



Experiences in the Management of Long-Acting Reversible Contraceptives

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Abstract

Objective

To report the experience of offering a contraceptive method to women detained in a prison in the city of Campo Grande, state of Mato Grosso do Sul, Brazil.

Method

Exploratory study, involving professors and students from the undergraduate Medicine course at the Federal University of Mato Grosso do Sul. The activities are carried out with women incarcerated at the Penal Institute. Health education is the strategy to inform and offer long-acting reversible contraceptives. Students have developed essential skills to assist in family planning.

Results

The results show the expansion of the supply of contraceptive methods for the vulnerable population and contributions to the quality of life of women who receive assistance.

Conclusion

The experience of managing long-acting contraceptive methods during medical graduation proved to be a strategy for preparing human resources to provide assistance in family planning, thereby contributing to Brazil meeting the goals agreed upon with the United Nations.

Keywords: Women's health; Reproductive rights; Contraception; Family planning; Prisons

Introduction

In Brazil, family planning is guaranteed to all Brazilian citizens, through public health policies, implemented by the Unified Health System, which guarantees universal access, comprehensive actions and the reduction of inequalities, especially social ones. Thus, sexual and reproductive rights are expressed in law number 9.263/1996, so that there has been progress in family planning actions, especially by reaffirming the right of every person to decide

whether or not to have children and conditioning the Unified Health System to offer methods of conception and contraception, including human sterilization [1]. However, the predefined criteria for surgical procedures and some warnings to professionals gave the connotation that family planning remained controlled by the State and there was only flexibility around 30 years after its validity. In this context, law number 14.443, of September 2, 2022, modified

the requirements for performing tubal ligations and vasectomies within the scope of family planning and came into force with changes, which gave a more democratic aspect and closer to the needs of people and health professionals [2].

In line with international policies, Brazil has made a commitment to the United Nations to ensure, by 2030, a healthy life and promote well-being for everyone, at all ages. With regard to family planning, the goal is “to ensure universal access to sexual and reproductive health services, including family planning, information and education, as well as the integration of reproductive health into national strategies and programs” [3]. To achieve this goal with the UN [3], it is important to implement continuing/permanent education programs, as they represent means to advance the rights of each individual to health based on scientific principles, in addition to collaborating with the safety of both the individual and the environment. professional. However, to guarantee universal, egalitarian and resolute services for the entire society, it is necessary to converge educational policies with those that regulate professions [4]. Therefore, the importance of having qualified professionals to implement public health policies and fulfill responsibilities towards society is highlighted. In this sense, it is essential to have professionals who meet the needs of the service, reducing training for the acquisition of skills that should be taught during training, which allows for faster responses capable of improving people’s lives. Taking into account the relevance of the theme and in order to contribute to the training of qualified human resources for the management of contraceptive methods, the objective was to develop a project to insert the intrauterine device for women detained in a women’s prison.

Method

Report of the experience of teachers and students of the undergraduate Medicine course at the Federal University of Mato Grosso do Sul, in the city of Campo Grande, state of Mato Grosso do Sul, Brazil, from August to December 2023. Theoretical-practical activities were carried out with content on national family planning policies, reproductive rights, sexual health and sexuality. Content regarding the insertion of long-acting reversible contraceptives (LARC) and insertion practices in simulators were also discussed, so that each participant had the experience of handling the intrauterine device and the subdermal implant, through realistic simulation, before providing care to women. Women detained in a women’s prison were chosen to be offered the hormonal intrauterine device and subdermal implant, as they are a population that lacks this type of benefit: amenorrhea, reduction of menstrual cramps, hygiene, savings on purchasing a menstrual protector, among others. others. The women received guidance regarding contraceptive methods and adherence was voluntary, expressed by signing the consent form for the insertion of LARC. The consultations took place in an office with materials and equipment for the procedures. So far, women’s choice has been for the hormonal IUD, due to the duration of this method. The insertion technique is expanded with cervical anesthesia to reduce pain and nerve effects.

Results

The experience has led to the acquisition of new skills by medical undergraduate students, such as communication, building a bond of empathy and trust between the professional and the woman, in addition to everything that involves managing the IUD, such as insertion, assessment of positioning using ultrasound examination and treatment of possible complications, such as pain and dislocation. The ultrasound is performed by a specialist doctor. The exam is carried out after each woman’s next menstrual cycle and has been uneventful. The action has benefited women deprived of their liberty, through access to long-lasting contraceptive methods and, consequently, improving their quality of life and preventing pregnancy. It should be noted that, when a detained woman is pregnant, she remains incarcerated, only the birth takes place in a hospital environment, after discharge, the woman returns to the prison and the child remains with the mother until 6 months of age. This is a chaotic situation and has been avoided by the researchers’ initiative to provide family planning assistance. Initiatives of this type are able to collaborate with teaching based on the reality of work and in the preparation of qualified health professionals to provide assistance in family planning.

Discussion

Work-based education is one of the requirements of the national curriculum guidelines for undergraduate Medicine courses and requires changes in practice scenarios, so that the student becomes a professional with skills to perform their functions, especially in the Unified Health System [4]. Other benefits of this initiative stand out, such as meeting unmet needs in family planning, whether due to a shortage of professionals or access barriers, especially for vulnerable groups such as women detained in prisons [5]. Unsatisfied need for family planning is defined by women who do not use contraception and want to avoid or postpone pregnancy [6]. Understanding unmet needs allows research and health policies to be established to reduce the possibilities of unwanted pregnancies that could compromise maternal health, increase the intrapartum interval with a reduced risk of prematurity and low birth weight, and improve child development [7]. The estimated reduction in the number of maternal deaths in developing countries by 30% would occur if women who wish to avoid pregnancy used an effective contraceptive method, which would prevent 28 million births and 473,000 infant deaths [8]. The percentage of accidental pregnancies detected in 19 countries showed a miscarriage and stillbirth rate between 5 and 20%, and in the countries of Armenia, Ukraine and Vietnam, more than half of pregnancies end in non-live births [9]. The prevalence of contraception use in Iran was 81.5% and unmet need for contraception was detected in 2.6%. Despite the high contraceptive rate, 30.7% reported unwanted pregnancies [10]. This is most likely related not only to contraceptive issues, such as incorrect or inconsistent use of the method, but personal contexts and circumstances must be considered, such as reproductive history, experience with violence, cohabitation with a partner, age and work experience. Paid [11].

Research carried out in Brazil identified unplanned pregnancies in 28.2% and 17.6% of women considered them unwanted. Women with unwanted pregnancies had less education (22.8%), were not married (23%), high parity (with 3 or more children: 58.6%) and 30.7% were in the age group of (25 to 29) years old. Despite the contraceptive offer, reproductive rights are not fully exercised by the most vulnerable population [12]. Women with behaviors that generate distrust regarding contraceptive effectiveness, even with clear intentions or desires to delay or avoid pregnancy, may not engage in consistent pregnancy prevention behaviors. Barriers to access to contraceptive measures specifically impose exposure to unsafe abortion procedures on women. And such unsatisfied needs were identified as one of the causes of women resorting to abortion whose factors are associated with difficulty in accessing the service, failure of the method, non-use of contraception or inconsistent use due to the lack of perception of the risk of becoming pregnant and lack of participation from the partner in choosing a contraceptive method or maintaining an unwanted pregnancy [13]. By developing strategies to eliminate barriers to access to contraceptive methods, it will prevent unwanted pregnancies and preventable deaths, enable the decline in fertility, strengthen families and provide society with opportunities for education, health and economic development. If access to contraceptive methods for women in common situations is sometimes limited, it is important to know what it is like for women deprived of their freedom [14].

Conclusion

The experience of managing long-acting contraceptive methods during medical graduation proved to be a strategy for preparing human resources to provide assistance in family planning, thereby contributing to Brazil meeting the goals agreed upon with the United Nations.

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