

Standard Days Method (SDM) Toolkit

K4Health eToolkits

K4Health eToolkits (www.k4health.org/toolkits) are collections of carefully selected information resources for health policy makers, program managers, and service providers. (See *more details, below.*)

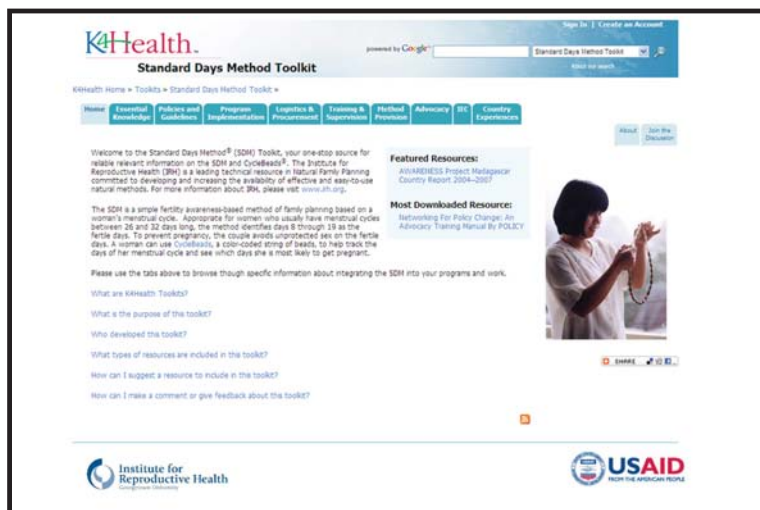
Standard Days Method (SDM) Toolkit

The SDM is a simple fertility awareness-based method of family planning based on a woman's menstrual cycle. Appropriate for women who usually have menstrual cycles between 26 and 32 days long, the method identifies days 8 through 19 as the fertile days. To prevent pregnancy, the couple avoids unprotected sex on the fertile days. A woman can use CycleBeads, a color-coded string of beads, to help track the days of her menstrual cycle and see which days she is most likely to get pregnant.

The Standard Days Method (SDM) Toolkit (www.k4health.org/toolkits/sdm) provides information on key aspects of the SDM for managers considering including the method into their programs. It includes background information on how the method was developed and tested, and the benefits of introducing the SDM. It also discusses key steps that need to be addressed as the introduction is planned and implemented.

Standard Days Methods (SDM) Toolkit Background

The SDM Toolkit was developed by the Institute for Reproductive Health, the developers of the Standard Days Method®, and CycleBeads®. The guidelines and resources in this toolkit are based on the experience of more than 20 international and local organizations that successfully introduced this natural method into their countries' family planning programs. K4Health invites users of the toolkit to provide feedback, suggest additional resources to fill information gaps, and share with other users how they have used or plan to use the toolkit. A built-in, moderated discussion board is provided for this purpose.



K4Health eToolkits (continued)

Partners with expertise and experience in the topic develop the toolkits collaboratively using a series of online features, including audio- and video-conferencing tools, text chatting, and a commenting feature that allows invited collaborators to provide comments about individual resources and toolkit sections. This participatory approach guarantees that the toolkits are of the highest quality. The continuous publishing principle on which toolkits are based allows them to evolve after publication to capture additional resources and to identify and fill remaining information gaps.

(To see a list of all K4Health eToolkits and those in production go to www.k4health.org/toolkits. If you, or your organization, would like to develop a toolkit not already on the list, please contact the k4Health eToolkits team at: Toolkits@k4health.org.)


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Program Implementation

The following guidelines are available to assist program managers to plan for and integrate the Standard Days Method® (SDM) into their services. These guidelines are based on the experience of more than twenty international and local organizations that have successfully introduced the SDM into their own countries' family planning programs. The SDM has been introduced into diverse programmatic settings, including clinic- and community-based programs, by ministries of health, NGOs providing family planning services, as well as community development organizations with limited experience in carrying out health or family planning programs. The method is being used by women and men with a wide variety of religious, cultural, educational, and socio-economic backgrounds.



These resources provide information on key aspects of the SDM for managers considering including it in their programs. It discusses key steps that need to be addressed as the introduction is planned and implemented. Of course, not all elements will be relevant to each reader, and program managers are encouraged to select those elements most appropriate for their programs.

Needs Assessment
 Standard Days Method® (SDM) introduction is most successful in areas where there is a potential demand and where there is likely to be high acceptability. Worldwide, millions of women report that they are using "period abstinence" to avoid pregnancy, although the majority of them do not know when they are most likely to get pregnant. Additionally, millions of women who do not want to get pregnant are not using any method of family planning, while others are using a method inconsistently.

Programmatic Framework For The Standard Days Method
 The successful integration of the Standard Days Method® (SDM) requires preparation and follow-through. Decisions need to be made about where the SDM should be offered and by whom. Support among key "influentials" and program decision-makers must be developed and a supportive policy environment established. Support materials and training for service personnel are required as well as communication strategies for inform the community about the availability of the method. In addition, CycleBeads must be available, and providers need to be supported in offering the method. All of these steps are a critical part of the integration process, though their sequence may vary from site to site. The following are key questions and actions that will help personnel establish SDM as an integral part of the family planning program.

Program Implementation

This section of the toolkit includes resources which provide information on important aspects of the SDM for managers as they integrate the method into their services.

IEC

The primary objective of the IEC (information, education, and communication) section is to provide key actions for integrating the SDM into IEC efforts. It contains specific SDM IEC Resources such as brochures and fliers, CycleBeads® inserts, SDM promotional materials, and CycleBeads® illustrations.


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IEC

The primary objective of IEC (information, education, and communication) efforts for the Standard Days Method® (SDM) is to ensure that women and couples make an informed choice about their family planning options. Because the SDM is suitable for a wide range of users, (e.g. literate, non literate, urban, rural, non-users of family planning, users of periodic abstinence, etc.) IEC materials must be tailored to the audience and setting in which the method will be provided. Ideally, the SDM should be integrated into existing family planning and reproductive health IEC materials. In addition, because it is a new method and most potential clients may not have heard of the method, developing some materials dedicated exclusively to inform them about the SDM also may be appropriate.



Key actions for integrating the SDM into IEC efforts:

- Determine target audiences for IEC efforts.**
 A first step in developing IEC materials should be to identify the target audience(s) you want to reach with SDM information. The characteristics of the audience (e.g. literate, non-literate, urban, rural, etc.) will help define the best strategies for reaching them as well as the kinds of materials which will be most appropriate.
- Decide on approaches for providing information on the SDM.**
 Numerous approaches can be considered for information to the target audience. They include print materials for women and couples in the clinic or community, group information sessions in the clinic or community, videos for waiting rooms, posters for the clinic or community, street theater, and radio or TV. The determination of the best approach comes from knowing the characteristics of the population to be reached as well as knowing the best ways to inform these groups.
- Assess existing SDM materials and consider adapting them for informational and educational activities, as appropriate.**
 A wide variety of materials on the SDM have been developed in different languages. Most of these materials are appropriate for both literate and low-literacy populations, can be reproduced very inexpensively and are available in print and electronically. Program planners may be able to use these materials "as is" or they may need to adapt them to meet their specific programmatic needs.
- Determine how best to include information on the SDM in existing counseling and educational materials for providers and clients.**
 SDM can be added to an organization's existing materials for family planning counseling that address all methods. Sometimes adaptations of SDM-specific provider job aids and materials will be needed. If it may not be feasible to incorporate SDM into all existing materials immediately, they should be incorporated as materials, protocols and guidelines are revised, updated and reprinted.