

FAMILY PLANNING PROGRAM AND CONTRACEPTIVE COUNSELING

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OBJECTIVES

1. Describe Michigan's network of family planning safety-net providers
2. Describe principles of Client Centered Contraceptive Counseling
3. Identify current FDA-approved contraceptives.
4. Discuss the mechanism of action and instructions for use of contraceptive methods, along with risks and benefits.

WHY FAMILY PLANNING?

Family Planning programs provide all individuals access to a wide range of birth control methods and help them make informed choices, so they can plan and space their births.

Family planning empowers individuals and couples to make healthy life decisions.

This leads to positive health, social and economic outcomes for individuals, families and for society as a whole.

WHO USES CONTRACEPTIVES IN THE U.S.?

In 2018

There were **72.7 Million** women of Reproductive Age (15-49) in the U.S; **46 Million** were sexually active and not seeking pregnancy

65% of U.S. women (15-49) were using a method of Contraception

99% of sexually experienced U.S. Women aged 15-44 have used at least one method

Of sexually active women not seeking pregnancy **88%** used contraception

- **83%** among 15-24-year-olds
- **91%** among 25-34-year-olds
- **89-91%** among women who had children
- **85%** among those who had not had children
- **89%** among non-Hispanic White women
- **87%** among Hispanic women
- **84%** among non-Hispanic Black women
- **81%** among those with no insurance; **87%** with Medicaid; **90%** with private insurance

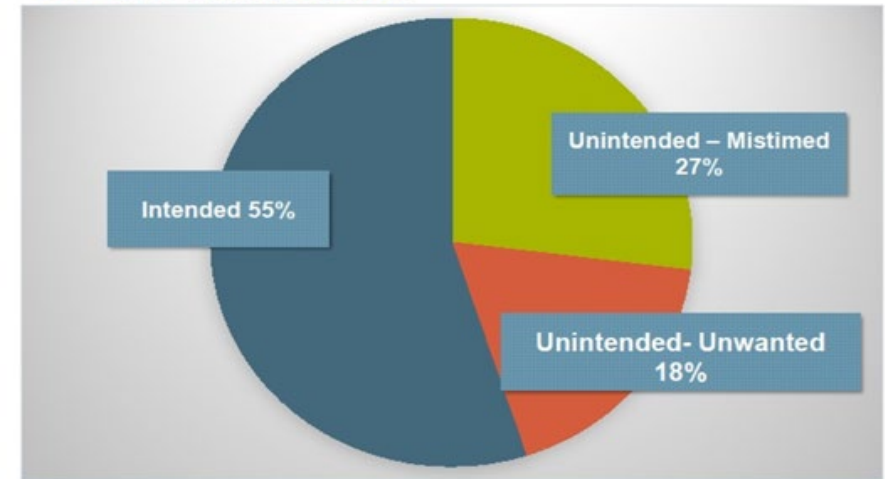


86% of sexually active women not seeking pregnancy at or below 100% FPL used contraception, while **91%** of those with income at least 300% FPL used contraception.

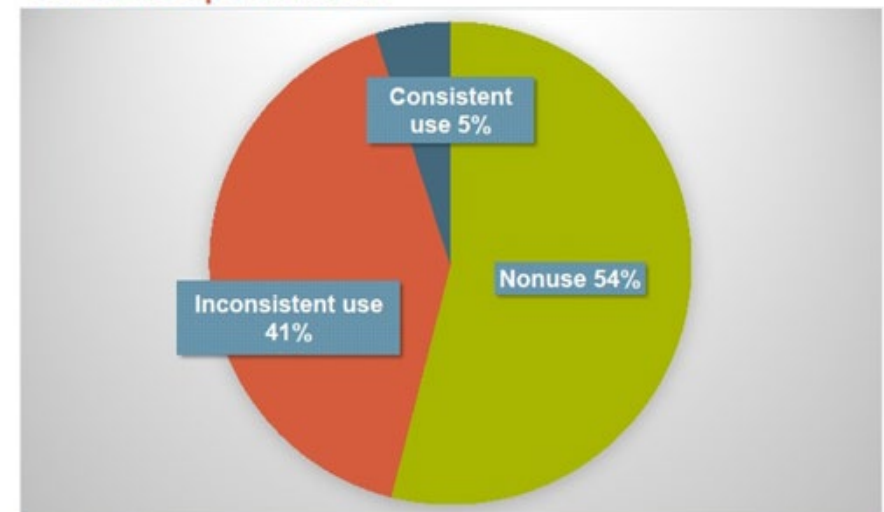
FAMILY PLANNING HELPS INDIVIDUALS AND COUPLES MEET THEIR REPRODUCTIVE GOALS

- Increasing Access to a broad range of Birth Control Methods
- Access alone is not Enough for Successful use
- Education & Counseling help People Choose the Method that will work best for them
- Education & Counseling help People use their chosen method effectively
- Successful Education & Counseling must be Person Centered

Nearly half (45%) of pregnancies in the US are unintended



Unintended pregnancy by consistency of contraception use



TITLE X FAMILY PLANNING PROGRAM

HHS.gov

U.S. Department of Health & Human Services



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About

Locate Family Planning Services Near You

Federally funded Title X clinics offer a broad range of family planning services, including contraceptive education, counseling, and methods. These low-cost services are available for all who want and need them.

Learn More



OPA Wins 2022 Digital Health Awards

The Digital Health Awards (DHA) honored OPA with a silver award for its website and a merit award for the Youth Create! compilation video. DHA honors the best digital health resources for consumers and health professionals and is sponsored by The Health Information Resource Center™.



TITLE X FAMILY PLANNING SERVICE GRANTS

Title X Family Planning Services Grants

See OPA's Fiscal Year 2022 Title X National Family Planning Services grantees that provide comprehensive family planning and related preventive health services.



Explore Mental Health for Adolescents

Learn about common mental health warning signs and disorders among adolescents, access to services, and treatment resources.

[Home](#) | [HHS Office of Population Affairs](#)

The Title X Family Planning program has provided access to a family planning and related preventive services to low-income and uninsured individuals for 50 years

Title X tenets:

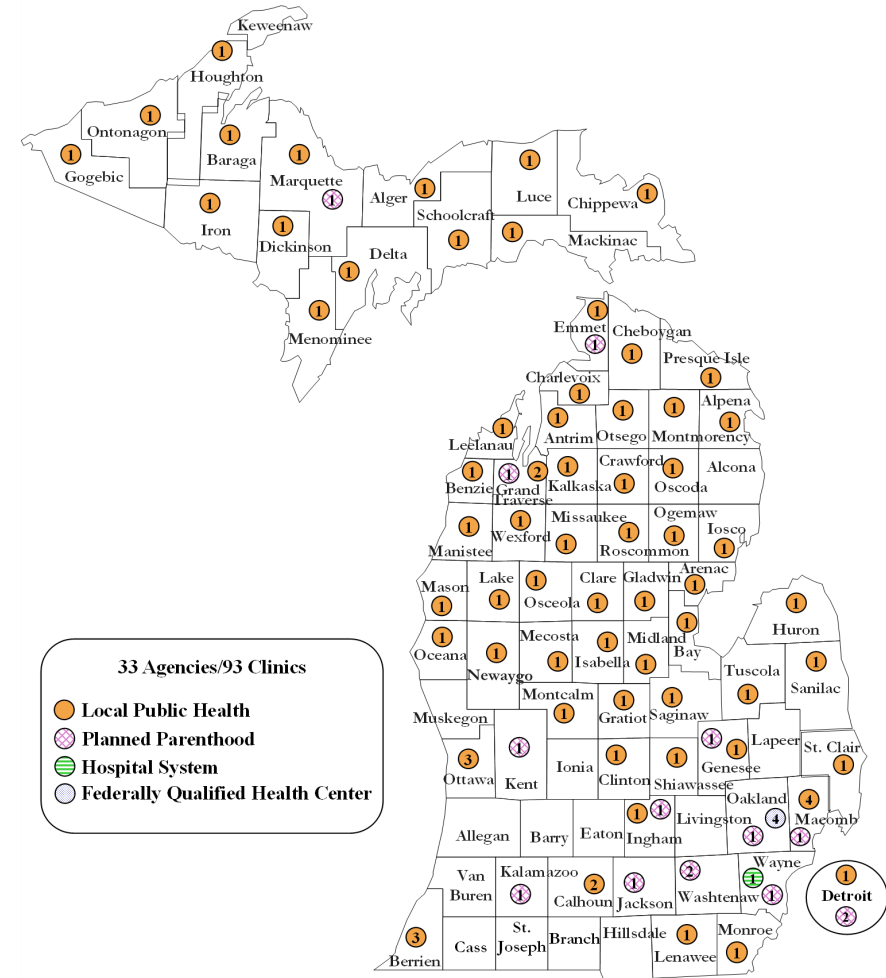
- High Quality Family Planning Services
- Focus on Education and Counseling
- Services are Client-Centered
- Services are Inclusive and Culturally Competent
- Services are Confidential
 - Including Confidential Services to Minors
- Services Prioritize Low-Income individuals
 - Services Provided Regardless of Ability to Pay
 - Services are Billed on Sliding Fee Scale or billed to Medicaid or Insurance if client agrees

MICHIGAN'S TITLE X FAMILY PLANNING PROVIDERS

Title X-Funded Clinics

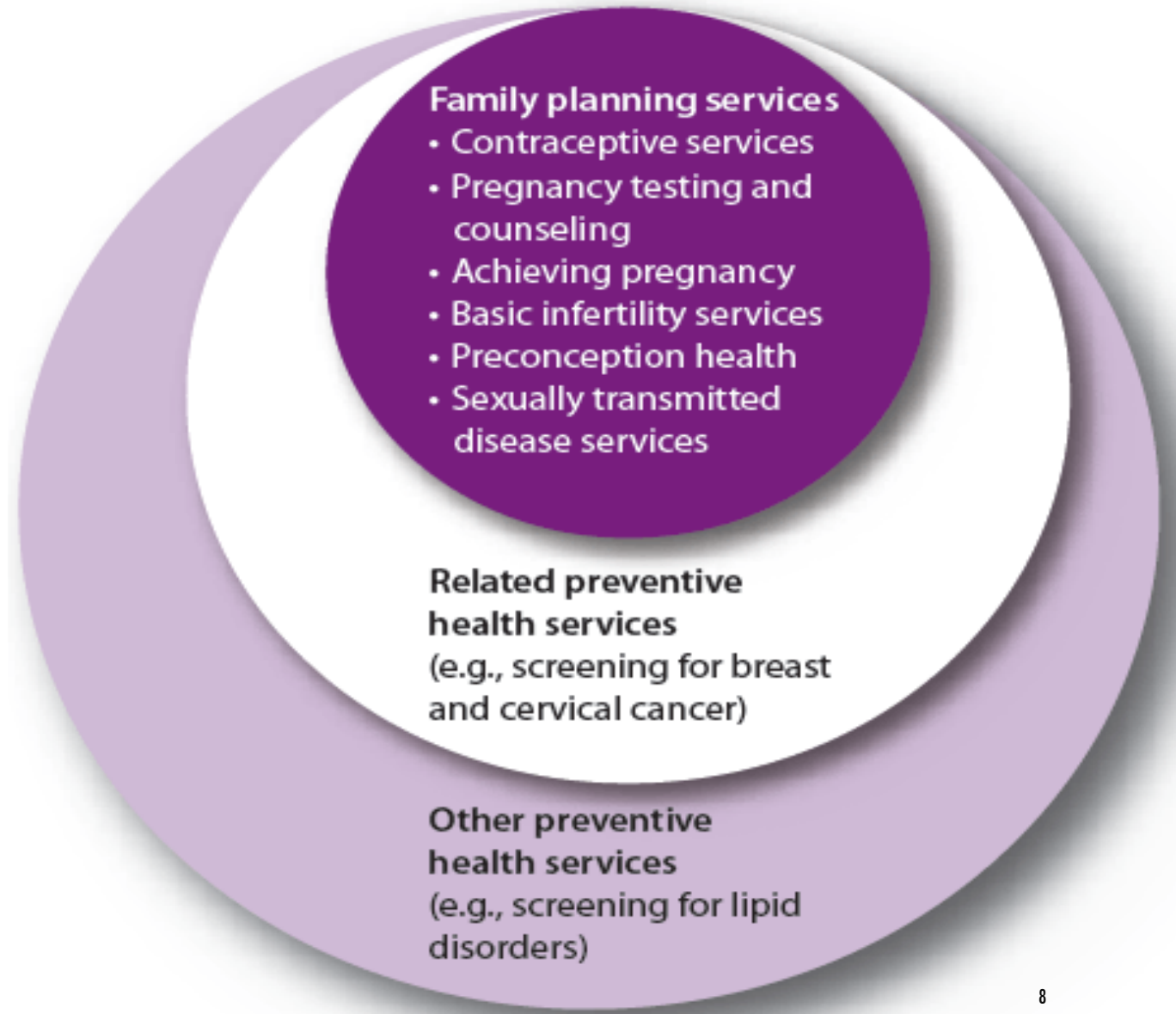
- 33 local agencies
 - 30 local health departments
 - 14 Planned Parenthood of Michigan sites
 - 1 hospital-based teen clinic
 - 1 federally qualified health center
- 92 clinic sites

[MDHHS Title X Clinic Locator](#)



Last Updated: 09/2021

WHAT ARE TITLE X FAMILY PLANNING SERVICES ?





CLIENT CENTERED CONTRACEPTIVE COUNSELING AND CONTRACEPTIVE CHOICES

GENERAL PRINCIPLES OF CLIENT-CENTERED COUNSELING



ASK AND LISTEN
MORE, TALK LESS



APPROACH EACH
CLIENT AS AN
INDIVIDUAL



FOCUS ON ISSUES
THAT THE CLIENT
IDENTIFIES



MAINTAIN A NEUTRAL,
NON-JUDGMENTAL
ATTITUDE



OFFER OPTIONS, NOT
DIRECTIVES



REMEMBER THE
DECISIONS REMAIN
WITH THE CLIENT

GOALS FOR CLIENT-CENTERED COUNSELING

Build	Build a rapport with client
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Be	Be respectful of client
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Listen	Listen carefully to understand client's point of view
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Listen	Listen for what has worked and what hasn't worked for the client
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Recognize	Recognize ambivalence.
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Support	Support client's self-confidence - change is possible, client is capable. Be optimistic!
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Work	Work collaboratively with client to make choices
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ASSESSING THE CLIENT'S NEEDS

Our interactions with clients in reproductive health discussions should always aim to help clients identify their reproductive wishes and provide information and resources to help them achieve their wishes

We can accomplish this by:

- Assuring clients of confidentiality
- Asking clients about their Reproductive goals (Questions like:)
 - Do you think you might like to have children? (or more children?)
 - When do you think that may be?
 - How important is it to you to prevent pregnancy?
 - What can we do to help with these goals?
 - We can focus on the birth control options that can meet the client's need or on other options like preconception counseling or achieving a desired pregnancy.

CONTRACEPTIVE METHODS

I. Hormonal Methods available by Prescription:

- Combined hormonal contraceptives (contain both estrogen and progesterone):
 - Oral contraceptive pills
 - Patches
 - Vaginal Rings
- Progesterone-only contraceptives:
 - Oral contraceptive pills
 - Injection
 - Implant
 - IUDs
 - Emergency Contraceptive pills

II. NON-HORMONAL METHODS AVAILABLE BY PRESCRIPTION:

Paragard intrauterine device (IUD)

Diaphragm

Cervical cap

Vaginal gel—Phexxi is not a spermicide

III. NON-PRESCRIPTION HORMONAL CONTRACEPTIVES:

- Emergency contraceptive pills

IV. Non-prescription Non-hormonal Contraceptives:

- Spermicides
- Condoms—external and internal (male and female)
- Fertility Awareness Methods
- Abstinence
- Withdrawal

CONTRACEPTIVE EFFECTIVENESS

HOW WELL DOES BIRTH CONTROL WORK?

Really, really well

Works, hassle-free...

- The Implant**: Up to 5 years
- IUDs**: Up to 7 years
- Copper IUD**: Up to 12 years
- Sterilization**: Forever

Pretty well

For it to work best, use it... Every. Single. Day.

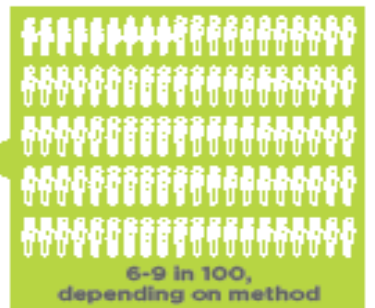
- The Pill**: Every. Single. Day.
- The Patch**: Every week
- The Ring**: Every month
- The Shot**: Every 3 months

Not as well

For each of these methods to work, you or your partner have to use it every single time you have sex.

- Pulling Out**
- Fertility Awareness**
- Internal Condom**: Use a condom with any other method for protection from STDs.
- Condom**

What is your chance of getting pregnant?

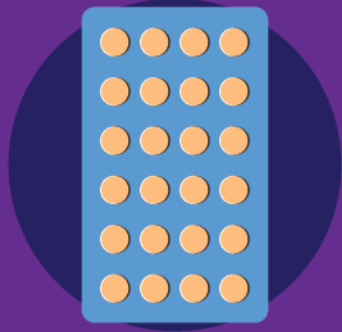


FYI, without birth control, over 90 in 100 young people get pregnant in a year.



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COMBINED ORAL CONTRACEPTIVE PILLS



Oral Contraception



WHAT TO KNOW ABOUT THE PILL

What Is It?

- Combination of the hormones estrogen and progestin

How Does It Work?

- Prevention of ovulation

How Effective Is It?

- Perfect use failure rate is <1%. Typical use failure rate is 7%.

How To Use The Pill?

- Take orally one a day; typical packs contain 21 hormones and 7 placebos

Side Effects?

- Unscheduled bleeding (breakthrough bleeding), breast tenderness, nausea typically during first 3 months. Chloasma (darkening of facial skin) can develop at any time.

Risks of Combined Hormonal Contraceptive Pills?

- Serious risk relates to blood clotting issues (ACHES):
 - A-abdominal pain
 - C-Chest pain
 - H-Headache
 - E-Eye problems
 - S-Severe leg pain

Benefits?

- Regulation of bleeding, decrease in menstrual cramping, acne improvement, reduced risks for endometrial and ovarian cancers.
- User-controlled method
- No delay in return of fertility when discontinuing the pill.

THE PATCH



WHAT TO KNOW ABOUT THE PATCH

What Is It?

- Contraceptive skin patches are thin patches containing estrogen and progesterone. There are currently 2 patches available: Xulane and Twirla

How Does It Work?

- Like the other combined hormonal methods, the patch works by suppressing ovulation.

How Effective Is It?

- Pregnancy rates are similar to the pill.

How to use the patch?

- The patch is applied to the upper arm, lower abdomen or buttocks. Use one patch for 7 days. Apply a new patch once a week on the same day for 3 weeks in a row, no patch for the 4th week. At the end of the 4th week, start another cycle of patches.

THE PATCH

Side effects?

- Similar to the combined hormonal pills.
- Possibly more breast tenderness with patch use as serum estrogen levels are higher with patch use compared to pills.
- Possible skin irritation at site of patch application; headaches and nausea.

Risks?

- Same circulatory risks as the combined pills. Patch use is contraindicated in clients with a BMI ≥ 30

Benefits?

- Weekly patch application may be more convenient than daily pills schedule.
- Controlled cyclic bleeding.
- No significant weight gain.

VAGINAL RING



VAGINAL RING

What Is It?

- Contraceptive rings are vinyl or silicone rings containing estrogen and progesterone.

How Does It Work?

- Similar to the combined oral contraceptive pills, the ring suppresses ovulation.

How effective is the Ring?

- The effectiveness rate for the ring is similar to the pill and patch.

How to use the Ring?

- The client uses the ring by pinching the sides of the ring together using thumb and index finger and inserts into the vagina. The Nuva Ring is worn for 21 days, then removed and a new ring inserted after 7 days.
- The newer **Annovera ring** is inserted into the vagina, worn for 21 days, removed for 7 days and then reinserted for up to a year.

VAGINAL RING

Side effects?

- Similar to combined oral contraceptive pills—possible headaches, nausea, breast tenderness. Possible increased vaginal discharge.

Risks?

- Risk of circulatory problems (blood clotting) as with other combined hormonal methods. Very rarely, TSS (Toxic Shock Syndrome).

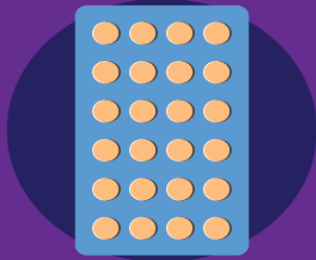
Benefits?

- Scheduled bleeding
- Does not cause weight gain
- May be more convenient than daily or weekly methods.

QUESTIONS?



PROGESTERONE-ONLY CONTRACEPTIVES



Oral Contraception



Shot



Implant



IUD

THE CONTRACEPTIVE IMPLANT

What Is It?

- Nexplanon is a single vinyl rod about 1.5 inches long and contains progesterone. It is inserted under the skin of the upper arm by a clinician. It is effective in preventing pregnancy for 3 years.

How Does It Work?

- Nexplanon prevents pregnancy by suppressing ovulation and thickening cervical mucus to prevent sperm from entering the uterus.

How Effective Is the Implant?

- Nexplanon is 99% effective in preventing pregnancy.

How To Use the Implant?

- A client must have the implant inserted and removed by a clinician.

THE CONTRACEPTIVE IMPLANT

Side effects of the Implant?

- Unpredictable bleeding patterns
- Headache
- Weight gain
- Acne
- Breast pain
- Moodiness

Risks?

- Bruising, pain, infection at the insertion site
- Migration of the implant (very rare)

THE CONTRACEPTIVE IMPLANT

Benefits?

- Highly effective
- Convenient
- Not visible
- Rapid return of fertility after removal

HORMONAL INTRAUTERINE DEVICES (IUDS)

What are hormonal IUDs?

- Hormonal IUDs are T-shaped polyethylene devices that contain progesterone. Each device has strings attached for removal purposes.
 - Mirena (8 yrs), Skyla (3 yrs), Liletta (7 yrs), Kyleena (5 yrs) IUDs are currently available.

How do they work?

- IUDs prevent pregnancy by thickening cervical mucus to inhibit sperm motility, suppressing the endometrium and impairing sperm by changing the environment in uterus.

How effective are IUDs?

- 99% effective

How to use an IUD?

- Must be inserted into the uterus and removed by a clinician.

HORMONAL IUDS

Side effects?

- Menstrual changes
- Cramping

Risks?

- Pelvic infection
- IUD expulsion
- Uterine perforation during insertion

Benefits?

- Highly effective
- Long-term protection
- No increased risk of blood clotting

PROGESTERONE INJECTABLE CONTRACEPTION

What Is It?

- DMPA-IM and DMPA-Sub Q are progesterone injections used for contraception. Injections are required every 3 months.

How Does It Work?

- DMPA inhibits ovulation

How effective is the shot?

- 93-98%

How to use the shot?

- The client returns for an injection every 3 months.
- The IM injection is administered in the deltoid or gluteal muscle.
- The Sub Q injection is administered in the abdomen or thigh.



THE DEPO SHOT

Side effects?

- Menstrual changes
- Weight gain
- Depression
- Decrease in bone density
- Delayed return of fertility after discontinuing DMPA

Risks?

- Serious health risks due to DMPA are rare; long term use may cause reversible decreased bone density

Benefits?

- Amenorrhea may occur
- Decrease in cramps, headaches, breast tenderness and nausea

PROGESTERONE-ONLY PILLS (POPS)

What are progestin-only pills?

- Progesterone-only pills are sometimes called “mini pills” as they do not contain estrogen.

How do they work?

- Inhibit ovulation
- Thicken cervical mucus
- May slow the movement of the egg through the fallopian tubes

How effective are these pills?

- 95-99% effective

How to use the pills?

- For some brands, take one active pill a day, everyday.
- For a newer brand, take 24 active pills, then 4 placebo pills

PROGESTERONE-ONLY PILLS (POPS)

Side effects?

- Acne, irregular bleeding, headache, breast tenderness, weight gain

Risks?

- Low risk of serious complications; some efforts being made to allow POPs to be available as an OTC drug
 - Slynd is under consideration by FDA as an over-the-counter contraceptive pill
- Efficacy of POPs reduced if pills are not taken at same time each day

Benefits?

- Can be taken by clients who have contraindications to combined hormonal methods

EMERGENCY CONTRACEPTION PILLS REQUIRING PRESCRIPTION

What are Emergency Contraceptive pills (EC)?

- ella is the emergency contraceptive pill requiring a prescription. It is a progesterone antagonist.

How does it work?

- ella delays follicular rupture, inhibits ovulation

How effective is ella?

- 62-85%

How to use ella?

- Take an ella pill as soon as possible and not more than 120 hours after unprotected sex or a contraceptive failure.

EC ELLA

Side effects?

- Headaches, dizziness, intermenstrual bleeding, cramping, nausea, vomiting

Risks?

- Use with caution while breastfeeding—risks to infant unknown

Benefits?

- More effective than OTC EC pills in heavier women

QUESTIONS?



NON-HORMONAL CONTRACEPTIVES AVAILABLE BY PRESCRIPTION

Paragard IUD

Diaphragm

Cervical Cap

Vaginal Gel (Phexxi)

PARAGARD IUD

What is a Paragard?

- It is a small, T-shaped device made of plastic and copper with strings attached for removal. It is effective for 12 years.

How does Paragard work?

- "Foreign body" effect of copper in the uterus causes an increase in white blood cells in uterine and tubal fluids; these changes impair sperm function and prevent fertilization.

How effective is Paragard?

- It is more than 99% effective

How to use Paragard?

- It is inserted through the cervix into the uterus by a clinician.

PARAGARD IUD

Side effects?

- Heavier or longer periods or bleeding between periods
- Menstrual cramps

Risks?

- Pelvic inflammatory disease
- Perforation of uterus during insertion

Benefits?

- Contains no hormones
- Can be used for emergency contraception and is more effective (99%) than oral ECs



DIAPHRAGM

What is a diaphragm?

- Diaphragms are reusable silicone devices consisting of a dome-shaped cup with a flexible rim, available in a single size device (Caya) and multi-size devices that must be fitted to the client. Prescription is required for a diaphragm. They are used with spermicidal gel.

How does it work?

- Diaphragms are barrier methods that cover the cervix and block sperm from traveling into the uterus. Spermicidal gel boosts the effectiveness.

How effective is it?

- 83-88%

How to use the diaphragm?

- Contraceptive gel is applied to the diaphragm, the diaphragm is bent in half and inserted into the vagina prior to intercourse. The diaphragm is left in place for at least 6 hours after sex and then removed.

DIAPHRAGM

Side effects?

- May cause vaginal irritation

Risks?

- Vaginal irritation can increase the risk of contracting STDs/HIV
- May increase risk of Toxic Shock Syndrome (TSS)

Benefits?

- Client-controlled
- Non-hormonal



CERVICAL CAP

What is it?

- FemCap is a reusable silicone device that resembles a hat that fits over the cervix. Spermicide is applied to the cap. It has a loop to use for removal. The cap is available by prescription in 3 sizes.

How does it work?

- The cap provides a barrier over the cervix to block sperm from advancing into the uterus.

How effective is it?

- Estimates vary, possibly 77-92% effective

How to use a cap?

- Coat the inside of the cap with spermicide, fold the cap and insert into the vagina. Can be worn for up to 48 hours but should be removed by 24 hours after sex. Must stay in place for at least 6 hours after sex. Client uses the loop on the device to grasp and remove.

CERVICAL CAP

Side effects?

- Potential for discomfort if not placed properly
- Spermicide may irritate the vagina

Risks?

- Possible risk of Toxic Shock Syndrome
- Possible increased risk of STDs/HIV secondary to irritation from spermicide.

Benefits?

- Hormone-free
- Multiple acts of sex for up to 48 hours with no additional spermicide needed.



PRESCRIPTION VAGINAL GEL

What is it?

- Phexxi gel is a new vaginal contraceptive introduced in 2020. It is available by prescription.

How does it work?

- It is a vaginal contraceptive that changes the pH of the vagina to reduce sperm motility.

How effective is it?

- About 86-93% effective

How to use the gel?

- Phexxi is inserted into the vagina using a pre-filled single-dose applicator before each act of vaginal intercourse. Insert an additional dose if intercourse does not occur within one hour of administration.

VAGINAL GEL

Side effects?

- Vaginal burning, vaginal itching, vaginal discharge, vaginal yeast infection, bacterial vaginosis, pain with urination

Risks?

- Cystitis
- Pyelonephritis
- Allergic reactions

Benefits?

- User-controlled
- Hormone-free
- An on-demand method

QUESTIONS?



NON-PRESCRIPTION HORMONAL CONTRACEPTION

What is it?

- The only over-the-counter hormonal contraceptives are emergency contraceptive progesterone oral pills (Plan B, Next Choice, My Way, Take Action, After Pill, EContra Ez). Can be written as a prescription if client has insurance coverage.

How does it work?

- Emergency contraceptive pills prevent or delay ovulation.

How effective is it?

- Up to 87% effective; less effective if $BMI \geq 26$

How to use EC OTC?

- Take pill as soon as possible after unprotected sex (preferably within 12 hours but must be within 72 hours).

EMERGENCY CONTRACEPTION OTC

Side effects?

- Next menses early or late, lighter or heavier; nausea, vomiting, cramping, headache, breast tenderness, dizziness

Risks?

- Possible allergic reaction to any components of the pill (rare)

Benefits?

- No restrictions on age or gender to purchase OTC

QUESTIONS?



NON-HORMONAL, NON-PRESCRIPTION CONTRACEPTIVES

Spermicides/Vaginal Barriers

Condoms

Fertility Awareness Based Methods

Abstinence

Withdrawal

SPERMICIDES/VAGINAL BARRIERS

What are spermicides/ barriers?

- The spermicides contain nonoxonyl-9 and include contraceptive gels, foams, film, sponge (Today). The barriers include external male condoms (latex, natural membrane and synthetic) and internal female condoms (nitrile sheath).

How do they work?

- The spermicides work by killing the sperm.
- The barriers work by blocking sperm from entering the cervix

How effective are spermicides/barriers?

- Sponge containing spermicide 76-88%
- Spermicide alone 72%
- External condom 82-87%
- Internal condom 79%

SPERMICIDES/BARRIERS

How to Use Spermicides?

- Place spermicide deep into the vagina prior to sex, usually effective for one hour. Avoid douching for at least 6 hours after sex

How to use barriers?

- Sponge—moisten with water to activate spermicide and insert into vagina to cover the cervix. It gives protection for up to 24 hours. Leave in place for 6 hours after last act of intercourse.
- External condoms (male)—place the condom on the head of erect penis; pinch air out of tip of condom. Unroll condom all the way down the penis. Soon after ejaculation, withdraw penis, holding condom against base of penis to prevent slippage and leakage of semen.
- Internal condoms (female)—hold the condom at the closed end by grasping the inner ring and squeeze with thumb and middle finger so it becomes long and narrow. Insert the ring into vagina as far as it will go. The outer ring remains outside the vagina.

SPERMICIDES/BARRIERS

Side effects?

- Spermicides may cause local irritation

Risks?

- Potential risk of TSS with sponge use

Benefits?

- Non-hormonal
- Latex condoms can protect against many STIs, including HIV
- Can be combined with most other methods to increase contraceptive efficacy

FERTILITY AWARENESS-BASED METHODS (FABM)

What is it?

- FABMs are practices that identify the days in the menstrual cycle when intercourse is most likely to result in pregnancy. The recognized methods are:
 - Standard Days Method using CycleBeads
 - Cervical Secretions-Based Methods (Two Day Method, Billings Ovulation Method)
 - Symptothermal methods (Marquette Model electronic fertility monitor)

How do they work?

- Standard Days Method—when menstrual cycles are 26-32 days long, can use the calendar to identify fertility window and abstain or use a barrier method.
- Cervical Secretions-Based Methods—by observing presence or absence of cervical mucus, beginning and end of the fertile window can be identified.
- Symptothermal Methods—by observing changes in cervical secretions, cervical position and basal body temperature, beginning and end of the fertile window can be identified.

How effective are these methods?

- Difficult to estimate typical use effectiveness. In theory, perfect use of these methods would be up to 95% effective but estimates of 85% typical use have not been published because of the small number of users studied.

FABM

How to use?

- Standard Days Method—abstain or use barrier method on days 8-19 of the cycle. Cycle Beads can be used to keep track of cycles. (CycleBeads app also)
- Cervical Secretions-Based Methods—check for secretions. If secretions noted, today or yesterday, you can become pregnant if you have sex today. If no secretions noted yesterday and today, not likely to get pregnant if you have sex today.
- Symptothermal Method—chart daily first morning BBT, secretions and cervical position to identify ovulation. Use cervical secretions to identify beginning of fertile time and BBT to identify end of fertile time (BBT rises 0.4°F at ovulation). Avoid sex during identified fertile time. Marquette Model uses electronic fertility monitor to measure hormone urine levels.

Side effects/Risks?

- None

Benefits?

- Can be used to avoid or plan pregnancy

ABSTINENCE

What is it?

- Can be defined as not having vaginal, oral or anal intercourse at any time or refraining from those acts.

How does it work?

- Pregnancy does not occur if sperm do not enter the female reproductive tract.

How effective is it?

- 100% effective in preventing pregnancy

How to use it?

- To prevent pregnancy, all forms of sexual expression are available except penile-vaginal intercourse.
- For STI protection, refrain from those sexual acts that result in transmission of a STI—vaginal, oral and anal.

ABSTINENCE

Side effects?

- None

Risks?

- Abstinence intentions can fail—a back-up contraceptive method should always be planned

Benefits?

- Abstinence is the only contraceptive choice that is 100% effective
- Encourages couples to build a relationship exploring alternatives for sexual expression

WITHDRAWAL

What is it?

- Withdrawal, coitus interruptus, pulling out is the practice of withdrawing the penis from the vagina before ejaculation occurs.

How does it work?

- Prevents pregnancy by preventing the sperm from reaching the egg.

How effective is it?

- Possibly 80%

Side effects?

- None

Risks?

- Pre-ejaculate prior to ejaculation usually is not felt and the pre-ejaculate may contain a low level of sperm. Educate about emergency contraception.

Benefits?

- No medical or hormonal side effects

QUESTIONS?



RESOURCES

Michigan Department of Health & Human Services

- [Family Planning Program](#)
- [HIV & STI](#)

Michigan Department of Education

- [HIV/STI & Sexuality Education](#)

Birth Control Charts & Other Educational Materials

- [Beyond the Pill](#)
- [Bedsider Birth Control Support Network](#)
- [Birth Control Options – Upstream USA](#)
- [CAP Birth Control Options – English Version](#)
- [CAP Birth Control Options – Spanish Version](#)
- [STI Education Tool – English Version](#)
- [STI Education Tool – Spanish Version](#)
- [Guttmacher Institute](#)

RESOURCES

Contraceptive and Reproductive Health Resources

[Contraceptive Technology](#)

[CDC Reproductive Health](#)

[CDC Sexually Transmitted Diseases](#)

[National Clinical Training Center for Family Planning](#)

[Reproductive Health National Training Center](#)

[Planned Parenthood of Michigan](#)

QUESTIONS?



THANK YOU!

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