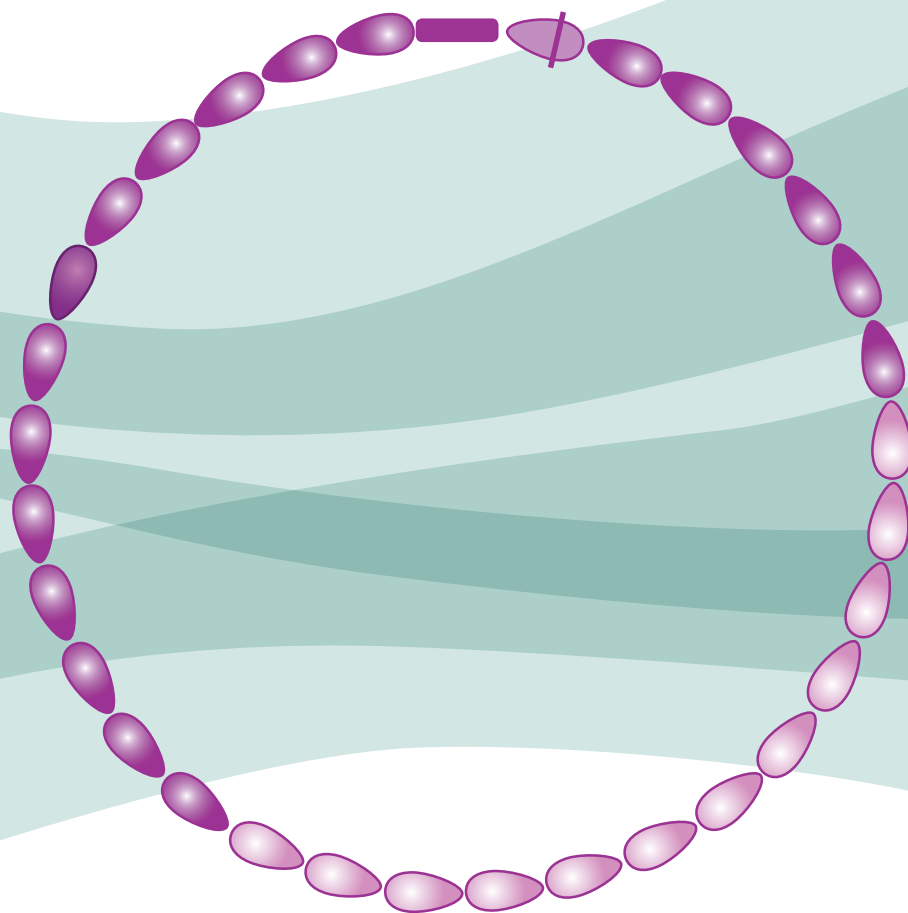


CycleBeads[®] Integration Guide

A Toolkit for Family Planning Programs

www.CycleBeadsToolkit.com



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CycleBeads® Integration Guide

A Toolkit for Family Planning Programs

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First Edition

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Prologue:

An open letter to innovators, trailblazers, and champions of choice

Dear innovators, trailblazers, and champions of choice:

This guide represents the combined efforts of a committed group of family planning professionals including managers, providers and counselors from across the country. These individuals hold the concept of informed choice close to their heart and mean it when they say, “The more options, the better.”

Their achievement has been to integrate the Standard Days Method® (SDM) – a modern, scientifically-tested fertility awareness-based method, commonly used with a visual tool called CycleBeads® – into family planning services that provide an array of contraceptive choices.

“I need to be able to offer every method possible.”
-Clinician, California

In so doing, they demonstrated a commitment to carry out the U.S. Office of Family Planning’s mandate to provide the full range of methods to their clients.

A 21st century method

SDM, which we’ll refer to as CycleBeads for convenience’s sake, is not your mother’s natural family planning method. Although it’s based on identifying the fertile days in a woman’s menstrual cycle, please do not confuse it with the rhythm method. Based on science, CycleBeads is simple, easy to teach, easy to learn, and 95% effective when used correctly.

“I think having this type of non-hormonal method available is really important.”
-Clinician, Massachusetts

CycleBeads are currently being offered in NGO, government, and private sector programs in over 30 countries worldwide. The method also has been gaining traction steadily in the U.S., and for good reason. Recent experience in the U.S. as part of research sponsored by the Department of Health and Human Services’ Office of Population Affairs (OPA) has demonstrated that many women would like to use a natural method, that clients who chose CycleBeads can use it successfully and satisfactorily, and that providers find the method easy to integrate into services.

An idea worth spreading

All women and couples should have access to this simple, low-cost, effective method. It appeals to those who seek a non-hormonal option and who meet the eligibility criteria for method use. Beyond that, it is an empowerment tool that teaches women and girls about their fertility.

Through years of operations research, we've learned that programs adding CycleBeads to their family planning and reproductive health services benefit by:

- Making available a natural option for those who prefer not to use hormonal methods
- Addressing unmet need, particularly among hard-to-reach and under-served populations
- Attracting new family planning users
- Offering an economical method that does not require resupply or clinical intervention
- Increasing the participation of men in family planning

In this spirit, we present this toolkit to you – program directors, health center managers, family planning coordinators, or similarly engaged professionals – to assist you to incorporate CycleBeads into your services.

It's based on real-world experiences and lessons learned from OPA-funded SDM introduction research in California and Massachusetts, as well as anecdotal evidence from clinics around the country.

Please note: *This guide is not intended to replace training on SDM, which is available from qualified trainers and online: www.irh.org/SDM_Training. It is simply meant to guide you through the integration process and highlight tips and strategies that health centers have found to be helpful.*

We're here to help

Did you think we'd simply send this to you and wish you the best? Not so. The process of integrating any new method can be challenging. While this toolkit was designed to help you anticipate challenges and facilitate a smooth integration process, nothing can take the place of in-person training and technical assistance.

"We've seen that a lot of 30 year olds are interested in a new method. They've been on the pill for years and now want to try something natural."

~ Clinician, Montana

So, if you would like to request training or technical assistance in integrating this method into your services, please contact Georgetown University's Institute for Reproductive Health (irhinfo@georgetown.edu) or your regional Title X Training Center. If you'd simply like to learn more before moving forward, peruse the "Method Basics" section (p. 5) or dive into the many excellent sources listed on our resources page (p. 23).

And don't be a stranger. We encourage you to stay connected and receive updates on the latest CycleBeads news by signing up for IRH's e-newsletter or through:

Facebook: Institute for Reproductive Health at Georgetown University
www.facebook.com/IRH.Georgetown

Twitter: @IRH_GU http://twitter.com/IRH_GU

YouTube: IRHgeorgetown www.youtube.com/IRHgeorgetown

You can also find social media links at **www.CycleBeads.com**.

Take action now

Peruse this guide and share it with your colleagues. If you haven't already, we hope that you'll join the ever-increasing number of family planning professionals who offer this simple, natural and effective method.

Yours in choice, empowerment, and freedom,

Georgetown University's Institute for Reproductive Health,
Washington, DC

Cardea Services (formerly The Center for Health Training),
Oakland, CA

JSI Research and Training Institute,
Boston, MA

1 Method basics:

A little about CycleBeads® and the Standard Days Method®

We thought we'd start with a brief introduction to what CycleBeads® and the Standard Days Method® (SDM) are all about. Perhaps you already know all this and can rattle off what the colors of the beads signify in your sleep. If so, feel free to skip this section! But if you'd like a little reminder, read on.

What is the Standard Days Method, and what are CycleBeads?

SDM is a simple, fertility awareness-based method of family planning that identifies a fixed set of days in each menstrual cycle when a woman can get pregnant if she has unprotected intercourse. SDM is used with CycleBeads, the visual tool that helps a woman determine the days when she is most likely to be fertile. If the woman does not want to get pregnant, she and her partner avoid unprotected intercourse on days 8 through 19 of her cycle.

Who can use CycleBeads?

To use CycleBeads, a woman should meet the following two criteria:

- 1) Her menstrual cycles should be between 26 and 32 days long. In other words, her periods should come about once a month.
- 2) She and her partner should be able to avoid unprotected intercourse on the days they might get pregnant.

As with other family planning methods except condoms, using CycleBeads does not protect against STIs including HIV.

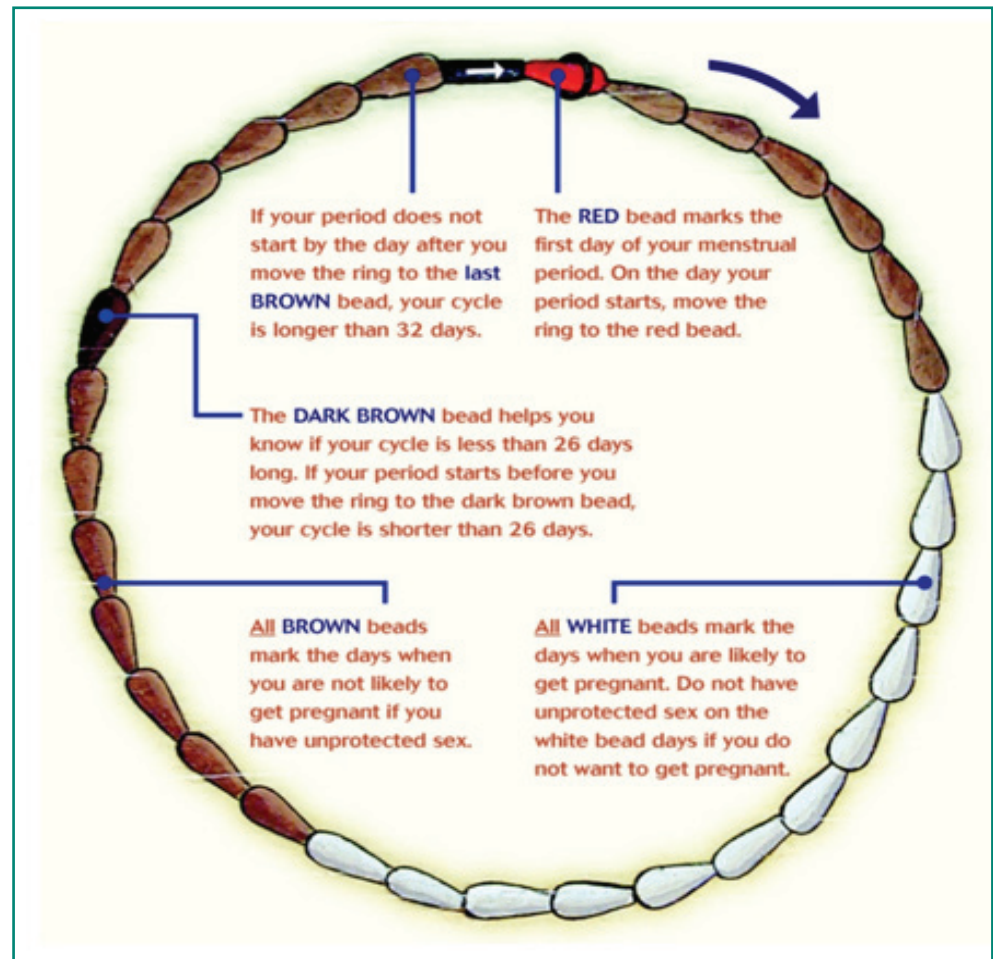
How do CycleBeads work?

CycleBeads are a visual tool that helps a woman use SDM to keep track of the days of her cycle and know when she is likely to get pregnant if she has unprotected intercourse. CycleBeads are a string of color-coded beads, with each bead representing a day of a woman's menstrual cycle.

On each set of CycleBeads, there is a black rubber ring that the woman moves over one bead each day. When the woman starts her period, she puts the ring on the first bead, which is red. She also marks the first day of her period on a calendar, in case she wants to check to see if she remembered to move the ring. She continues moving the ring one bead each day of her cycle.

- When the ring is on a brown bead, she is on a day in her cycle when she can have intercourse **without** getting pregnant.
- When she is in on a day represented by the white beads (days 8-19), she may be fertile and **could get pregnant** if she has unprotected intercourse.

CycleBeads can also be used to monitor cycle length. Since CycleBeads have 32 beads, the woman knows that if her period doesn't come by the day after the last bead, she's had a cycle that's out of range (too long). Similarly, if she gets her period before reaching a specially-marked dark brown bead, she knows she's had a cycle that's less than 26 days (too short). If a woman's cycle is longer than 32 days or shorter than 26 days more than once in a year, she should not use CycleBeads.



Can women with low literacy use CycleBeads?

Absolutely. There is no need for them to be able to read in order to use it. In fact, that is one of the reasons CycleBeads are so helpful. They provide a visual aid for women, regardless of how literate they are. College-educated women and non-readers alike are using CycleBeads.

How are CycleBeads different from the rhythm method?

Both SDM (the method behind CycleBeads) and the rhythm method are considered calendar-based methods, but that is where the similarities end. The rhythm method requires having exact information about the last six or more menstrual cycles and making arithmetical calculations – adding and subtracting – every month to figure out which days in the current cycle a woman is likely to get pregnant. The rhythm method has never actually been

tested in a well-designed efficacy study. SDM is simple – it does not involve any calculations, and it is the same every cycle. It has been tested in a well-designed efficacy trial, with good results (see Section 6).

How can I find more information on CycleBeads?

More information on CycleBeads can be found throughout this toolkit. You can find lots more information on the website of Georgetown University's Institute for Reproductive Health, at **www.irh.org**, including a free online training at **www.irh.org/SDM_Training**. You can also find more information on **www.CycleBeads.com**. Please see Section 6 of this guide for a comprehensive list of resources.

2 Making it happen:

Steps for Integration of CycleBeads

Sustainable introduction of a new birth control method into your services requires more than just product training. We've identified Five Key Steps that make complete integration possible at all levels:

1. Creating a supportive **environment**
2. **Training** staff on screening and counseling clients
3. Integrating CycleBeads into all relevant **systems**
4. **Procuring and stocking** CycleBeads
5. Engaging in **outreach efforts**

These steps are described below. Section 3 of this guide enables you to create an action plan for each step that is tailored to your organization.

Step One: **Creating a supportive environment to facilitate sustainability**

Just as you would build a house on a solid foundation, building a solid foundation of support for method introduction will help ensure that initial introduction efforts are successful and sustainable. We recommend the following:

- Assessing, even through informal means, staff's interest and comfort in providing this method and addressing any concerns they may have
- Ensuring that organizational leadership is supportive of the decision to integrate the method
- Communicating within the organization and key community partners about the method and plans for integration
- Assigning one staff person to lead the CycleBeads integration process
- Orienting staff to new processes. Keep your staff in the loop and address any questions or concerns in a timely and transparent fashion.

Tools you can use:

- Informational brief about SDM and CycleBeads
English: <http://bit.ly/CBInfoEng> Spanish: <http://bit.ly/CBInfoSpan>

Step Two: **Training staff on screening and counseling clients**

Training staff is a necessary step to offer CycleBeads, just like any new method being integrated into a health center's services. CycleBeads can be offered by clinical providers and just as easily by medical assistants, counselors, or outreach workers.

Initial training on how to offer CycleBeads can typically be given in a two-hour session. In addition to explaining how to teach the method, it is important to devote plenty of time during training to ensure staff are well versed in the eligibility criteria for the method and can screen clients accordingly. Depending on time availability, an additional hour or so may be added to:

- Review CycleBeads-related client materials that will be used by the health center
- Discuss in-reach and out-reach strategies to let clients know about the availability of this new method
- Review any “systems” issues pertaining to CycleBeads integration such as documentation, billing, etc.

You’ll need to make sure that any new staff are trained upon joining your agency. An online training module: www.irh.org/SDM_Training is available when in-person training is not possible.

Refresher trainings may be needed to maintain a high quality of services, as with any other contraceptive option. Organizations that offer CycleBeads should regularly include the method in on-going training.

Ask your regional training center for training on this method or an experienced in-house trainer who has taken the online training.

Tools you can use:

- Fact sheets and brochures for clients
English: <http://bit.ly/ClientBrochureE1>, <http://bit.ly/ClientBrochureE2>
Spanish: <http://bit.ly/ClientBrochureS1>, <http://bit.ly/ClientBrochureS2>
- Job aid for providers: <http://bit.ly/jobaid>
- Training and orientation PowerPoint: www.CycleBeadsToolkit.com
- Links to training materials for download: www.CycleBeadsToolkit.com
- Videos for instant viewing: <http://bit.ly/CBVideos>

Step Three: Integrating CycleBeads into all relevant systems

Sometimes we can get so focused on training that we tend to forget the rest. But the only way to ensure that services are sustainable is to integrate them into all the health center systems. Obviously, the method should be included in family planning counseling sessions as an option and as part of informational materials available for clients. Here are other systems to consider:

- **Clinic flow:** Your agency should determine how a CycleBeads user will flow through the health center and the roles and responsibilities of each staff member vis-à-vis CycleBeads service provision. How will a potential user learn about CycleBeads? Who will do the counseling? Remember, a physical exam is not required to use CycleBeads.
- **Supervision:** Once staff have been trained and start offering the method, supervisors can play an important role in monitoring and supporting staff

in offering the method correctly.

- **Reporting:** Programs need to collect routine data on CycleBeads to monitor services and acceptability, as they do with other methods. Remember, “If you don’t measure it, you can’t manage it.” Consider if it makes sense for your health center to group CycleBeads users with other “FAM/NFP” users, or if any separate forms or categories are required.
- **Billing:** Decide how to charge for a CycleBeads visit. Staff should be informed of how to code for a CycleBeads user on billing forms and any other reporting forms. Reimbursement for counseling and/or CycleBeads varies from state to state, although most carriers will reimburse for counseling.
- **Follow up:** Just because CycleBeads users don’t need to return to the health center for resupply doesn’t mean you can’t follow up with them. CycleBeads users, just as the rest of your patients, should be encouraged to contact the health center if they have questions or concerns; they will need routine generalized check-ups; and they may need to return for condom supplies. They also should be counseled on the use of emergency contraception if they have unprotected sex on a fertile day.

Tools you can use:

- Sample counseling protocol: <http://bit.ly/CBProtocol>
- Sample chart documentation form: <http://bit.ly/ChartCB>

Step Four: Procuring and Stocking CycleBeads

Sure, we could have put this bit about CycleBeads procurement under Step Three. It certainly falls under systems in that you will need to integrate the method into your procurement and logistical systems. However, we’ve given it a special section because of another phrase that it is particularly relevant to family planning: “No product, no program.”

The organization will need to procure CycleBeads and ensure adequate stocks are available at each service delivery point. CycleBeads are available from Cycle Technologies (www.cyclebeads.com) at retail price for individual purchase as well as discounted for bulk orders.

To order CycleBeads for your health center, contact Cycle Technologies at providers@cyclebeads.com or toll free at **1-877-292-5399**. Discounted pricing is available for all Title X programs. Although CycleBeads are not yet covered by many insurance plans, this low cost family planning tool can be purchased with donor funding or programs can recover the costs of this family planning tool by selling them.

For your clients who own a smartphone, there is an application called iCycleBeads that can enable them to use CycleBeads virtually through their mobile device. See page 21 for more information on iCycleBeads and the Android version.

Tools you can use:

- CycleBeads order form for non-profit organizations:
<http://bit.ly/OrderCB>
(for orders placed after 2011, contact providers@cyclebeads.com for updated pricing)

Step Five: Outreach

Call it outreach, call it marketing, call it what you will - the fact is that all the good work you've done to integrate the method won't do any good if people don't know it's available. Women and men need to know about CycleBeads and its availability at the health center in order for them to come in and ask for it. Providers at other health centers and other stakeholders also need to know about the method and where to obtain more information about it in order to make referrals to your health center. For this reason, spreading the word about the method is a crucial step.

Importantly, you'll not want to publicize CycleBeads in a vacuum. Make sure people know that it's available **as part of the menu of contraceptive choices you already offer**. Introducing CycleBeads could be a good opportunity for you to do some publicity around your health center in general, if appropriate.

We've found that putting up posters in waiting areas can encourage clients who are already at the clinic to ask about CycleBeads. But to reach potential clients, you'll need to take action outside the health center. Approaches for providing this information to the public include:

- Announcing it on your website, to your email list, and in your organizational newsletter
- Incorporating CycleBeads into educational presentations and community talks given by the organization
- Including CycleBeads information along with other methods as part of displays at health fairs and community events
- Placing information in public service advertisements, radio or TV programs, newspapers, and magazines
- Notifying other organizations in your community that you offer CycleBeads and that they are welcome to refer interested clients to your agency
- Displaying posters or flyers at public places in your community such as grocery stores and hair salons
- Reaching out to community groups such as mothers' groups and church groups that may not have been reached before
- Engaging community health promoters to spread the word about the method as part of their general family planning outreach efforts
- Utilizing social media sites such as Facebook and Twitter
- Ensuring that your health center is listed in the directory of health centers that offer CycleBeads at www.CycleBeads.com

Sure enough, your budget is likely to affect the type of outreach you will be able to do. So leverage your web presence and community connections to reach a broader audience. There is a lot that can be done on a small budget, so be creative! But whatever you do...don't forget this step.

Outreach materials including brochures, posters, and display boxes are included with every provider CycleBeads purchase, which can be used in the clinic or for community outreach. Additional tools you can use are listed and linked below.

Tools you can use:

- Sample press release: <http://bit.ly/PressReleaseCB>
- Sample news article in English: <http://bit.ly/NewsArticleCB>
 Spanish: http://bit.ly/NewsArticleCB_Sp
- Posters
 English: <http://bit.ly/PosterCB> Spanish: http://bit.ly/PosterCB_Sp
- Outreach cards
 English: <http://bit.ly/FlyerCB1> <http://bit.ly/FlyerCB2>
 Spanish: http://bit.ly/FlyerCB1_Sp http://bit.ly/FlyerCB2_Sp

The short list:

Key Characteristics of Integration

Here's a short list of key characteristics to assess at-a-glance if the steps needed to integrate CycleBeads into clinic systems have been done. We kept this short and sweet for you!

KEY Characteristics

- Lead manager/supervisor is in charge of the integration process
- Everyone is trained to talk to clients about this method
- CycleBeads information is incorporated into educational materials
- Billing systems are modified to include CycleBeads/SDM
- Procurement system includes CycleBeads

3 Dream, believe, plan:

Integration planning worksheet

This comprehensive checklist has been developed to walk you through the various considerations when integrating CycleBeads in detail. They correspond to the Five Key Steps described in Section 2. You can use it to plan the integration process.

1) Ensuring a supportive environment	Action plan
a) What action is required at the organizational and management level to support the introduction of CycleBeads? This may include board approval, sign off of key organizational leaders, etc.	
b) How will you assess the interest of your staff to incorporate the method? How will you address any questions or concerns they might have? (e.g., orientation at staff meeting, lunch-and-learn)	
c) How will the decision to incorporate CycleBeads be communicated throughout the organization?	
d) What linkages or ties to other public and private organizations does the organization have that might influence (positively or negatively) the organization's ability to provide CycleBeads? (e.g., community organizations, religious organizations) Consider any implications for your organization.	
2) Training staff	Action plan
a) What staff will receive training on CycleBeads? Describe the training needs by staff profile (e.g. counselors, nurses, physicians, administrative staff, community promoters).	
b) What type of training will be most appropriate for the introduction of CycleBeads? (e.g. 2-hour training, whole-staff training, online training)	
c) When will the training be conducted, and who will conduct it?	

<p>d) What type of follow-up training evaluation activities will be necessary to ensure that staff have the appropriate skills on-the job?</p>	
<p>e) Who will be responsible for overseeing the adaptations and implementation of the training for CycleBeads? Does someone at the site need to approve training plans?</p>	
<p>f) What additional steps will be required to ensure that future staff will be trained in CycleBeads upon joining the organization?</p>	
<p>3) Integrating CycleBeads into systems</p>	<p>Action plan</p>
<p>a) What role might the different staff roles play with regards to CycleBeads?</p>	
<p>b) How will CycleBeads fit into the counseling process?</p>	
<p>c) How will service delivery staff be informed of their role in integrating the CycleBeads?</p>	
<p>d) Will client-flow patterns need to be adapted to address the particular needs of CycleBeads clients? How?</p>	

<p>e) What type of job aids/support materials do counselors use for family planning? Consider how CycleBeads could be integrated into these existing materials.</p>	
<p>f) Consider the sample client materials provided in the Toolkit (Section 5). Decide which materials to use, or how to adapt them if needed.</p>	
<p>g) Who will be responsible for arranging printing or copying of the job aids and client materials and placing them in the health center(s)?</p>	
<p>h) Write and/or adapt the protocol for CycleBeads counseling (view a sample at http://bit.ly/CBProtocol).</p>	
<p>i) Will any additional steps be required to ensure excellent counseling for prospective users of CycleBeads, and effective follow-up of clients who choose to use this method?</p>	
<p>j) Does the organization currently charge for counseling services?. Will CycleBeads counseling be covered under the organizational fee structure? If so, how?</p>	
<p>k) How will CycleBeads counseling be accounted for on billing/reimbursement forms?</p>	

l) How will information on CycleBeads be incorporated into the MIS of the organization, so that user statistics may be tracked?	
4) Procuring and stocking CycleBeads	Action plan
a) What funds will be used to purchase CycleBeads? Who will be responsible for procurement?	
b) Who will be responsible for logistics of CycleBeads support materials and making sure each service delivery site is adequately stocked?	
5) Outreach	Action plan
a) Inform your agency’s website manager to include CycleBeads among the family planning method offerings listed on your website, and provide them with relevant information about CycleBeads to include on the website.	
b) Consider the marketing efforts your agency is currently engaging in (newsletter, email marketing, Facebook, etc). How/when will you include CycleBeads in those efforts?	
c) Does the agency have ongoing community outreach and education activities? How can CycleBeads be incorporated into them (e.g. male involvement, teen program, community talks, health fair displays)?	

<p>d) What type of materials might be useful for outreach? (See samples in Section 5.) What is the approval process/who needs to approve materials? Who will arrange for printing?</p>	
<p>e) Who will be responsible for ensuring integration into educational activities and community outreach?</p>	
<p>f) What additional steps are needed to revise or update educational activities and community outreach in support of quality CycleBeads services? Are informational materials given to community members through outreach? Describe any and all ways to get the word out. (See list on page 11 for ideas.)</p>	

4

Success secrets:

Tips from those who have been there, done that

In this section we're providing some extra advice on CycleBeads integration and counseling from our project partners who have integrated the method.

Tip #1: After you've been trained... don't forget to actually offer the method!

Sometimes staff are so used to their counseling routine that, although they have been trained on CycleBeads, they forget to actually mention it during a counseling session. During and following the integration process, managers and directors should discuss the CycleBeads integration process in staff meetings and other interactions to keep it on people's radar screens. Here are a few more tips:

- **Display CycleBeads** - Display a set of CycleBeads, along with the other methods, in the counseling rooms to help staff remember to offer them to interested clients – and so they are readily available for teaching purposes.
- **Display CycleBeads posters and pamphlets in the health center waiting areas and exam/counseling rooms** – This will prompt interested clients to ask about the method.
- Ensure that medical assistants, counselors, or health education staff are comfortable and proficient in counseling on CycleBeads. **Keep the CycleBeads job aid in counseling rooms as a handy reference.**

Tip #2: Screen, screen, screen...oh, and don't forget to screen.

You may find that even when you routinely offer CycleBeads as an option, a number of women who want to use them really shouldn't. This is because they:

- Have out-of-range cycles, and/or
- Cannot avoid unprotected sex on fertile days.

Out-of-range cycles and inability to avoid unprotected sex on fertile days are contraindications to using CycleBeads. Women in one or both of these circumstances shouldn't use CycleBeads as a birth control method because it's not going to work well for them.

Therefore, it is **very important** that you screen clients before offering the method. To assess her cycle length, all you need to ask is, "*Do you have your period about once a month?*" If she says yes, you can be reasonably sure that her cycle length is appropriate to use CycleBeads.

To see if she will be able to avoid unprotected sex on the fertile days, you can ask her questions like, “Do you discuss your birth control method with your partner?” and “Would both of you be able to avoid sex or use a condom during the fertile days?”

Helpful hint: Screen potential CycleBeads users BEFORE teaching them how to use the method. This will ensure you’re not spending time teaching someone how to use the method when it isn’t appropriate for them anyway.

Tip #3: Address biases among staff, if they exist.

While most people support offering CycleBeads as part of the full range of options, some staff may be skeptical at first. Here are a few examples of biases you might encounter, and how to address them:

Potential bias	Ways you can respond to it
<p>“I don’t think any of my patients will want to use CycleBeads.”</p>	<ul style="list-style-type: none"> • While the method is not for everyone, many clients are likely to want to use it if they are given accurate information. One health center in California had over 100 CycleBeads users during the first year they offered the method. Other health centers have reported increasing interest in natural methods, particularly among women who have used a hormonal method for a long time and are ready for a change to something natural. • While your current patients may be satisfied with their methods, what about the patients you’re not reaching? You may find that by offering this method, you’ll have new patients who want to use it. • Regardless of how many people use it, it is important to include a natural option among the method choices offered at a Title X health center. In fact, Title X mandates that natural methods be available. CycleBeads is one of the easiest and simplest effective natural methods available.
<p>“My client won’t be successful using CycleBeads because she will not be able to remember when she got her period or track her cycle.”</p>	<ul style="list-style-type: none"> • Many CycleBeads users report that being able to track their menstrual cycle is one of their favorite things about using the method. • A calendar is included in every set of CycleBeads, which many clients find useful. In addition, clients can use their cell phones to help them use the method. For example, they can note the first day of their period on their phones, and set a daily alarm to remind them to move the ring on their CycleBeads, as they might do for taking a pill. • A smartphone application like iCycleBeads can help clients track their cycles. Refer to the Technology Tip on page 21 for more information.

Potential bias	Ways you can respond to it
"I don't have time to counsel on this method."	<ul style="list-style-type: none"> • It only takes 10-15 minutes to teach a client to use CycleBeads. • Experience has shown that medical assistants, counselors, and health education staff can screen and teach women how to use CycleBeads. As with other non-prescription methods, if these staff are trained, they can provide CycleBeads counseling. • Research suggests that women are more likely to use a family planning method correctly and continuously if it is the method of their choice. This in turn results in greater effectiveness because many of the pregnancies in the U.S. are due to incorrect use and discontinuation.
"I'd only give this to a client as a last resort. I'd rather she use a more effective method."	<ul style="list-style-type: none"> • The Standard Days Method, on which CycleBeads are based, has been scientifically tested to be 95% effective with perfect use. The typical use rate is 88%, similar to that of condoms. • Many women prefer to use a natural method, for a variety of reasons, whether it be health-related, religious, or simply personal preference. Women who commit to using the method, and whose partners are willing to use it with them, can use it very effectively.
"It's unreasonable to expect people to not have sex for 12 days each month."	<ul style="list-style-type: none"> • Couples CAN have sex - many couples use condoms or other means of pregnancy prevention, or engage in sexual activity other than vaginal intercourse during these days. • Research has shown that people who use CycleBeads have sex the same number of times on average as non-CycleBeads users - they just time it differently.



A few *bonus* counseling tips

- **Emphasize the positive** - When teaching clients how to use CycleBeads, emphasize when you CAN have sex (i.e., the brown bead days) as opposed to when you can't have sex (or need to use a condom or other method).
- **The white bead days might mean more than just condoms** – Couples need to have a plan for how they'll handle the fertile "white bead" days. Most couples reportedly use **condoms** or **abstain** from vaginal intercourse on these days. Or, the couple may decide to use a different barrier method such as a diaphragm or to engage in sexual activity that does not lead to pregnancy. The right way to handle the fertile days is what works best for the couple.
- **Make emergency contraception available to CycleBeads clients** – Although we have found through focus groups that most women know about emergency contraception (EC), not all of them know how to get it. Health centers we've worked with have found it helpful to let CycleBeads clients know that EC is available at the health center if they should need it as a result of having unprotected sex on a fertile day.



Technology Tip

Consider how technology can help with method use - Some clients may want to integrate technology into their use of CycleBeads – for example, they may wish to record the first day of their period each month in an electronic calendar on their phone or computer. They also might want to set their cell phone alarm to help them remember to move the ring every day.

Clients with smartphones may choose to download the **iCycleBeads™** application and use that to track their cycles, rather than CycleBeads. This application is available for iPhones, iPad, iTouch, and Android phones, both in English and Spanish.

iCycleBeads™: <http://itunes.apple.com/us/app/icyclebeads/id401996963?mt=8>



Find more information about iCycleBeads and the Android version at www.cyclebeads.com.

"We've had a number of patients say that they've been looking for something that's easy to use and contains no hormones. We've also found that providing this method has opened up our Center to women who may not have ever thought to access Planned Parenthood before. Through their interest in CycleBeads, we've been able to link these women to additional services such as breast and cervical cancer screening."

– Health center manager, California

5

Download and copy:

Tools you can grab and use NOW

In this section we have provided some resources that have been used in a variety of organizations. These are provided as examples only. These tools have all been linked in Section 2 as part of the Five Key Steps for Integration. We are putting them all here in one place for your easy reference.

You are free to use these resources as is or adapt them to meet your needs. In some of the materials, there is a space to insert your organization's logo.

Please note that for staff training, you may wish to hire an experienced trainer. Please contact your regional Title X training center or the Institute for Reproductive Health (202-687-1392) if you would like training or are unsure how to identify a trainer.

All of the following materials are downloadable from www.CycleBeadsToolkit.com

Ensuring a supportive environment

- **Informational brief about CycleBeads/SDM:**
English: <http://bit.ly/CBInfoEng>
Spanish: <http://bit.ly/CBInfoSpan>

Training staff

- **Brochures for clients:**
Version 1–
English: <http://bit.ly/ClientBrochureE1>
Spanish: <http://bit.ly/ClientBrochureS1>
Version 2–
English: <http://bit.ly/ClientBrochureE2>
Spanish: <http://bit.ly/ClientBrochureS2>
- **Job aid for providers (English):** <http://bit.ly/jobaid>
- **Materials for 2-hour Contraceptive Technology Update for healthcare professionals** – Training Module, Participant Notebook, PowerPoint, Job Aids Packet: www.CycleBeadsToolkit.com
- **Videos for instant viewing:** <http://bit.ly/CBVideos>

Integration into systems

- Sample counseling protocol (English): <http://bit.ly/CBProtocol>
- Sample chart documentation form:
<http://bit.ly/ChartCB>

Procurement and stocking of CycleBeads

- CycleBeads order form for non-profit organizations (English):
<http://bit.ly/OrderCB>
(for orders placed after 2011, contact providers@cyclebeads.com
for updated pricing)

Outreach

- Outreach cards:
Version 1–
English: <http://bit.ly/FlyerCB1>
Spanish: http://bit.ly/FlyerCB1_Sp
Version 2–
English: <http://bit.ly/FlyerCB2>
Spanish: http://bit.ly/FlyerCB2_Sp
- Sample press release:
English <http://bit.ly/PressReleaseCB>
- Sample news article:
English: <http://bit.ly/NewsArticleCB>
Spanish: http://bit.ly/NewsArticleCB_Sp
- CycleBeads Posters:
English: <http://bit.ly/PosterCB>
Spanish: http://bit.ly/PosterCB_Sp

6 More for knowledge seekers:

The ultimate SDM and CycleBeads resource list

This section does not deal directly with CycleBeads integration, but we wanted to include this information for those looking for a greater understanding of the evidence behind this modern fertility awareness-based method and its research-to-practice trajectory.

Key Websites

- **Institute for Reproductive Health:** www.irh.org
- **CycleBeads:** www.cyclebeads.com
- **CycleBeads Toolkit downloadable resources:**
www.CycleBeadsToolkit.com
- **CycleBeads/SDM Online training:**
www.irh.org/SDM_Training
- **iCycleBeads™ application for iPhones:**
<http://itunes.apple.com/us/app/icyclebeads/id401996963?mt=8>
- **K4Health Standard Days Method Toolkit:**
www.k4health.org/toolkits/sdm

Social media

- **Facebook:**
 - **CycleBeads** www.facebook.com/pages/CycleBeads/174301922449
 - **Institute for Reproductive Health at Georgetown University** www.facebook.com/IRH.Georgetown
- **Twitter:**
 - **@IRH_GU** http://twitter.com/irh_gu
 - **@CycleBeads** <http://twitter.com/cyclebeads>
- **YouTube:**
 - **IRHgeorgetown** www.youtube.com/IRHgeorgetown
 - **CycleBeads** www.youtube.com/CycleBeads
- **Blog:**
 - **The Fertile Window** <http://fertilewindow.blogspot.com>

Selected peer-reviewed journal articles featuring SDM/CycleBeads

- **Scientific basis of the method:**
Arevalo M, Sinai I, Jennings V. A Fixed Formula to Define the Fertile Window of the Menstrual Cycle as the Basis of a Simple Method of Natural Family Planning. *Contraception* 1999; 60:357–360
- **Efficacy studies:**
Arevalo M, Jennings V, Sinai I. Efficacy of a new method of family planning: the Standard Days Method. *Contraception* 2002; 65:333–8.
- **Operations research:**
Gribble J, Lundgren R, Velasquez C, and E Anastasi. 2008. Being strategic about contraceptive introduction: the experience of the Standard Days Method. *Contraception*; 77(3): 147-154.
- **General information and experiences:**
Germano E., and V. Jennings. 2006. New approaches to fertility awareness-based methods: Incorporating the Standard Days and TwoDay Methods into practice. *Journal of Midwifery & Women's Health*: (51): 471-477, <http://bit.ly/NewApproachFAM>.

For these and more articles featuring SDM/CycleBeads, see http://bit.ly/SDM_Articles.

SDM Featured in Family Planning Guidance Documents

- Jennings, V., & Arevalo, M. Fertility Awareness-Based Methods. In Hatcher, R.A., Trussell, J., Nelson, A., Cates, W, Stewart, F., & Kowal, D. (Eds.), *Contraceptive Technology*, 19th Edition, pp. 343-349. New York: Ardent Media. 2009.
- U.S. Medical Eligibility Criteria for Contraceptive Use 2010 Appendix H (Fertility Awareness Based Methods)
www.cdc.gov/mmwr/preview/mmwrhtml/rr59e0528a9.htm
- WHO and Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs (CCP). *Family planning: a global handbook for providers*. 2007. www.fphandbook.org
- *Contraceptive Technology Update*. Add option of fertility awareness-based methods. 2006. <http://bit.ly/AddOptionFAM>.

U.S. Research Reports and Posters (selected)

- **Report:** Improving Family Planning Services for Women and Their Partners: A Couple Focused Approach. IRH, 2009. http://bit.ly/SDM_US
- **Poster:** Strategic Approach to Contraceptive Introduction: Offering CycleBeads/SDM in Title X Clinics. Presented at American Public Health Association Annual Meeting, Denver, 2010.

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Fax: 202-537-7450
Website: <http://www.irh.org>

