common diseases of the intestines are spread through food. Sometimes people who harvest, handle, or prepare food pass germs from their hands into the food. Sometimes germs and molds in the air begin to grow in the food and it goes bad (spoils). This happens when food is not stored or cooked properly, or when it gets old.

♦ *Washing your hands prevents the spread of disease. Keep a special dean rag for drying your hands. Wash it often and dry it in the sun.*



Figure



Or dry your hands in the air by shaking the water off.

To prevent the spread of germs in food:

- **wash your hands with soap and water before preparing food, before eating, and before feeding your children.**
- **wash or peel all fruits and vegetables that are eaten raw.**

- **do not let raw meat, poultry, or fish touch other food that is eaten raw. Always wash your hands, knife, and cutting board after cutting these meats.**
- **avoid coughing, spitting, and chewing things like gum or betel near food so your saliva does not get in the food.**
- **do not allow animals to lick dishes or utensils clean. If possible, keep animals out of the kitchen.**
- **throw food out when it spoils.**

Here are some of the most common signs of spoiled foods:

- **bad smell**
- **bad taste or a change in taste**
- **changed color (for example, if raw meat changes from red to brown)**
- **many bubbles on the top (for example, on the top of old stew or soup) along with a bad smell**
- **slime on the surface of meat or cooked foods**

Cooked food

Cooking food kills germs. All meats, fish, and poultry should be well cooked. Nothing should look raw or have a raw color.

◆ ***In some communities there are special ways to prepare raw meat or fish that make them safe to eat.***

If the food begins to cool, the germs quickly start to grow again. If the food is not eaten within 2 hours, reheat it until it is very hot. Liquids should be bubbling, and solids (like rice) should be steaming.



Figure

Food selection. Sometimes food is bad even before it is cooked or stored. Here are some things to look for when selecting food.

Fresh (raw) foods should be:

- fresh and in season.
- whole - not bruised, damaged, or eaten by insects.
- clean (not dirty).
- fresh smelling (especially fish, shellfish, and meat, which should not have a strong smell).

Processed (cooked or packaged) foods should be stored in:

- tins that look new (no rust, bulges, or dents).
- jars that have clean tops.
- bottles that are not chipped.
- packages that are whole, not torn.



Strong-smelling fish and bulging cans are signs that the food has spoiled.

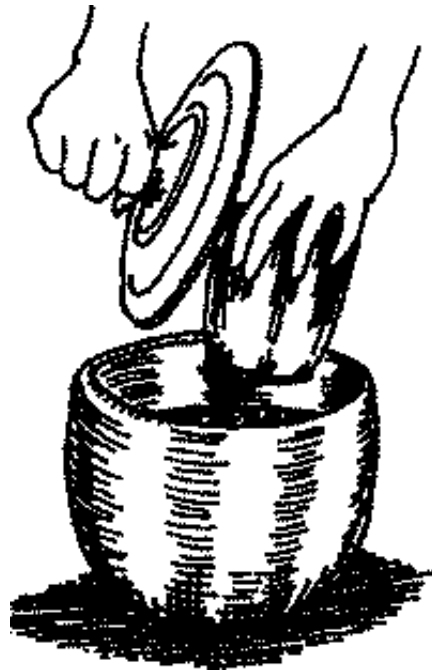
Food storage

Whenever possible, eat freshly prepared food. If you store food, keep it covered to protect it from flies and other insects, and dust.

◆ ***Women in the community who know which local foods keep well and good ways to store them can teach others.***

Food keeps best if it stays cool. The methods described below cool food using evaporation (the way that water disappears into the air). Put the food in shallow pans for more complete cooling.

Pottery cooler. This double-pot cooler is made of a small pot inside a large pot. The space between the pots is filled with water. Use a large pot and lid that have not been glazed (coated with a hard, smooth, baked-on covering) so that the water will evaporate through the pot. The small pot should be glazed on the inside to stop water from seeping into the stored foods.



Figure

Cupboard cooler. Put a wooden crate or box on its side, and then set it on bricks or stones to raise it off the floor Put a container of water on top of the crate and drape sackcloth or other coarse cloth over the bowl and around the crate. The cloth should not quite reach the floor. Dip the cloth in the water, so that the wetness spreads throughout the cloth. Place the food inside the crate. As the water in the cloth evaporates it will cool the food. This method works best if you can keep the cloth wet all the time.



Cover the entire crate when you make a cupboard cooler. The front is open here just so you can see inside.

Special Needs of Women

Rest and exercise

Rest

Most women work very hard cooking, carrying water, and collecting fuel to help their families survive. If a woman also works outside her home, she has a double

burden. She may work all day at a factory, in an office, or in the fields, and then return home to her second job - caring for her family. All this hard work can lead to *exhaustion, malnutrition, and sickness*, because she does not have enough time to rest or enough food to give her energy for her tasks.



**work
Figure**

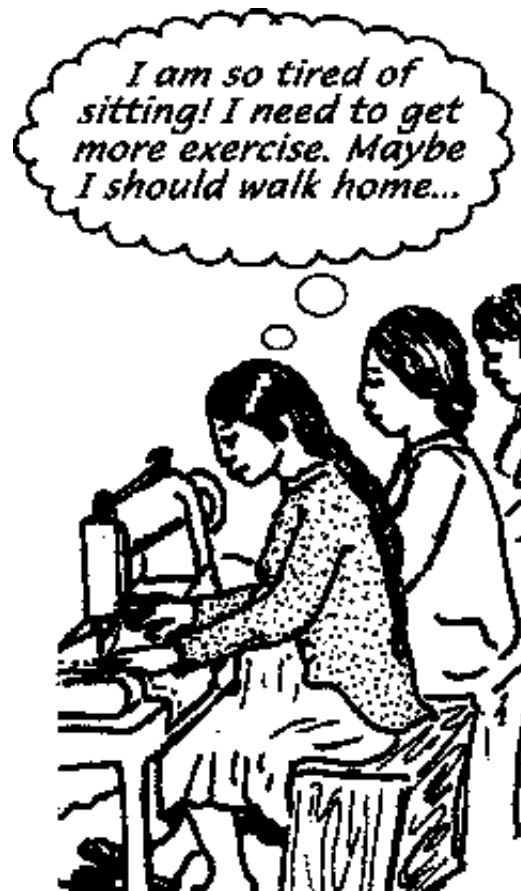
◆ *Work with your community to lower women's workload. Stoves that use less fuel and village water sources improve everyone's lives.*

To help reduce a woman's workload, family members can share the burden of work at home. Cooking, cleaning, and gathering fuel and water with other women (together or in turns) can also help make a woman's burden lighter. Whether she works for pay or not, she probably needs help caring for her children. Some women organize child care cooperatives, where one woman cares for young children so that others can work. Each woman pays something to the woman caring for the children or they each take a turn.



Figure

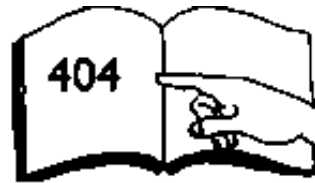
If a woman is pregnant, she needs even more rest. She can explain to her family why she needs rest, and ask them for extra help with her workload.



Figure

Exercise

Most women get plenty of exercise doing their daily tasks. But if a woman does not move much while she works - for example, if she sits or stands all day in a factory or office - she should try to walk and stretch every day. This will help keep her heart, lungs, and bones strong.



sitting or standing
for a long time
Figure

Regular health exams

If possible, a woman should see a trained health worker to check her *reproductive system* every 3 to 5 years, even if she feels fine. This exam should include a pelvic exam, a breast exam, a test for weak blood (*anemia*), and an exam for *sexually transmitted diseases (STDs)* if she is at risk. It may also include a Pop test (explained below) or other test for cervical cancer. This is especially important for women over 35, because women are more likely to get cancer of the cervix (the opening of the womb) as they get older.

◆ *Many STDs and cancers do not show signs until the illness is very serious. By then it may be too late to treat the problem.*



Figure



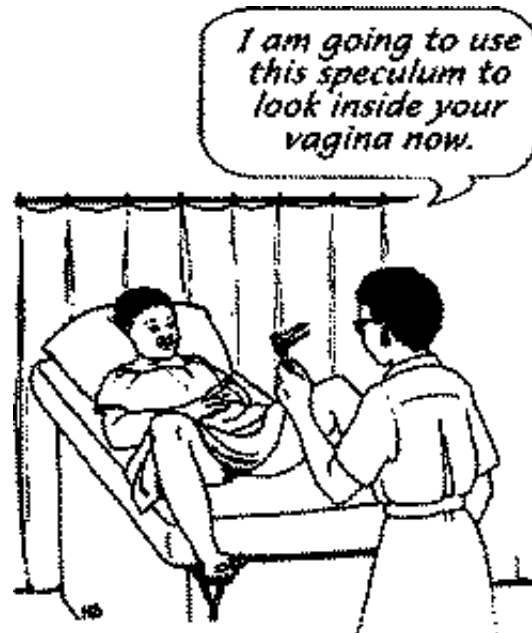
women who are at
risk for STDs

Figure

These are the steps in the pelvic exam:

- 1.** The health worker will look at your outer genitals for any swelling, bumps, sores, or changes in color.
- 2.** Usually, the health worker will put a speculum into your vagina. A speculum is a small

metal or plastic tool that holds the inside of the vagina open. He or she can then examine the walls of the vagina and the cervix for swelling, bumps, sores, or discharge. You may feel slight pressure or discomfort with the speculum inside, but it should not hurt. The exam is more comfortable if your muscles are relaxed and your *bladder* is empty.



Figure

3. If the clinic has *laboratory* services, the health worker will do a Pap test for cancer and, if needed, tests for STDs. To do a Pap test, the health worker scrapes a few *cells* from the cervix. This is not painful. You should only feel a little pressure. The cells are sent to a laboratory where they are checked for signs of cancer. If the cancer is found and treated early, it can almost always be cured.

4. After the health worker removes the speculum, she will put on a clean plastic glove and put two fingers of one hand into your vagina. She will press her other hand on your lower

belly. In this way she can feel the size, shape, and location of your womb, tubes, and ovaries. This part of the exam should not be painful. If it is, tell her. It may mean something is wrong.

5. For some problems, the health worker may need to do a rectal exam. One finger is put into your rectum and one finger into your vagina. This can give the health worker more information about possible problems of the vagina, and of the womb, tubes, and ovaries.

Safer sex

Having unprotected sex or sex with many partners makes a woman more at risk for getting an STD, including *HIV/AIDS*. Untreated STDs can cause *infertility*, *pregnancies in the tube*, and *miscarriage*. Having many partners also makes a woman more at risk for developing *pelvic inflammatory disease (PID)* and cancer. A woman can help prevent all these problems by practicing safer sex.



safer sex, 186

pelvic infection, 272

Figure

◆ ***AIDS has become a major cause of death among women.***

Family planning

A young woman should use family planning to delay her first pregnancy until her body is fully grown. Then, after her first baby is born, she should wait 2 or more years between each pregnancy. This method, called child spacing, lets her body get strong again between pregnancies, and her baby can finish breastfeeding. When she has the number of children she wants, she can choose not to have any more.



**family planning
Figure**

For healthy mothers and babies, it is better not to have:



babies too early, babies too late, too many babies, babies too close together.

Figure

Good care during pregnancy and birth

Many women do not seek care during their pregnancy because they do not feel sick. But feeling well does not mean there are no problems. Many of the problems of pregnancy and birth, such as high blood pressure or the baby lying the wrong way, do not have any signs. A woman should try to get regular prenatal (before birth) checkups, so that a midwife or health worker trained in giving care during pregnancy can examine her body and see if her pregnancy is going well. Good prenatal care can prevent problems from becoming dangerous.

Family planning and good care during pregnancy and birth can prevent:

Fallen womb (prolapse). If a woman has been pregnant often, had long labors, or pushed too early during labor, the muscles and *ligaments* that hold up her womb may have become weak. When this happens the womb can fall part or all of the way into the vagina. This is called a prolapse.



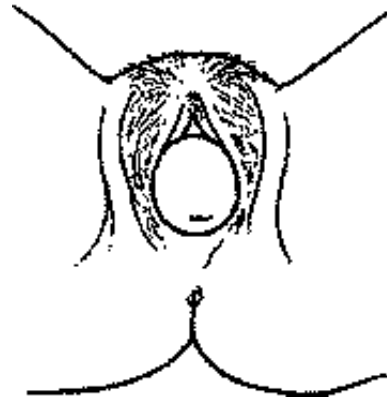
treatment for
fallen womb
Figure

Signs:

- leaking urine
- in severe cases, the cervix can be seen at the opening of the vagina



leaking urine
Figure



Figure



**giving birth
Figure**

Prevention:

- **Space children at least 2 years apart.**
- **During labor, push only when the cervix is fully open and there is a strong need to push. Never let anyone push down on your womb to get the baby out quickly.**



**squeezing exercise
Figure**

Urine leaking from the vagina (VVF). If a baby's head presses too long against the wall of the vagina during labor, the vaginal *tissue* may be damaged. Urine or stool may leak out of the vagina.

Prevention:

- **Wait to get pregnant until your body is fully grown.**
- **Avoid labor that goes on too long.**
- **Space babies at least 2 years apart so that your muscles can get strong again in between pregnancies.**

Vaccinations against tetanus

Tetanus is an infection that kills. A woman can get tetanus when a germ that lives in the stools of people or animals enters her body through a wound. Although anyone can get tetanus, women and babies are especially at risk during childbirth. Tetanus can enter the body if an instrument that is not properly disinfected is put into the womb or used to cut the baby's cord.

All girls and pregnant women should be *vaccinated* against tetanus. If a woman is pregnant and has not been vaccinated, she should have an *injection* at her first prenatal checkup, and a second injection at least a month later. Then, if possible, she should follow the rest of the schedule.

Tetanus immunization schedule:

No. 1: at first visit

- No. 2: at least 1 month after first injection
- No. 3: at least 6 months after 2nd injection
- No. 4: at least 1 year after 3rd injection
- No. 5: at least 1 year after 4th injection

Then get an injection every 10 years.

Regular breast exams

Most women have some small lumps in their breasts. These lumps often change in size and shape during her monthly cycle. They can become very tender just before a woman's monthly bleeding. Sometimes - but not very often - a breast lump that does not go away can be a sign of breast cancer.

◆ *A woman should examine her breasts every month, even after her monthly bleeding has stopped forever.*

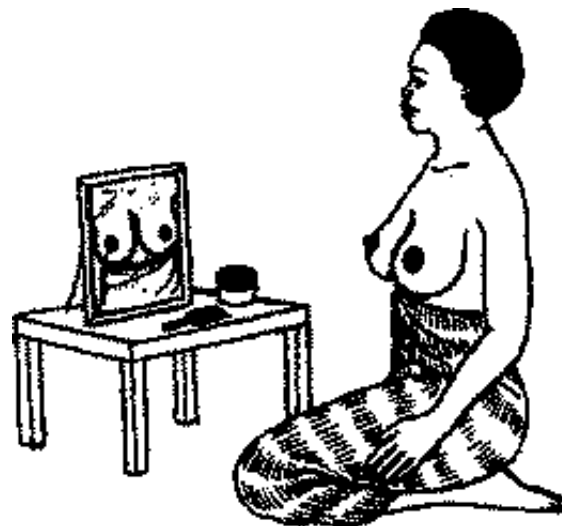
A woman can usually find breast lumps herself if she learns how to examine her breasts. If she does this once a month, she will become familiar with how her breasts feel, and will be more likely to know when something is wrong.

◆ *If a woman has a disability that makes examining her breasts difficult, she can ask someone she trusts to do it for her.*

How to examine your breasts

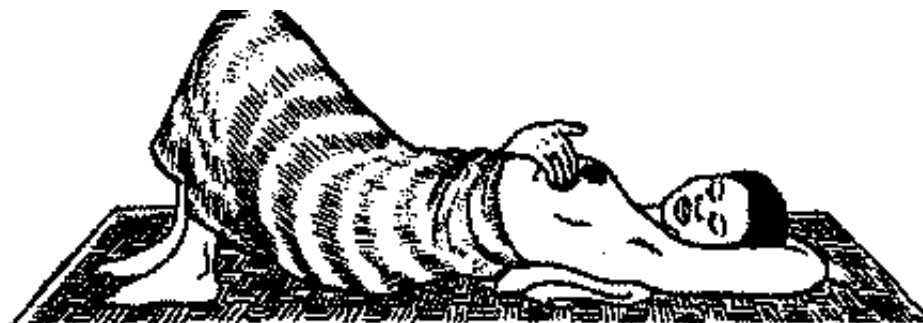
Look at your breasts in a mirror, if you have one. Raise your arms over your head. Look for any change in the shape of your breasts, or any swelling or changes in the skin or

nipple. Then put your arms at your sides and check your breasts again.



Figure

Lie down. Keeping your fingers flat, press your breast and feel for any lumps.



Figure

Be sure to touch every part of your breast. It helps to use the same pattern every month.



Figure

What to do if you find a lump

If the lump is smooth or rubbery, and moves under the skin when you push it with your fingers, do not worry about it. But if it is hard, has an uneven shape, and is painless, keep watching it - especially if the lump is in only one breast and does not move even when you push it. See a health worker if the lump is still there after your next monthly bleeding. This may be a sign of cancer. You should also get medical help if there is a *discharge* that looks like blood or pus.

Things to Avoid to Stay Healthy

Tobacco, alcohol, and other drugs can all be bad for a woman's health.

Working for Change

Working toward a balance between treatment and prevention

Health workers, or anyone working to improve the health of women in the community, can play an important role in stopping illnesses before they start. But

often a woman's main need is not preventing illness but getting relief from an illness she already has. One of the first concerns of a health worker, then, must be to help with healing.

But treatment can be used as a doorway to prevention. One of the best times to talk to a woman about prevention is when she comes to see you for help. For example, if a woman comes to you with an infection of the urine system, treat the problem first. Then take time to explain how she can prevent these infections in the future.



Figure

Work toward a balance between prevention and treatment that is acceptable to the women you see. This balance will depend a lot on how the women already feel about sickness, healing, and health. As daily survival becomes less of a challenge, as their ideas about health change, and more diseases are controlled, you may find that they become more interested in prevention. Then much needless suffering can be avoided, and you can help women work toward more effective self-care.

◆ Health workers can play an important role in helping women work together to prevent women's health problems in the community.



Figure



[Home](#) > [ar](#).[cn](#).[de](#).[en](#).[es](#).[fr](#).[id](#).[it](#).[ph](#).[po](#).[ru](#).[sw](#)

 **Where Women Have No Doctor - A Health Guide for Women**
(Hesperian Foundation, 1997, 600 p.)

➔  **Chapter 11: Eating for Good Health**

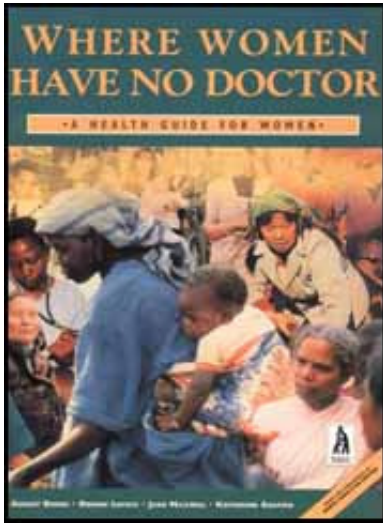
 **(introduction...)**

 **Main Foods and Helper Foods**

 **(introduction...)**

 **Important vitamins and minerals**

 **Eating Better for Less Money**



- ☐ **Harmful Ideas About Eating**
- ☐ **Poor Nutrition Can Cause Disease**
 - ☐ *(introduction...)*
 - ☐ **Anemia**
 - ☐ **Beriberi**
 - ☐ **Problems from eating too much food or the wrong kind of food**
- ☐ **Ways to Work toward Better Nutrition**
 - ☐ *(introduction...)*
 - ☐ **Trying a new idea**
 - ☐ **Working toward a balance between people and land**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 11: Eating for Good Health



Figure

A woman needs good food to do her daily work, to prevent illness, and to have safe and healthy births. And yet, around the world, more women suffer from poor nutrition than any other health problem. This can cause exhaustion, weakness, disability, and general poor health.

◆ *Many illnesses could be prevented if people had enough good food to eat.*

There are many reasons for hunger and not eating well. One main reason is poverty. In many parts of the world, a few people own most of the wealth and the land. They may grow crops like coffee or tobacco instead of food, because they can make more money that way. Or poor people may farm small plots of borrowed land, while the owners take a big share of the harvest.

This poverty is hardest on women. This is because in many families women are fed less than men, no matter how little there is to eat. So the problems of hunger and poor nutrition will never be completely solved until land and other resources are shared fairly, and women are treated equally with men.

Still, there are many things people can do now to eat better at low cost. By eating as well as they can, they will gain strength. And when people are not feeling hungry every day, they are more able to think about their families' and communities' needs and to work for change.

Main Foods and Helper Foods

In much of the world, most people eat one main low-cost food with almost every meal. Depending on the region, this may be rice, maize, millet, wheat, cassava, potato, breadfruit, or plantain. This main food usually provides most of the body's daily food needs.

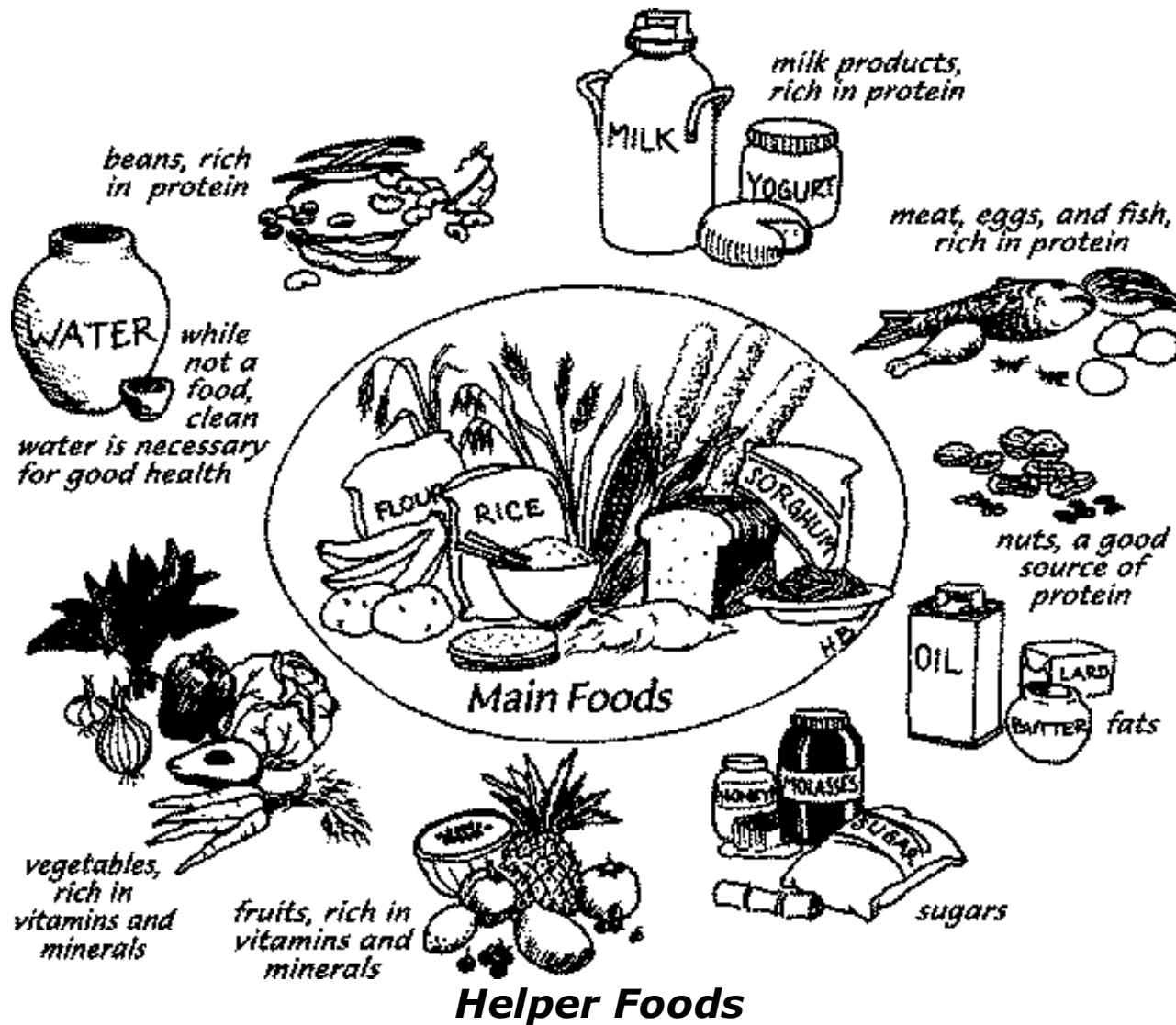
By itself, however, the main food is not enough to keep a person healthy. Other 'helper' foods are needed to provide protein (which helps build the body), vitamins and minerals (which help protect and repair the body), and fats and sugar (which give energy).

The healthiest diets have a variety of foods, including some foods with protein, and fruits and vegetables rich in vitamins and minerals. You need only a small amount of fat and sugar. But if you have problems getting enough food, it is better to eat foods with sugar and fat than to eat too little food.

◆ *Good nutrition means eating enough food and the right kind of food for the body*

to grow, be healthy, and fight off disease.

A woman does not need to eat all the foods listed here to be healthy. She can eat the main foods she is accustomed to, and add as many helper foods as are available in her area.



Important vitamins and minerals

There are 5 important vitamins and minerals that women need, especially women who are pregnant or breastfeeding. The 5 are: iron, folic acid (folate), calcium, iodine, and vitamin A.

Iron

Iron is needed to make blood healthy and to help prevent weak blood (*anemia*). A woman needs to get a lot of iron throughout her life, especially during the years she has monthly bleeding and during pregnancy.

These foods have a lot of iron:

- meat (especially liver, heart, and kidney)
- blood
- chicken
- eggs
- fish
- beans
- grasshoppers, crickets, termites
- peas



Figure

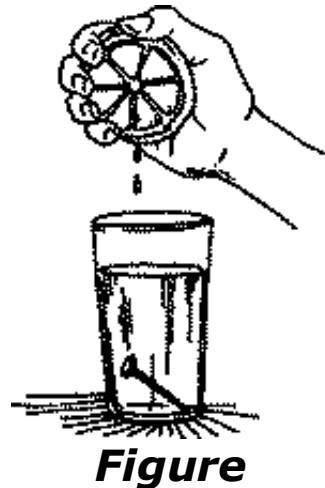
These foods also have some iron:

- cabbage with dark-colored leaves
- potatoes
- cauliflower
- lentils
- brussels sprouts
- turnips
- sunflower, sesame, pumpkin seeds
- strawberries
- dark green leafy vegetables
- pineapples
- yams
- seaweed
- broccoli
- dried fruit (especially dates, apricots, and raisins)

- black-strap molasses

It is possible to get even more iron if you:

- **Cook food in iron pots. If you add tomatoes, lime juice, or lemon juice (which are high in vitamin C) to the food while it is cooking, more iron from the pots will go into the food.**
 - **Add a clean piece of iron - like an iron nail or horseshoe - to the cooking pot. These should be made of pure iron, not a mixture of iron and other metals.**
 - **Put a clean piece of pure iron, like an iron nail, in a little lemon juice for a few hours. Then make lemonade with the juice and drink it.**
- ◆ ***It is best to eat iron foods along with citrus fruits or tomatoes. These contain vitamin C, which helps your body use more of the iron in the food.***



Folic acid (folate)

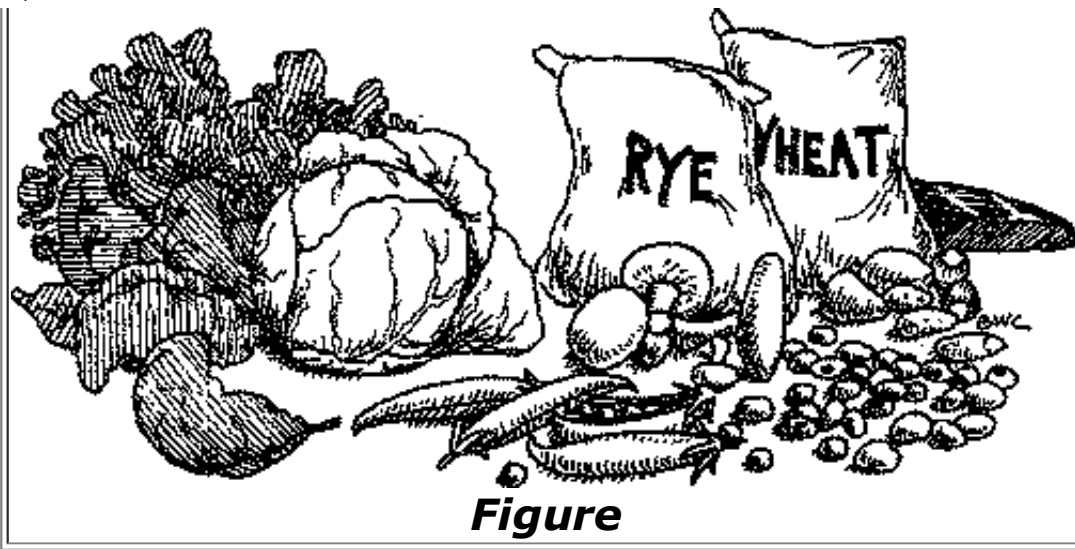
The body needs folic acid to make healthy red blood cells. Lack of folic acid can lead to anemia in women and severe problems in newborn babies. So getting enough folic acid is especially important during pregnancy.

◆ *Avoid cooking food for a long time. This destroys folic acid and other vitamins.*

Good sources of folic acid are:

- dark green leafy vegetables
- whole grains
- mushrooms
- liver
- meats
- fish
- nuts
- peas and beans

- eggs



Calcium

Everyone needs calcium to make their bones and teeth strong. In addition, girls and women need extra calcium:

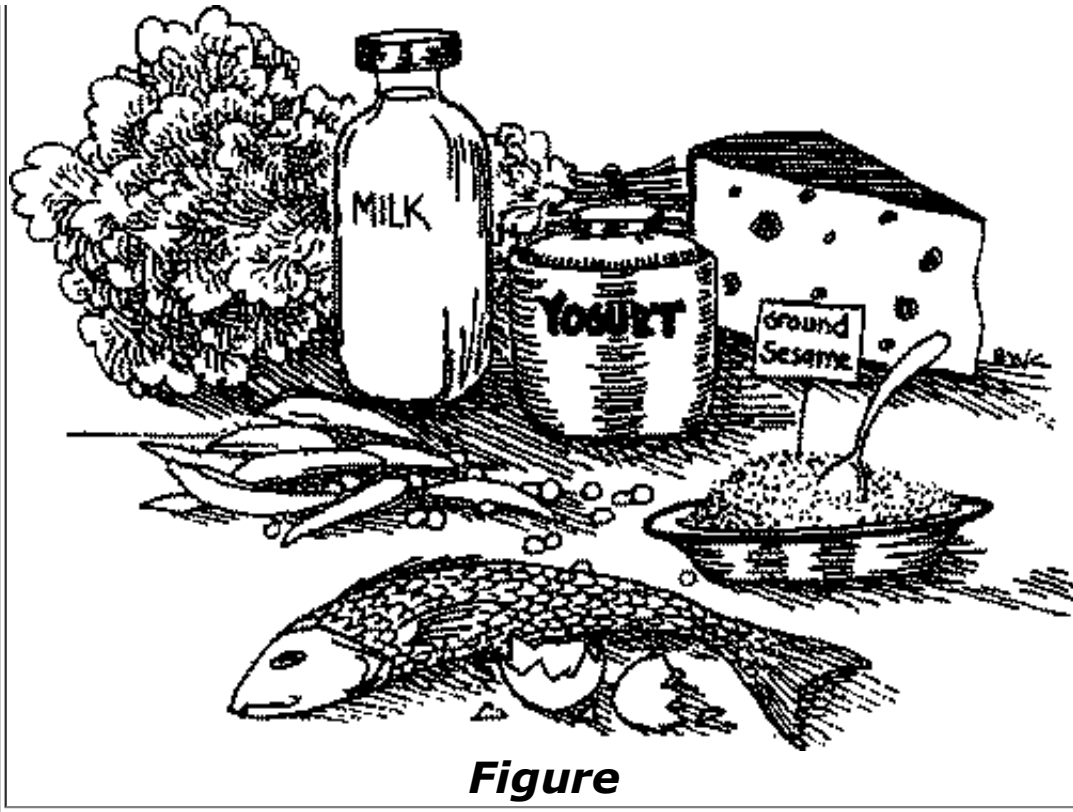
- **during childhood. Calcium helps a girl's hips grow wide enough to give birth safely when she is fully grown.**
- **during pregnancy. A pregnant woman needs enough calcium to help the baby's bones grow, and to keep her own bones and teeth strong.**
- **during breastfeeding. Calcium is necessary for making breast milk.**
- **during mid-life and old age. Calcium is needed to prevent weak bones (*osteoporosis*).**



**weak bones
Figure**

These foods are rich in calcium:

- milk, curd, yogurt
- cheese
- ground sesame
- bone meal
- green leafy vegetables
- almonds
- beans, especially soy
- shellfish
- lime (carbon ash)



Figure

To increase the amount of calcium you get from food:

- **Soak bones or egg shells in vinegar or lemon juice for a few hours, and then use the liquid in soup or other food.**
- **Add a little lemon juice, vinegar, or tomato when cooking bones for soup.**
- **Grind up egg shells into a powder and mix with food.**
- **Soak maize (corn) in lime (carbon ash).**



Sunshine will help you use calcium better. Try to be in the sun at least 15 minutes every day. Remember that it is not enough to just be outdoors. The sun's rays must touch the skin.

Iodine

Iodine in the diet helps prevent a swelling on the throat called *goiter* and other problems. If a woman does not get enough iodine during pregnancy, her child may be mentally slow. Goiter and mental slowness are most common in areas where there is little natural iodine in the soil, water, or food.



Figure

The easiest way to get enough iodine is to use iodized salt instead of regular salt. Or you can eat some of these foods (either fresh or dried):

- shellfish (like shrimp)
- fish
- seaweed
- cassava

- cabbage



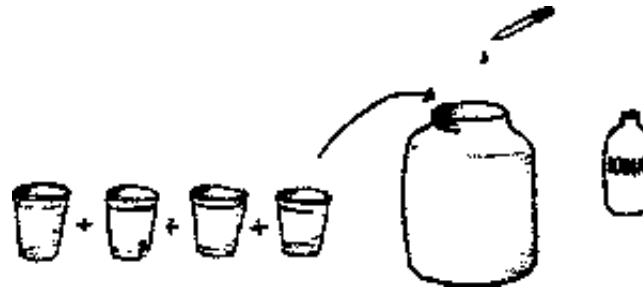
Figure

◆ ***The easiest way to get enough iodine is to use iodized salt instead of regular salt.***

If iodized salt or these foods are hard to get, or if there is goiter or mental slowness in your area, check with the local ministry of health to see if they can give iodized oil by mouth or by injection. If not, you can make an iodine solution at home with polyvidone iodine (an antiseptic that is often available at a local pharmacy). It contains 6 ml of iodine per drop. To make an iodine solution to drink:

1. Pour 4 glasses of clean drinking water into a jug or jar.

Store iodine at room temperature and in dark containers to protect it from light.



Figure

2. Add 1 drop of polyvidone iodine.

In areas where there is little natural iodine, everyone over 7 years old should drink 1 glass of this iodine solution every week of her or his life. This is especially important for pregnant women and children.

Vitamin A

Vitamin A prevents night blindness and helps fight off some infections. Many pregnant women have problems with night blindness, which probably means that their diet lacked vitamin A before they got pregnant. The problem shows up when pregnancy places extra demands on the body.



Dark yellow and green leafy vegetables, and some orange fruits, are rich in vitamin A.

Lack of vitamin A also causes blindness in children. By eating foods rich in vitamin A during pregnancy, a woman can increase the amount of vitamin A her baby will get in breast milk.

Eating Better for Less Money

When money is limited, it is important to use it wisely. Here are some suggestions for getting more vitamins, minerals, and proteins at low cost:

- 1. Protein foods. Beans, peas, lentils, and other similar foods (called legumes) are a good, cheap source of protein. If allowed to sprout before cooking and eating, they have more vitamins. Eggs are one of the cheapest sources of animal protein. Liver, heart, kidney, blood, and fish are often cheaper than other meats and are just as nutritious.**
- 2. Grains. Rice, wheat, and other grains are more nutritious if their outer skins are not removed during milling.**
- 3. Fruits and vegetables. The sooner you eat fruits and vegetables after harvesting, the more nutrition they have. When you store them, put them in a cool, dark place to preserve vitamins. Cook vegetables in as small an amount of water as possible, because vitamins from the vegetables go into the water during cooking. Then use the water in soups or drink it.**

The tough outside leaves or tops from vegetables like carrots or cauliflower

contain many vitamins and can be used to make healthy soups. For instance, cassava (manioc) leaves contain 7 times as much protein and more vitamins than the root.

Many wild fruits and berries are rich in vitamin C and natural sugars, and can provide extra vitamins and energy.

4. Milk and milk products. These should be kept in a cool, dark place. They are rich in body-building proteins and in calcium.

5. Avoid spending money on packaged foods or vitamins. If parents took the money they often use for sweets or sodas (fizzy drinks) and spent it on nutritious foods, their children would be healthier for the same amount of money.

Since most people can get the vitamins they need from food, it is better to spend money on nutritious foods than on pills or *injections*. If you must take vitamins, take pills. They work as well as injections and cost less.



You can buy more nutritious food than packaged food for the same amount of money.

Harmful Ideas About Eating

In many parts of the world, certain traditions and beliefs about women and food are more harmful than helpful. For example:

It is not true that girls need less food than boys. Some people believe that boys need more food. But these people are wrong! Women work just as hard as men in most communities, if not harder, and need to be as healthy. Girls who are healthy and well-fed during childhood grow up into healthy women, and have fewer problems at school and at work.

It is not true that women should avoid foods during pregnancy and breastfeeding. In some communities, people believe that a woman should avoid certain foods - like beans, eggs, chicken, milk products, meat, fish, fruits, or vegetables - at different times in her life. These times may include her monthly bleeding, pregnancy, immediately after childbirth, while breastfeeding, or during *menopause*. But a woman needs all these foods, especially during pregnancy and while breastfeeding. Avoiding them can cause weakness, illness, and even death.

It is not true that a woman should feed her family first. A woman is sometimes taught to feed her family before herself. She eats only what is left and often does not get as much food as the rest of the family. This is never healthy. And when a woman is pregnant, or has just had a baby, it can be very dangerous.

If a family does not help a woman eat well, we encourage her to do what she must to get enough food. She may need to eat while cooking, or hide food and eat it when her husband is out of the house.

It is not true that a sick person needs less food than a healthy person. Good food not only prevents disease but also helps a sick person fight

disease and become well again. As a general rule, the same foods that are good for people when they are healthy are good for them when they are sick.



Figure

Poor Nutrition Can Cause Disease

Because girls and women often get less food - and less nutritious food - than they need, they are more likely to get sick. Here are some common illnesses caused by poor nutrition.

Anemia

A person with anemia has weak blood. This happens when red blood cells are lost or destroyed faster than the body can replace them. Because women lose blood during their monthly bleeding, anemia is often found in women who are between *puberty* and menopause. About half of the world's pregnant women are anemic, because they need to make extra blood for the growing baby.

Anemia is a serious illness. It makes a woman more likely to get other kinds of diseases, and affects her ability to work and learn. Anemic women are more likely to bleed heavily or even die during childbirth.

Signs:

- **pale inner eyelids, tongue, and nails**
- **weakness and feeling very tired**
- ***dizziness*, especially when getting up from a sitting or lying position**
- **fainting (loss of consciousness)**
- **shortness of breath**
- **fast heartbeat**



Figure

Causes of anemia:

The most common cause of anemia is not eating enough food rich in iron, since iron is needed to make red blood cells. Other causes are:

- ***malaria*, which destroys red blood cells**
- **any kind of blood loss, such as:**
 - **heavy monthly bleeding (an *intra-uterine device*, or IUD, can make bleeding heavier)**
 - **childbirth**
 - **bloody diarrhea (dysentery) from *parasites* and worms**
 - **bleeding stomach *ulcers***
 - **a wound that bleeds a lot**

◆ ***For more information about malaria, parasites, and worms, see *Where There Is No Doctor* or another general medical book.***

Treatment and prevention:

- **If malaria, parasites, or worms are causing your anemia, treat these diseases first.**
- **Eat foods rich in iron, along with foods rich in vitamins A and C, which help the body absorb iron. Citrus fruits and tomatoes are rich in vitamin C. Dark yellow and dark green leafy vegetables are rich in vitamin A. If a woman cannot eat enough foods rich in iron, she may need to take iron pills.**
- **Avoid drinking black tea or coffee, or eating bran (the outer layer of grains) with meals. These can prevent the body from absorbing iron from food.**
- **Drink clean water to prevent infection from parasites.**
- **Use a *latrine* for passing stool, so that worm eggs will not spread to food and water sources. If hookworms are common in your area, try to wear shoes.**
- **Space births at least 2 years apart. This will give your body a chance to store some iron between pregnancies.**



clean water
Figure



cleanliness
Figure

Beriberi

Beriberi is a disease caused by lack of thiamine (one of the B vitamins), which helps the body turn food into energy. Like anemia, beriberi is most often seen in women from puberty to menopause, and in their children.

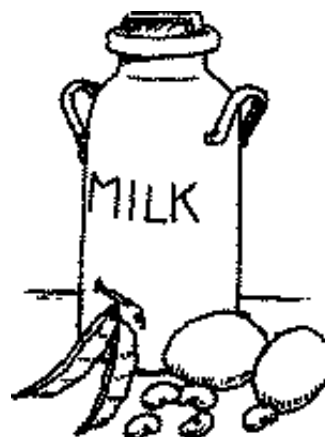
Beriberi occurs most often when the main food is a grain whose outer skin has been removed (for example, polished rice) or a starchy root, like cassava.

Signs:

- **not wanting to eat**
- **severe weakness, especially in the legs**
- **the body becomes very swollen or the heart stops working**

Treatment and prevention:

Eat foods rich in thiamine, like meat, poultry, fish, liver, whole grain cereals, legumes (peas, beans, clover), milk, and eggs. If this is difficult, a person may need thiamine pills.



Figure

Problems from eating too much food or the wrong kind of food



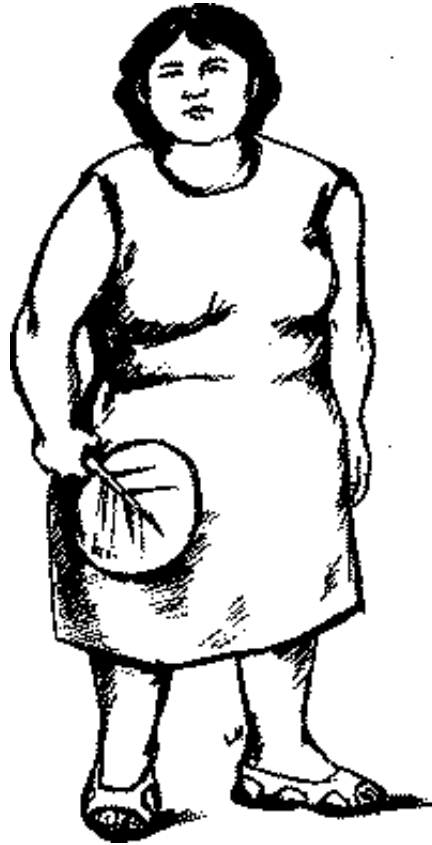
high blood pressure, 130

cancer, 376

arthritis, 133

Figure

If a woman weighs too much or eats too much fat, she is more likely to have high *blood* pressure, heart disease, a stroke, *gallstones*, diabetes, and some cancers. Being overweight can also cause *arthritis* in the legs and feet.



Figure

People who weigh too much should lose weight by exercising more, and by replacing fatty and sweet foods in their diet with fruits and vegetables. Here are some suggestions for cutting down the amount of fat in the diet:

- **When cooking, try to use as little butter, ghee, lard, or oil as possible. Or cook with broth or water instead.**
- **Remove fat from meat before cooking. Do not eat the skin of chicken or turkey.**

- **Avoid processed snack foods that are high in fat, like chips and crackers.**

Diabetes

People with diabetes have too much sugar in their blood. This disease is usually more serious if it starts when a person is young (juvenile diabetes). But it is most common in people over age 40 who are overweight.

Early signs:

- **always thirsty**
- **urinates often and a lot**
- **always tired**
- **always hungry**
- **weight loss**
- **frequent *vaginal* infections**

♦ *Diabetes is more likely to develop during pregnancy than at other times. If you are pregnant and are always thirsty or are losing weight, see a health worker who can test your urine for sugar.*

Later, more serious signs:

- **itchy skin**
- **periods of blurry eyesight**
- **some loss of feeling in the hands or feet**
- **sores on the feet that do not heal**
- **loss of consciousness (in extreme cases)**

All these signs may be caused by other diseases. To find out whether you have diabetes, you can test your urine yourself. Use special paper strips, like *Uristix*, that change color when dipped in urine that has sugar in it. If the strips are not available, see a health worker to get a simple urine test for sugar.

Treatment:

If you have diabetes and are less than 40 years old, you should be treated by a health worker whenever possible. If you are over 40, you may be able to control diabetes by watching your diet:

- **Eat smaller meals more often. This helps keep the same amount of sugar in the blood.**
- **Avoid eating a lot of sweet foods.**
- **If you are overweight, try to lose weight.**
- **Avoid foods high in fat (for example, butter, ghee, lard, and oils), unless you have trouble getting enough food to eat.**

If possible, you should also see a health worker regularly to make sure your illness is not getting worse.

♦ *There may be plants in your area that are helpful for diabetes. Check with a health worker.*

To prevent infection and injury to the skin, clean your teeth after eating, keep your

skin clean, and always wear shoes to prevent foot injuries. Check your feet and hands once a day to see if you have any sores. If you have a sore and there are any signs of infection (redness, swelling, or heat), see a health worker.



Check your feet once a day to see if you have any sores or signs of infection.

Whenever possible, rest with your feet up. This is especially important if your feet get darker in color and become numb. These signs mean that the blood flow to and from your feet is poor.

Other health problems that can be caused or made worse by poor nutrition:

- high blood pressure
- weak bones
- constipation

- stomach ulcers, acid indigestion, and heartburn

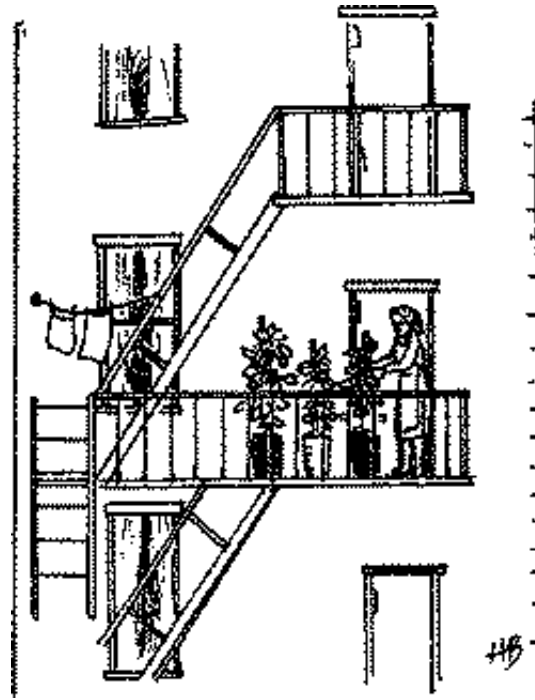
For more information on stomach ulcers, indigestion, and *heartburn*, see ***Where There Is No Doctor*** or another general medical book.

Ways to Work toward Better Nutrition

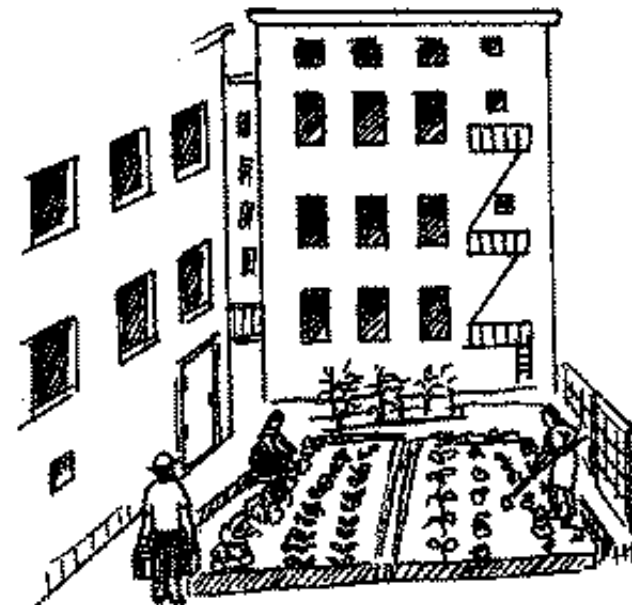
There are many different ways to approach the problem of poor nutrition, because many different things help cause the problem. You and your community must consider the possible actions you might take and decide which are most likely to work.

Here are a few examples of ways to improve nutrition. These suggestions can help you grow more food or different kinds of food, or store it better so the food does not spoil. Some of these examples bring quick results. Others work over a longer time.

Some ways people can improve their nutrition



Family gardens



Community gardens

Rotation of crops

Every other planting season, plant a crop that returns strength to the soil - like beans, peas, lentils, alfalfa, peanuts, or some other plant with seeds in pods (legumes or pulses).



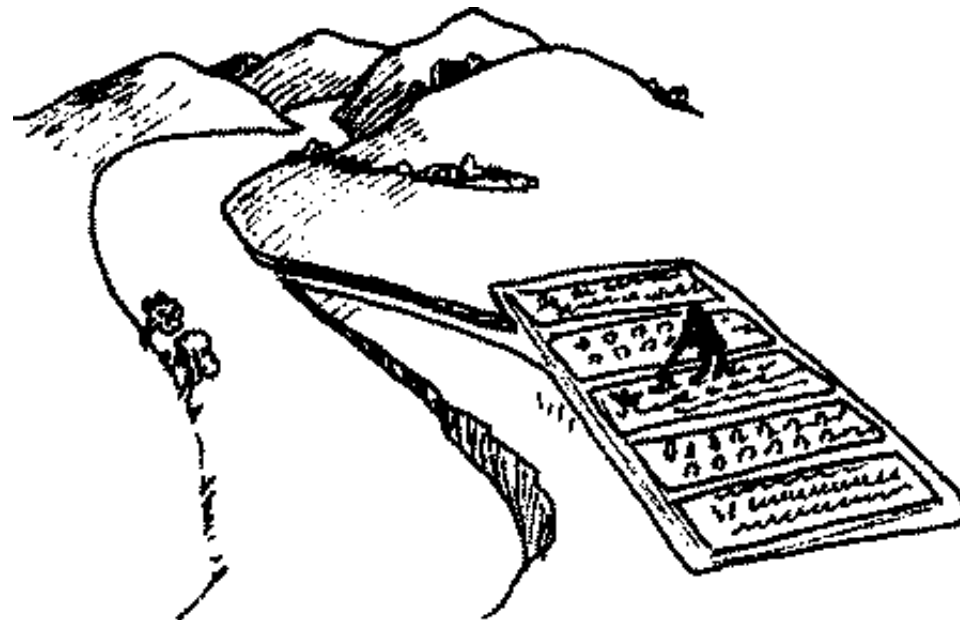
This year maize



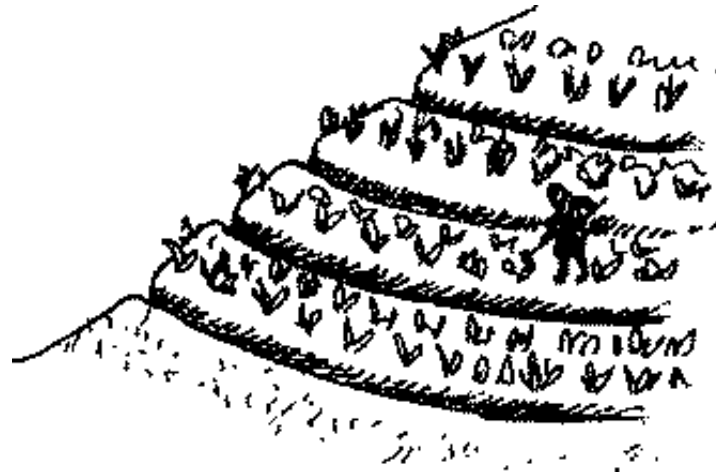
Next year beans

Figure

Try to grow a variety of foods. That way, even if one crop fails there will still be something to eat.



Irrigation

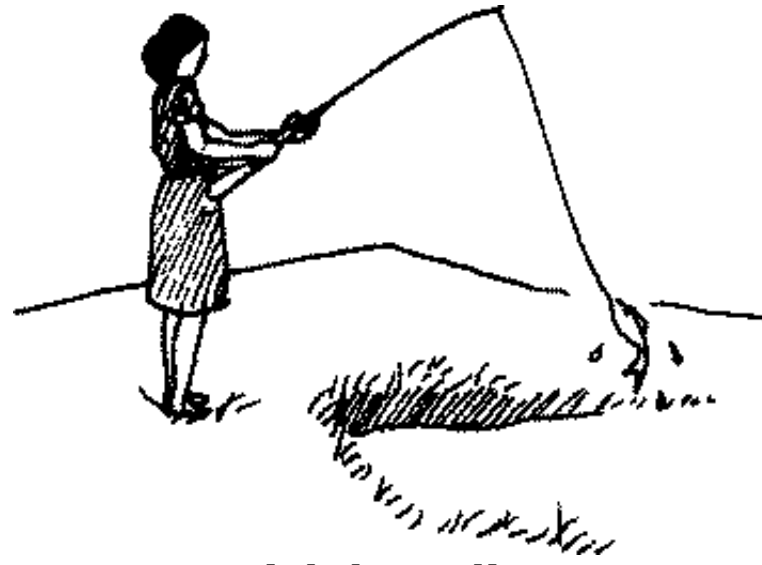


Contour ditches prevent the soil from washing away.

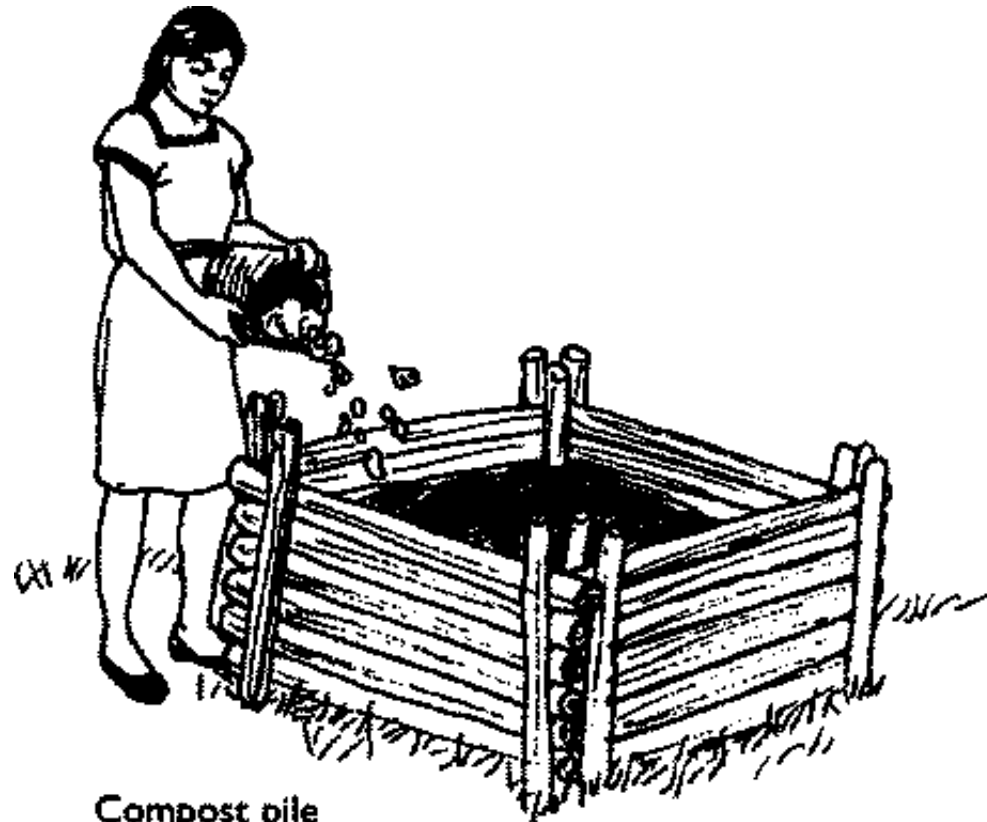


Food cooperatives

The community can buy large amounts of food at lower prices.

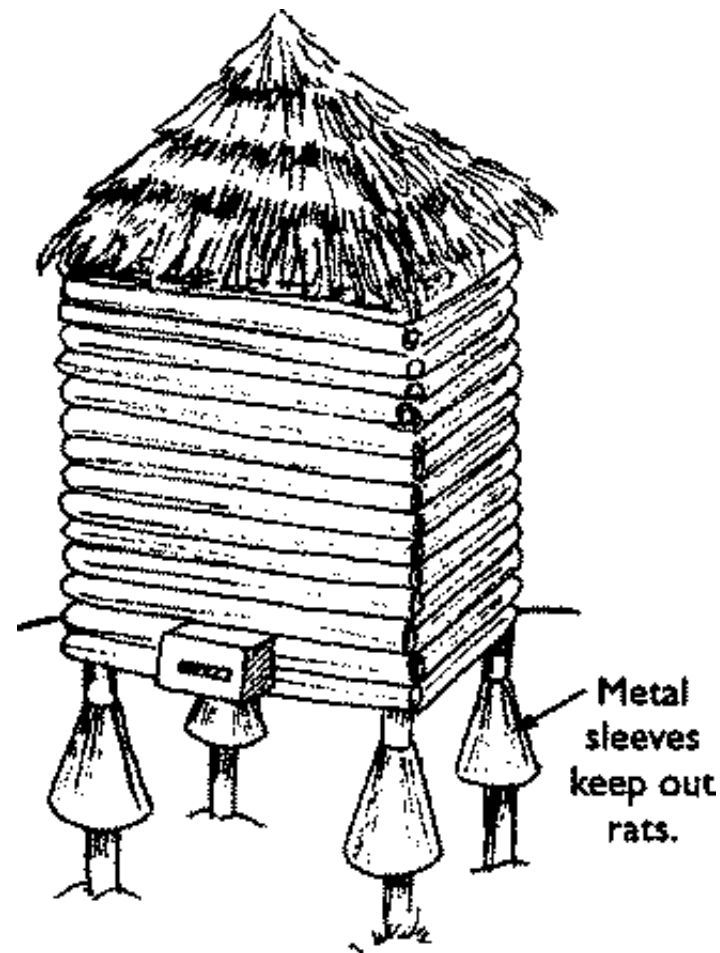


Fish breeding



Compost pile

Natural fertilizers



Better food storage

Trying a new idea

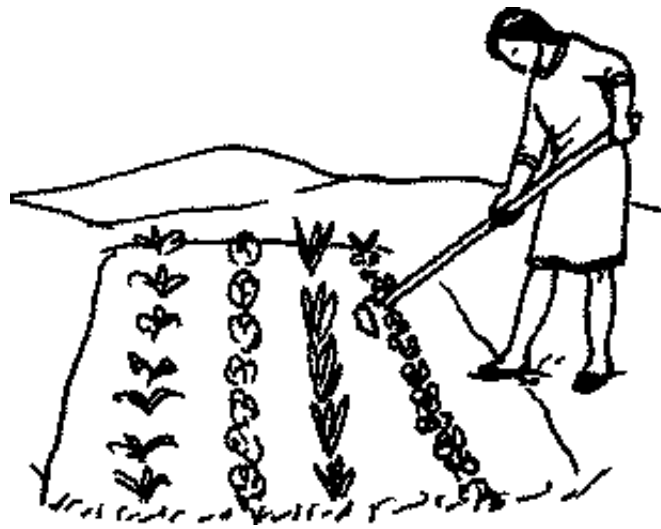
Not all the suggestions in this chapter are likely to work in your area. Perhaps some will work if they are changed for your particular community and the resources at hand. Often you can only know whether something will work or not by trying it - that is, by experiment.

When you try out a new idea, always start small. If you start small and the experiment fails, or something has to be done differently, you will not lose much. If it works, people will see that it works and can begin to use it in a bigger way.

Here is an example of experimenting with a new idea:

You learn that a certain kind of bean, such as soya, is an excellent body-building food. But will it grow in your area? And if it grows, will people eat it?

Start by planting a small patch - or 2 or 3 small patches under different kinds of conditions (for example, with different kinds of soil or using different amounts of water). If the beans do well, try cooking them in various ways, and see if people will eat them. If so, try planting more beans using the conditions in which they grew best.



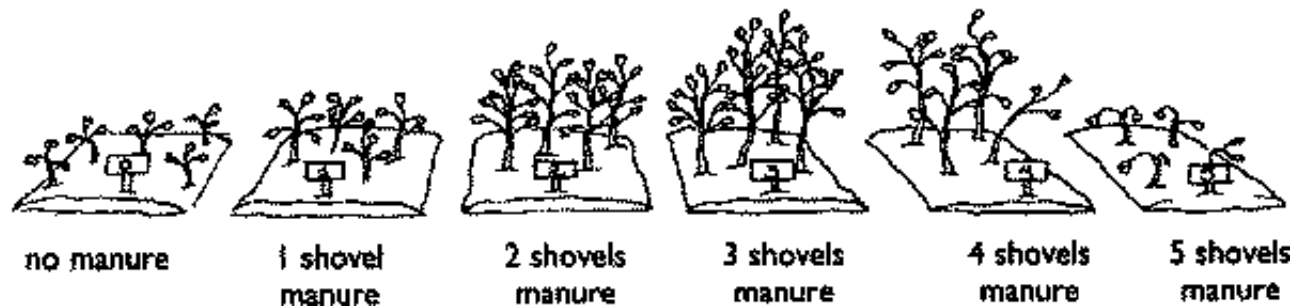
Figure

You can also try out even more conditions (for example, adding fertilizer or using

different kinds of seed) in more small patches to see if you can get an even better crop. To understand what helps and what does not, try to change only one condition at a time and keep the rest the same.

♦ Do not be discouraged if an experiment does not work. Perhaps you can try again with certain changes. You can learn as much from your failures as from your successes.

Here is an example of adding animal fertilizer (manure) to see if it helps beans grow. This person planted several small bean patches side-by-side, under the same conditions of water and sunlight, and using the same seed. Before planting, each patch of soil was mixed with a different amount of manure, something like this:



Figure

This experiment shows that a certain amount of manure helps, but that too much can harm the plants. This is only an example. Your experiments may give different results. Try for yourself!

Other ideas to experiment with

- To increase the amount of food a piece of land will produce, try planting different kinds of crops together. For example, plants that grow along the ground can be mixed with plants that grow tall. Fruit trees can be planted above both. Or plants that take a shorter time to grow can be mixed with those that take a longer time. Then the first crop can be harvested before the second crop gets too large.
- If you must plant cash crops (non-food crops that you sell), try planting food crops together with the cash crops. For example, plant nut or fruit trees to shade coffee. Or plant cassava with cotton.
- Try to find nutritious plants that grow well in local conditions, so that you will need less water and fertilizer for good results.



By planting breadfruit and cacao together, this family can earn some money and grow more food for themselves - with the same amount of land.

Working toward a balance between people and land

Most food comes from the land. Land that is used well can produce more food. But even the best used piece of land can only feed a certain number of people. And today, many of the people who farm do not have enough land to meet their needs or to stay healthy.

For this reason, some people argue that 'the small family lives better'. For many poor families, however, having many children is an economic necessity. Because of the work they do to help the family, children of poor families often produce more than they cost by the time they are 10 or 12 years old. Having a lot of children also makes it more likely the parents will have someone to give the help and care they need in old age.

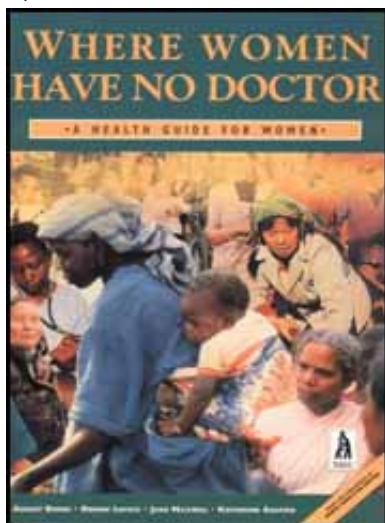
So lack of social and economic security creates the need for parents to have many children. Therefore, the answer to gaining a balance between people and land does not come from telling poor people to have smaller families. It comes from sharing the land more fairly, paying fair wages, and taking other steps to overcome poverty. Only then can people afford small families. Then we can hope to achieve a lasting balance between people and land.



[Home](#)"" """"> [ar.cn.de.en.es.fr.id.it.ph.po.ru.sw](#)



**Where Women Have No Doctor - A Health Guide for Women
(Hesperian Foundation, 1997, 600 p.)**



- ➔ **Chapter 12: Sexual Health**
 - (introduction...)**
 - Sex and Gender Roles**
 - (introduction...)**
 - How gender roles are learned**
 - When gender roles cause harm**
 - How Gender Roles Affect Sexual Health**
 - Harmful beliefs about women's sexuality**
 - Gaining More Control over Your Sexual Health**
 - (introduction...)**
 - Safer sex for sexual health**
 - Making changes for safer sex**
 - Feeling more pleasure from sex**
 - Working for Change**
 - Changing harmful gender roles**
 - Improving sexual health in your community**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 12: Sexual Health



Figure

We have been ignorant for so long, and full of fear about our bodies.

- Oaxaca, Mexico

Sex is a natural part of life. For many women, it is a way to feel pleasure, express love or sexual desire for their partners, or to become pregnant with the children they hope for.

But sex can also lead to serious problems, such as pregnancies that are unwanted or that threaten a woman's health, *sexually transmitted diseases (STDs)*, or

physical and emotional harm from forced sex.

To be free from these problems, a woman must have control over her sexual life. This control should include:

- **choosing her sexual partner.**
- **negotiating when and how to have sex.**
- **choosing if and when she becomes pregnant.**
- **preventing STDs, including *HIV/AIDS*.**
- **being free from sexual violence, including forced sex.**

When a woman has this control, we say she has good sexual health. But in many communities, harmful beliefs about what it means to be a woman make it hard for women to have good sexual health. This chapter gives information and suggestions about how women can overcome these beliefs and gain control over their sexual lives.

Sex and Gender Roles

Each person is born with either a girl's body or a boy's body. These physical differences determine a person's sex, which does not change overtime.

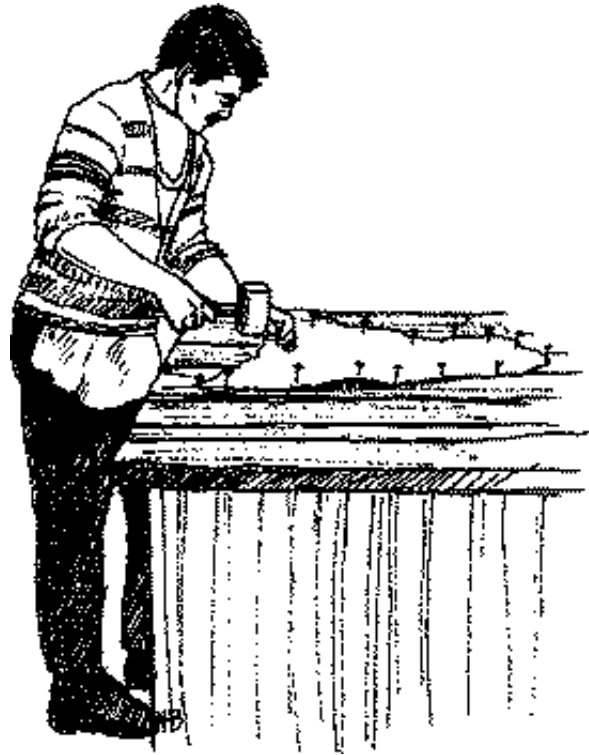
A person's gender role refers to the way a community defines what it is to be a woman or a man. Each community expects women and men to think, feel, and act in certain ways, simply because they are women or men. In most communities, for example, women are expected to prepare food, gather water and fuel, and care for their children and partner. Men, however, are often expected to work outside the home to provide for their families and parents in old age, and to defend their

families from harm.



Figure

Unlike the physical differences between men and women, gender roles and the activities associated with them are created by the community. Some activities, like preparing food and caring for children, are considered 'women's activities' in many communities. But others vary from place to place - depending on a community's traditions, laws, and religions. Gender roles can even vary within communities, based on how much education a person has, her race, or her age. For example, in some communities women of a certain race are expected to do domestic work, while other women have more choice about the jobs they hold.



Figure

How gender roles are learned

Gender roles are passed down from parents to children. From the time children are very young, parents treat girls and boys differently - sometimes without realizing they do so. Children watch their parents closely, noticing how they behave, how they treat each other, and what their roles are in the community.

As children grow up, they accept these roles because they want to please their parents and, because parents have more authority. These roles also help children know who they are and what is expected of them. So in the same way that children learn their own names, they also learn about their gender - that is, what

it means to be a woman or a man.

As the world changes, gender roles also change. Many young people want to live differently from their parents. But they sometimes find it difficult to change, because the family and community expect them to continue following old 'rules'. As women struggle to gain the freedom to redefine their gender roles, they can also gain more control over the things that determine sexual health.

When gender roles cause harm

Fulfilling the roles expected by the community can be satisfying and can give a woman a sense of belonging. But these roles can also limit a woman's activities and choices, and make her feel less valued than a man. When this happens, everyone - the woman herself, her family, and her community - suffers.

In most communities, women are expected to be wives and mothers. Many women like this role because it can be very satisfying and it gives them *status* in the community. Other women would prefer to follow their own interests - , or they want to have only a few children - but their families and communities do not give them this choice. If she is expected to have many children, a woman may have less chance to learn new skills or go to school. Most of her time and energy will be spent taking care of others' needs. Or, if a woman is unable to have children, her community may value her less than other women.



Figure

Most communities value men's work more than women's work. For example, this woman has worked all day - and then cooks, cleans, and cares for her children at night. But because her husband's work is considered more important, _ she is concerned about his rest - not her own. Her children will grow up thinking men's work is more important, and value women less.



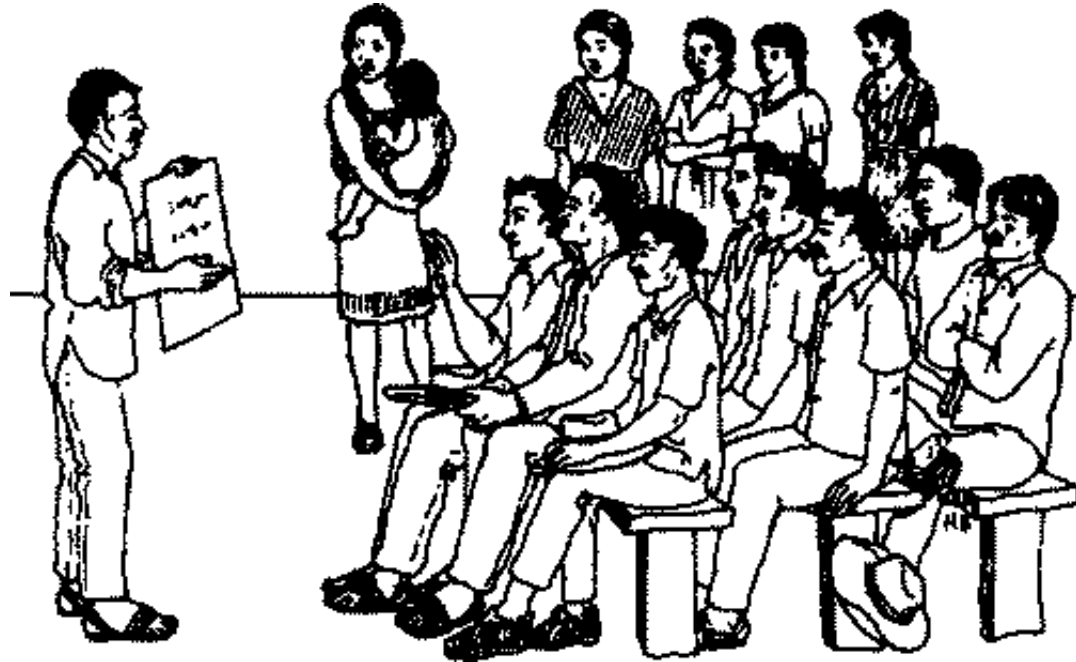
Figure

Women are often considered more emotional than men, and they are free to express these emotions with others. Men, however, are often taught that showing emotions like sadness or tenderness is 'unmanly', so they hide their feelings. Or they express their feelings in angry or violent ways that are more acceptable for men. When men are unable to show their feelings, children may feel more distant from their fathers, and men are less able to get support from others for their problems.



Figure

Women are often discouraged from speaking - or forbidden to attend or speak - at community meetings. This means the community only hears about what men think - for example, how they view a problem and their solutions for it. Since women have much knowledge and experience, the whole community suffers when they cannot discuss problems and offer suggestions for change.



Figure

Women and men who have sexual relations with people of the same sex (homosexuals) are sometimes made to feel like outcasts in their own communities. Even if they are community leaders in other ways, they may be forced to live and love in secrecy and shame. In some communities, fear or lack of understanding of people in same sex relationships may even lead to physical violence against them. Any time a person is made to feel afraid or ashamed about who he or she is, it harms the person's mental and sexual health.

How Gender Roles Affect Sexual Health

Harmful beliefs about women's sexuality

What it means to be a woman or a man in a particular community includes beliefs

about men's and women's sexuality - that is, about sexual behavior and how people feel about their own bodies.

A few harmful beliefs about women's sexuality that are common in many communities are described below. These beliefs and other harmful effects of gender roles - the lack of opportunity and choice for women, and the lack of value they feel - prevent women from having control over their sexual lives. This puts them at great risk for sexual health problems.

Harmful belief: Women's bodies are shameful

Mothers and fathers begin to teach their children about their bodies as soon as they are born. Parents do not do this directly. But a baby learns it by the way the parents hold her, and the tone of their voices.



Figure

As a little girl grows, she becomes curious about her body. She wants to know what the different parts are called and why her *genitals* are different from a boy's. But unlike little boys, she is often scolded for being curious, and is told that 'nice girls' do not ask such things. If she touches her genitals, she is taught that it is dirty or shameful - and that she should keep her sexual parts hidden.



Parents act differently when little boys and little girls touch their bodies.

Her parents' reactions teach a little girl that her body is shameful. As a result, she will find it difficult to ask questions about changes in her body as she enters *puberty*, and about her *monthly bleeding*, or about sex. She may be too embarrassed to talk to a health worker, because she does not know what parts of her body are called or what questions to ask. When she starts having sex, she is less likely to understand how her body feels sexual pleasure, or to know how to protect herself from unwanted pregnancy or sexually transmitted diseases (STDs).

♦ ***A woman's body is NOT shameful. Her body is something to discover, love, and value.***

Our bodies are not causes for shame. Our bodies allow us to touch and care for others, and to feel sexual pleasure. Our bodies are something to discover, love, and value.

Harmful belief: Women's bodies belong to men

In many communities, a woman is treated like the property of her father or husband. As a child, she belongs to her father, and he can arrange to have her marry whomever he chooses. Sometimes she will be sold - like property - to her husband or to an employer. Her future husband wants his property to be 'pure' and unspoiled by other men, so he expects her to be a *virgin*. After marriage, he feels he has the right to use her body for his pleasure whenever he wants. He may have sex with other women, but she is to be his alone.

These beliefs can cause great harm. A girl learns that other people make the important decisions about her life - it does not matter what she wants or what skills she could contribute to the community. Because virginity is valued so highly, she may be forced to marry at a young age. Or she may try to remain 'virgin' by using unsafe sexual practices. For example, she may have sex in the anus (so that her hymen will not be torn), which puts her at great risk for STDs, including HIV/AIDS. When she starts having sex, she may have little power to discuss *family planning methods* with her partner or to protect herself from STDs.



Some girls are married as children to make sure they will be virgins. This can cause serious health problems for a girl and her babies.

But men do not own women's bodies! A woman's body is hers alone, and she should be able to decide how, when, and with whom to share it.

Harmful belief: Women have less sexual desire

A woman is often taught that it is part of her duty as a wife to meet her husband's sexual demands. But if she is a 'good' woman, she will endure sex, not want it.

Again, these beliefs harm a woman's sexual health. First, a woman who believes she should not think about sex will be unprepared to have sex safely. She is less likely to learn about family planning or about how to get and use condoms. Even if she has the information, it will be hard for her to discuss these things with her partner beforehand. If she can discuss sex, her partner may think she is sexually

experienced, and therefore 'bad'.

Once she is in a sexual relationship, she is likely to let her partner control the kind of relationship they have. This includes when and how they have sex, whether they try to prevent pregnancy or STDs, and whether he has sex with other women. This puts her at great risk for getting STDs.



Figure

But sexual desire is a natural part of life, and a woman can feel as much sexual

desire and pleasure as a man.

Gaining More Control over Your Sexual Health

Improving sexual health means:

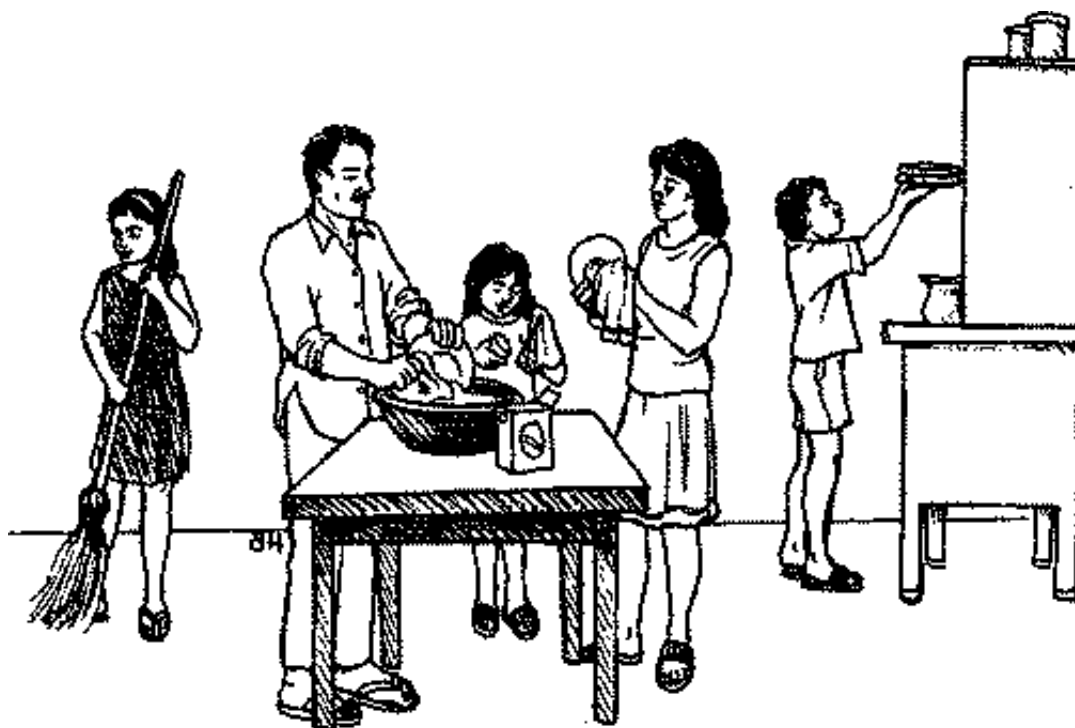
- **reducing the risk of unwanted pregnancy and STDs. This means women must have access to information about family planning methods and ways to prevent STDs, including HIV/AIDS (safer sex methods and practices). Women also need control over when to use these methods. For information about family planning and choosing a method that works best for you, see the chapter on “Family Planning.” For information about safer sex, see the next section below.**
 - **feeling more pleasure from sex. What brings pleasure to one person should not be harmful to another.**
 - **changing harmful gender roles, including harmful beliefs about women’s sexuality. This kind of change takes time, because it means women and men must develop different ways of relating to each other See suggestions about how you and your community can work to change these roles.**
- ♦ ***It is best for family planning and STD services to be included in the other health services women already use.***



STDs, 261

HIV/AIDS, 283

Figure



Figure

Safer sex for sexual health

In the past, the main danger from sex was unwanted pregnancy. Now STDs, including HIV/AIDS, have become a serious sexual health problem.

STDs are caused by germs that are passed from one person to another during sex. Some STDs, like genital warts and herpes, are spread by germs on the outer genitals of an infected person. Other STDs are passed by contact with germs in a man's semen, the liquid in a woman's *vagina*, or blood. *Infection* can happen when the germs pass through the *cervix* into the *womb*, or through breaks in the skin - especially in the *vagina*, *anus*, tip of the *penis*, or mouth.

◆ ***Safer sex can save your life.***

Because STDs are spread through sexual contact, avoiding direct contact with an infected man's genitals, semen and blood is the best way to avoid getting an STD. This is called 'safer sex'.

When should a woman practice safer sex?

Everyone should always have sex safely. Women have many different kinds of sexual relationships. Some have one faithful sex partner their entire lives. Others have one sex partner at a time but several partners over the course of their lives. And others have multiple partners (or their partners have multiple partners) at one time. This means different women have different risks of getting STDs.

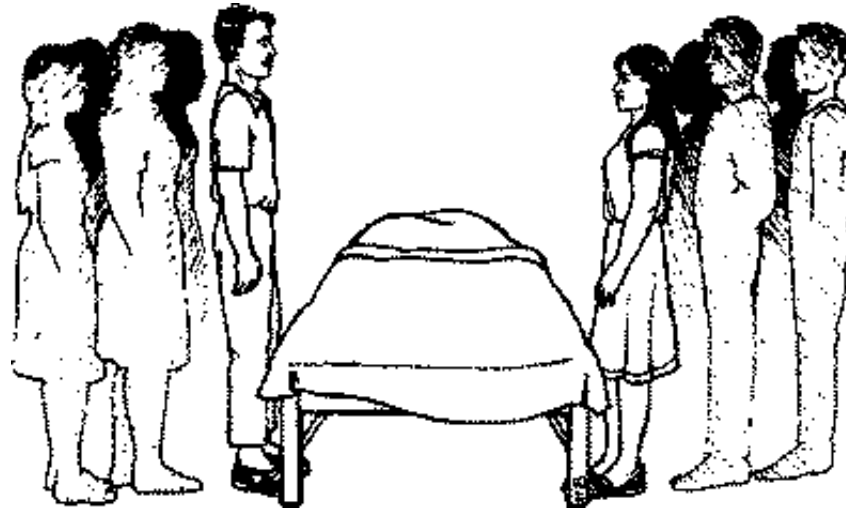
Many women think they are not at risk for an STD if they have just one sex partner. This is true **ONLY if you and your partner know for sure that neither of you already has an STD, and that both of you have sex only with each other**

Most women cannot be sure of this because:

- **it is possible to have an STD and not know it. If a woman's past partners -**

or her partner's past partners - had an STD, she or her partner could have one, too.

- **they do not know for sure that their partner does not have other sex partners now. If someone your partner has sex with has an STD, you can get it too.**



You can be infected by past partners - and your partner's past partners.

Ftima's story: Every woman should protect herself

Ftima lives in a rural town called Belem - and she is dying of AIDS. When she was 17, she married a man named Wilson. He was killed a few years later in an accident at the cooperative where he worked. Ftima had to leave her baby with Wilson's parents and go to the city to find work. When she had extra money, she sent it back home. The work was hard, and she was very lonely.

When she learned that the government was building a highway near Belem, Ftima got a

job cooking for the road construction workers so that she could stay at home. It was there that she met Emanuel. He was handsome, had cash in his pockets, and charmed her little girl when he came around after work. When the work crew had to move on, he promised to return.

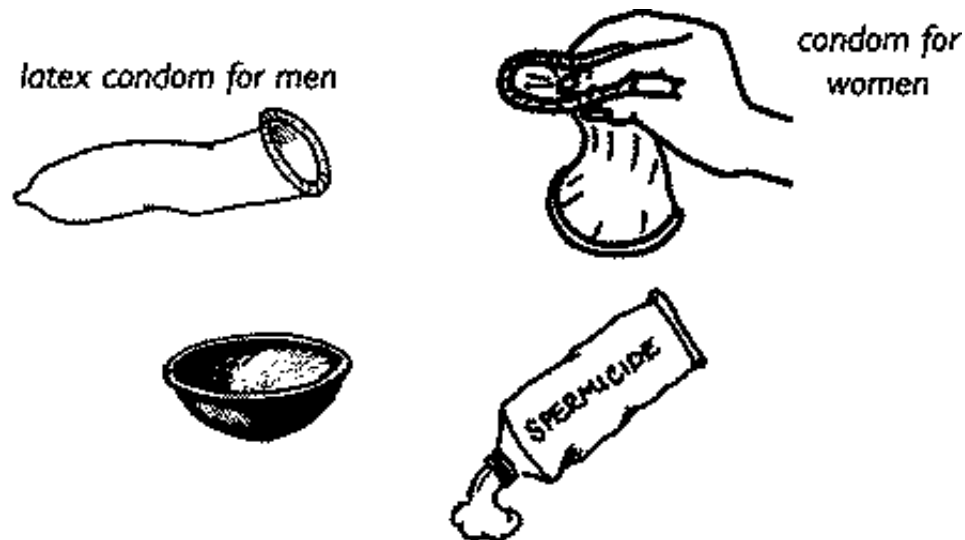
Emanuel did come back, but he never stayed long. He got a new job driving trucks that kept him on the road most of the time. Ftima thought he probably had other women, but he always told her she was his only one. They had a baby boy, but he was small and sickly and died after a year. Soon Ftima began to feel sick, too. The nurse at the health post gave her different medicines, but nothing helped. Finally she went to the hospital in the city. They did some tests, and later told her she had AIDS. When she asked how she could have got AIDS, the doctor replied, "You shouldn't have slept with so many men." Ftima did not think she was at risk for HIV/AIDS - she had only had sex with 2 men in her life! She thought that only prostitutes and homosexuals in the cities got AIDS.

Practicing safer sex means using barriers that keep germs from being passed between you and your partner during sex (safer sex methods), and having sex in ways that make infection with an STD less likely (safer sex practices).

Safer sex methods *condom for women*

Using condoms for either men or women can protect you from STDs, including HIV/AIDS. If they are used correctly, they keep a man's genitals and semen from touching your genitals. Condoms can also prevent unwanted pregnancy.

◆ *The more often you use a condom, or avoid sex in the vagina or anus without one, the less likely you will be to get AIDS.*



Figure

Note: Spermicides - chemicals that kill sperm - used alone or with a diaphragm, also provide some protection against the germs that cause gonorrhoea and chlamydia.

To encourage your partner to use condoms:

If he says...



try saying...

Figure

It will not feel as good.

It may feel different, but it will still feel good. Here, let

You can last even longer and then we will both

I do not have any diseases.

You are already using family planning.

Just this once without a condom.

Condoms are for prostitutes. Why do you want to use one?

me show you.

I do not think I have any, either. But one of us could and not know it.

I would like to use it anyway. One of us might have an infection from before that we did not know about.

It only takes one time without protection to get an STD or HIV/AIDS. And I am also not ready to be pregnant.

Condoms are for everyone who wants to protect themselves.

feel good!

NO CONDOM, NO SEX!

Do what you can to make sure that you both enjoy having sex with a condom. That way, it may be easier to get him to use one the next time.

Safer sex practices

Sexual practices in which there is less contact with a man's semen are also less likely to spread STD germs, including HIV. The box below shows which kinds of practices are safer than others. Sex with the penis in the vagina (vaginal sex) is the most common kind of sexual practice for many men and women. But other couples give and receive sexual pleasure by using many different kinds of talk and touch. If your partner does not want to use condoms, try to get him to have other kinds of sex with you. These other practices may feel just as good to him - and mean less risk for you.

◆ *Moke sex safer:*

- ***Use a latex condom every time.***
- ***Replace risky practices with touching and kissing.***
- ***If you cannot use a condom, it is better to use spermicide alone or with a diaphragm.***

Some kinds of sex are safer than others

Kissing. Kissing mouth-to-mouth is safe, even if your mouths are open or your tongues touch. But if you or your partner has a sore in the mouth, you should wait until the sore has healed.



Figure

Touching. Touching is always safe, as long as neither person has blood, discharge, or sores on the genitals or hands.



Figure

Oral sex. *Oral sex* is much safer than vaginal or anal sex. But the less time you have semen in your mouth, the better. So, if the man *ejaculates* into your mouth, you should swallow or spit right away, and rinse your mouth afterward. If you get a sore throat a couple of days after having oral sex, be sure to have it checked by a health worker. You can get gonorrhea in your throat and herpes sores in your mouth. The safest way to have oral sex is if the man's penis is covered with a condom before you take it into your mouth.

**Figure**

Vaginal sex. Vaginal sex is less safe than oral sex, but safer than anal sex. Always use a condom to keep the semen from touching your vagina. If you cannot, try to have the man withdraw his penis before he ejaculates. You can still get HIV and you can still get pregnant, but it is safer because less semen gets into your body.



Figure

Anal sex. Sex in the anus is very dangerous because the skin there tears even more easily than the skin in the vagina. If you and your partner have anal sex, it is important that you use condoms and make the anus wet first. Never have sex in the vagina **after** having sex in the anus without the man washing his penis first, or you could get an infection.



Figure

Avoid 'dry sex'. In some places people prefer to have sex when the vagina is very dry, so some women put herbs or powders in their vaginas or *douche* before sex. But if the vagina (or anus) is dry or irritated, it will tear easily during sex and make infection more likely. You can make the vagina less dry by not using powders, herbs, or douches, and by taking more time with sex to allow the body to make more of its own wetness. Or use saliva,

spermicide, or *lubricant* to make the vagina slippery so the skin will not tear **Do not use oil or petroleum gel**, which can make a condom break.

Making changes for safer sex

Everyone needs to think about ways to make sex safer, even if you do not think you are at risk. How you make these changes will depend on whether you expect your partner to support your wish to have safer sex.

If your partner is supportive, it is best to talk together about the health risks of STDs. But this is not always easy! Most women are taught that it is not 'proper' to talk about sex - especially with their partners or other men - so they lack practice. A man may talk with other men about sex, but is often uncomfortable talking with his partner Here are some suggestions:



Figure

Practice talking with a friend first. Ask a friend to pretend to be your partner and then practice what you want to say. Try to think of the different things he might say and practice for each possibility. Remember that he will probably feel nervous about talking too, so try to put him at ease.

Talk with your partner. Do not wait until you are about to have sex. Choose a time when you are feeling good about each other and when you are not likely to be interrupted. If you have stopped having sex because you have a new baby, try to talk with him before you have sex again. If you and your partner live far apart or must travel often, talk ahead of time about what having other partners would

mean for your sexual health.



Figure

◆ ***Work with your community to educate women and men about condoms and how to use them. This will help make condoms more acceptable.***

Learn as much as you can about the risks of unsafe sex, and about safer sex methods and practices. If your partner does not know much about STDs and how they are spread, or about their lasting health effects, he may not understand the real risks involved in unsafe sex. If you give him this information, or encourage him to talk to a health worker about it, you can help convince him of the need to practice safer sex.

If you think your partner will not want to practice safer sex, you will need to be more creative to get what you want:

Bargaining for safer sex

Think about how you bargain for the other things you need. In these situations, you

must know what you want and then talk to the other person in such a way that you get it. Start by asking yourself: Exactly what changes do I want my partner to make? Is there something I can offer him that will make him more likely to agree? What am I willing to offer?



Figure

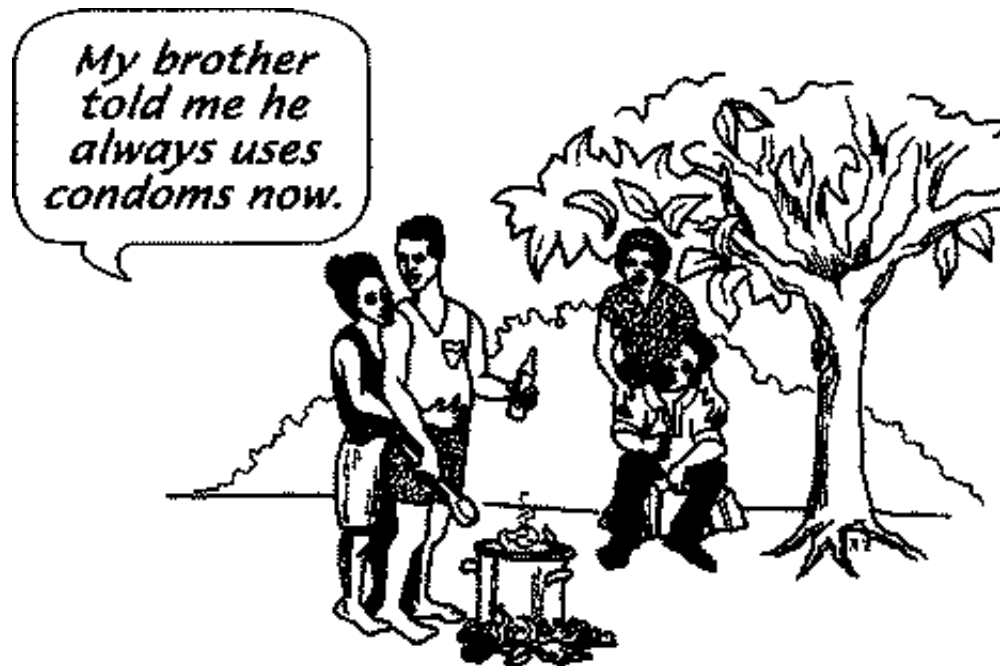
Focus on safety. When you talk about safer sex, your partner may say that you do not trust him. Tell him the issue is safety, not trust. Since a person may have an STD without knowing it, or may get HIV/AIDS from something other than sex, it is difficult for a person to be sure he or she is not infected. Safer sex is a good idea for every couple, even if they only have sex with each other.



Figure

But if you or your partner has had or now has another sexual partner, it may be hard to talk about. If your partner is having sex with others now, do not use this discussion to punish him. Try to talk honestly about why you are scared and how each of you will behave in the future. If he is not willing to stop having sex with others, ask him to use condoms every time he has sex with you and with anyone else.

Use other people as examples. Sometimes learning that others are practicing safer sex can help influence your partner to do so, too.

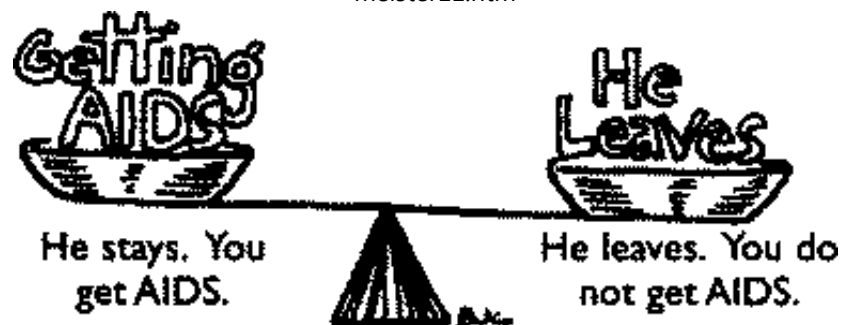


Figure

Ask for help if you need it. If you are afraid your partner will get angry or violent when you talk, you may need someone to help you discuss safer sex with him. Ask someone you trust for help.

If your partner does not want to change

If your partner does not want to change his sexual habits, you must decide what to do. You may be able to choose not to have sex, to find protection you can control - like the female condom, or the diaphragm with spermicides - or think about ending the relationship.



What you must weigh if your partner is unwilling to stop unsafe sexual practices.

Feeling more pleasure from sex



Figure

It is natural for women and men to want to share sexual pleasure with their partners. When each partner knows the kind of sexual talk and touch that the other likes, they can both enjoy sex more.

◆ *Both men and women are capable of feeling - and controlling - their desires.*

If a woman does not feel pleasure with sex, there may be many reasons. Her

partner may not realize that her body responds to sexual touch differently from the way a man's body does. Or she may have been taught that women should enjoy sex less than men, or that she should not tell her partner what she likes. Understanding that women are capable of enjoying sex just as much as men, and that it is OK to do so, may help her like sex more. But she should remember that these kinds of changes often take time.

◆ ***What brings pleasure to one person should not be harmful to another.***

How the body responds to sexual pleasure

Both women and men feel sexual desire but their bodies respond differently to sexual thoughts and touch. When men and women have sexual thoughts or are touched in a sexual way, they feel excited. More thought and touch makes the body more excited. It is easy to see sexual excitement in a man, because his penis gets hard. When a man reaches his peak of pleasure, his penis releases fluid with his sperm (ejaculation). This is called *orgasm*, or *climax*. After orgasm, the penis becomes soft again.

The woman's body also gets excited, but it is harder to see. The *clitoris* gets hard and may swell, and the *labia* and walls of the vagina become sensitive to touch. If sexual touch and thought continue, sexual tension builds up until she reaches her peak of pleasure and has an orgasm. Touching the clitoris is the most common way this happens. It often takes longer for a woman to reach orgasm than a man. But when orgasm happens, the energy and tension in her body releases, and she feels relaxed and full of pleasure.

It is possible for almost all women to have orgasms, but many women have them only once in a while, or never. If she wants, a woman may be able to learn how to have an

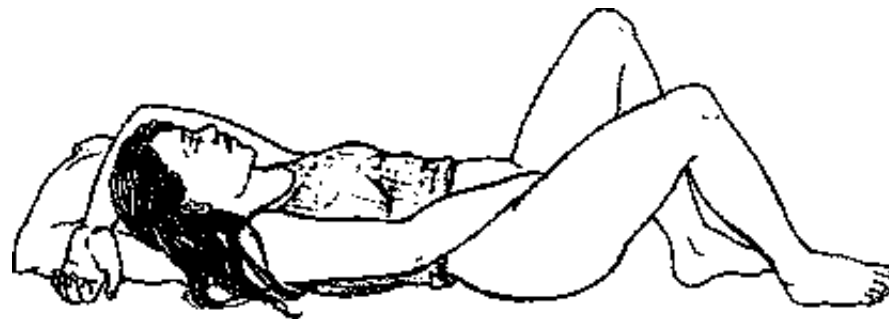
orgasm, either by touching herself, or by letting her partner know what feels good. It may make him feel good too, to know that he pleases her



Figure

Touching oneself for pleasure (masturbation)

A woman can touch herself in a way that gives sexual pleasure. This is a good way for her to learn about her body and what kinds of sexual touch feel best. Many communities have beliefs that touching oneself is wrong, so sometimes people feel shame about doing it. But touching oneself does not cause harm or use up sexual desire.



Figure

Lack of desire

Many things - including everyday life events - can affect how much sexual desire a woman or man feels. For example, when life seems exciting - such as when starting a new relationship or a new job - a woman or man may feel more sexual desire. But you may feel less desire when:

- **you feel stress from hard work, not enough food, illness, or a new baby.**
- **you have a partner you do not like.**
- **you fear that others will see or hear you having sex.**
- **you are afraid of becoming pregnant or getting an STD.**

◆ If a woman has been raped or forced to have sex, she may need time - or to talk with someone she trusts or a trained mental health worker - before she wants to have sex again.

When a woman lacks desire, her body makes less of its natural wetness, and she may need to use lubrication, like saliva, so that sex is not painful. When a man lacks desire, it is more difficult for his penis to get hard (impotence). He may feel ashamed, and this may make it more difficult for him to get hard the next time.

If you or your partner are having less desire, try to forgive each other and to talk about it. Plan time for sex when you both want it, and try to do things that awaken sexual thoughts and feelings for both of you.

If sex is painful

Sex should not be painful. Pain during sex is usually a sign that something is wrong. A

woman may feel pain with sex when:

- her partner enters her too soon, before she is relaxed or wet enough.
- she feels guilt or shame, or does not want to have sex.
- she has an infection or growth in her vagina or lower belly.
- she has been *circumcised*.



Figure

IMPORTANT

Pain with sex after recent childbirth, miscarriage, or abortion can be a sign of serious infection. See a health worker right away.

Working for Change

Changing harmful gender roles

Changing harmful gender roles takes time, because ideas about gender are some of the most deeply-held beliefs a community has. But overtime, women and men can learn to take on new roles, especially if they understand how these roles will

help girls and women live healthier, more productive lives.

To begin changing these gender roles, you will need to find ways to help your community. Here are some suggestions:

- **Develop an awareness of what gender roles are, and how they are passed on by parents, community traditions, and the media (the radio, television and newspapers).**
- **Examine different gender roles to see which are harmful and need changing.**
- **Make plans for change.**

Here are some suggestions for fun activities that have been used in some communities to help women and men think about gender roles and how they affect sexual health:

Using sexual language

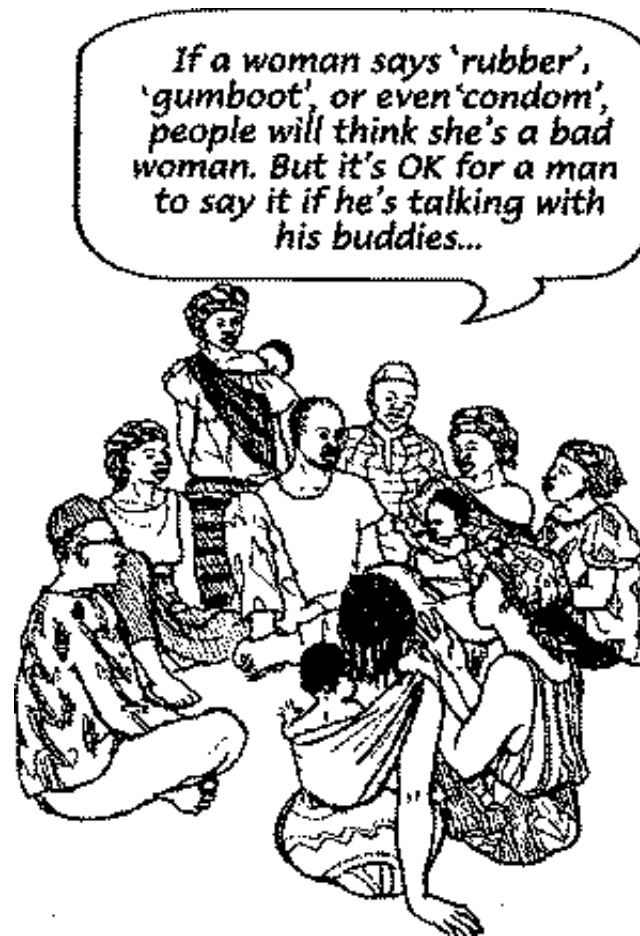
Understanding that men and women see each others' sexuality differently can help people think about how gender roles affect their beliefs about sexuality. This activity can help women and men learn how to talk openly about sex without shame, and to begin to think about the different ways that men and women view sexuality.

1. *Write down (or draw) several sexual terms, each at the top of a separate piece of paper: for example 'male genital organ', 'female genital organ', 'sex', 'condoms', etc.*

2. *Divide into groups of 2 or 3 people. Give each small group one of the pieces of paper. Let each group have a few minutes to think of every polite, rude, medical, and common way to say the words on their paper, and call them out. Then pass the papers to a different group until each group has had a chance to add to each list.*

3. *Discuss the words with the whole group.*

What does each word make people feel? Do they make the women in the group feel differently from the men? What words are used more by men? Which are used more by women? If a woman uses these words, what do people think of her? What do they think of a man who uses the same words? Why? What words are the best to use in different situations? Why?



Figure

Gender messages in the media

If people understand how harmful ideas about women's sexuality and gender roles are learned, they can begin to think about how to change those ideas. This activity will help people think about how radio, movies, popular songs, and advertising communicate ideas about gender roles.

1. Listen to some popular songs on the radio (record them ahead of time if you have a tape recorder) or have members of the group sing (or act out) the songs. Listen carefully to what the words of the songs are saying about women and men. How are the women and men being described? Are these songs passing on ideas about women's roles and sexuality? Note each 'gender' message the group identifies in the songs, and decide whether it is harmful or helpful to women.

2. Divide into small groups. Give each group an advertisement cut out of a magazine or newspaper, or copied from a billboard (pick advertisements that have women in them). Ask each group to identify what the advertisements say about women's roles and sexuality. Then, bring everyone together again to say what messages are being passed on in each advertisement. Then decide as a group whether the messages are harmful or helpful to women.

3. Discuss how messages about women are passed on by radio, songs, and advertisements. How do these ideas influence us, our husbands, our children? Do these ideas lead to practices and beliefs which are harmful to women?

4. Identify ideas about women's roles and sexuality **that are important and helpful** to pass on. How can these ideas be communicated in advertisements, songs, and movies? Ask small groups to draw an advertisement, or prepare a song or a skit that teaches helpful and healthy ideas about women. Have each group present their work to the others.



Figure

Improving sexual health in your community

Gender roles are different in each community, and so are the difficulties women and men face when trying to improve their sexual health. Here is a way to begin a discussion about why it may be hard for women to practice safer sex in your community.

◆ *To work for change in your community, it is important to identify the barriers to practicing safer sex.*

1. Begin by telling a story, like "Ftima's story". Talk about Ftima and Emanuel as if they

lived in your community.


2. *After telling the story, start a discussion with questions like, "Why didn't Ftima protect herself from AIDS?" "Do you think she realized that she could get AIDS?" "If no, why not?"*

3. *Once the group has talked about the importance of understanding risk, you can talk about other barriers to safer sex. For example: What are the difficulties that women like Ftima face if they try to practice safer sex? Why do women find it hard to talk with their partners about safer sex? What can women do to convince their partners to practice safer sex?*

4. *Talk about what can be done in your community to help women like Ftima. Discuss how you can help to overcome barriers to safer sex in your community. End the discussion by making a plan to improve sexual health in your community.*



[Home](#) > [ar](#).[cn](#).[de](#).[en](#).[es](#).[fr](#).[id](#).[it](#).[ph](#).[po](#).[ru](#).[sw](#)

 **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**

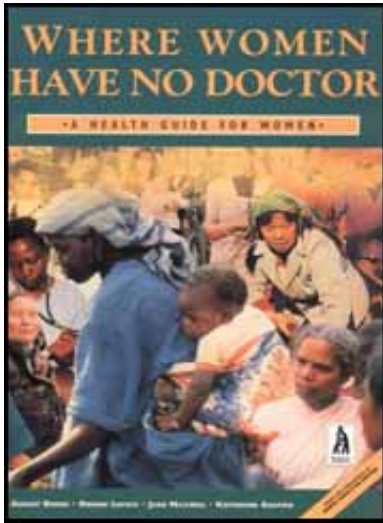
➔  **Chapter 13: Family Planning**

 **(introduction...)**

 **Benefits of Family Planning**

 **Is Family Planning Safe?**

 **Choosing to Use Family Planning**



- **Choosing a Family Planning Method**
 - 📄 *(introduction...)*
 - 📄 **How well each method works**
- **Barrier Methods of Family Planning**
 - 📄 *(introduction...)*
 - 📄 **The condom**
 - 📄 **Condoms for women (female condoms)**
 - 📄 **The diaphragm**
 - 📄 **Spermicide (contraceptive foam, tablets, jelly, or cream)**
- **Hormonal Methods of Family Planning hormones**
 - 📄 *(introduction...)*
 - 📄 **The pill**
 - 📄 **Implants**
 - 📄 **Birth control injections**
- **Intra-Uterine Devices (Devices that go into the womb)**
 - 📄 **THE IUD (IUCD, Copper-T, The Loop)**
- **Natural Methods of Family Planning**
 - 📄 *(introduction...)*
 - 📄 **Breastfeeding for the first 6 months (Lactational Amenorrhea Method, LAM)**

 - 📄 **The mucus method and the rhythm method**

- 📄 **Traditional and Home Methods to Prevent Pregnancy**
- 📄 **Permanent Methods of Family Planning**
- 📄 **Emergency Methods of Family Planning**
- 📄 **Choosing the Best Method**
- 📄 **Working for Change**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 13: Family Planning



Figure

Having the number of children you want, when you want them, is called family planning. If you decide to wait to have children, you can choose one of several methods to prevent pregnancy. These methods are called family planning methods, child spacing methods, or contraception.

◆ *Family planning saves lives.*

Benefits of Family Planning

◆ *In poor countries about half of all deaths in women of child-bearing age are caused by problems of pregnancy and childbirth. Family planning prevents these pregnancies and deaths.*

Every year, half a million women die of problems from pregnancy, childbirth, and unsafe *abortion*. Most of these deaths could be prevented by family planning. For example, family planning can prevent dangers from pregnancies that are:

- too soon. Women under the age of 17 are more likely to die in childbirth because their bodies are not fully grown. Their babies have a greater chance of dying in the first year.**
- too late. Older women face more danger in child bearing, especially if they have other health problems or have had many children.**
- too close. A woman's body needs time to recover between pregnancies.**

- **too many. A woman with more than 4 children has a greater risk of death after childbirth from bleeding and other causes.**

As well as saving lives, family planning has other benefits

Mothers and babies will be healthier, because risky pregnancies are avoided.



Figure

Fewer children means more food for each child.



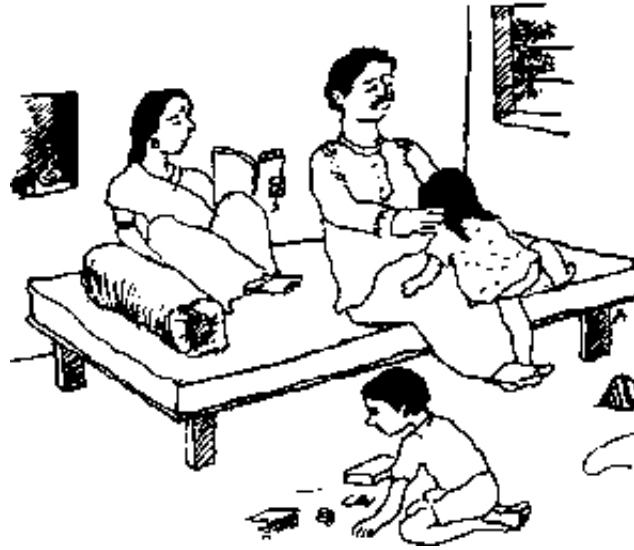
Figure

Waiting to have children can allow young women and men time to complete their education.



Figure

Fewer children can mean more time for yourselves and your children.



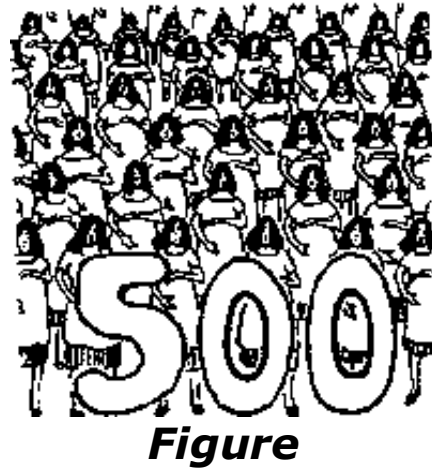
Figure

Family planning can also help you and your partner enjoy sex more, because you are not afraid of unwanted pregnancy. And some methods have other health benefits. For example, *condoms* and *spermicides* can help protect against the spread of *sexually transmitted diseases (STDs)*, including *HIV/AIDS*. *Hormonal methods* can help with irregular bleeding and pain during a woman's *monthly bleeding*.

Is Family Planning Safe?

All of the family planning methods found in this chapter are used safely by millions of women. In fact, these methods are much safer than pregnancy and childbirth:

Of 15,000 women who become pregnant, 500 are likely to die from problems of pregnancy or childbirth.



Of 15,000 women who use family planning methods, only one is likely to die from using these methods.



Choosing to Use Family Planning



Figure

You have a right to make your own decisions about family planning.

Some women want a lot of children - especially in communities where poor people are denied a fair share of land, resources, and social benefits. This is because children help with work and provide care for their parents in old age. In these places, having just a few children may be a privilege only wealthier people can afford.

Other women may want to limit the number of children they have. This often happens where women have opportunities to study and earn income, and where they can negotiate with men in a more equal way.

No matter where a woman lives, she will be healthier if she has control over how many children she has, and when she will have them. Still, deciding to use - or not to use - family planning should always be a woman's choice.

Talking with your husband or partner about family planning

It is best if you can talk together with your husband or partner about choosing to use family planning and what method you will use.

Some men do not want their wives to use family planning, often because they do not know very much about how different methods work. A man may worry about his wife's health, because he has heard stories about the dangers of family planning. He may fear that if a woman uses family planning, she will have sex with another man. Or he may also think it is 'manly' to have lots of children.

Try sharing the information in this chapter with your partner. It may help him understand that:

- family planning will allow him to take better care of you and your children.
- child spacing is safer for you and your children.
- family planning can make sex with him more pleasant, because neither of you will have to worry about an unplanned pregnancy. Being protected against unwanted pregnancy will not make you want to have sex with other men.

If your husband still does not want you to use family planning even after learning about its benefits, you must decide whether you will use family planning anyway. If you do, you

may need to choose a method that can be used without your partner knowing about it.

Choosing a Family Planning Method

Once you have decided to use family planning, you must choose a method. To make a good decision you must first learn about the different methods, and their advantages and disadvantages.

There are 5 main types of family planning methods:

- **Barrier methods, which prevent pregnancy by keeping the *sperm* from reaching the egg.**
- **Hormonal methods, which prevent the woman's *ovary* from releasing an egg, make it harder for the sperm to reach the egg, and keep the lining of the *womb* from supporting a pregnancy.**
- **IUDs, which prevent the man's sperm from *fertilizing* the woman's egg.**
- **Natural methods, which help a woman know when she is *fertile*, so that she can avoid having sex at that time.**
- **Permanent methods. These are operations which make it impossible for a man or a woman to have any children.**

These methods of family planning are described on the following pages. As you read about each method, here are some questions you may want to consider:

- How well does it prevent pregnancy (its effectiveness)?
- How well does it protect against STDs, if at all?
- How safe is it? If you have any of the health problems mentioned in this chapter, you may need to avoid some types of family planning methods.
- How easy is it to use?
- Is your partner willing to use family planning?
- What are your personal needs and concerns? For example, do you have all the children you want, or are you breastfeeding your baby?
- How much does the method cost?
- Is it easy to get? Will you need to visit a health center often?
- Will the side effects (the problems the method may cause) create difficulties for you?

After reading about these methods, you can get more help with choosing one on Choosing the Best Method. It may also help to talk with your partner, other women, or a health worker about different methods.

Only you can decide which family planning method is right for you.




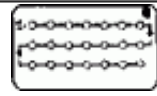
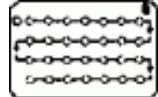
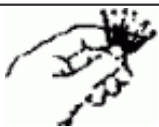







Figure

How well each method works

Here is some basic information about the effectiveness of the different methods, their usefulness in protecting against STDs as well as pregnancy, and whether you can use them while breastfeeding.

<i>For every 100 women who use this method for one year...</i>	<i>This many women will become pregnant:</i>	<i>Protection against STDs</i>
<i>Condom</i>	12	good

Condom for Women 	20	good
Diaphragm 	18	some
Spermicide 	20	some
Pill (the combined pill) 	3	none
Progestin Only Pill 	5	none
Implants 	Less than 1	none
Injections 	Less than 1	none
IUD 	1	none
Breastfeeding (1st 6 mo.) 	2	none
Natural Family Planning 	20	none

Natural Family Planning		
Sterilization 	Less than 1	none
No Method	85	none

All of these methods can be used safely while breastfeeding except the combined pill, and injections that have estrogen.

Barrier Methods of Family Planning



Barrier methods prevent pregnancy by blocking the sperm from reaching the egg. They do not change the way the woman's or man's body works, and they cause very few side effects. Barrier methods are safe if a woman is breastfeeding. Most of these methods also protect against STDs, including HIV/AIDs. When a woman wants to become pregnant, she simply stops using the barrier method.

The most common barrier methods are the condom, condoms for women, the diaphragm, and spermicides.

The condom

The condom is a narrow bag of thin rubber that the man wears on his *penis* during sex. Because the man's semen stays in the bag, the sperm cannot enter the woman's body.

Condoms work best when they are used with spermicide. Condoms made of *latex* are the best protection against STDs and HIV/AIDS, and can be used alone or along with any other family planning method.

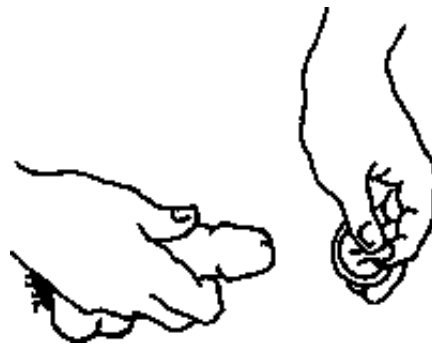
Condoms can be bought at many pharmacies and markets, and are also available at health posts and through AIDS prevention programs. They can help some men last longer during sex.

◆ ***Condoms can help some men last longer during sex.***

Be careful not to tear the condom as you open the package. Do not use a new condom if the package is torn or dried out, or if the condom is stiff or sticky. The condom will not work. Do not unroll the condom before putting it on.

How to use a condom:

1. If the man is not circumcised, pull the foreskin back. Squeeze the tip of the condom and put it on the end of the hard penis.



Figure

2. *Keep squeezing the tip while unrolling the condom, until it covers all of the penis. The loose part at the end will hold the man's sperm. If you do not leave space for the sperm when it comes out, the condom is more likely to break.*



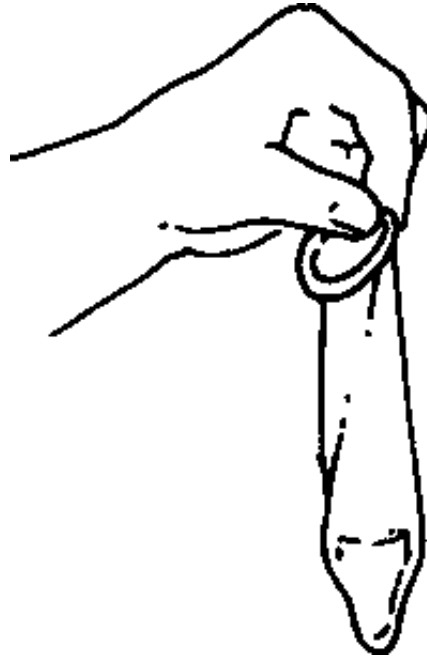
Figure

3. *After the man ejaculates, he should hold on to the rim of the condom and withdraw from the vagina while his penis is still hard.*



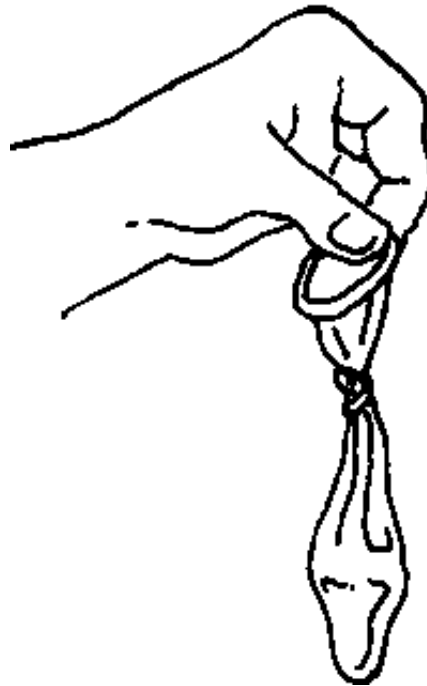
Figure

4. *Take off the condom. Do not let sperm spill or leak.*



Figure

5. *Tie the condom shut and dispose by burning or burying it away from children and animals.*



Figure

◆ ***If the condom tears or slips off, the woman should immediately put spermicide into her vagina. If possible, use an emergency method of family planning.***

The condom must be put on the man's penis when it is hard, but before it touches the woman's *genitals*. If his penis touches the woman's *genitals* or goes into her *vagina*, he can make the woman pregnant or can give her an STD, even if he does not spill his sperm (ejaculate).

Remember:

- **Use a condom every time you have sex.**

- **If possible, always use condoms made of latex. They give the best protection against HIV. Condoms made of sheepskin will not protect against HIV.**
 - **Keep condoms in a cool, dry place away from sunlight. Condoms that are from old or torn packages are more likely to break.**
 - **Use a condom only once. A condom that has been used before is more likely to break.**
- ♦ ***Since condoms are the best protection against STDs and HIV/AIDS, they should be used with other family planning methods when a woman needs protection from both pregnancy and STDs.***

Use *lubricants* to keep condoms from breaking. Lubricants should be water based, such as spit (saliva), spermicide, or K-Y Jelly. Rub the lubricant on the sides of the condom after it is on the hard penis. Do not use cooking oils, baby oil, mineral oil, petroleum gel, skin lotion, or butter. They can make the condom break.



**encouraging your
partner to use
condoms
Figure**

A man may not want to use a condom at first, but often a woman can convince her

partner to use condoms by explaining the advantages of family planning and the importance of protection against HIV/AIDS and STDs.

Condoms for women (female condoms)



Figure

A female condom, which fits into the vagina and covers the outer lips of the *vulva*, can be put in the vagina any time before sex. It should be used only once, because it may break if it is washed and reused. But reusing a female condom is better than no condom.

◆ Female condoms are larger than condoms made for men and are less likely to

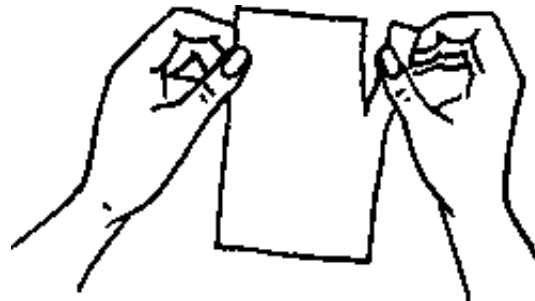
break.

The female condom is the most effective of the methods controlled by women in protecting against both pregnancy and STDs, including HIV/AIDS. It is available only in a few places now. But if enough people demand this method, more programs will make them available.

The female condom should not be used with a male condom.

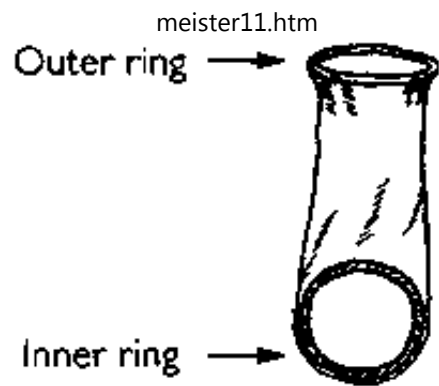
How to use the female condom:

1. Carefully open the packet



Figure

2. Find the inner ring, which is at the dosed end of the condom.



Figure

3. *Squeeze the inner ring together.*



Figure

4. *Put the inner ring in the vagina.*



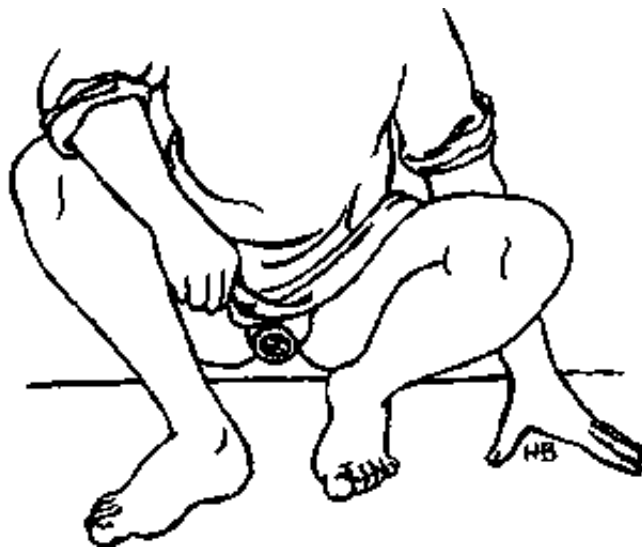
Figure

5. Push the inner ring up into your vagina with your finger. The outer ring stays outside the vagina.



Figure

6. When you have sex, guide the penis through the outer ring.



Figure

7. *Remove the female condom immediately after sex, before you stand up. Squeeze and twist the outer ring to keep the man's sperm inside the pouch. Pull the pouch out gently, and then burn or bury it. Do not flush it down the toilet.*

The diaphragm

The diaphragm is a shallow cup made of soft rubber that a woman wears in her vagina during sex. The diaphragm works by covering the opening to the womb (cervix), preventing the sperm from entering it. The spermicide jelly used with the diaphragm helps kill the sperm, and also protects against gonorrhea and chlamydia (2 common STDs).



◆ ***New research shows that using a diaphragm without spermicide can also help prevent pregnancy. You can leave the diaphragm in all the time, except during monthly bleeding. Remove it once a day for cleaning.***

Diaphragms come in different sizes, and are available at some health posts and family planning clinics. A health worker who has been trained to do *pelvic exams* can examine you and find the right size diaphragm.

Diaphragms can get holes, particularly after being used for more than a year. It is a good idea to check your diaphragm often. Replace it when the rubber gets dry or hard, or when there is a hole in it.

When you use a diaphragm with spermicide, it can be put in just before you have sex, or up to 6 hours before.

How to use a diaphragm:

1. If you have spermicide, squeeze it into the center. Then spread a little bit around the edge with your finger.



Figure

2. *Squeeze the diaphragm in half.*



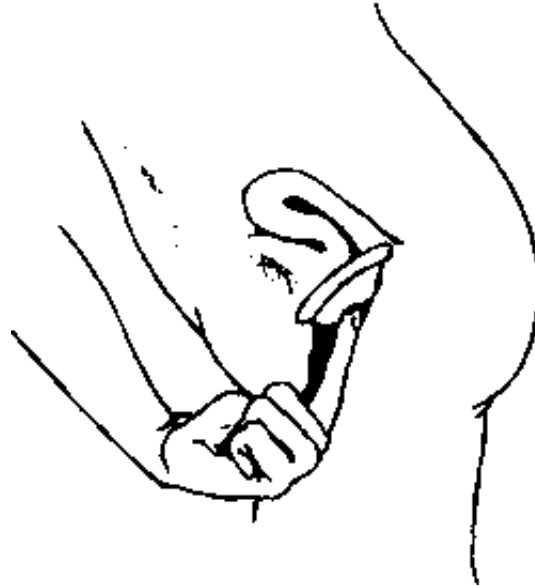
Figure

3. *Open the lips of your vagina with your other hand. Push the diaphragm into your vagina. It works best if you push it toward your back.*



Figure

4. *Check the position of your diaphragm by putting one of your fingers inside your vagina and feeling for your cervix through the rubber of the diaphragm. The cervix feels firm, like the end of your nose. The diaphragm must cover your cervix.*



Figure

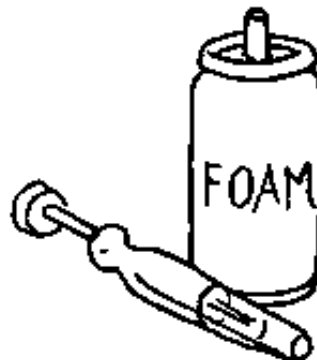
5. *If the diaphragm is in the right place, you will not be able to feel it inside you.*

6. *Leave the diaphragm in place for 6 hours after sex.*

To remove the diaphragm:

Put your finger inside your vagina. Reach behind the front rim of the diaphragm and pull it down and out. It sometimes helps to push your muscles down at the same time, as if you were passing stool. Wash your diaphragm with soap and water, and dry it. Check the diaphragm for holes by holding it up to the light. If there is even a tiny hole, get a new one. Store the diaphragm in a clean, dry place.

Spermicide (contraceptive foam, tablets, jelly, or cream)



Foam



Tablets



Cream or jelly

Spermicide comes in many forms - foam, tablets, and cream or jelly - and is put into the vagina just before having sex. Spermicide kills the man's sperm before it can get into the womb. Spermicide made with nonoxynol-9 also provides some

protection from gonorrhea and chlamydia, which are 2 common STDs.

If used alone, spermicide is less effective than some other methods. But it is helpful when used as extra protection along with another method, like the diaphragm or condom.

Spermicides can be bought in many pharmacies and markets. Some women find that some types of spermicides cause itching or irritation inside the vagina.

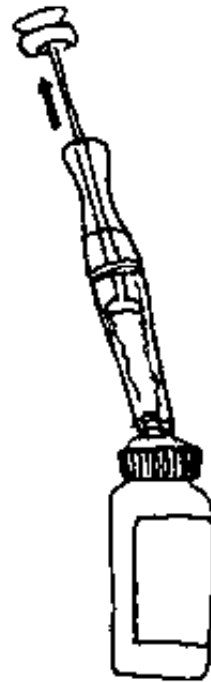
When to insert spermicide:

Tablets or suppositories should be put in the vagina 10 to 15 minutes before having sex. Foam, jelly, or cream work best if they are put in the vagina just before having sex.

If more than one hour passes before having sex, add more spermicide. Add a new tablet, suppository, or applicator of foam, jelly, or cream each time you have sex.

How to insert spermicide:

1. Wash your hands with soap and water
2. **To use foam**, shake the foam container rapidly, about 20 times. Then press the nozzle to fill the applicator.



Figure

To use jelly or cream, screw the spermicide tube onto the applicator. Fill the applicator by squeezing the spermicide tube.

To use vaginal tablets, remove the wrapping and wet them with water or spit on them. (DO NOT put the tablet in your mouth.)



Figure

3. Gently put the applicator or vaginal tablet into your vagina, as far back as it will go.
4. If you are using an applicator, press in the plunger all the way and then take out the empty applicator.
5. Rinse the applicator with clean water and soap.

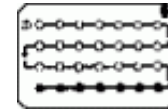
Leave the spermicide in place for at least 6 hours after sex. Do not douche or wash the spermicide out. If cream drips out of your vagina, wear a pad, cotton or clean cloth to protect your clothes.

Hormonal Methods of Family Planning hormones

These methods contain *hormones*, called *estrogen* and *progestin*, that are similar to the estrogen and progesterone a woman makes in her own body.

Hormonal methods include:

- **birth control pills, which a woman takes every day.**



- **injections, which are given every few months.**



- **implants, which are put into a woman's arm and last for several years.**



Hormonal methods work by preventing the woman's ovaries from releasing an egg. The hormones also make the mucus at the opening of the womb very thick, which helps stop the sperm from getting inside the womb.

IMPORTANT

Hormonal methods do not protect against STDs, or HIV/AIDS.

Most birth control pills and some injections contain both estrogen and progestin. These are called 'combination' pills or injections. The two hormones work together to give excellent protection against pregnancy. However, some women should not use pills or injections with estrogen for health reasons, or because they are breastfeeding.

♦ ***A woman controls hormonal methods and they can be used without a man knowing.***

'Progestin-only' pills (also called mini-pills), implants, and some injections contain only one hormone - progestin. These methods are safer than combined pills or injections for women who should not use estrogen, or are breastfeeding.

These women should avoid ANY kind of hormonal method:

- **Women who have breast cancer, or a hard lump in the breast. Hormonal methods do not cause cancer. But if a woman already has breast cancer, these methods can make it worse.**



Figure



hormones

Figure

- **Women who might be pregnant or whose monthly bleeding is late.**



Figure

- **Women who have *abnormal bleeding* from the vagina during the 3 months before starting hormonal methods. They should see a health worker to find out if there is a serious problem.**



Figure

Some hormonal methods are harmful for women with other health problems. Be sure to check each method to see if it is safe for you. If you have any of the health problems mentioned and still wish to use a method, talk to a health worker who has been trained in hormonal methods of family planning.

◆ *Some medicines for seizures (fits) or for tuberculosis (TB) make hormonal methods less effective. A woman taking these medicines should use other family planning methods.*

Side effects of hormonal methods

Because hormonal methods contain the same *chemicals* that a woman's body makes when

she is pregnant, these things may happen during the first few months:



Nausea



Headaches



Swelling of the breasts



Changes in monthly bleeding

Side effects often get better after the first 2 or 3 months. If they do not, and they are annoying or worrying you, see a health worker. She may be able to help you change the amount of the hormones in your method or to change methods.

The pill

Birth control pills that contain estrogen and progestin

◆ ***Some women find that taking the pill helps their monthly bleeding to be more regular, with less bleeding and less pain.***

If you take birth control pills every day, they will protect you from pregnancy for your entire *monthly cycle*. These pills are usually available at family planning clinics, health posts, pharmacies, and through health workers.

There are many different brands of pills. The pill you get should be what is called a 'low-dose' pill. This means it has 35 micrograms (mcg) or less of estrogen, and 1 milligram (mg) or less of progestin. (Mini-pills and low-dose pills are different - low-dose pills have both estrogen and progestin, while the mini pill has only progestin.) Never use a method with more than 50 mcg of estrogen.



common brands of oral
contraceptives
Figure

Once you start taking pills, you should try to stick with one brand (and if you can, buy several packets at once). If you must change brands, try to get another with the same hormone names and strength. You will have fewer side effects and better

protection.

Who should not take combined pills:

Some women have health problems that make it dangerous for them to use the pill. NEVER take the pill if you have any of the conditions listed, or if you:

- **have *hepatitis*, or yellow skin and eyes.**
- **have ever had signs of a *stroke*, *paralysis*, or heart disease.**
- **have ever had a *blood clot* in the *veins* of your legs or in your brain.**
***Varicose veins* are usually not a problem, unless the veins are red and sore.**

◆ *If you must change to a lower dose pill, use a barrier method of family planning or do not have sex during the first month.*

If you have any of the following health problems, try to use a method other than combined birth control pills. But if you cannot, it is still better to take the combined pill than to become pregnant. Try not to take combined pills if you:

- **smoke and are over 35 years old. You have a greater chance of having a stroke or heart attack if you take combined pills.**
- **have diabetes or epilepsy. If you are taking medicine for fits (*seizures*) you will need to take a stronger (50 mcg estrogen) birth control pill. Get medical advice from a health worker or doctor.**
- **have high blood pressure (more than 140/90). If you have ever been told you have high blood pressure or think you might have it, have your *blood***

***pressure* checked by a health worker. If you weigh too much, have frequent headaches, get out of breath easily, feel weak or *dizzy* often, or feel pain in the left shoulder or chest, you should be tested for high blood pressure.**



Figure

◆ *If you are breastfeeding you should also try not to take the combined pills. The estrogen in combined pills will reduce your milk supply. This could affect your baby's health.*

Common side effects of combined pills:

- Irregular bleeding or spotting (bleeding at other times than your normal monthly bleeding). Combined pills often make your monthly bleeding shorter and lighter. It is also normal to sometimes skip your monthly bleeding. This is the most common side effect of combined birth control pills. To reduce spotting, be extra careful to take the pill at the same time**

every day. If the spotting continues, talk with a health worker to see if changing doses of progestin or estrogen will help.

- **Nausea.** Nausea, the feeling that you want to throw up, usually goes away after 1 or 2 months. If it bothers you, try taking the pills with food or at another time of day. Some women find that taking the pill just before going to sleep at night helps.

- **Headaches.** Mild headaches in the first few months are common. A mild pain medicine should help. If the headache is severe or comes with *blurred eyesight*, this could be a serious warning sign.

♦ ***If your monthly bleeding does not come at the normal time and you have missed some pills, continue to take your pills but see a health worker to find out if you are pregnant.***

Warning signs for problems with combined pills:

STOP taking the pill and see a health worker if you:

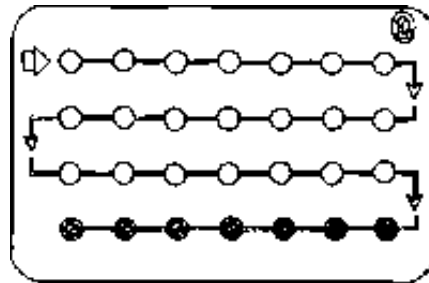
- **have severe headaches with blurred vision (*migraines*) that begin after you start taking the pill.**
- **feel weakness or numbness in your arms or legs.**
- **feel severe pain in your chest and shortness of breath.**
- **have severe pain in one leg.**

If you have any of these problems, pregnancy can also be dangerous, so use another type of family planning such as condoms until you can see a health worker trained in hormonal family planning methods.

◆ If you are given a new medicine while on the pill, ask your health worker if you should use a barrier method or not have sex while taking the medicine. Antibiotics and some other medicines make the pill less effective.

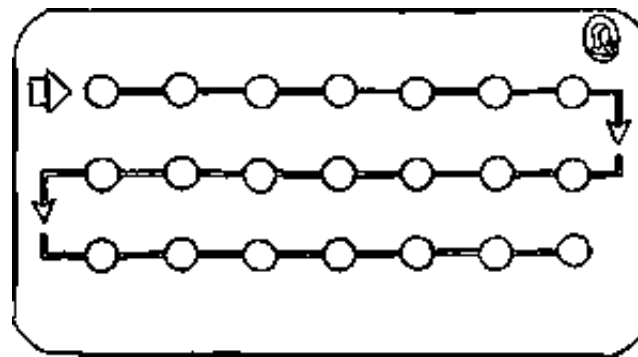
How to take combined birth control pills:

The pill comes in packets of 21 or 28 tablets. If you have a 28-day packet, take one pill every day of the month. As soon as you have finished one packet, begin taking pills from another packet.



28-Day Pill Packet

If you have a 21 -day packet, take a pill every day for 21 days, then wait 7 days before beginning a new packet. Your monthly bleeding will usually happen during the days you are not taking pills. But begin a new packet even if your monthly bleeding has not come.



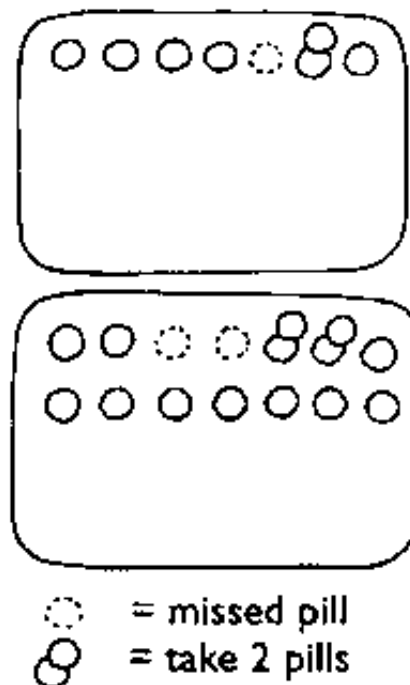
21-Day Pill Packet

With both 21 -day and 28-day packets, take the first pill on the first day of your monthly bleeding. This way you will be protected right away. If it is after the first day, you can start taking a pill on any of the first 7 days of your monthly cycle. But you will not be protected right away, so for the first 2 weeks you are taking the pill you should also use another family planning method or not have sex.

You must take one pill every day, even if you do not have sex. Try to take your pill at the same time every day. It may help to remember that you will always start a new packet on the same day of the week.

Forgetting to take pills:

If you miss pills you could get pregnant.



Figure

If you forget one pill, take it as soon as you remember. Then take the next pill at the regular time. This may mean that you take 2 pills in one day.

If you forget to take 2 pills in a row, start taking them again immediately. Take 2 pills for 2 days and then continue taking 1 pill each day until you finish the packet. Use condoms (or do not have sex) until you have taken a pill for 7 days in a row. If you forget to take 3 or more pills, stop taking the pills and wait for your next monthly bleeding. Use condoms (or do not have sex) for the rest of your cycle. Then start a new packet.

Late or missed pills will cause some bleeding, like a very light monthly bleeding.

If you have trouble remembering to take pills, try taking a pill when you do a daily task, like preparing the evening meal. Or take the pill when you see the sun go down or before you sleep. Keep the packet where you can see it every day. If you still forget to take your pills often (more than once a month), think about changing to a different method of birth control.



Figure

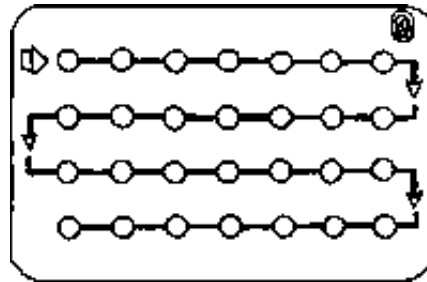
If you vomit within 3 hours after taking your pill or have severe diarrhea, your birth control pill will not stay in your body long enough to work well. Use condoms, or do not have sex, until you are well and have taken a pill each day for 7 days.

Stopping the pill:

If you want to change methods or get pregnant, stop taking the pills when you

finish a packet. You can get pregnant right after you stop. Most women who stop taking pills because they want to get pregnant will get pregnant sometime within the first year.

The Mini Pill or Progestin-only Pills



Figure



Figure

Because this pill does not contain estrogen, it is safer for women who should avoid combined birth control pills and for women who have side effects from combined pills. But this pill is less effective than combined birth control pills.

The mini pill is also a better choice for women who are breastfeeding because it does not cause a decrease in the milk supply. The mini pill is very effective for most breastfeeding mothers. Like the combined pill, it is usually available at family planning clinics, health posts, pharmacies, and through health workers.

Women with any of the conditions and women who are taking medicine for seizures should not take the mini pill. The medicine makes the mini pill less effective.

Common side effects of the mini pill:

- **irregular bleeding or spotting. This is the most common side effect. If it becomes a problem, taking ibuprofen may help stop spotting.**
- **no monthly bleeding. This is fairly common, but if you go more than 45 days without bleeding you may be pregnant. Keep taking your pills until you can see a health worker to find out if you are pregnant.**
- **occasional headaches.**

♦ *If you forget a pill, use a barrier method (or do not have sex) for 7 days, AND keep taking your pills.*

How to take the mini pill:

- Take your first pill on the first day of your monthly bleeding.
- **Take one pill at the same time each day, even if you do not have sex.** If you take a pill even a few hours late or forget only one day's pill, you can become pregnant.
- When you finish a packet, start your new packet the next day, even if you have not had any bleeding. Do not skip a day.

If you are breastfeeding and have not started your monthly bleeding, you can start taking the pills any day. You may not begin bleeding. This is normal.

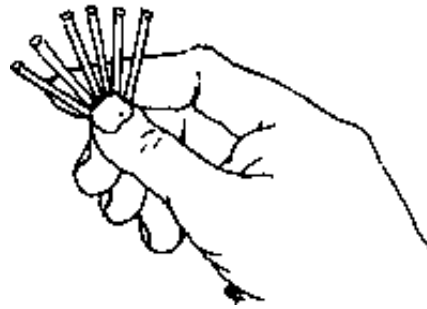
What to do if you miss a mini pill:

Take it as soon as you remember. Take the next pill at the regular time, even if it means taking 2 pills in one day. You may have bleeding if you take your pill at a later time than usual.

Stopping the mini pill:

You can stop taking the pill any time. You can get pregnant the day after you stop, so be sure to use another family planning method right away if you do not want to become pregnant.

Implants

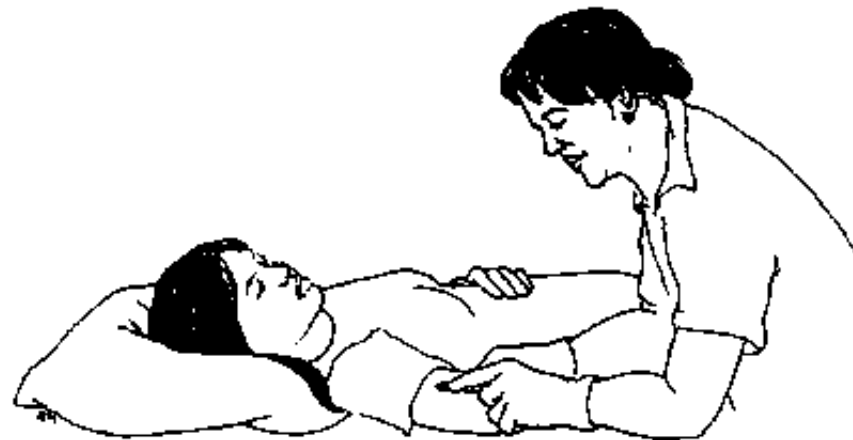


Figure

Implants are 6 small, soft tubes that are placed under the skin on the inside of a woman's arm. These tubes contain the hormone progestin and work like mini pills. They prevent pregnancy for 5 years. The only brand available when this book was written is called *Norplant*.

How to use implants:

A trained health worker makes a small cut in the skin to insert and remove the implants. This is usually done at a clinic or family planning center.



Figure

IMPORTANT

Before trying implants, be sure a health worker near you is trained and willing to remove the implants, in case you want them removed. It is harder to take implants out than it is to put them in.

Implants can be used by women who are breastfeeding and others who have problems with estrogen. Women should not use implants if they have any of the conditions described, if they have heart disease, or if they want to become pregnant in the next few years. If you are taking medicines for seizures, you will need to use a backup method, like a condom or a diaphragm, as well as the implants.



**contraceptive implant
Figure**

Common side effects of implants:

During the first months, the implants may cause irregular bleeding (in the middle of your monthly cycle) or more days of monthly bleeding. Or you may have no bleeding at all. This does not mean that you are pregnant or that something is wrong. These changes will go away as your body becomes used to having more progesterin. If this irregular bleeding causes problems for you, a health worker may have you take low-dose combined birth control pills along with the implants for a few months.

You may also have occasional headaches and the same side effects common with progestin-only injections.

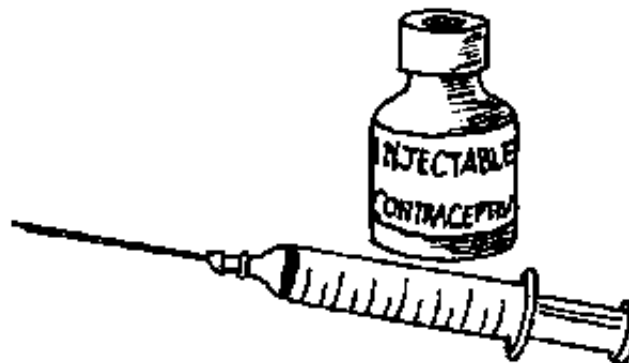
◆ ***Ibuprofen or aspirin will also help control irregular bleeding.***

To stop using implants:

Although *Norplant* implants last for 5 years, they can be removed at any time - though it can be hard to find a health worker who knows how to remove them. After removal, you can get pregnant right away, so use another family planning method if you do not want to become pregnant.

◆ ***Many women want their implants removed early because they do not like the side effects. The most common concern is irregular bleeding.***

Birth control injections



Figure

In this family planning method, a woman is given injections of hormones every 1 to 3 months, usually at a health center or family planning clinic, by someone who

knows how. The protection lasts until you need a new injection, and can be used without others knowing.

Progestin-only injections

Progestin-only injections, such as *Depo Provera* and *Noristerat*, contain only the hormone progestin. These are especially good for women who are breastfeeding and women who should not use estrogen. They are given every 2 to 3 months.

Women should not begin progestin-only injections if they have any of the conditions listed, if they are unable to get regular injections, or if they want to become pregnant within the next year.

Common side effects of progestin-only injections:

Because of the large doses of progestin given with each injection, women experience more changes in their monthly bleeding during the first few months than with other hormonal methods.

Other common side effects are:

- **irregular bleeding or heavy spotting. If this is a problem, a health worker can give 2 cycles of a combined low-dose birth control pill to take along with the injections to stop the spotting. Most irregular bleeding will stop after a few months.**
- **no monthly bleeding.**

- **weight gain.**

◆ ***Progestin-only injections almost always cause changes in the monthly bleeding. You may have light bleeding every day or every once in a while. You will probably stop having monthly bleeding by the end of the first year. These changes are normal.***

Combined injections

Other injections, such as *Cyclofem* and *Mesigyna*, contain both estrogen and progestin. This type of injection is good for women who want to have regular monthly bleeding. Combined injections are given every month, are more expensive than progestin-only injections, and are harder to find.

Women who should not take combined birth control pills or progestin-only injections should not take combined injections either. Do not begin combined injections while breastfeeding.

Common side effects of combined injections:

Because the injection contains the same hormones as combined birth control pills, the same side effects are common.

How to use birth control injections:

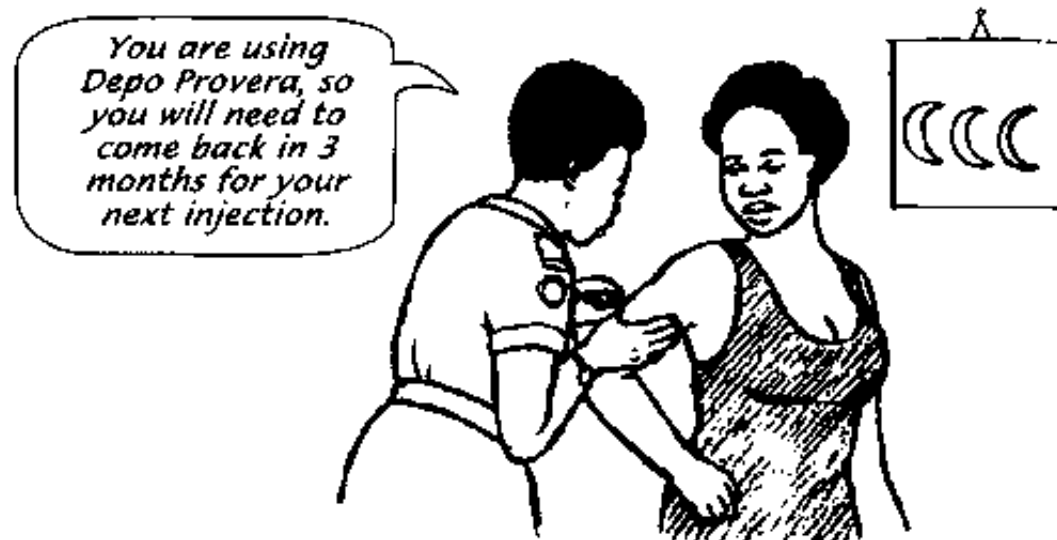
It is best to get your first injection during your monthly bleeding. This way you know that you are not pregnant. You can start the injections any time if you are breastfeeding and have not started your monthly bleeding.

The injection protects you against pregnancy immediately if it is given within 5 days after your monthly bleeding begins. If the injection was given 6 or more days after the beginning of your monthly bleeding, you should use condoms or not have sex for the next 2 weeks.

You must have an injection every 1, 2, or 3 months, depending on the kind of injection:

- *Depo Provera*: every 3 months
- *Noristerat*: every 2 months
- *Cyclofem* and *Mesigyna*: every month

Try not to be late getting injections. The injection becomes less effective the longer you wait.



Figure

To stop using injections:

You can stop having birth control injections any time you want. But after you stop, it can take a year or more to become pregnant and for your monthly bleeding to return to normal. But it also may come back sooner. So if you do not want to become pregnant right away, you must use another family planning method during this time.



**injectable
contraceptives
Figure**

Intra-Uterine Devices (Devices that go into the womb)

THE IUD (IUCD, Copper-T, The Loop)

The IUD is a small object or device that is inserted into the womb by a specially trained health worker or midwife. Once in the womb, the IUD prevents the man's sperm from fertilizing the woman's egg. The IUD can stay in the womb for up to 10 years (depending on the kind of IUD it is) before it must be removed and replaced. An IUD can be used without the man knowing you are using it (although sometimes a man can feel the strings).



Figure

The most common IUDs are made of plastic, or plastic and copper.



Figure

Progestin IUD

This kind of IUD also contains the hormone progestin and is available in some countries. Progestin decreases the pain and bleeding that some women have with the IUD. It protects against pregnancy for 5 years.

IMPORTANT

IUDs do not protect against STDs, including HIV/AIDS. Not only that, but if a woman has an STD, the IUD can lead to more serious complications, such as pelvic inflammatory disease (PID). PID can lead to infertility.



**STDs
Figure**

Who should not use an IUD:

◆ ***IUDs can be used safely by women who are breastfeeding.***

Do not use an IUD if you:

- **are pregnant or might be pregnant.**
- **are in danger of getting an STD. (This includes any woman who has more than one partner, or whose partner may have other sex partners.)**
- **have ever had an *infection* in your tubes or womb, or an infection after giving birth or after having an abortion.**
- **have had a pregnancy in your tubes.**
- **have a lot of bleeding and pain during your monthly bleeding.**

- **are very *anemic*.**
- **have never been pregnant.**

♦ ***Do not use an IUD if you are unable to get to a health center or clinic where you can have the IUD removed if necessary.***

Common side effects:

You may have some light bleeding during the first week after getting an IUD. Some women also have longer, heavier, and more painful monthly bleeding, but this usually stops after the first 3 months.

How to use the IUD:

An IUD must be inserted by a specially trained health worker after doing a pelvic exam. The best time to have the IUD put in is during your monthly bleeding. After childbirth, it is best to wait 6 weeks for the womb to return to its normal size and shape before getting an IUD.

Occasionally an IUD will slip out of place. If this happens, it will not be effective in preventing pregnancy, so it is important to learn to check your IUD to make sure it is still in place. Most IUDs have 2 thread-like strings attached which hang down into the vagina. You should check the strings after each monthly bleeding to make sure the IUD is in place.



Figure

How to check the *IUD strings*:

- 1.** Wash your hands.
- 2.** Squat down and reach as far as you can into your vagina with your 2 fingers. Feel for the IUD strings, but **do not pull them.**
- 3.** Take out your fingers and wash your hands again.

Warning signs for problems with an IUD:

Pelvic inflammatory disease is the most serious problem that can result from

having an IUD. Most infections happen in the first 3 months, usually because the woman already had an infection when the IUD was put in. Or it may happen because the health worker did not put in the IUD under clean conditions.

If you have any of the following signs, you should see a health worker trained to insert IUDs and to treat complications, or go to a hospital immediately:

- **Your monthly bleeding is late.**
- **You have pain in your lower belly or pain during sex.**
- **You have a heavy or bad-smelling discharge from the vagina.**
- **You do not feel well, or have fever or chills.**
- **Your IUD string is missing, or is shorter or longer than usual.**
- **Your partner can feel the IUD (not just the strings) during sex.**

To stop using an IUD:

When you want to stop using an IUD, it must be removed by a trained health worker. Never try to remove an IUD yourself.

You can become pregnant as soon as it has been removed.

Natural Methods of Family Planning

There are also 3 methods to avoid pregnancy that do not require any devices or chemicals (as with barrier methods) or medicines (as with hormonal methods). The methods are:

- **breastfeeding for the first 6 months**

- the mucus method
- the rhythm method

IMPORTANT

Natural methods of family planning do not protect against STDs, including HIV/AIDS. If you use any of the natural methods listed in these pages, you still need to think about ways to protect yourself from these diseases.

Breastfeeding for the first 6 months (Lactational Amenorrhea Method, LAM)

Breastfeeding under certain conditions can prevent the ovaries from releasing an egg. This method does not cost anything, but it is most effective for only the first 6 months after childbirth.

How to use breastfeeding to prevent pregnancy:

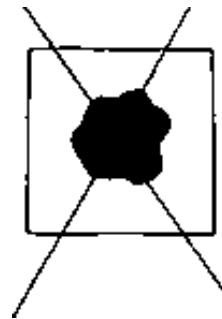
Breastfeeding is not an effective method of family planning unless these 3 conditions are true:

- 1.** Your baby is less than 6 months old.



Figure

2. You have not had your monthly bleeding since giving birth.



Figure

3. You are giving your baby only breast milk, and feeding it whenever it is hungry - with no more than 6 hours between feedings - day and night. Your baby does not sleep through the night without feeding.



Figure

Use another method of family planning that is safe with breastfeeding as soon as any of the following things happen:

- Your baby is more than 6 months old, **or**
- Your monthly bleeding starts, **or**
- Your baby starts taking other kinds of milk or other foods, or starts sleeping for more than 6 hours during the night, **or**
- You must be away from the baby for more than 6 hours and cannot remove milk from your breasts during that time.

The mucus method and the rhythm method

To use either of these methods, you must understand when you are fertile during your monthly cycle. This is sometimes called 'fertility awareness'. Then, to avoid pregnancy, you and your partner must not have sex, or must use a barrier method of family planning, during your fertile days.

◆ All these methods require the man's cooperation or they will not be effective.



barrier methods Figure

Because there are no costs or side effects, these methods can be used by women who cannot or do not want to use other methods, or when other methods are not available.

To practice fertility awareness more effectively, both you and your partner should visit a specially trained health worker to learn about your bodies and about fertility. It usually takes about 3 to 6 months of practice to learn how to use these methods.

Natural family planning methods do not work as well if:

- you have little control over when you will have sex. During your fertile times, your partner must be willing to wait and not have sex or to use condoms or some other barrier method.**
- your fertility signs change from month to month. You will not be able to know when you are fertile.**
- you have just had a baby or miscarriage. It is hard to know when you are fertile at these times.**



Figure

What you should know about a woman's cycle of fertility:

- **A woman produces one egg each month.**
- **The egg is released from the ovary about 14 days before the next monthly bleeding.**
- **The egg lives for about 24 hours (1 day and 1 night) after it has been released from the ovary.**
- **The man's sperm (seed) can live up to 2 days inside the woman's body.**



monthly bleeding Figure

To make all natural family planning methods more effective:

- Have sex only on the days between the end of the fertile time and your next monthly bleeding.
- Use both the mucus method and the rhythm method at the same time.
- Use condoms whenever you are not sure if you are fertile, or do not have sex.

Mucus Method

To use the mucus method, you must pay careful attention to the mucus (wetness) in your vagina. Your body produces wet mucus during your fertile time to help the sperm get into the womb. So if you check your mucus every day, you will know when you are becoming fertile. Then you can avoid sex during this time.

How to tell when you are fertile:

- 1.** Wipe the outside of your vagina with your finger or a piece of paper or cloth.
- 2.** If there is mucus there, take some between your fingers. How does it feel? Wet and

slippery? Dry and sticky?



clear, wet, slippery mucus = fertile



white, dry, sticky mucus = not fertile



Figure

How to use the mucus method:

- Do not have sex on any day you see or feel wetness or mucus. Or, if you want to have sex on those days, use a condom or a diaphragm **without** spermicide (these are the only methods that do not change the mucus).
- Do not have sex until 4 days after the last day of clear, slippery mucus.
- Do not have sex during your monthly bleeding. There is a small possibility you could be fertile and not be able to tell.
- Do not douche or wash out your vagina at any time.

- If you are having trouble knowing when you are fertile, or if you have a vaginal infection, you should use another method.

Rhythm Method

The rhythm method teaches you to find your fertile time by counting the days in your monthly cycle. You CANNOT rely on the rhythm method if:

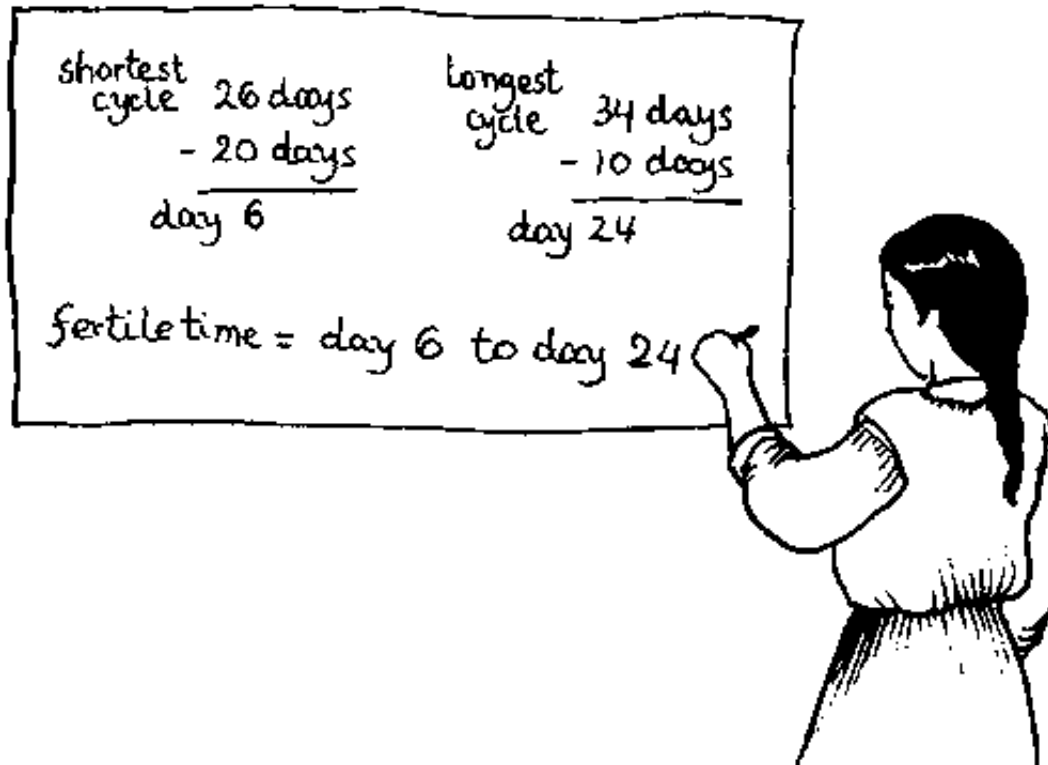
- **you are breastfeeding and your monthly bleeding has not returned.**
- **you have recently been pregnant and your monthly bleeding is not yet regular.**

How to use the rhythm method:

- Count the number of days in each of your monthly cycles for 6 months, from the first day of one monthly bleeding until the first day of the next.
- Pick out the longest and the shortest cycles.
- Take away or subtract 20 days from your shortest cycle and 10 days from your longest cycle. The time between these 2 days is your fertile time.
- Although you can have sex any time before or after your fertile time, the safest time is between the end of your fertile time and the beginning of your next monthly bleeding.

For example: Julia kept track of her monthly bleeding for 6 months. Her shortest cycle was

26 days and her longest cycle was 34 days:



To avoid pregnancy, Julia should not have sex, or she should use another family planning method, from day 6 after her monthly bleeding starts until day 24.

You must use another method of family planning while you are counting your 6 monthly cycles. But you should not use the pill, implants, or injections during the time you are counting, because these methods change the time when your monthly bleeding starts.

Traditional and Home Methods to Prevent Pregnancy

Every community has traditional methods to prevent or stop pregnancy. Many of these can be very useful in limiting the number of children a couple has, although

they are usually not as effective as modern methods. But some traditional methods are not effective at all, and some can even be very harmful.

TRADITIONAL METHODS THAT WORK

Withdrawal or pulling out (coitus interruptus). With this method, a man pulls his penis out of the woman and away from her genitals before he ejaculates. This method is better than no method, but it does not always work. Sometimes a man is not able to pull out before he ejaculates. Even if the man pulls out in time, some liquid that contains sperm can leak out of his penis before ejaculation and cause pregnancy.



Figure

Separating partners after childbirth. In many communities, couples do not have sex for months or years after the birth of a baby. This allows the mother to give more time to the care of the new baby and to regain her strength without fear of pregnancy.

TRADITIONAL METHODS THAT DO NOT WORK OR THAT CAN BE HARMFUL

- **Omens and magic do not prevent pregnancy.**
- **Putting grasses, leaves, pods, and dung in the vagina can cause infection and irritation.**
- **Washing out the vagina (douching) with herbs or powders does not prevent pregnancy. Sperm move very fast and some will reach the inside of the womb before they can be washed out.**
- **Urinating after sex does not prevent pregnancy. (But it can help to prevent infections of the urine system.)**

Permanent Methods of Family Planning

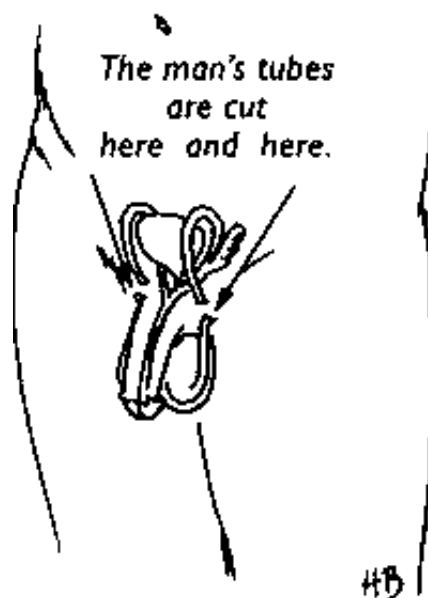
STERILIZATION (the operation for no more children)

There are operations that make it almost impossible for a man or a woman to have any children. Since these operations are permanent, they are only good for those women or men who are certain that they do not want any more children.

To have one of these operations, you must go to a health center or hospital. The surgery is fast and safe, and does not cause side effects.

The operation for the man (Vasectomy)

A vasectomy is a simple operation in which the tubes that carry the sperm from the *testicles* to the penis are cut. The man's testicles are not cut. This operation can be done in any health center where there is a trained health worker. It takes only a few minutes to do.



Figure



a man's body

Figure

The operation does not change a man's ability to have sex or to feel sexual pleasure. He still ejaculates semen but there are no sperm in the semen. He must ejaculate 20 times after the operation before all the sperm are gone. During this time, keep using your regular method of family planning.

The operation for the woman (Tubal Ligation)



A tubal ligation is a slightly more difficult operation than a vasectomy, but it is still very safe. It takes about 30 minutes.

A trained health worker makes 1 or 2 small cuts in the woman's belly, and then cuts or ties the tubes that carry the eggs to the womb. It does not change a woman's ability to have sex or to have sexual pleasure.

IMPORTANT

Sterilization does not protect against STDs, including HIV/AIDS. So you will still need to think about ways to protect yourself from these diseases.

Emergency Methods of Family Planning

Emergency methods are ways for women to avoid pregnancy after having unprotected sex. These methods prevent a fertilized egg from attaching to the womb wall. They are only effective if used soon after having sex.

Emergency methods are safe and effective. But they are not as effective as consistent use of the other family planning methods discussed in this chapter and they can cause unpleasant side effects.

EMERGENCY PILLS

The pills used for emergency family planning are the same combined birth control pills that some women take each day. But in emergencies, you take a much higher dose for a short time. You must take the pills within 3 days (72 hours) of having unprotected sex. The pills will not work if you are pregnant from having sex more than 3 days earlier.



Figure

◆ **Emergency family planning methods should not be used instead of other methods.**

How to take Emergency Pills:

Low dose pills. Take 4 low-dose birth control pills, which contain 35 mcg of the estrogen called ethinyl estradiol. Then take 4 more tablets 12 hours after the first dose. Some common brands are ***Brevicon 1 + 35, Lo-Femenal, Lo-Ovral, Microgynon 30, Microvlar, Neocon, Nordette, Ortho-Novum 1/35, 1/50.***

OR

High dose pills. Take 2 high-dose birth control pills, which contain 50 mcg of the estrogen called ethinyl estradiol. Then take 2 more tablets 12 hours after the first dose. Some common brands are ***Ovral, Femenal, Primovlar, Norlestrin, Ovcon 50, Nordiol,***

Eugynon, and Neogynon.

Emergency pills can make you have headaches or feel nauseous. Try eating something at the same time you take the pills and, if possible, take a medicine that will keep you from vomiting. If you vomit within 3 hours of taking the pills, you should take them again.

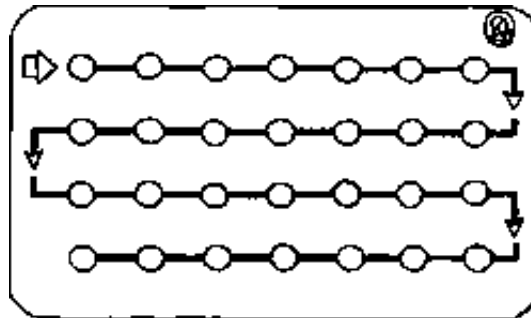
Until your next monthly bleeding, you should use a barrier method of family planning, like condoms, or not have sex. After your monthly bleeding, you can use any family planning method you choose.

Your next monthly bleeding should begin in about 2 weeks. If it does not, you may have become pregnant despite the emergency family planning. You should continue to use a barrier method of family planning until you know for sure.

OTHER EMERGENCY METHODS

Mini pills (progestin only pills). These pills contain no estrogen, so they cause less nausea than combined birth control pills. They only work if taken within 2 days (48 hours) of having unprotected sex.

- **Take 20 mini pills followed by 20 more pills 12 hours after the first dose.**



Figure

Mifepristone, also known as RU 486 or the 'French Pill', causes less nausea and vomiting than the other emergency pills.

- **Take 600 mg within 3 days of having unprotected sex. Take this amount only once.**



mifepristone
Figure

IUD (Intra-Uterine Device): An IUD can also keep the egg from attaching to the womb wall.



IUD
Figure

- **The IUD must be inserted by a specially trained health worker within 5 days after having unprotected sex. The IUD can be kept in and continue to protect you from pregnancy for up to 10 years. Do not have an IUD inserted if you are at risk of having an STD.**



how to know if you
are at risk for an STD
Figure

New methods of family planning

The following new methods of family planning are available or are being developed. They may only be available in some places and may be expensive. We include them here because the more women know about new methods and ask for them, the more likely it is that the methods will become available for everyone and perhaps be less costly. The more methods there are, the more likely it is that every woman who wants to prevent pregnancy will be able to find a method that suits her needs.

1. Plastic condoms are made from very fine polyurethane. They are thinner than latex condoms and allow for more feeling. They are less likely to be damaged by heat or oils.

2. Once-a-week birth control pills work by changing a woman's natural balance of estrogen, which prevents a fertilized egg from attaching to the womb wall. The once-a-week pill is less effective than regular daily birth control pills at preventing pregnancy. Little is known about its side effects.

3. Vaginal rings slowly release progestin into a woman's vagina. Vaginal rings come in only one size and a woman can put one in herself. They last from 3

months to a year. After taking the ring out, fertility returns within 24 hours.

If you are offered a new method of family planning, be sure to discuss any concerns you have before choosing that method. Make sure you have all the information you need to make a good choice, and that you are not being pressured into using a method that is not right for you.

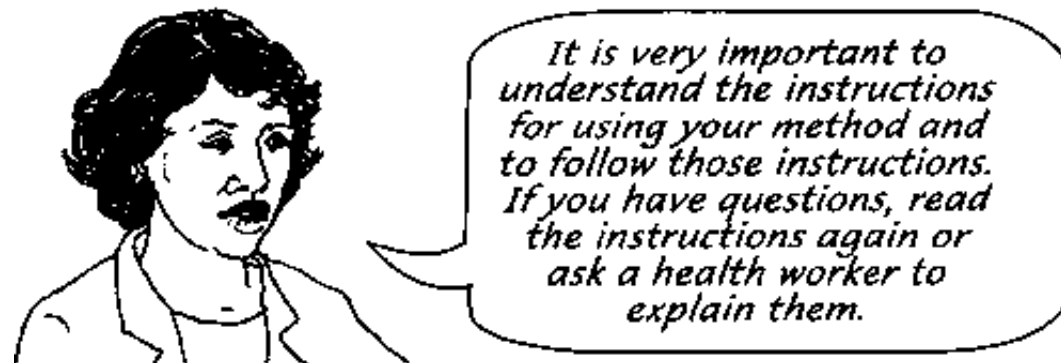
Choosing the Best Method

After reading this chapter, if you still have questions about which family planning method is best for you, the chart below may help. It is important to choose a method that meets your needs, because then you will be likely to use it regularly and it will be more effective.

Personal Needs	You Might Prefer	You Should Probably Avoid
Your partner is not willing to take an active role in family planning.	Hormonal methods, diaphragm, female condom, IUD	Male condoms, natural methods
Other bleeding, besides your normal monthly bleeding, worries you or creates difficulties for you.	Barrier methods, IUD	Hormonal methods
You do not want any more children.	Sterilization, implants, IUD, injections	Natural methods, barrier methods
No matter what you say, your partner does not want you to use family planning.	Injections, inserts, IUDs	Barrier methods, pills, natural methods

You feel embarrassed to touch your vagina.	Hormonal methods, male condoms	Diaphragm, female condoms
You do not feel comfortable asking your partner to avoid or to interrupt sex.	IUD, hormonal methods	Barrier methods, natural methods
You are concerned that your partner has had sex with others and may infect you with STDs	Male or female condom, or other methods combined with condoms	IUD, hormonal methods
You have more than one sex partner or have had STDs.	Male or female condom	IUD
You think you will want to have a child within a year	Male or female condom, diaphragm, natural methods, combined or progestin-only pills	IUD, injections, implants
You are breastfeeding.	IUD, male or female condoms, diaphragm with spermicide, mini pill, progestin-only injections	Combined birth control pills, injections with estrogen
You have not had a child.	Hormonal methods, barrier methods	IUD
You do not want to have to remember to do anything.	IUD, implants, injections	Birth control pills, natural methods

After you choose a new method



Figure

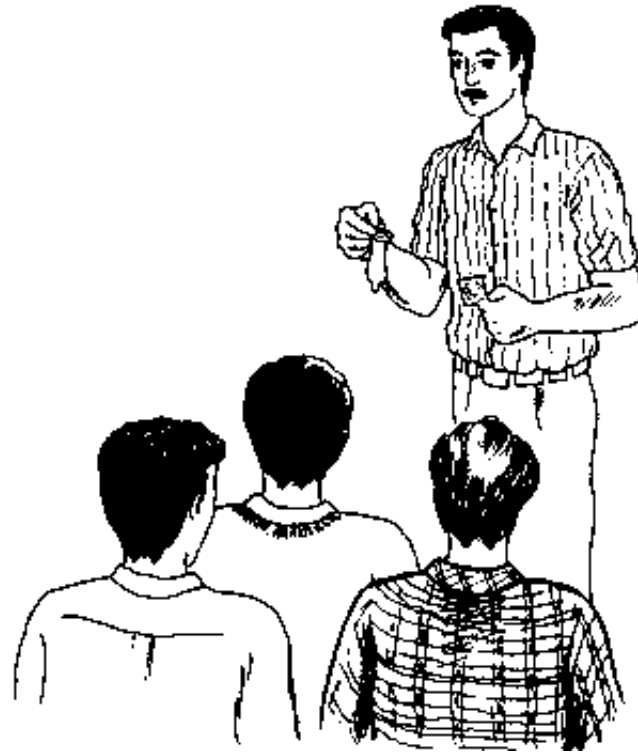
Working for Change

Sometimes a woman would like to space her children or limit the number she has, but cannot use family planning. This can happen because:

- **she cannot get the information about different methods.**
- **some family planning methods are not easily available or cost too much for the family to afford.**
- **there are no women's health or family planning services nearby, or the local health worker is not trained to provide family planning services.**
- **religious beliefs forbid the use of family planning.**
- **a woman's husband does not agree to use family planning.**

Here are some things that groups of people can do to make family planning services more available to all women in the community, and to encourage the use of family planning:

- **Provide education.** Make information about family planning available to everyone - boys and girls as well as women and men. Education programs can show the benefits of family planning and help couples choose the best methods for them. Perhaps you can lead discussions with women or couples about their concerns and experiences related to family planning. Include information about preventing STDs and HIV/AIDS when you talk about family planning.
- **Make family planning methods accessible at a low cost.** Have a local health worker trained to provide family planning services start a women's health center or include family planning services at your local clinic.
- **Train male outreach workers** to educate men about the importance and benefits of family planning. Help men understand their role in reproduction so they can see that they should share the responsibility for family planning. Try to change attitudes about what is 'manly' so that men will support and participate in family planning with their partners.
- **Address local religious concerns** about family planning. If a family planning method can be explained in a way that respects religious beliefs, it will help create more acceptance of it.




Figure

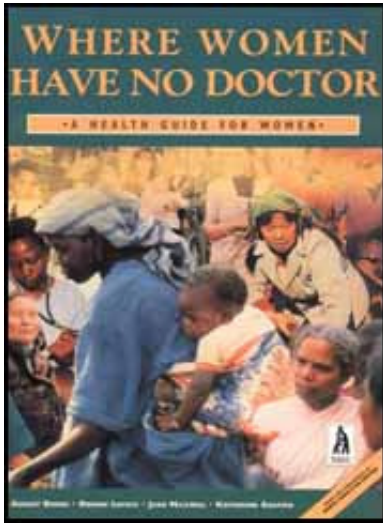
As you talk about family planning in your community, it helps to remember and remind others that family planning is important to improve not just women's health and well being, but the health and quality of life of **everyone** in your community.



[Home](#) > [ar](#).[cn](#).[de](#).[en](#).[es](#).[fr](#).[id](#).[it](#).[ph](#).[po](#).[ru](#).[sw](#)

 **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**

 **Chapter 14: Infertility (When You Are Not Able to Have a**



Baby)

 **(introduction...)**

 **What Is Infertility?**

 **What Causes Infertility?**

 **Infertility in a man**

 **Infertility in a woman**

 **Dangers at Work or Home That Can Hurt Fertility**

 **What to Do for Infertility**

 **Losing a Pregnancy (Miscarriage)**

 **Living with Infertility**

 **Working for Change**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 14: Infertility (When You Are Not Able to Have a Baby)



Figure

◆ ***When a couple cannot have a baby, it may be because the man, the woman, or both have a fertility problem. It is a problem that few people talk about.***

Most men and women assume they will be able to have children. The truth is that about 1 out of every 10 couples has trouble getting pregnant. Some men and women do not want to have children. But for couples who look forward to having

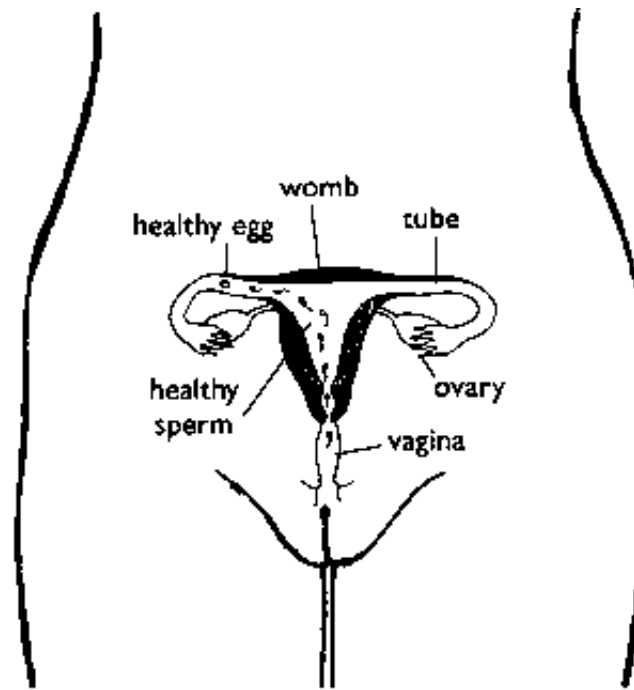
children, infertility can bring sorrow, anger, and disappointment.

Often it is the woman who is blamed if a couple does not have children. But about half the time, it is the man who is infertile. Sometimes a man will not believe it is his problem, or that it may be a shared problem. He may refuse to go for an *examination*, or he may react with anger. Most often this is because infertility causes shame in communities where a man is expected to produce children as a sign of his manhood.

Infertility has many causes. Some of them can be treated and some cannot. This chapter will help you understand infertility and what you can do about it.

What Is Infertility?

We say a couple is infertile if they cannot get pregnant after having sex together a few times a month for a year, without using a family planning method. A couple may also have a fertility problem if they have had 3 or more miscarriages (lost pregnancies) in a row.



Normal fertility Healthy sperm swim through the womb to the healthy egg.

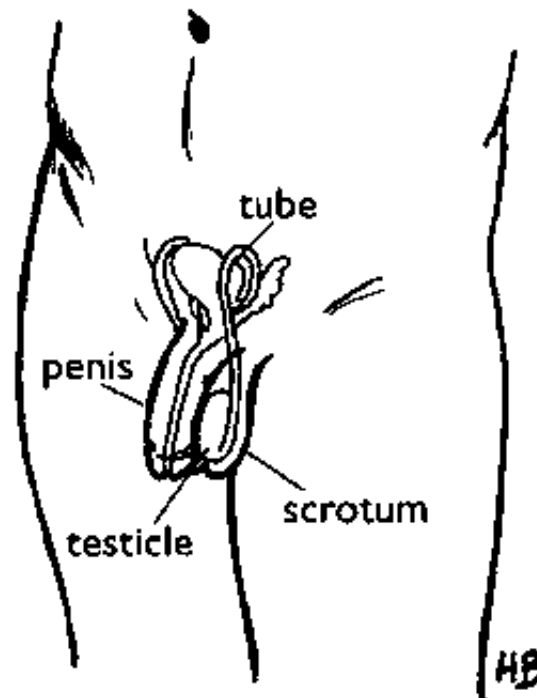
A man or woman who has already had a child can also become infertile. A problem can develop in the years after the last child was born.

Sometimes the problem is not the man's or the woman's alone but a combination of the two. And sometimes both partners seem to be healthy and no doctor or test can find out what is causing the problem.

Habits such as drinking too much alcohol, smoking or chewing tobacco, and using drugs can all affect a man's or a woman's fertility.

What Causes Infertility?

Infertility in a man



Figure

The main causes of infertility in a man are:

- 1. He does not produce enough sperm. Or his *sperm* may not be able to swim to the woman's tubes or to *fertilize* the eggs.**
- 2. He had *mumps* after *puberty* that harmed his *testicles*. When this happens, the man can still climax (*ejaculate*), but the liquid that comes out has no sperm in it.**
- 3. His sperm cannot leave his penis because he has scars in his tubes from a past or present *sexually transmitted disease (STD)*.**

4. He has a swelling of the veins in his scrotum (varicocele).

5. He may have problems during sex because:

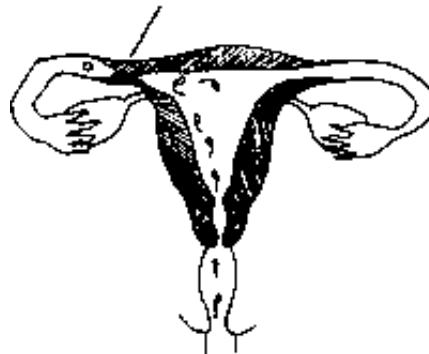
- his *penis* does not get hard.
- his penis gets hard but does not stay hard during sex.
- he has a *climax* too quickly, before his penis is deep in the woman's *vagina*.

6. Illnesses such as *diabetes*, *tuberculosis*, and *malaria* can all hurt a man's fertility.

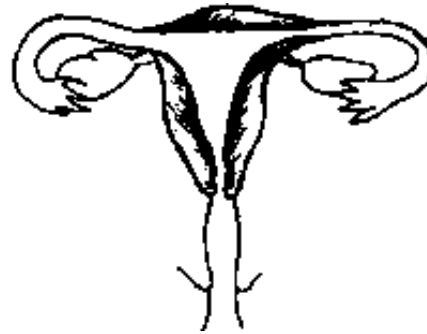
Infertility in a woman

◆ ***Infertility caused by infection can be prevented.***

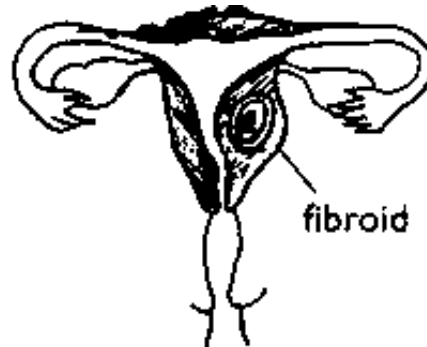
Infertility in the woman



1. blocked tube



2. ovary does not produce an egg



3. fibroids

The main causes of infertility in a woman are:

1. She has scarring in her tubes or inside her womb. Scarring in the tube can prevent the egg from moving through the *tube*, or the sperm from swimming to the egg. Scarring in the *womb* can prevent the fertilized egg from attaching to the wall of the womb. Sometimes a woman gets scarring but does not know it because she does not feel ill. But years later she learns she is infertile.

Scarring can be caused by:

- **an infection from an untreated STD that goes up into the womb or tubes**

(pelvic inflammatory disease or PID).

- **unsafe *abortion* or problems in childbirth that caused damage or *infection* in the womb.**
- **unclean conditions when an IUD is put in that caused an infection.**
- **problems from an operation of the vagina, womb, tubes, or *ovaries*.**

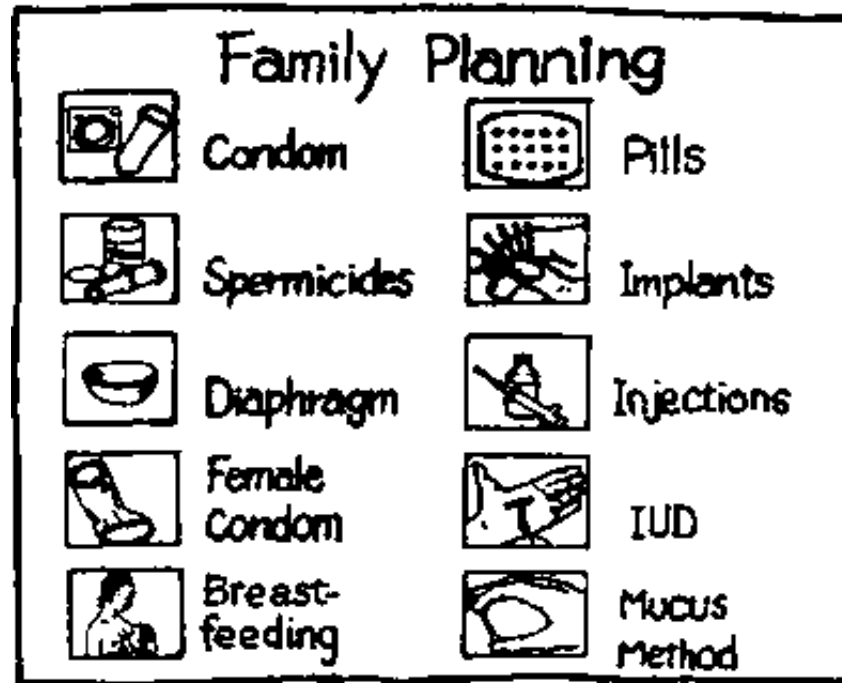
2. She does not produce an egg (no ovulation). This can be because the body does not make enough of the needed *hormones* at the right time. If her monthly bleedings are less than 25 days apart, or more than 35 days apart, she may have a problem with ovulation.

Sometimes a woman does not produce eggs if she loses weight very quickly, or if she is too fat.

3. She has growths in her womb (fibroids). Fibroids can prevent *conception* or make it difficult to carry the pregnancy.

4. Illnesses such as diabetes, tuberculosis, and malaria can also hurt a woman's fertility.

Family Planning Is Safe



Figure

Family planning methods are often blamed for infertility. But family planning methods (other than sterilization) do not cause infertility except in some cases when an IUD has not been put in correctly and causes an infection in the womb or tubes. For more information, see the chapter on "Family Planning".

Dangers at Work or Home That Can Hurt Fertility

These dangers can hurt fertility in many ways - from the making of sperm and eggs to the birth of a healthy baby:

- **Contaminated air, food, or water caused by dangerous *pesticides* or *toxic chemicals* used in factories and farms.**

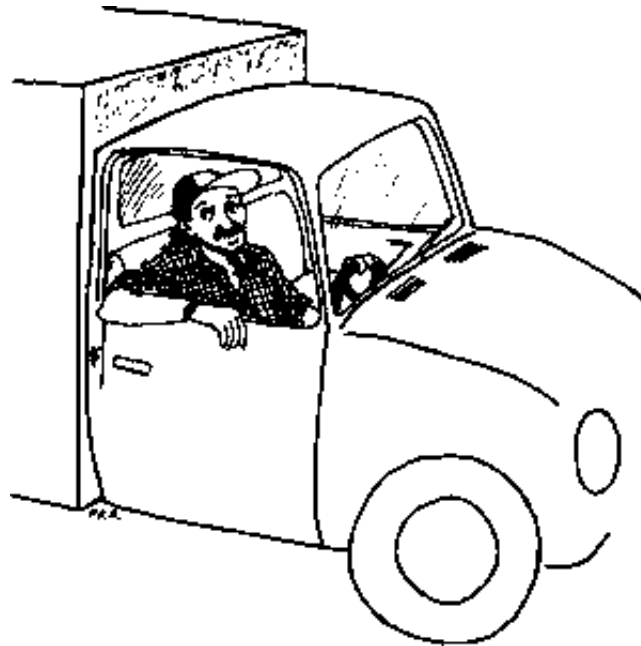


Pesticides and other harmful chemicals can hurt a man's sperm while he works...



...and if the woman washes his clothes, the harmful chemicals are passed to her.

- **Smoking or chewing tobacco, or drinking alcohol or strong coffee. Women who smoke or chew tobacco, or who drink a lot of alcohol or strong coffee take longer to become pregnant and have more miscarriages. Men who smoke or drink a lot have fewer sperm, and these are often damaged or weak.**



Working in hot places, like sitting near the hot engine of a truck for many hours, can kill sperm and cause a man to be infertile.

- **High temperatures.** A man's sperm need to stay cool. That is why the testicles hang in the scrotum outside a man's body. When the testicles get too warm they can stop making healthy sperm. For example, this can happen if a man wears tight clothes that press his testicles up inside his body, or if he takes a hot bath, or works near hot things such as boilers, furnaces, or the hot engine of a long-distance truck - especially if he drives for many hours without a break. Once the testicles become cool, they start making healthy sperm again.
- **Medicines.** Some medicines can hurt fertility. The best choice is for you and your partner not to use any medicines while you are trying to become pregnant. If you must use medicines because of illness, talk to a health worker and tell her you are trying to get pregnant.

What to Do for Infertility

If you or your partner think you have a fertility problem:

1. Try to have sex during your fertile time. Although a man makes millions of sperm every day, a healthy woman releases only one egg a month. This is called her fertile time - the only time during the month when she can get pregnant. For most women their fertile time starts about 10 days after the first day of the *monthly bleeding* and lasts about 6 days.

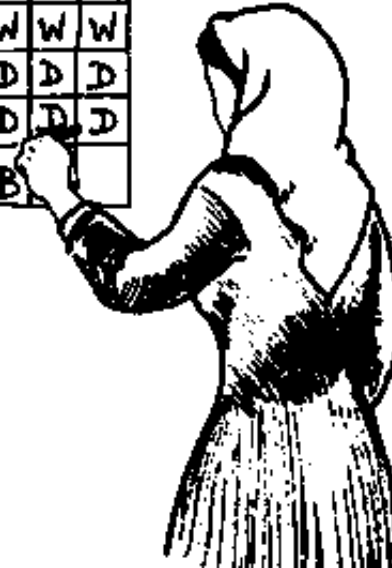
The body has several signs that tell you when you are in a fertile time. The easiest signs to check are the changes in the mucus in your vagina.

Checking your mucus

During your fertile time, your *cervix* makes mucus that helps sperm get into the womb. This mucus looks clear and wet, like raw egg white, and can be stretched between your fingers. Later in your monthly cycle, you may see sticky or dry mucus. This kind of mucus stops the man's sperm from getting into the womb.

B = monthly
bleeding
W = wet days
(fertile)
D = dry days
(not fertile)

	B	B	B	B	B	D
D	D	D	D	W	W	W
W	W	W	D	D	D	D
D	D	D	D	D	D	D
B	B	B	B	B		



Figure

See **The mucus method and the rhythm method** to learn how to check your mucus. Write down the changes every day on a chart. During the week that you see wet, shiny, clear mucus, try to have sex every day.

When you have sex, the best positions for getting the sperm close to the opening of your womb are:

- to lie on your back with the man on top.
- to lie on your side.

Then, after having sex, lie flat on your back for about 20 minutes. This will help the sperm swim into your womb and find the egg.

◆ **Try not to worry if you do not get pregnant right away. Many couples get pregnant within a year if they continue to have sex during the woman's fertile days.**

Avoiding these things can also help:

- **Do not use oils or creams during sex. They can kill the sperm or stop it from reaching the egg.**
- **Do not *douche* or wash inside your vagina. Douching before or after sex can change the wetness inside your vagina, making it harder for the sperm to live.**
- **Your partner should not have a hot bath before having sex. Heat on the testicles kills sperm.**



**STDs
Figure**

2. Treat any health problems.

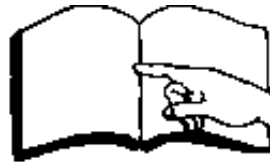
Both you and your partner should have medical exams and be checked for STDs. If either of you has an STD, both of you must be treated. Be sure to finish all the medicines you are given.



Figure

3. Practice good health habits:

- **Eat good, healthy food. If you do not have regular monthly bleeding and you are very thin or very fat, try to gain or lose weight.**
- **Avoid smoking or chewing tobacco, using drugs, or drinking alcohol.**
- **Avoid *caffeine* in drinks like coffee, black tea, and cola drinks.**
- **Get plenty of rest and regular exercise.**



staying healthy, 149

eating for good

health, 165

Figure

4. Try to see a health worker if you are not pregnant after one year. There are some simple tests that do not cost much that may be able to tell you what the problem is. For example, the health worker may look at your partner's sperm under a *microscope* to see if they are healthy. She may give you a *pelvic exam* to check your vagina, womb, and tubes for infection or growths. Or she may teach you to tell if your ovaries are releasing an egg by taking your *temperature* every morning.

It is important to remember that these tests only tell you what the problem is - they will not solve it. Even the most expensive medicines and operations often cannot cure infertility.

Losing a Pregnancy (Miscarriage)

For many couples, the problem is not getting pregnant but staying pregnant. Losing 1 or even 2 pregnancies is common. It can be the body's way of ending a pregnancy that is too weak to survive.

But if you have lost 3 or more pregnancies, there may be another problem, such

as:

- **unhealthy eggs or sperm.**
- **a problem with the shape of the womb.**
- **growths (fibroids) in the womb.**
- **the wrong balance of *hormones* in your body.**
- **infection in the womb or vagina.**
- **an illness, such as malaria.**



**infection in the womb
Figure**

The warning signs of miscarriage are:

- **small amounts of brown, red, or pink blood from your vagina.**
- **pains or *cramping*, no matter how small.**

♦ *Miscarriage often happens no matter how careful you are. Do not blame yourself.*



pregnancy

Figure

What to do when signs start:

Once a miscarriage starts there is usually not much that can be done to stop it. If you are bleeding slightly, without pain:

- **lie down and rest for 2 or 3 days.**
- **do not have sex.**

If bleeding continues or becomes heavy, or if you are more than 4 months pregnant, go to a hospital and tell them you are pregnant.

IMPORTANT

If you are in the first 3 months of pregnancy and you have severe pain, feel faint, and have some bleeding, you could have a pregnancy in the tube. Go to a hospital immediately. Be sure to tell them you are pregnant.

Before you try to get pregnant again:

- **Follow the guidelines about treating health problems and practicing good health habits. It is especially important to avoid caffeine, to stop smoking or chewing tobacco, and to stop drinking alcohol or using drugs. These things can all help cause miscarriage.**
- **If your miscarriages always happen after you have been pregnant for 3 months, it may be that the opening to your womb is weak. This can sometimes be treated by having a doctor put a small tie around the cervix**

to keep it closed. Make sure that the doctor has experience giving this treatment. When it is time to give birth, the tie has to be removed.

If you do become pregnant:

- **try not to lift heavy things.**
- **try not to have sex for the first 6 to 8 weeks of your pregnancy.**
- **rest when you can.**



Losing a pregnancy is common. If it happens to you, it does not mean you cannot have a healthy pregnancy the next time.

Living with Infertility

Infertility can make a woman or man feel sad, nervous, alone, frustrated, or angry.

When this happens, it is important to know you are not alone. Try to talk with people who love and care about you. You may also be able to find other couples with the same problem and learn to help each other.



Figure



helping relationships,
support groups
Figure

The stories below describe some ways that people have coped with infertility:

Adopting a child: Lina's story

Lina was 25 years old and had been married 3 times. She was very unhappy because each of her husbands divorced her when she did not become pregnant. In the village, people spoke about her and blamed her, saying that she must have used some magic to avoid pregnancy before she was married, and that it must have been so strong it had made her infertile.

Her sisters all had children, and sometimes Lina cared for them. Her older sister had *tuberculosis (TB)* and she was very ill when she gave birth to twins. Lina asked if she might adopt one of the twins and her sister agreed. Lina went to the health center and asked the health worker to help her find a way to feed the baby. The health worker taught Lina how to feed the baby from a cup and spoon and arranged to have the baby breastfed during the day by a healthy woman in the village with another baby. At night Lina fed her baby from a cup, with breast milk that another sister gave her each evening.

Lina's friends and neighbors were not sure that her baby would be healthy. But when they saw the baby grow strong, they were pleased and proud of Lina. In fact, Lina came to be

seen as an expert in raising adopted babies. When a village mother died in childbirth, her baby was given to Lina to care for.



Figure

The twins have grown up now, and people often say that the one Lina adopted is taller and stronger than the other. They credit this to Lina's loving care.

- Bundoora, Australia

Building a life without children: Sara and Tito's story

Sara and Tito tried for many years to have children, but they were not able to. At first they were sad, because in their community, couples were expected to have as many children together as they could. But then they decided to stop thinking that their lives were not complete without children and to plan a future for themselves.

They decided to start a business and to travel from town to town, market to market, selling pots and pans and other goods. With children, it would have been very difficult for them to travel in this way.



Figure

Now that Sara and Tito are older, people say they look alike in their faces and attitudes. They care for each other, share many laughs and many friends. They are not grandparents like their neighbors, but they have many interesting stories to tell. They are respected by everyone in the community.

- Lima, Peru

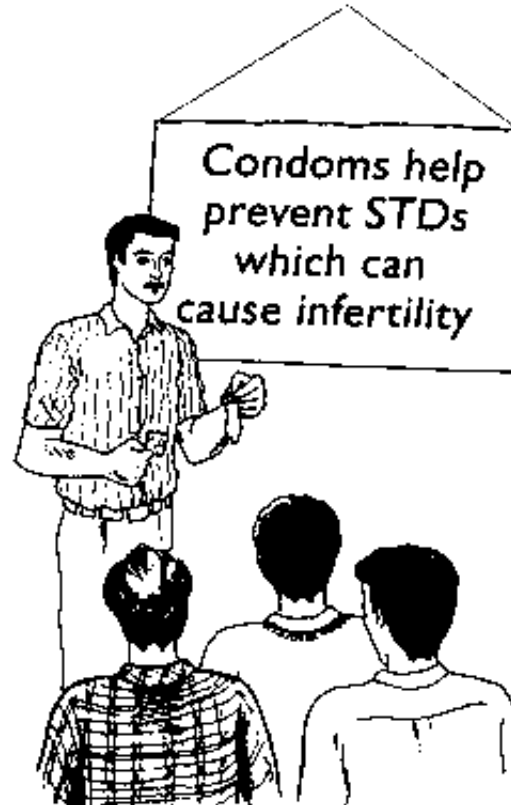
Working for Change

To help others with infertility problems:

- **be kind and sympathetic. It is a difficult time, and they need support and understanding. Do not blame couples who cannot get pregnant.**
- **teach couples to value and respect each other as companions.**
- **help a couple who cannot have children to look for other ways to be with children or to make peace with their lives.**

Health workers can also:

- **provide information on ways to adopt children.**
- **teach young people about STDs and how to prevent them.**
- **make sure your local health center is prepared to diagnose and treat STDs and to take women's complaints about *pelvic* pain seriously. Too often women are sent home without treatment after being told there is nothing wrong with them.**
- **teach women the signs of pelvic infection and the importance of getting immediate and complete treatment.**
- **teach men and women the signs of STDs, the importance of getting treated right away, and the importance of treating all partners.**



There are many causes of infertility, but STDs are the easiest to prevent



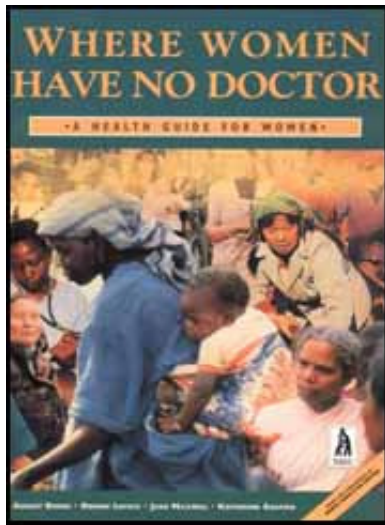
[Home](#) > [ar](#).[cn](#).[de](#).[en](#).[es](#).[fr](#).[id](#).[it](#).[ph](#).[po](#).[ru](#).[sw](#)

 **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**





 **(*introduction...*)**

  **Women's health is in your hands**

 **Thanks**



- About this Book**
- How to Use this Book**
- Chapter 1: Women's Health Is a Community Issue**
- Chapter 2: Solving Health Problems**
- Chapter 3: The Medical System**
- Chapter 4: Understanding Our Bodies**
- Chapter 5: Health Concerns of Girls**
- Chapter 6: Pregnancy and Childbirth**
- Chapter 7: Breastfeeding**
- Chapter 8: Growing Older**
- Chapter 9: Women with Disabilities**
- Chapter 10: Staying Healthy**
- Chapter 11: Eating for Good Health**
- Chapter 12: Sexual Health**
- Chapter 13: Family Planning**
- Chapter 14: Infertility (When You Are Not Able to Have a Baby)**
- Chapter 15: Abortion and Complications from Abortion**
- Chapter 16: Sexually Transmitted Diseases and Other Infections of the Genitals**
- Chapter 17: AIDS (Acquired Immune Deficiency Syndrome)**
- Chapter 18: Violence Against Women**

- Chapter 19: Rape and Sexual Assault**
- Chapter 20: Sex Workers**
- Chapter 21: Pain in the Lower Abdomen**
- Chapter 22: Abnormal Bleeding from the Vagina**
- Chapter 23: Problems of the Urine System**
- Chapter 24: Cancer and Growths**
- Chapter 25: Tuberculosis**
- Chapter 26: Work**
- Chapter 27: Mental Health**
- Chapter 28: Alcohol and Other Drugs**
- Chapter 29: Refugees and Displaced Women**
- Chapter 30: Female Circumcision**
- Chapter 31: Use of Medicines in Women's Health**
-  **Table of Medicines: Green Pages**
- Health Care Skills**
-  **Vocabulary: List of difficult words**
-  **Where to get more information**
-  **Back cover**

Women's health is in your hands

Around the world, millions of women live in rural or urban areas 'where there is no doctor' or where health care is not affordable. Many women suffer and die

needlessly because they lack access to health care and clear, useful information about their health.

This book is written for these women, and for anyone interested in improving women's health. Using simple language and hundreds of pictures, it provides information about a wide range of women's health problems. We hope that everyone - girls, women, and health workers - will find it useful, even life-saving. Our goal is to provide this information to as many women as possible, in as many places as possible.

We did not write this book alone. To make it useful, we asked women around the world about their health needs, beliefs, and practices - and what they would most like included in the book. Women from many countries met in groups to discuss health topics and sent us the results. This showed us that although women's health services often focus on reproductive health, these women considered other topics just as important to their health. So this book covers a wide range of issues that affect women's health.

These same women also helped us write the book. Their voices, experiences, and stories helped shape the writing. We were guided by their comments about what was most helpful, what was unclear or incorrect, and whether this information would be useful in their communities.

If you can read, perhaps you could read this book to someone who cannot. If you know others who suffer from poor health, please share this book with them - this is not a book to be used by a woman alone. As we discover actions and ideas that can help solve women's health problems, working together and learning from each


other become important and necessary parts of change.



Any woman can be a health worker



[Home](#) > [ar](#).[cn](#).[de](#).[en](#).[es](#).[fr](#).[id](#).[it](#).[ph](#).[po](#).[ru](#).[sw](#)

 **Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)**

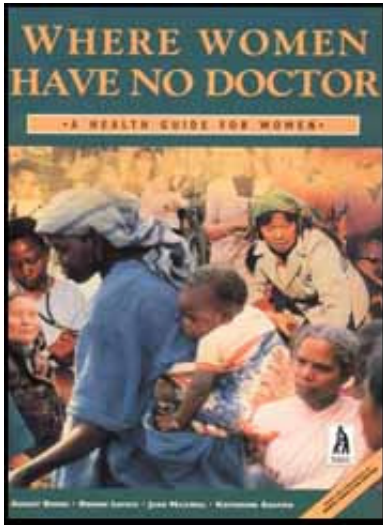
  **Chapter 15: Abortion and Complications from Abortion**

 ***(introduction...)***

 **Why Do Some Women Have Abortions?**

 **Safe and Unsafe Abortion**

 **Deciding about an Abortion**

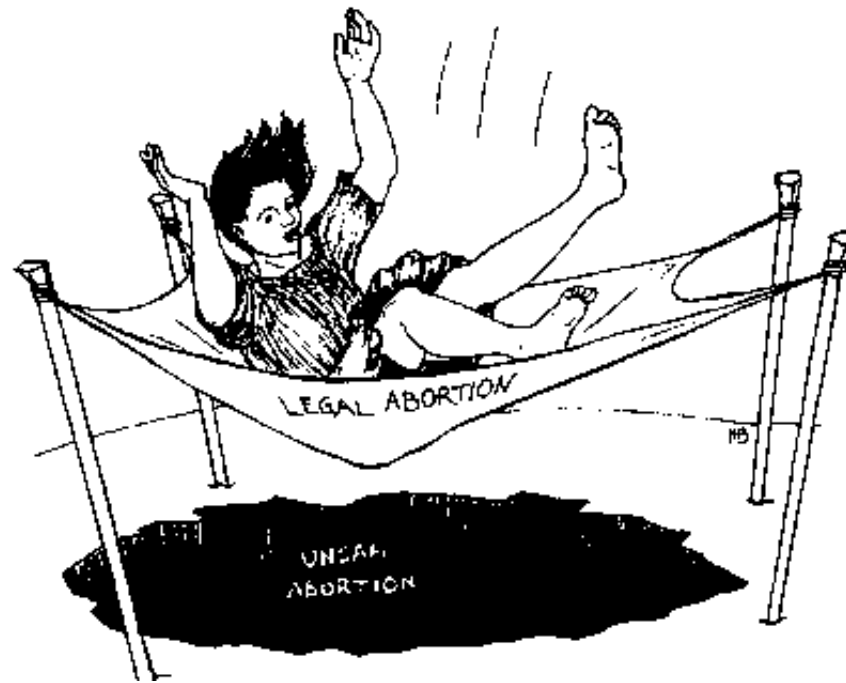


- **Safe Methods of Abortion**
 - ☞ **(introduction...)**
 - ☞ **How to tell if an abortion will be safe**
 - ☞ **What to Expect during a Safe Abortion**
 - ☞ **What to Expect after an Abortion**
 - ☞ **Family Planning after an Abortion**
- **Complications of Abortion**
 - ☞ **(introduction...)**
 - ☞ **Heavy bleeding from the vagina**
 - ☞ **Emergency help for too much bleeding**
 - ☞ **Shock**
 - ☞ **Infection**
 - ☞ **Fainting or loss of consciousness**
 - ☞ **Injury inside the body (Internal Injury)**
- ☞ **Preventing Unsafe Abortion**

Where Women Have No Doctor - A Health Guide for Women (Hesperian Foundation, 1997, 600 p.)

Chapter 15: Abortion and Complications from Abortion

If family planning methods fail, safe and legal abortion is a woman's safety net.



Figure

When a woman does something to end a pregnancy, this is called an 'abortion'. We use the word abortion in this book only to describe an action that is planned. The unplanned, natural loss of a pregnancy we call a 'miscarriage'.

◆ Lack of family planning services and lack of information about sex lead to unwanted pregnancy and abortion.

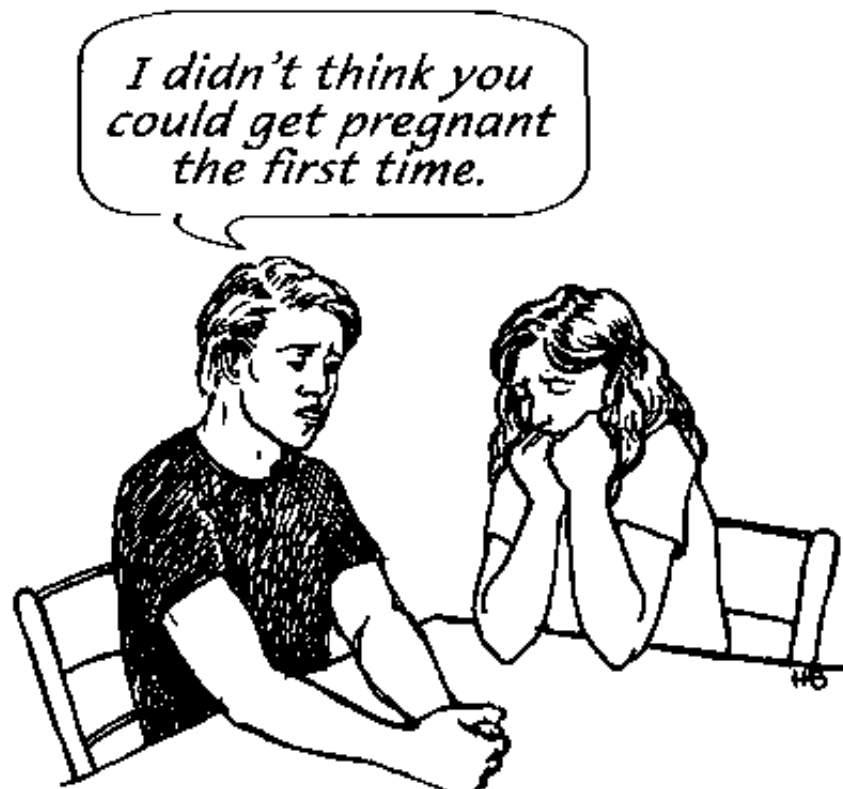
Deciding to have an abortion is always hard. A woman may seek abortion because:

- **she already has all the children she can care for.**
- **a pregnancy is a danger to her health or her life.**
- **she has no partner to help support the child.**

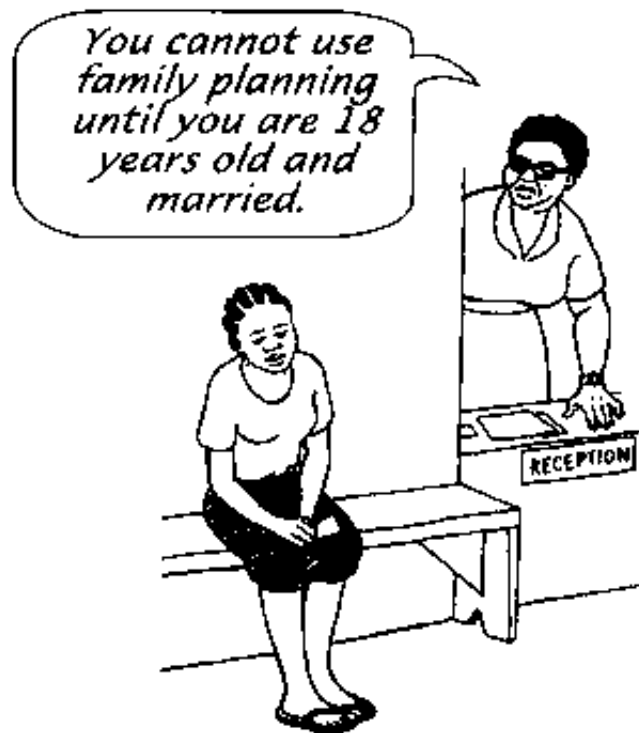
- she wants to finish school.
- she does not want to have children.
- she got pregnant after being forced to have sex.
- someone is forcing her to have an abortion.
- the child will be born with serious problems (*birth defects*).

Why Do Some Women Have Abortions?

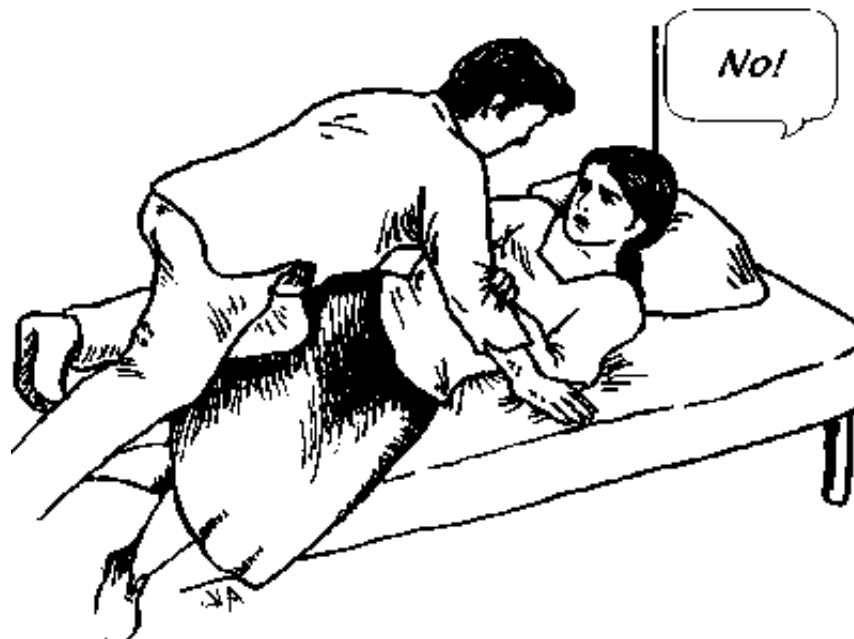
Unplanned and unwanted pregnancy can happen when...



... the woman and her partner do not know how pregnancy happens.



... health workers think some women are too young to get family planning.



... women are forced to have sex.



... family planning is not available, is not used correctly, or it fails.

Emergency Family Planning Methods

A woman who has had unprotected sex within the last 3 days may be able to prevent pregnancy if she acts quickly.

Safe and Unsafe Abortion

A safe abortion is less likely to cause harm than having a baby.

Abortion is very safe when it is done:

- **by a trained and experienced health worker.**
- **with the proper instruments.**
- **under clean conditions. Anything that goes into the *vagina* and *womb* must be sterile (without any germs).**
- **up to 3 months (12 weeks) after the last *monthly bleeding*.**

Abortion is unsafe when it is done:

- **by someone who has not been trained to do it.**
- **with the wrong instruments or medicines.**
- **under unclean conditions.**
- **after 3 months (12 weeks) of pregnancy, unless it is done in a health center or hospital that has special equipment.**

DEATH FROM UNSAFE ABORTION

Around the world, 55 million abortions are done every year. Women survive most of them, even if they are not legal. But unsafe abortions can cause death, or complications like *infection*, lasting pain, and *infertility*.

Out of 100,000 women getting a safe abortion, only 1 will die.



Figure

But out of 100,000 women having unsafe abortions, between 100 and 1000 will die.



Figure

◆ *Avoid unsafe abortion. Try to prevent unwanted pregnancy before it happens.*

Women have always tried to find ways to end pregnancy when they are desperate.

Stay away from the following methods. They are very dangerous.

- **Do not put sharp objects like sticks, wire, or plastic tubing into the vagina and womb. These can tear the womb and cause dangerous bleeding and infection.**
- **Do not put herbs or plants in the vagina or womb. These can burn or irritate badly, causing damage, infection, and bleeding.**
- **Do not put substances such as bleach, lye, ashes, soap, or kerosene in the vagina or womb. Also, do not drink them.**
- **Do not take medicines or traditional remedies in large amounts to cause abortion (either by mouth or in the vagina). For example, taking too much of the medicines for *malaria* (chloroquine) or to stop bleeding after childbirth (ergometrine, oxytocin) can kill you before they cause abortion.**
- **Do not hit your abdomen or throw yourself down stairs. This can cause injury and bleeding inside your body, but may not cause abortion.**

IMPORTANT

Never put anything inside the womb yourself or allow an untrained person to do so. This can kill you.

ACCESS TO SAFE ABORTION

When a woman is faced with an unwanted pregnancy, she should be able to get a safe and legal abortion. But laws about abortion differ from one country to another

Legal abortion. If abortion is legal a woman can walk into a health center or hospital, pay a fee, and have a safe abortion. In countries where this happens, almost no women get sick or die from complications of abortion.

Legal abortion in some cases. In some countries an abortion is only legal for certain reasons, such as:

- **if a woman becomes pregnant from rape or incest (sex with a close family member).**
- **if a doctor says pregnancy would be a danger to a woman's health.**

But abortion is often difficult to get, even for those reasons. Doctors and health workers may not be sure what the law really says. They may be unwilling to do abortions openly, or they may charge a lot of money. Women may not know if abortion is legal or available in their country.

◆ Even if abortion is illegal, a woman should be able to get medical help for complications after an abortion. It is often difficult to tell the difference between abortion and miscarriage, unless something from the abortion has been left in the womb.

Illegal abortion. If abortion is not legal, both the women who get abortions and those who perform them can be arrested.

In most places this does not happen. But where abortion is against the law, more women die from unsafe abortion and unsafe pregnancies. Money that could be spent on women's health services is spent instead on treating *complications* of unsafe abortion.

Never assume abortion is illegal. Try to find out about the laws in your own country. It may be easier to work around the laws than to try and change them. Even if abortion is illegal, there may be people providing safe abortions. Finding a safe abortion may mean the difference between staying alive and dying.

Other barriers to finding a safe abortion

Legal or not, it can be hard to get a safe abortion because it is too costly, too far away, or because there are confusing rules, or papers to fill out.



Figure

These reasons often make it especially difficult for women who are poor, or who are not

familiar with the medical system, to get safe abortions. Unfortunately, in many places, the only women who can easily get a safe abortion are women who can afford to pay a private doctor.

Deciding about an Abortion

◆ *If safe abortion is not available, you might consider giving the baby up for adoption, if this is acceptable to you and your community.*

Your decision to have an abortion will often depend on whether safe abortion is available where you live. It also depends on how an abortion or a baby would affect your life.



Figure

It may help to think about these questions:

- **Will you be able to care for a baby? Do you have enough money to raise a**

child?

- **Is pregnancy a danger to your health?**
- **Do you have a partner or husband who will help support a child? Can you talk with him about this decision?**
- **Is your religion or family against abortion? If yes, how will you feel if you have one?**
- **How will the abortion be done?**
- **For how long have you been pregnant?**
- **Could you have a sexually transmitted disease (STD)? You may be at more risk of having an STD if you are young, single, and have a new partner, or if you have signs of an STD. If you feel that you are at risk, see the STD chapter. You may need treatment before the abortion.**
- **What complications (problems) can be caused by the abortion?**
- **Where can you go for emergency care if you have complications? How will you get there?**



Figure

The information on the next pages may help you decide whether safe methods of abortion are available in your community.

If you are helping someone decide about an abortion:



Figure

She needs respectful advice and friendly support. Do not tell anyone else about her decision unless she wants others to know.

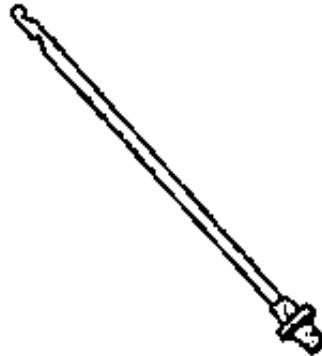
Safe Methods of Abortion

A pregnancy can be removed from the womb by a trained health worker in the

following ways:

Abortion by suction (vacuum aspiration, MVA)

The pregnancy is removed by suction using a special tube (cannula) that is put into the womb through the vagina and *cervix*. This can be done without putting the woman to sleep, though sometimes medicine is injected into the *cervix* to help with the pain. When vacuum aspiration is done by hand (manual vacuum aspiration or MVA), the pregnancy is removed using a special *syringe*. Otherwise, a small electric machine is used.



Cannula

Vacuum aspiration is simple and safe, and takes only about 5 to 10 minutes. It is usually done in a clinic or health post, or doctor's office. This kind of abortion is easiest to do during the third month of pregnancy, but is sometimes done a bit later. Vacuum aspiration causes fewer complications than dilation and curettage (described below).

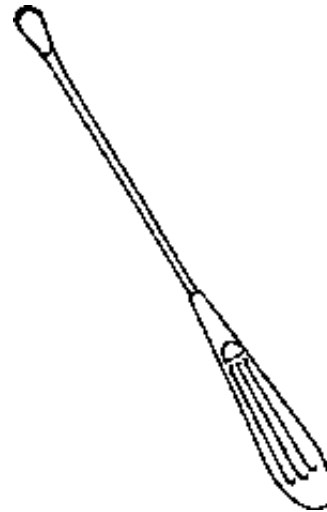


Vacuum aspirator

In some places MVA is used to bring on late monthly bleeding. The woman may not even know if she is pregnant - just that her monthly bleeding has not come. This is called menstrual regulation.

Abortion by scraping (dilation and curettage, or D and C)

The pregnancy is scraped out with a curette, a small spoon-shaped instrument that is made especially to go into the womb. A curette is larger than a cannula and because it is sharp, the cervix must first be stretched open. This stretching can cause some pain.



Curette

The D and C takes more time to do (about 15 to 20 minutes), is more painful, and costs more than vacuum aspiration. It is usually done in an operating room, and the woman is often given medicine to make her sleep.

Abortion by medicine (medical abortion)

Certain medicines are now being used by doctors and health workers to cause abortion. These medicines work by causing the womb to contract and squeeze out the pregnancy. Some medicines are put into the vagina (NOT in the womb), some are swallowed, and some are injected. If the right medicine to cause abortion is used, it may be safer than putting something inside the womb, which may cause severe injury or infection.

♦ *As time goes on, medicines for abortion may be used in more places and be more available to women who need them.*

If you use medicines for abortion

- Never use a medicine you are not sure of.
- Medicines to cause abortion should only be used if there is a health clinic or hospital close by, so you can get there soon after bleeding starts. The clinic or hospital should have trained health workers who can empty a womb in case the abortion medicines do not work.
- Go to the clinic or hospital when bleeding starts so your womb can be checked to see if it has emptied completely. If it has not, you must have the rest of the pregnancy removed by suction or scraping. If you do not, you could suffer dangerous complications. (If you go on to give birth, the baby may be born with severe birth defects.)

Some medicines used for abortion

1. Mifepristone (RU-486, the 'French Pill') is available in some countries to cause abortion in women who are up to 9 weeks pregnant. It is given only in special programs in clinics and hospitals where the woman can be watched for complications and treated if needed. Two days later a second medicine, such as misoprostol, is given. This usually causes complete abortion.

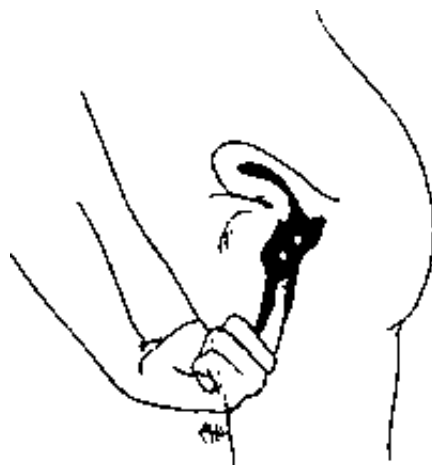
2. Misoprostol is a medicine used to treat stomach *ulcers*, and is used with mifepristone or other medicines to cause abortion. It can also be used by itself to start abortion, but usually the abortion will not finish, so a woman must get medical care after bleeding starts. Misoprostol can be used during the first 3 months (12 weeks) of pregnancy, and works better close to 12

weeks. The tablets are put into the vagina, not swallowed.

3. Methotrexate is an anti-*cancer* medicine which has been used together with misoprostol to cause abortion. It has dangerous side effects for the woman, and if it fails to cause abortion, it can cause severe birth defects in the baby. Not enough is known yet about how to use methotrexate safely, especially in places without modern hospital equipment.

IMPORTANT

Follow the instructions for misoprostol very carefully. If you do not, the womb can split open (rupture) and cause death.



Figure

◆ For more information about these medicines, see the Green Pages

Incomplete abortion

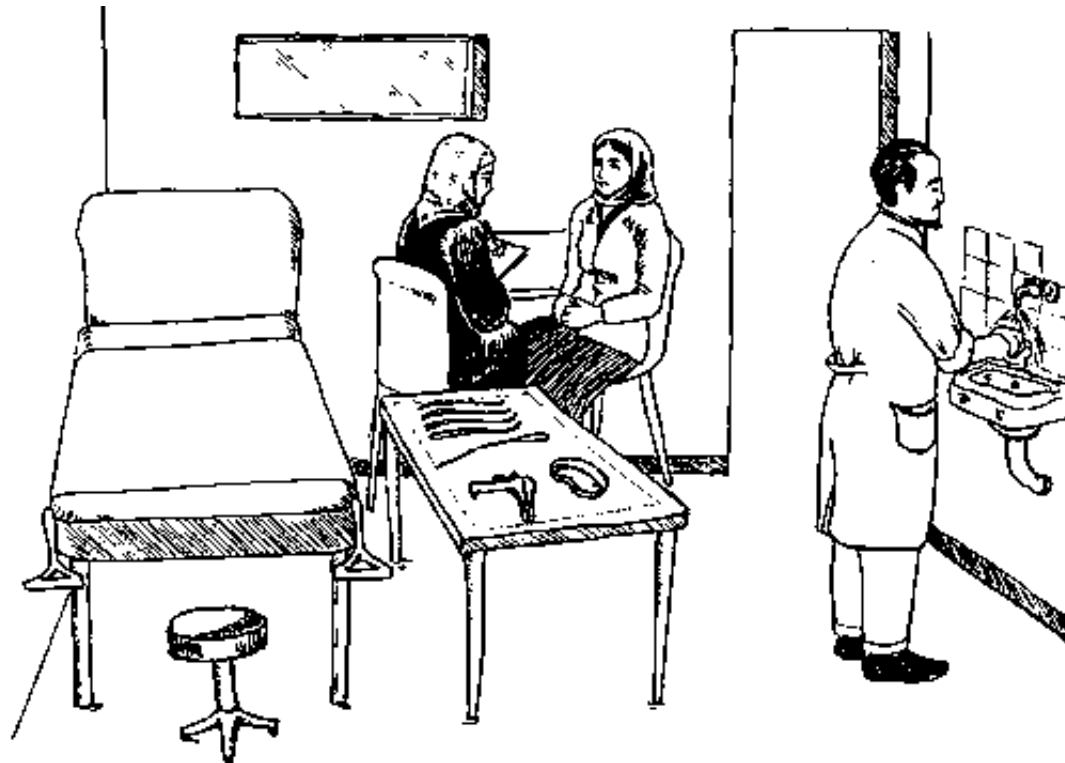
An incomplete abortion is when part of the pregnancy remains in the womb after an

abortion. The signs are heavy bleeding for more than one day after the abortion, *cramping* pains, and passing *tissue* and clots or lumps of blood from the vagina. If this happens, go to a hospital right away to have the pregnancy completely removed. If not, you could have serious complications and even die. See **What to Expect after an Abortion** for danger signs after abortion.

How to tell if an abortion will be safe

It is not always easy to tell if an abortion will be safe. Try to go to the place where the abortion will be done, or ask someone who has been there these questions:

- **Have you heard of women getting sick or dying from having an abortion here?** If so, go somewhere else.
- **Who will do the abortion and how were they trained?** Doctors, nurses, health workers, and traditional birth attendants can all do abortions. However, abortions done by someone who is not trained in safe abortion methods and how to prevent infection can be very dangerous.



This room looks safe.

- **Is the room where the abortion will be done clean and neat?** If it is dirty and messy, probably the abortion will be also.
- **Is there a place for washing hands?** A health worker who has no place to wash his or her hands cannot do a clean, safe abortion.
- **Do the instruments look like the ones in this chapter on Safe Methods of Abortion, or do they look like something found or made at home?** Instruments made at home can cause injury and infection.
- **How are the instruments cleaned and made free of germs?** Instruments

should be soaked in strong disinfectant or boiled in water to kill germs that cause infection.

- **Does the cost seem fair?** If the cost is very high, sometimes it means the health worker cares only about money, not your health.
- **Are other health-care services also provided along with abortions?** A good health center will also try to provide other services that women need, like family planning, treatment for STDs, and *AIDS* prevention.
- **Where will you be taken if something goes wrong during or after the abortion?** There should always be a plan to get you to a hospital in case of emergency.



This room does not look safe.

IMPORTANT

An abortion is more dangerous if:

- your last monthly bleeding was more than 3 months ago.
- your pregnancy is starting to show.



Figure

The longer you have been pregnant, the greater the chance of complications after abortion. For your safety, an abortion after more than 3 months of pregnancy must be done with special equipment in a clinic or hospital.

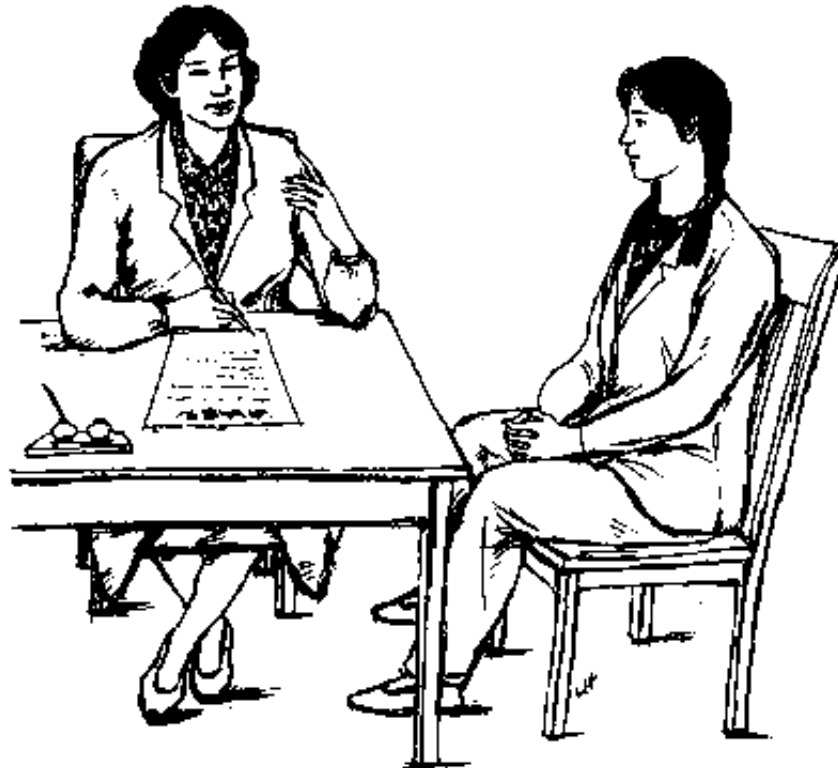
What to Expect during a Safe Abortion

Safe abortions, especially abortions by suction (MVA), are done in both health centers and hospitals. An abortion by scraping (D and C) is usually done in a hospital. An abortion by medicine should be done at a health center or hospital that also has equipment to do MVAs and D and Cs, and health workers trained to do them. For more information about how these abortions are done, see Safe

Methods of Abortion.

◆ ***Drink plenty of liquids the day before you have an abortion. This will help you recover more quickly.***

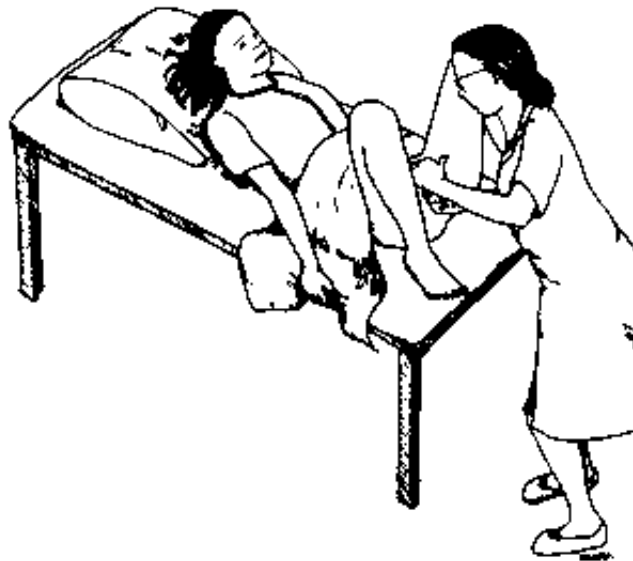
When you go to a health center or hospital for an abortion, you should be welcomed and treated with respect. A counselor should talk with you about your decision and explain how the abortion will be done and what the risks are.



Figure

The information below tells what to expect from a safe abortion. An abortion that is very different from this could be dangerous.

- **You should be asked about the time of your last monthly bleeding and whether you might have an STD.**
- **A health worker should do a medical exam. This includes feeling carefully in your vagina and on your belly for the size of your womb.**
- **During both abortion by suction and by scraping you will feel strong pains in the lower belly. But soon after the abortion is over, the pains will become less strong.**
- **After the abortion, your genitals should be cleaned, and then you should be taken to rest. A health worker should be there to check you for about an hour.**
- **Someone should tell you what to do after the abortion, the danger signs to watch for, and who to contact if you have a complication.**



Figure

In addition, someone should discuss family planning methods with you. You can start using a method the day of the abortion. You should be given an appointment to come back for a check-up in 1 or 2 weeks.

What to Expect after an Abortion

After an abortion, signs of pregnancy, like *nausea* and sore breasts, should disappear within a day. If they do not, you could still be pregnant, either in your womb or in one of your tubes (ectopic pregnancy). This is an emergency. See a health worker right away.

You may feel a little tired and have some cramps or pains for a day after the abortion. You will have some bleeding from the vagina for as long as 2 weeks. But after the first day it should be no more than a light monthly bleeding. Your next normal monthly bleeding should start about 4 to 6 weeks after an abortion. It might take longer if you were more than 5 to 6 months pregnant.

◆ Normal monthly bleeding should start about 4 to 6 weeks after an abortion. But you can become pregnant again after 11 days.

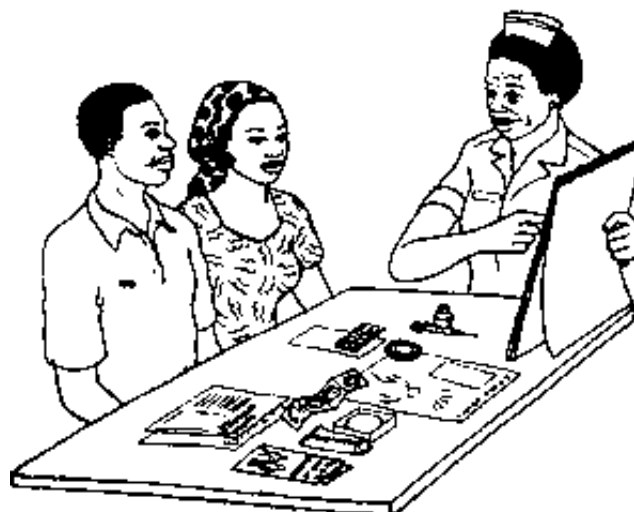
If you had no one to talk to before the abortion, it may help to talk to someone now. Talking about your feelings with someone you trust can make you feel better.

How to care for yourself after an abortion:

- To prevent infection, take 100 mg of doxycycline twice a day for 5 days**

starting the day of the abortion. (But if you are breastfeeding, take 500 mg of amoxicillin 3 times a day for 5 days instead.)

- **Do not have sex or put anything into your vagina for at least 2 days after bleeding stops.**
- **If you have cramps or pains, rest and use a hot water bottle on your *abdomen*. Or take paracetamol or ibuprofen.**
- **To lessen pain and bleeding, rub or massage your lower abdomen often. This helps the womb to squeeze down to normal size and lessen bleeding.**
- **Drink plenty of liquids to help you recover faster.**
- **You can go back to your usual activities as soon as you feel well, usually within a day.**



After an abortion, start family planning right away. You can get pregnant again

before your next monthly bleeding.

Danger signs

If you have any of these signs, get medical help fast:

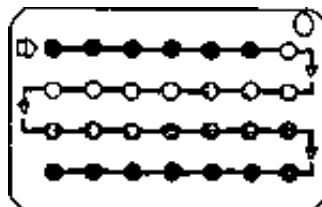
- Heavy bleeding from the vagina (see **Complications of Abortion**)
- High fever (see **Infection**)
- Severe pain in the abdomen (see **Internal Injury** and **Infection**)
- Fainting and confusion (see **Shock**)

- Bad-smelling *discharge* from the vagina (see **Infection**)

Family Planning after an Abortion

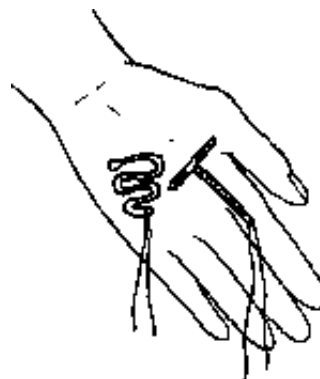
After an abortion you can get pregnant again right away - in as soon as 2 weeks. Many methods of family planning take time to start working, so talk with someone about family planning and start using one of these methods as soon as possible:

- **The Pill:** You can start taking pills on the same day as the abortion. Do not wait more than one week.



Figure

- **Intra-Uterine Device (IUD):** If there is no risk of infection, a trained health worker can put in an IUD right after the abortion.



Figure

- **Injections:** The first injection should be given on the day of the abortion, or up to one week after.



Figure

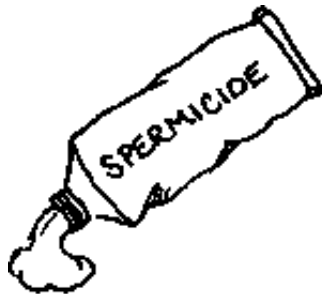
- **Implants:** Implants can be put in just before or just after the abortion, or up to one week later.
- ◆ ***A woman who has just had an abortion most likely did not want to become pregnant. This is a good time to offer her information about family planning methods and how to get them.***

- **Female sterilization:** If your pregnancy was less than 3 months, you can be sterilized during the abortion or right after it. It is very important that you make this decision carefully. Sterilization is permanent.
- **Male sterilization:** Sterilization for a man can be done any time and is permanent. This decision must be made carefully.
- **Condoms:** You and your partner can use condoms as soon as you have sex again. Condoms also protect against STDs, including HIV.



Figure

- **Spermicide:** You can use spermicide as soon as you have sex again. Spermicides made with nonoxynol-9 also give some protection against gonorrhea and chlamydia, 2 common STDs.



Figure

- **Diaphragm:** If there was no infection or injury, you can be fitted with a

diaphragm before or after the abortion. Diaphragms with spermicide give some protection against gonorrhea and chlamydia.



Figure

- **Natural methods (mucus and rhythm): These methods do not work until your normal monthly bleeding returns.**



Figure

◆ ***For more information on all these methods, see the chapter on "Family Planning."***

Complications of Abortion

A woman with any of the danger signs after abortion needs medical help fast! She should go immediately to a health center or hospital where she can get the care she needs. Most of the time the womb must be emptied completely using vacuum aspiration or a D and C. In the meantime, the information on the next pages may help if transport is not available immediately or if medical care is very far away.

◆ **Early treatment of abortion complications prevents illness, infertility, and death. Seek help quickly if you have problems after an abortion. DO NOT WAIT!**

Heavy bleeding from the vagina

Heavy bleeding is the most common problem after an abortion. It is usually caused by pieces of the pregnancy that are left in the womb. The womb cannot squeeze itself shut and keeps bleeding. If the pieces are removed, often the bleeding will stop. Sometimes the bleeding is caused by a torn cervix which must be stitched for the bleeding to stop.

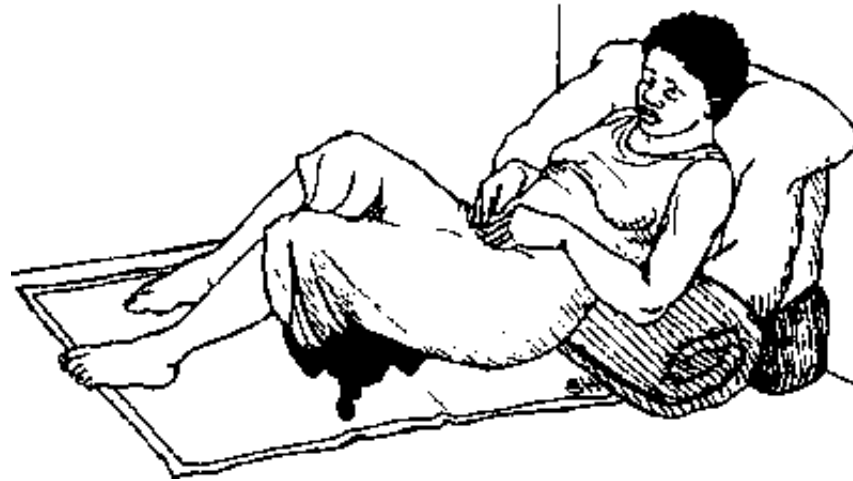


Figure

A woman is bleeding too much if she soaks a pad, towel, or clothing with bright red blood in less than 30 minutes. A slow, steady trickle of bright red blood is also dangerous. When this happens, a woman may quickly lose a dangerous amount of blood. If it is not possible to get medical help immediately, try to stop the bleeding.

To stop the bleeding

A woman who is bleeding too much may be able to help her womb squeeze shut with massage. She can do this herself or have someone else do it. Rub or massage the lower belly very hard while lying down or squatting.



Figure

If there are pieces of tissue stuck in the womb or cervix, she may be able to push them out herself by squatting and bearing down as if passing stool or giving birth.

Even if these treatments seem to work, get medical help as soon as possible. The woman will need *antibiotics* and may still need to have her womb emptied completely.

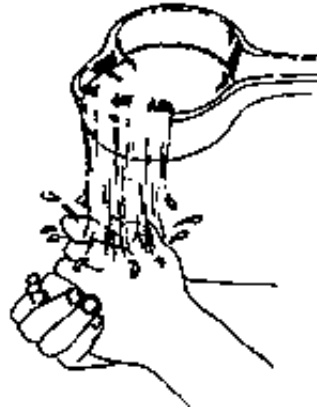
Emergency help for too much bleeding

Health workers and others trained in giving a woman a *pelvic exam* may be able to follow these steps to try and stop the bleeding until the womb can be emptied.

IMPORTANT

Because the entrance to the woman's womb is open, putting anything inside her vagina is very dangerous. She can get a serious infection. Only do this if the bleeding is so heavy the woman's life is in danger. See the previous page for how much bleeding is too much.

1. Wash your hands and the woman's *genitals* with soap and clean water



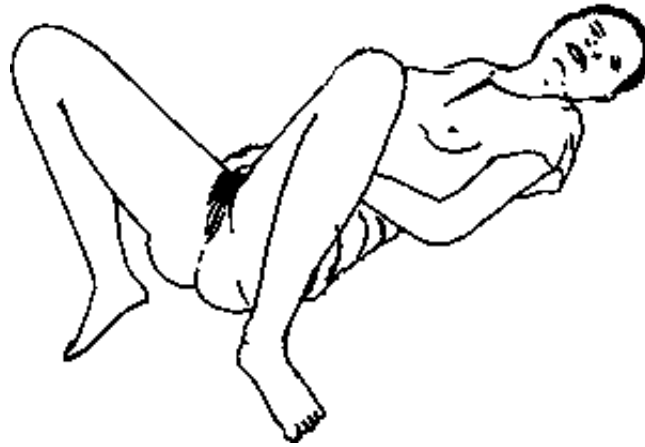
Figure

2. Put a clean *latex* or plastic glove or a very clean plastic bag on one hand. The gloved hand should not touch anything before it goes into the woman's vagina.



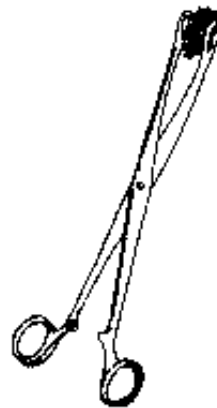
Figure

3. Have the woman lie on her back with her feet and knees apart. Help her relax.



Figure

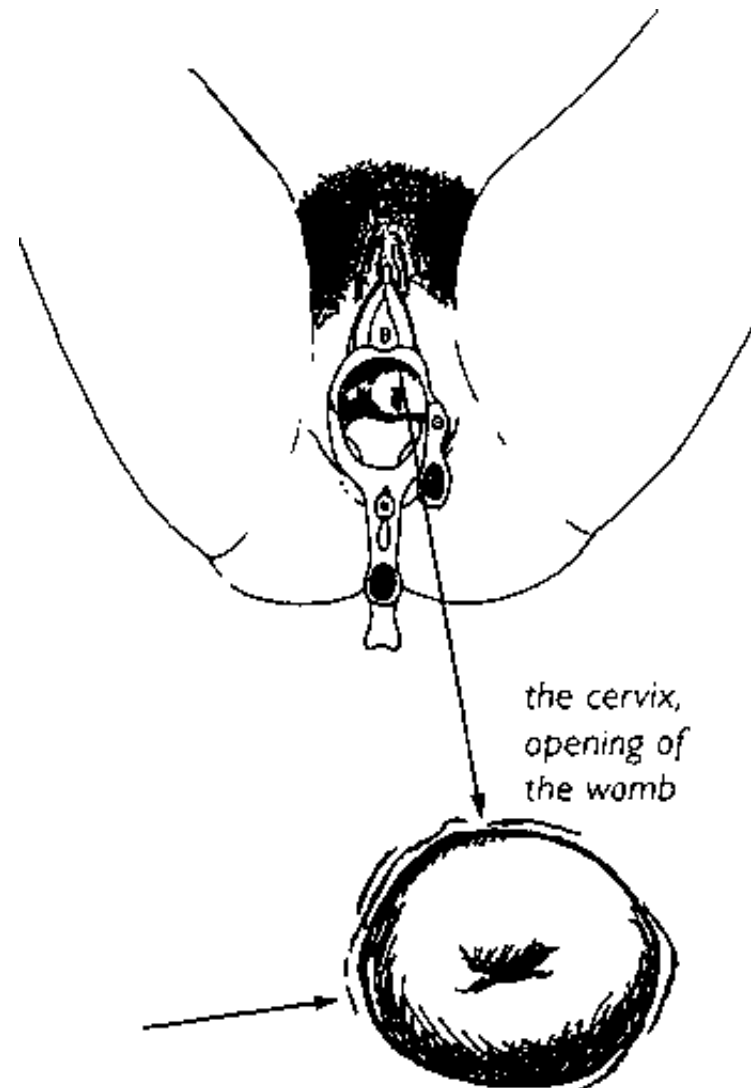
4. If you have a sterile *speculum* (you can get the right instruments from an IUD kit if you have one), put it into the vagina so you can see the opening of the womb. If you can see tissue or clots or lumps of blood there, try to get hold of them with sterile forceps or clamps and gently remove them.



Use sterile forceps to remove any tissue you see at the opening of the womb.

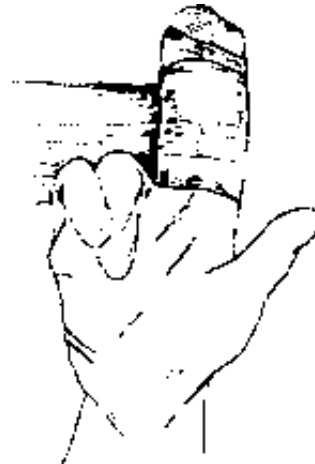
5. If you do not have a speculum, reach inside the woman's vagina with your gloved hand, first with 1 finger, and then with 2 fingers.

6. Feel for the cervix. It will feel more firm and smooth than the skin around it. It looks like this and is about this size.



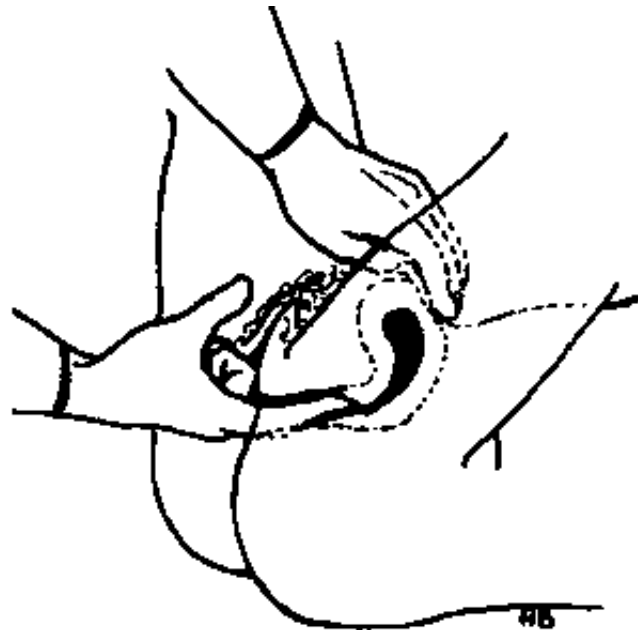
Figure

7. Move your finger across the opening and feel for bits of the pregnancy that may be sticking out of the opening. They will feel like soft meat. Gently try to remove them. If the pieces are too slippery, take your hand out and wrap 2 fingers with sterile *gauze*, or a clean cloth that has been boiled in water, and try again to remove them.



Figure

8. After you have removed the pieces, put your gloved hand into the woman's vagina with two fingers under the womb. With your other hand, rub or massage her belly to help stop the bleeding. Her womb should be between your 2 hands.



Figure

9. Give the woman an injection of ergometrine (0.2 mg) in a large muscle, such as her *buttock* or thigh. Then give her one 0.2 mg pill of ergometrine, or a 0.1 mg injection, every 4 hours for 24 hours.



how to give an
injection
Figure

10. Give antibiotics for mild infection immediately to prevent infection. She is at high risk of infection because the womb is open to germs.

11. If she is awake, give her fluids to drink. If she is unconscious, see the next page.

12. Take her to a hospital right away, even if you think you have removed the tissue and the bleeding has stopped. She still needs to have her womb emptied completely. If the bleeding does not stop, continue to rub or massage her lower belly while taking her to the hospital.



When there is no health worker to help

If you are bleeding too much after an abortion, you can also try to remove tissue stuck in your cervix by yourself.



Figure

First wash your hands and genitals well with soap and clean water. Then squat and bear down, as in childbirth or passing stool, and follow the instructions above in steps 6 and 7. After you have removed any pieces, massage your lower belly. You should still get medical help, even if the bleeding becomes less.

Shock

Shock is a life-threatening condition that can result from heavy bleeding. Bleeding inside the body can also cause shock.

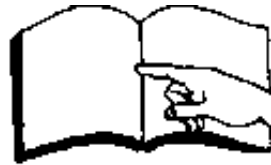
DANGER! Heavy bleeding can cause SHOCK, which can kill. Transport immediately.

Signs:

- **very fast heart rate, more than 110 beats a minute**
- **pale, cold, damp skin**
- **pale inner eyelids, mouth, and palms**
- **fast breathing, more than 30 breaths a minute**
- **confusion or unconsciousness (fainting)**

Treatment if she is conscious:

- **Lay the woman down with her feet higher than her head.**
- **Cover her with a blanket or clothes.**
- **If she can drink, give her sips of water or rehydration drink.**
- **Help her to stay calm.**
- **If you know how, start a fast *intravenous drip (IV)* with a wide needle, or start rectal fluids.**



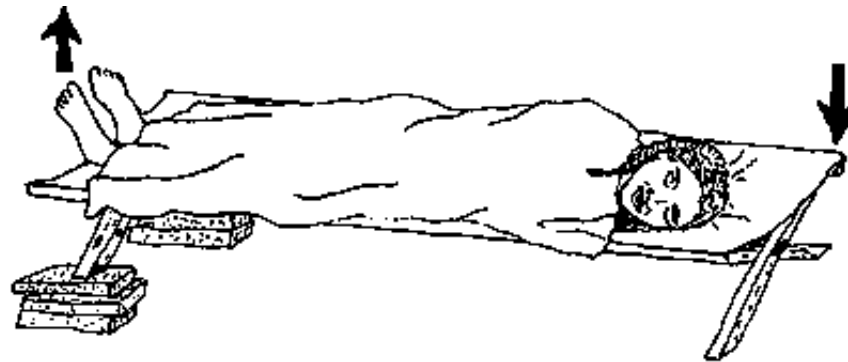
rehydration drink, 536

rectal fluids, 537

Figure

Treatment if she is unconscious:

- Lay her on her side with her head low, tilted back and to one side, and her feet high.



Make sure her feet are higher than her head.

- If she seems to be choking, pull her tongue forward with your finger.
- If she has vomited, clean out her mouth immediately. Be sure her head is low, tilted back and to one side, so she does not breathe vomit into her lungs.
- Do not give her anything by mouth until she has been awake for one hour

- **If you know how, start a fast IV drip with a wide needle. If you do not, start rectal fluids.**



Do not wait for a health worker. Take the woman for medical help or to a hospital right away. She needs medical help fast!

Infection

If there is infection, it is more likely to be a mild infection if the abortion was done sooner than 3 months (12 weeks) after the last monthly bleeding.

Serious infection is an infection that has spread into the blood (sepsis). A woman is more likely to have a serious infection if the abortion was done later than 3 or 4 months from the last monthly bleeding, or if there was an injury to the womb during the abortion. Sepsis is very dangerous and can also cause shock.

Infection can happen because:

- **an unclean hand or object was put inside the womb.**
- **pieces of the pregnancy were left inside the womb and they have become infected.**
- **the woman already had an infection when she had the abortion.**
- **a hole was made in the wall of the womb.**

Signs of mild infection:

- **slight fever**
- **mild pain in the abdomen**



Figure

Treatment for mild infection:

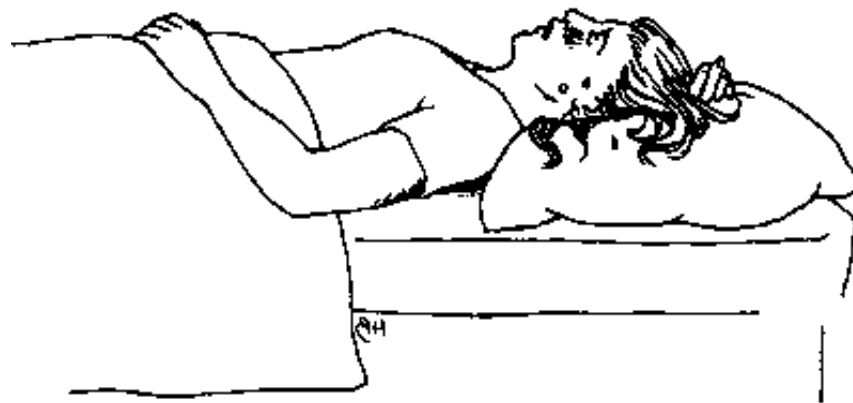
To keep mild infection from becoming serious, treat it immediately with the medicines listed below. A woman needs more than one medicine because infections after abortion are caused by several different kinds of germs. If the medicines listed below are not available, see the “Green Pages” for others that will work. A woman who is breastfeeding should use the treatment for womb infection after childbirth.

Medicines for mild infection after abortion

Medicine	How much to take	When and how to take
Take both medicines:		
amoxicillin	3 grams	all at once, 1 time only, by mouth
and		
doxycycline	100 mg	2 times a day for 10 days, by mouth
IMPORTANT <i>If the fever is not completely gone in 48 hours (2 days after starting these medicines), the woman should go to a health center.</i>		

Signs of serious infection:

- **chills and high fever**
- **muscle aches, weakness, and tiredness**
- **swollen, hard, and painful belly**
- **bad-smelling discharge from the vagina**



Figure



Treatment for serious infection:

- **Take the woman to a health center or hospital immediately.**
- **Start the following medicines right away, even if you are already on your way to the hospital. If she can swallow, give her these medicines, with plenty of water:**

Medicines for serious infection after abortion		
Medicine	How much to take	When and how to take
Take all 3 medicines:		
amoxicillin	3 grams	all at once, 1 time only, by mouth
and		
doxycycline	100 mg	2 times a day by mouth until you reach a hospital
and		
metronidazole	500 mg	3 times a day by mouth until you reach a hospital

If the woman cannot swallow medicines and you know how to give *injections* or *IV* medicines, start giving the medicines listed on the next page. But do not delay. Take the woman for medical help or to a hospital right away. She needs medical help fast.

A woman with an infection or bleeding from an injury after abortion can get a tetanus infection, especially if a dirty object or instrument was put into her womb. She needs a tetanus toxoid vaccination immediately.



Figure

Injectable medicines for serious infection after abortion

IMPORTANT

Medicines in the vein (IV) or in the muscle (IM) should be given until the woman has been completely without fever for 48 hours.

- ***Choose one box and give ALL the medicines in that box.***
- ***If the woman still has fever after 24 hours, change to another group of medicines.***

- **After 48 hours without fever, she can change to medicine by mouth (see the box).**

For complete information on these medicines, see the "Green Pages."

Best treatment: Give all 3 medicines

Medicine:	How much to give:	When and how to give:
benzylpenicillin	5 Million Units	4 times a day, IV
gentamicin	80 mg first dose, then 60 mg each dose	3 times a day, IM
metronidazole	1 gram	2 times a day, by mouth or IV

Second best treatment: Give both medicines

Medicine:	How much to give:	When and how to give:
doxycycline	100 mg	2 times a day, by mouth or IV
metronidazole	1 gram	2 times a day, IV or by mouth

Third best treatment: Give both medicines

Medicine:	How much to give:	When and how to give:
benzylpenicillin	5 Million Units	4 times a day, IV
chloramphenicol	1 gram	4 times a day, IV

After 48 hours without fever, give this medicine by mouth:

Medicine:	How much to give:	When and how to give:
doxycycline	100 mg	2 times a day, by mouth, for 10 days

If a woman is breastfeeding, give amoxicillin instead, 500 mg 3 times a day for 10 days.

Fainting or loss of consciousness



Figure

Fainting can be a sign of shock after abortion, either from heavy bleeding, severe injury to the internal organs, or infection. For signs and treatment of shock, see **Shock**. If a woman faints but wakes up very soon afterward and does not have signs of shock, give her plenty of liquids to drink and watch her carefully.

Injury inside the body (Internal Injury)

An internal injury from an abortion is most often caused by a sharp object that makes a hole in the womb. The object may also cause damage to other internal organs, such as the *tubes, ovaries, intestines, and bladder.*

When a woman has internal injuries she may have severe bleeding inside her abdomen but almost no bleeding from her vagina.

Signs (she will have some or all of these):

- her abdomen feels stiff and hard with no sounds or gurgles inside
- very bad pain or cramps in the abdomen
- fever
- nausea and vomiting
- pain in one or both shoulders



Listen for gurgles for 2 minutes.



Treatment:

- **Immediately take the woman to a hospital or clinic where she can have surgery. An injury inside the body must be repaired right away by a surgeon or it can lead to infection, shock, and death.**

- **Do not give her anything by mouth - no food, no drink, not even water - unless it will take more than 1 2 hours to get to a health center. Then give water only in small sips. Or let her suck on a piece of cloth soaked in water.**
- **If she has signs of shock, treat her for shock. Make sure nothing is blocking her mouth and that she can breathe.**
- **Give her the medicines for severe infection, but only by injection or IV. If possible, give her a tetanus toxoid vaccination.**

Preventing Unsafe Abortion



Family planning education can prevent the need for abortion.

Here are some things any woman or group of women can do in a community to help prevent illness and death from abortion:

- **Educate men, women, and the community about how family planning can help prevent the need for abortion. Get training to provide family planning services to women in your community.**
- **Educate women and girls in your community about the dangers of unsafe**

abortion.

- **Visit the people in your community who do abortions to make sure they are doing them safely.**
- **Learn about the complications of abortion and what to do for them. Find out where to take a woman in your community for emergency treatment of complications.**
- **Find out who could transport a woman who needs emergency care. If there is no emergency medical transport, is there someone in the community with a car or truck? Store extra containers of fuel (gas or petrol) for emergencies.**
- **Keep some of the medicines in a village pharmacy or clinic to treat emergency abortion problems.**

If you are a health worker, here are some more suggestions:

- **Try to get trained to do MVA, so you can treat women with abortion complications. Perhaps someone can train health workers at your local hospital. Do not do abortions unless you have been trained and have the instruments to do them safely.**
- **Organize health workers in your community to talk with health authorities about the risks of unsafe abortion. Even where abortion is not legal, treatment for abortion complications should be available to save women's lives.**

◆ ***Encourage women who are sick to seek help after an abortion, not to hide from it.***

Treat women who need your help with kindness

Many women who seek help after abortion are refused treatment or treated very badly. Some are made to feel ashamed or are given no care as 'punishment' for what they have done. Whatever your own beliefs, try not to judge women who have had an abortion, but rather care for them with compassion. Many of us could have an unwanted pregnancy at some time in our lives. Treat others as you would want yourself or your daughter to be treated.

