LARC 101:
LARC & Lunch

TAKE CONTROL
INITIATIVE
Family Health Coalition
Lunch & LARC: Trivia

How many do you know (without help from our best friend, Google)?

1. What does LARC stand for?
2. What is the key chemical element in the non-hormonal IUD?
3. What is Oklahoma’s national rank for teen births?
4. What percentage of unintended pregnancies occur while using a method of contraception?
5. Can you draw where an IUD is located?
Laura Bellis
Program Director

Gaby Ortega
Communications Coordinator
The Take Control Initiative (TCI) empowers women and families with the choice of when to have children through highly effective, low maintenance contraception.

We provide education, outreach and free clinical services for IUDs and the Implant.

Qualifications:
- Female of reproductive age
- Live in Tulsa County
- At or below 250% of the Federal Poverty Level
TCI aims to reduce teen and unintended pregnancy

Focus on prevention and reducing barriers to services

Educate on all methods of contraception

Partner with Tulsa County clinics to provide free services for long acting reversible contraception (LARC)
Services Covered

Insertion and removal of device

**IUDs:**
- Mirena - 5 years
- Skyla - 3 years
- Kyleena
- Liletta - Currently 3 years
- ParaGard - 10 years

**Implant:**
- Nexplanon - 3 years

STD & Pregnancy Test
History
What is it?
St. Louis offered women free contraception for 3 years if they switched methods (no method to a method or from one method to another)

Results:
When counseled about all methods of birth control, **75% of women chose either an IUD or the implant.**
Results for women using LARC methods:

♀ 86% were still using the method at 1 year
♀ Highest satisfaction at their one-year follow-up
♀ Lowest unintended pregnancy rates during year 1, year 2, and year 3 compared to non-long-acting method
What is it?
Teenagers and low-income women were offered free IUDs and implants.

Results:
Birth rate among low-income women with Title X providers dropped significantly from 2009-2013.
By 2009:
½ of first births to low-income women happened before turning 21.

By 2014:
½ of first births to low-income women did not occur until the women turned 24.

Between 2009 – 2013:
Abortion rate fell 42% among women ages 15-19.
National: 22.3 births per 1,000

Oklahoma: 34.8 births per 1,000

State Rankings:
#1 Massachusetts
#49 Oklahoma
#50 Arkansas

Source: The National Campaign to Prevent Teen and Unintended Pregnancy
Oklahoma ranks 2nd in the nation for highest rate of teenage births
About 51% of all pregnancies are unplanned in Oklahoma
About 50% of unplanned pregnancies occur while using a form birth control
Teen Pregnancy costs taxpayers in Oklahoma $169 million every year
LARC
What is LARC?

Long Acting Reversible Contraception

♀ LARC is defined as birth control methods that require less than monthly administration, that users do not have to think about regularly

♀ LARC options through the Take Control Initiative include the arm implant and IUDs that are effective between 3 – 10 years
♀ Mirena IUD – Effective up to 5 years
♀ Kyleena IUD – Effective up to 5 years
♀ Skyla IUD – Effective up to 3 years
♀ Liletta IUD – Currently approved for up to 3 years
♀ ParaGard IUD – Effective up to 10 years
♀ Nexplanon Implant – Effective up to 3 years
♀ Depo Injection (3 months)
LARC is...

♀ The most effective form of reversible birth control
♀ Over 99% effective at preventing pregnancies
♀ Discreet and safe
How can LARC help?

♀ Helps prevent unintended pregnancy
♀ Great tool for healthy birth spacing
♀ Increases likelihood of healthy outcomes for both mother and infant
♀ Can be placed immediately postpartum

Unintended pregnancy can lead to:
- Depression
- Physical abuse
- Diabetes
- Obesity
- Poor physical & mental health
- Child abuse
- Lower educational attainment
How can LARC help?

♀ Empowers women with the choice of when to have children:

♀ Helps women obtain goals such as:

- School
- Career
- Financial Stability
- Family
BIRTH CONTROL HELPS WOMEN SUCCEED

When women have access to contraceptives, they're able to make the right choices for their families, and live longer, healthier lives.

In fact, enabling women to plan and space their pregnancies leads to:

- Better education.
- More job opportunities.
- And economic security.

But still, 222 MILLION women around the world want to prevent pregnancy but aren't taking contraceptives.

The good news is, 91% OF AMERICANS believe "every woman on the planet deserves access to quality maternal and reproductive health care." So what are we waiting for?

SHARE THIS!

If you think every woman deserves access to contraceptives!

SOURCES:
- Ferris-Thomas, September 14, 10, 2010. Americans for Planned Parenthood: Putting Women's Health First.
♀ LARC methods have few contraindications

♀ Almost all women, including teens and nulliparous, are medically eligible for the implant and IUDs

♀ User satisfaction and high continuation rates

♀ More cost-effective at preventing pregnancy than short-acting reversible methods
LARC has few contraindications

**Medical Eligibility Criteria for Contraceptive Use**

<table>
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<th>1</th>
<th>2</th>
<th>3</th>
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<tr>
<td>No restriction (method can be used)</td>
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<td>Advantages generally outweigh theoretical or proven risks</td>
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<tr>
<td>Theoretical or proven risks usually outweigh the advantages</td>
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<td>Unacceptable health risk (method not to be used)</td>
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<td>Method</td>
<td>% of Women Experiencing an Unintended Pregnancy Within the First Year of Use</td>
<td>% of Women Continuing Use at 1 Year</td>
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<td>--------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
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<tr>
<td></td>
<td>Typical Use^a</td>
<td>Perfect Use^b</td>
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<tr>
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<td>85</td>
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<td>Spermicides (foams, creams, gels, suppositories, and film,)</td>
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<td>Contraceptive patch</td>
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<tr>
<td>Contraceptive ring</td>
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<td>0.3</td>
<td>67</td>
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<tr>
<td>DMPA injection</td>
<td>6</td>
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<td>IUD</td>
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<tr>
<td>Copper T</td>
<td>0.8</td>
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<td>78</td>
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<td>Levonorgestrel</td>
<td>0.2</td>
<td>0.2</td>
<td>80</td>
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<td>Single-rod contraceptive implant</td>
<td>0.05</td>
<td>0.05</td>
<td>84</td>
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<td>Female sterilization</td>
<td>0.5</td>
<td>0.5</td>
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<td>Male sterilization</td>
<td>0.15</td>
<td>0.10</td>
<td>100</td>
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Pediatricians should be able to educate adolescent patients about LARC methods, including the progestin implant and IUDs. Given the efficacy, safety, and ease of use, LARC methods should be considered first-line contraceptive choices for adolescents.
Services Covered

Insertion and removal of device

IUDs:
Mirena - 5 years
Skyla - 3 years
Kyleena
Liletta - Currently 3 years
ParaGard - 10 years

Implant:
Nexplanon - 3 years

STD & Pregnancy Test
Services Not Covered by TCI

♀ Pap Smears
♀ Well Woman Exams
♀ String Checks
Participating Clinics

- Tulsa Health Department (5 locations)
- Morton Comprehensive Health Services (2 locations)
- OU Tulsa – Women’s Health Care Specialists
- OU Tulsa – Family Medicine
- Indian Health Care Resource Center
- Planned Parenthood of the Great Plains
- Community Health Connection (2)
- OSU Physicians – OB/GYN
- OSU Women’s Health
Offer same day service when possible
Offer patient-centered contraceptive counseling
Data tracking
Participate in TCI training

20,017,990
Total number of women, 13–44, in need of publicly funded contraceptive services in the U.S.
Order of Payer Sources

1st - Private Insurance & Medicaid

2nd - Take Control Initiative

3rd - Title X
TCI provides comprehensive education sessions covering the full range of methods for groups and an education module online.

**Outreach Materials Available:**

♀ Brochures, Posters, and Bedsider sheets (in English, Spanish, Burmese, and Zomi)
♀ Social Media: TCI website, Facebook, Instagram, Twitter
♀ Sexual Health Rights for Teens (compliments of the Tulsa Campaign)
♀ Gold Uterus Temporary Tattoos
Outreach

Education

The Condom Project

Volunteer Program

Social Media Strategies
Data
13,383 women have received LARC in a TCI participating clinic since 2010.

In 2016 ~2,000 women and families were reached by TCI through education sessions and health fairs.
The “it’s ready-to-go 24/7 and knows me better than Netflix” birth control.

The “my love life is epic enough so I need a method with no drama” birth control.

The “your body is awesome just the way it is” birth control.
There was a 41.5% increase in teens 13-19 receiving TCI funded LARC in 2016.

This increase in teen LARC use also correlate with increased social media spending.
From 2009-2015 Tulsa’s teen birth rate plummeted 40.9%
County Comparison

Declines in teen birth rates from 2009 to 2013 were more dramatic in Tulsa County, TCI’s program area, than in Oklahoma County.

Births per 1000 for 15-17-year-olds decreased 10.2% more in Tulsa than in Oklahoma County and births per 1000 for 18-19-year-olds decreased 21.2% more in Tulsa than in Oklahoma County.

Data in 2014 indicates Oklahoma County is having sharper declines in the teen birth rate than in the past. This is likely due to increased activity to prevent teen pregnancy, including some LARC work.
County Comparison

According to Oklahoma Policy Institute, from 2011* to 2014, Tulsa County's teen birth rate decreased by 24.8%, compared to an average decrease of 19.5% among 18 demographically-similar counties without LARC programs.

Since TCI began, Tulsa's teen birth rate dropped by 27% more than the comparison counties.
This graph is too big so click here
LARC
Methods
**HOW WELL DOES BIRTH CONTROL WORK?**

**Really, really well**
- The Implant (Nexplanon)
  - Works, hassle-free, for up to... 3 years
- IUD (Skyla)
  - 3 years
- IUD (Mirena)
  - 5 years
- IUD (ParaGard)
  - 12 years
- Sterilization, for men and women
  - Forever

**Okay**
- The Pill
- The Patch
  - Every week
- The Ring
  - Every month
- The Shot (Depo-Provera)
  - Every 3 months

**Not so well**
- Withdrawal
- Diaphragm
- Fertility Awareness
- Condoms, for men and women

**What is your chance of getting pregnant?**
- Less than 1 in 100 women

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

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

The Nexplanon or Implant is a little matchstick-sized rod that is inserted under the skin of your upper arm.

It’s a soft, flexible plastic that releases a very low dose of Progestin.

Radio Opaque
The Implant

How does it work?

♀ Releases a small dose of hormone that keeps your ovaries from releasing eggs
♀ Thickens the cervical mucus which helps block sperm from reaching the egg
♀ Decreases the lining of the uterus which is why your period lighter.
The Implant

♀ Back up birth control method (condoms) is needed for the first 7 days after insertion
♀ Does not protect against STDs
♀ Estrogen-free

Things to Keep in Mind

♀ Different experiences for everyone
♀ Safe to use while breastfeeding
♀ Rapid return to fertility after removal
♀ Spotting can occur - most common side effect

It’s important to remind patients that they need to give their bodies **3 to 6 months** to adjust to any form of hormonal birth control.
Who can use the Implant?

Females of reproductive age:
♀ Not currently pregnant
♀ Can use Nexplanon whether or not you currently have an STD
♀ Relationship status does not affect Nexplanon eligibility
Mirena

♀ Intrauterine device, it’s a long-acting reversible contraceptive method that is placed inside the uterus.

♀ Small, t-shaped piece of soft flexible plastic that releases progestin

♀ Treats menorrhagia otherwise known as heavy menstrual bleeding.

> 99% Effective
Lasts 5 years
Kyleena

♀ Kyleena is a smaller version of Mirena
♀ It releases a smaller dose of Progestin
♀ Lower dose of hormones means higher chance for a period compared to Mirena
♀ Does not protect against STDs
Skyla

♀Skyla is also a smaller version of Mirena
♀Slightly smaller and narrower in diameter than Mirena
♀It releases a smaller dose of progestin, a little less than Kyleena
♀Lower dose of hormones means higher chance for a period compared to Mirena
Liletta

> 99% Effective
Lasts 3 years

♀ Intrauterine device, it’s a long-acting reversible contraceptive method that is placed inside the uterus.
♀ Small, t-shaped piece of soft flexible plastic that releases Progestin
♀ Does not protect against STDs/STIs.
♀ Treats menorrhagia otherwise known as heavy menstrual bleeding.
How Hormonal IUDs Work

- Mirena
  - Inhibits sperm
  - Stops release of egg
- Thins uterine lining
- Thickens mucus
- Threads
- Fallopian tubes
- Ovary
<table>
<thead>
<tr>
<th>NAME</th>
<th>HORMONE</th>
<th>DOSE</th>
<th>APPROVED FOR</th>
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<tbody>
<tr>
<td>ParaGard</td>
<td>N/A, uses copper</td>
<td>N/A</td>
<td>10/12 years*</td>
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<tr>
<td>Mirena</td>
<td>levonorgestrel</td>
<td>20 mcg/day (52 mg total in the device)</td>
<td>5/7 years*</td>
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<tr>
<td>Liletta</td>
<td>levonorgestrel</td>
<td>18.6 mcg/day (52 mg total)</td>
<td>3/5 years*</td>
</tr>
<tr>
<td>Kyleena</td>
<td>levonorgestrel</td>
<td>17.5 mcg/day (19.5 mg total)</td>
<td>5 years</td>
</tr>
<tr>
<td>Skyla</td>
<td>levonorgestrel</td>
<td>14 mcg/day (13.5 mg total)</td>
<td>3 years</td>
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</table>
Hormonal IUDs

Things To Keep In Mind

- Does not protect against STDs
- Back up birth control method (condoms) is recommended for the first 7 days after insertion
- Extremely effective
- Rapid return to fertility after removal
- Can be inserted any time during menstrual cycle
- Can be inserted immediately after postpartum
- Treats menorrhagia (Mirena and Liletta Only)
- Different experiences for everyone
ParaGard

> 99% Effective
Lasts 10 years

♀ Little, T-shaped device, placed in uterus
♀ Made of plastic and a small amount of natural, safe copper.
♀ 100% hormone-free
♀ Does not alter your periods
♀ Also used for Emergency Contraception
ParaGard

Things To Keep In Mind

♀ Good for 10 years
♀ Discreet, low-maintenance
♀ Extremely effective
♀ No hormones
♀ Continued regular periods
♀ Possible heavier, crampier periods
♀ No protection against STDs
Dispelling Myths about IUDs

IUDs can be safely used in...

- Women with multiple partners
- Teens
- Women who are immediately postpartum
- Women with a history of STI or PID
- Women who have or haven’t had children
- Women with a history of ectopic pregnancy
- Do not currently have PID, gonorrhea, or Chlamydia
- Currently breastfeeding
Talking Points Toolkit
We have to initiate and normalize the dialogue.

Providing the opportunity to talk about birth control in a proactive and positive way is empowering.
Talking Points Toolkit:

- Myth vs. Fact cards
- Phone wallet
- Gold uterus tattoo
- PATH questions card
- IUD (not for human use)
- Flash Drive

TCI brochure pdf
TCI referral process pdf
TCI qualifications pdf
Bedsider sheet pdf
CDC Medical Eligibility Criteria pdf
This powerpoint
What is the goal?
To increase LARC use? To stop unintended pregnancy?

The goal is to:
- Help her figure out what she wants
- Clarify what she wants
- Help her get what she wants
What is your role?
Most women know very little about IUDs and Implants.

- 99% have heard of pills
- 99% have heard of condoms
- 87% have heard of implants
- 77% have heard of IUDs

Percentage of people who say they know little or nothing about various methods of birth control:
- Pills: 38%
- Condoms: 12%
- Implants: 77%
- IUDs: 68%

Percentage of people who don’t know where the implant is inserted: 56%
Percentage of people who don’t know where the IUD is inserted: 27%
Long-lasting? Yes, but emphasize low-maintenance.
Most young women want a baby at some point. When talking about low-maintenance methods, be positive about pregnancy and stress that the Implant and IUDs are reversible.
Long-acting birth control available to women at no cost.*
PATH Questions

Pregnancy
Do you think you might like to have (more) children some day?

Attitude
When do you think that might be?

Timing
How important is it to you to prevent pregnancy (until then)?
Opening Lines:
- Do you want to have a baby this year?
- What are your plans for the future?
- Would your future plans change if you became pregnant (again)?
- Have you thought about where kids might fit in?
- What are you doing about birth control?
- What’s important to you about your method?
- Are you familiar with IUDs and the Implant?
**Bringing-up methods:**

**What not to ask:** “What method are you interested in?”

They will feel like it’s their job to give an answer, even if they don’t know

**Instead Ask:**

- Do you have a sense of what is important to you about your method?
- Do you have a sense of what you are looking for?
- There are methods you take every day, once a month, once every 3 months, etc....” Do any of those time frames interest you?
Address questions and myths:

- Bedsider.org
- Stayteen.org
- takecontrolinitiative.org
A woman thinking about her future hears about IUDs, the Implant and Take Control initiative.

1. She gets an appointment:
   - Calling a TCI clinic
   - Walk-in: 918.838.0697
   - Visiting TCI's website

2. A healthcare provider works with her to choose the best birth control method.

3. She gets a free pregnancy test and STI test as needed compliments of TCI.

4. If she chooses, she gets the most effective, reversible method for free.

5. The clinic is reimbursed by Take Control for any costs not covered.

6. This woman is going places and she has birth control that can keep up with her.

7. Free transportation is available for qualifying women.
We have to initiate and normalize the dialogue.

Providing the opportunity to talk about birth control in a proactive and positive way is empowering.
Lightbulb moment?

Have an approach that has worked for you? Share with us!
Recap
The Take Control Initiative (TCI) empowers women and families with the choice of when to have children through highly effective, low maintenance contraception.

We provide education, outreach and free clinical services for IUDs and the Implant.

Qualifications:
- Female of reproductive age
- Live in Tulsa County
- At or below 250% of the Federal Poverty Level
Thank You!

TCI Website:
www.takecontrolinitiative.org

Facebook: /TakeControlInitiative

Instagram: @IUDecide

Twitter: @IUDecide

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