

# Family Planning: Another Way Faith Groups Can Prevent HIV Infections



## Four Approaches Are Used to Prevent HIV Infection in Infants and Young Children

- Prevent HIV infection in women of child-bearing age.
- Prevent unintended pregnancy among women living with HIV.
- Prevent transmission from pregnant women living with HIV to their infants.
- Provide care and support for mothers living with HIV, their children, and their families.

Recommended by the World Health Organization (WHO), this list is sometimes referred to as the “four pillars” or the “comprehensive four-pronged approach to prevention of mother-to-child transmission (PMTCT) of HIV.” (Ref 1)

During the past decade, however, most faith-based organizations (FBO) (and most donor agencies) have spent a great deal of effort and money on the third element – helping HIV-infected women who were already pregnant to avoid passing the infection to their babies. Many of those pregnant women, though, had not planned or wanted a pregnancy at that time – in other words, they had “unintended pregnancies.”

Therefore, an Expert Panel in the U.S. urged the U.S. Congress and Global AIDS Coordinator to implement all four of the pillars. The panel wrote, “Preventing unintended pregnancies among women living with HIV would significantly decrease the numbers of HIV-infected children.” (Ref 5, p. 90)

## Family Planning Helps Prevent HIV Infection in Women and Men

For some time, researchers have known that pregnancy increases a woman’s risk of HIV infection. The reasons are two—she relaxes her safer sex practices in order to conceive, and her immune system down-regulates in intensity to accommodate the partially foreign fetus.

Recent research has found that men are also at higher risk of contracting HIV when their partner becomes pregnant. (Ref 7)

## View from a Christian Global Health Professional

“It is certainly appropriate for church-related AIDS programs to give more attention to voluntary family planning information and services.

I believe there is currently a demand among women and families who are affected by HIV and AIDS for information and help in planning their decisions about child spacing and family size. Church programs can respond significantly to this demand.

We know that many HIV-infected women do want to have children. With good PMTCT programs, it has become safer for them to have those children. We also know that many HIV-positive women do not want to become pregnant.

This means that there will be more and more resources to integrate family planning appropriately into AIDS programs, and the church can be at the forefront of these developments. Of course, we want to be sure that any family planning information and services respect the theology and values of various Christian communities.”

**Ray Martin**  
*Executive Director  
Christian Connections for  
International Health*

## Where You Can Add Family Planning to Current HIV/AIDS Activities

- Help every person who comes to you for HIV testing (whether infected or not) to think about the pros and cons of having a baby. Ask each person to bring the spouse for testing and discussion.
- Help every person infected with HIV, woman or man, to avoid pregnancies they do not want. Offer them information on contraceptive methods at every visit. Encourage them to make their own decisions and to choose, among the several excellent methods that are appropriate and highly recommended for people with HIV.
- Test every pregnant woman for HIV, and help every infected woman to avoid passing HIV to her baby—by taking anti-retroviral medicines herself, giving them to her baby, and following breastfeeding recommendations.
- Help every woman after delivery (and as her baby grows) to choose how to avoid an unwanted pregnancy. Explain the contraceptive methods that are recommended for her situation—whether she wants another baby later or no more babies at all.
- For all men and women infected with HIV, you have a chance at every visit to discuss pregnancy plans. Be ready to provide contraceptive methods right then and there (so they don't have to go to another place and another person to get contraception).



Photo Courtesy of John Snow, Inc.  
Ethiopia

## Where You Can Add HIV/AIDS Activities to Current Family Planning Services

- Offer HIV counseling and testing to every woman and every man who comes for family planning.
- Encourage family planning clients to bring their spouses for counseling and testing.
- Consider having regular “Men-Only” educational sessions for sexually transmitted infections (STI), HIV testing and family planning.

## What about Condoms?

Around the world, thousands of faithful married couples are “HIV sero-discordant” (one is infected with HIV, but the other is not). Many of these couples want to continue sexual relations, be faithful to each other, and keep the one partner uninfected. The only way they can hope to accomplish these goals is to use condoms every time they have intercourse.

Many sero-discordant couples do not want to have a baby. Condoms serve also as a contraceptive, but many couples decide to use another method for added protection against pregnancy. *See Family Planning: A Global Handbook for Providers, listed in references.*

Some sero-discordant couples decide they do want a baby. You can counsel them to use condoms for several months, as they study the woman's menstrual cycle to learn when she is most likely to become pregnant. (Calendars or Cycle Beads will help them study the woman's cycle.) Once they understand her cycle, the couple will continue to use condoms on all the days when the woman is not fertile, to prevent HIV transmission. On the few days when she is fertile and able to conceive, they will not use condoms.

Many Christian groups in the United States and in the Global South feel that condoms are very appropriate for couples to use in these situations.

## Faith-Based Advice for Couples, When One or Both Are Infected with HIV

- Pray together for wisdom and courage.
- Decide together, with God's help, to be faithful.
- To prevent HIV transmission, you can abstain from sexual relations, or always use condoms.
- Decide together, with God's help, whether to have a new baby. If you decide yes, talk about when to do that and how to keep the baby HIV free. If you decide no, talk about safe ways to be sure you don't have a pregnancy.

## Adding Family Planning to Your HIV/AIDS Activities: How to Keep Costs Down

### Check with your personnel on the ground

- How many already have training and experience in FP services? How and where are they providing services now? Have they already found ways to add family planning to AIDS activities?
- If field people need updating on family planning in general, or on contraceptive methods for HIV-infected people, look for courses nearby, trainers who will come to your site, or good courses on the internet.
- Study how to fit family planning into existing services and activities (ex: HIV testing, PMTCT, ante-natal clinics, post-natal clinics, child immunizations, church services, community events)

### Decide what contraceptive methods you will recommend and provide

- The standard international guide is the book *Family Planning: A Global Handbook for Providers* (Ref 2 below, available online). The book describes a wide range of contraceptive methods: pills, injectables, patches, vaginal rings, implants, intrauterine devices (IUDs), female sterilization, vasectomy, male condoms, female condoms, spermicides, diaphragms, cervical caps, fertility awareness methods (FAM), withdrawal, and the lactation amenorrhea method (LAM).
- Your program may decide to offer just a few of these methods, or a wider range. The important thing is that the people you serve have a choice, and that your front-line personnel can help each couple find a contraceptive method right for them.

### Check medical supply lines in each country or province. Try to locate at least two reliable sources of contraceptive methods.

- Contraceptives are on the WHO list of Essential Medicines: [www.who.int/medicines/publications/essentialmedicines/en/](http://www.who.int/medicines/publications/essentialmedicines/en/)
- In many countries, the Ministry of Health will supply contraceptives to faith-based programs.
- Check with the in-country offices of the United Nations Fund for Population Activities (UNFPA), and of donor countries: DFID (Britain), GTZ (Germany), USAID (USA), etc.
- In many countries, faith-based groups have their own drug supply organizations that stock medical supplies in large quantities. Example: [www.epnetwork.org](http://www.epnetwork.org)

## To Give or Not To Give: A True Story from Africa

An HIV/AIDS counselor was worried. In his training course for voluntary counseling and testing, he was given a box of condoms, and he had practiced opening the packets and demonstrating their use. Now, back at work at his Catholic hospital, he didn't know what to do. As a Catholic himself, he understood that the church had concerns about the use of condoms.

For a few weeks, the counselor kept the condoms in his bottom desk drawer and never mentioned them to his clients. He often thought of the condoms, though, as he talked with married couples who wanted to stay together and be faithful, even though one of them was infected with HIV.

Finally, the counselor decided to talk with his priest. They spent a long time discussing his dilemma and praying for guidance. Together, they decided that the counselor could not withhold from those couples the one way (condoms) that would allow them to continue to show their sexual affection as faithful husband and wife. The counselor returned to his job, knowing what he would do in the future.

- Organizations that furnish essential medicines at low cost to faith-based programs may include contraceptive methods (for example, IDA in the Netherlands, [www.idafoundation.org](http://www.idafoundation.org)).

If you need new funding for family planning in your HIV/AIDS programs, contact the HIV/AIDS organizations and the family planning groups already active in the countries where you work. The following agencies now encourage the integration of family planning with HIV/AIDS activities: FHI 360, Global Fund, PEPFAR, UNAIDS, USAID, Centers for Disease Control and Prevention (CDC).

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