1. Why is family planning and contraception (FP/C) information important (for individuals, communities, countries, world)?

Karah Pedersen & Meredith Sparks (IntraHealth International): ‘FP/C influences all areas of global development and is crucial to sustainable and human rights-based development… Accurate, available information on family planning for a variety of audiences - including girls, adolescents, men, women, health workers, and policy makers - is a crucial aspect of supporting FP/C programs, policies and services.'

2. What is the current level of FP/C knowledge among adolescents, girls, women, and men?

Andre Shongo, DR Congo: Modern FP/C discourse interest is recent, about 20 years, the knowledge of concept and adolescents, girls, women, and men services sites, is variable according region, and within countries… women are informed more than men…in most culture, adults impede the programs; they make opposition according their assumption: FP/C pushes adolescents/ girls to prostitution.

3. What are the common myths and misconceptions related to FP/C?

A survey of HIFA members (highly educated health professionals and researchers) found that:
1. 1 in 4 respondents thought their friends and colleagues believe that 'most contraceptives also protect against sexually transmitted infections such as HIV'
2. 1 in 7 respondents thought their friends and colleagues believe that 'contraceptives are dangerous to a woman’s health'
3. 1 in 7 respondents thought their friends and colleagues believe that ‘contraceptives often cause long-term problems with fertility’

Myths and misconceptions about every method of FP/C are very common. See the long edit for examples.

4. What are the drivers and barriers to FP/C information?

**Religion**

Marg Docking, Uganda: For many years, we the health professionals, have blamed the religious faith leaders as the cause of the gap in the delivery of correct family planning information. My experiences as a Christian midwife in Uganda led me to close that gap by being respectful of culture religion and all faiths.

Abimbola Onaliran: The interrelatedness of culture, religion, and contraception cannot be overemphasized… Perhaps, we should:

1. Conduct more research to address unwanted side effects that influence acceptance: E.g. many women continue to complain of their inability to perform certain cultural or religious rites because of irregular menstruation caused the injectable contraceptive.
2. Review cultural and religious sensitivity of messages…
3. Role of religious leaders: Religious and traditional leaders play key roles in influencing acceptance of contraception. Programmes aiming to improve acceptance and adherence may consider harnessing the potentials of these key stakeholders.

Andre Shongo Diamba, DR Congo: I believe that we left the point A of our modern FP/C campaign, and we are in middle-path. I believe that there not strict religious barriers today…


http://www.ccih.org/cpt_resources/fp-advocacy-guide/

**FP education for children and youth**

Marg Docking: A sustainable simple solution to intergenerational poverty and acceptance of family planning needs to start early. Some of the barriers to understanding Family planning are simply embarrassment about all things to do with sexuality menstruation and reproduction. This conversation and shift of thinking needs to start very early. Amongst girls and boys, led by mature adults with excellent understanding themselves and clear communication skills. Our recent Wise choices or Life training led to hundreds of youth boys and girls learning about menstruation. They revealed stories of complete embarrassment through lack of toilets, personal hygiene facilities and sanitary pads kept them away from school. They had teachers claim that back ache during period is improved by being sexually active.

Clare Hanbury, UK: Every country needs a comprehensive strategy for sexual and reproductive health and HIV education for children and adolescents, in and out of school… In addition, educators need to employ participatory methods to engage and empower children and adolescents to help them understand themselves and their world.

Mamsallah Faal-Omisore, Nigeria: I would also like to add that there needs to be improved efforts to shift the narrative of family planning from being the responsibility of women to that of the family as whole. Empowering and enabling children to understand the cycle of life is central to this.
Radio and mass media
Andre Shongo, DR Congo: I need just to emphasize on the place of radio among mass media, its diffusion power in remote areas and the need of extending its distribution as an information communication and education tool in health, including modern FP/C.

5. Who is doing what, and where, to provide reliable FP/C information for adolescents, girls, women, and men? What works well and why?
The organisations that were highlighted include (see long edit for details):
- Children for Health: http://www.childrenforhealth.org/the-collection/
- K4Health: http://www.k4health.org
- The Evidence Project: http://evidenceproject.popcouncil.org
- Wise Choices for Life: www.wisechoicesforlife.org/kampala-conference

6. What can be done to improve the availability and use of FP/C information for adolescents, girls, women, and men?

There were no specific comments on this other than those made above in relation to Q1-5.