

Lecture -6

SEXUAL AND REPRODUCTIVE HEALTH (SRH)

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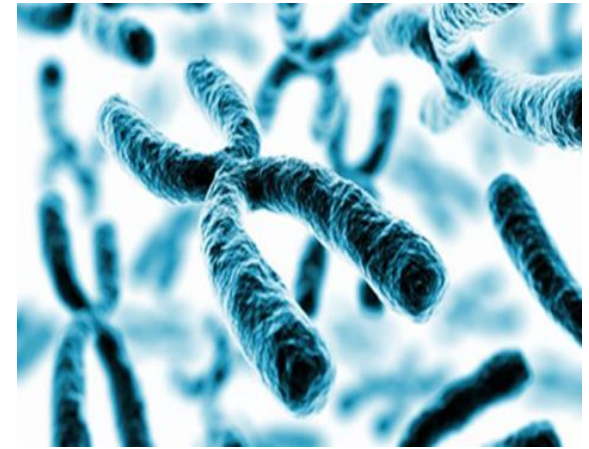
- Good sexual and reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system. It implies that people are able to have a satisfying and safe sex life, the capability to reproduce, and the freedom to decide if, when, and how often to do so



- To maintain one's sexual and reproductive health, people need access to accurate information and the safe, effective, affordable and acceptable contraception method of their choice. They must be informed and empowered to protect themselves from sexually transmitted infections

Sex

- In general use in many languages, the term sex is often used to mean “sexual activity”
- Genetic factors define the sex of an individual. Women have 46 chromosomes including two Xs and men have 46 including an X and a Y. The Y chromosome is dominant and carries the signal for the embryo to begin growing testes



Gender

- A person's gender is how they identify internally and how they express this externally. People may use clothing, appearances, and behaviors to express the gender that they identify with



- Gender expression and presentation involve aspects such as mannerisms, clothing styles, names, and pronoun choices, to name a few.
- Types :

✓ **Genderqueer**

A person who identifies as genderqueer has a gender identity or expression that is not the same as society's expectations for their assigned sex or assumed gender.

✓ **Cisgender**

A cisgender person identifies with the sex that they were assigned at birth.

✓ **Transgender**

This is an umbrella term that encompasses all people who experience and identify with a different gender than that which their assigned sex at birth would suggest.

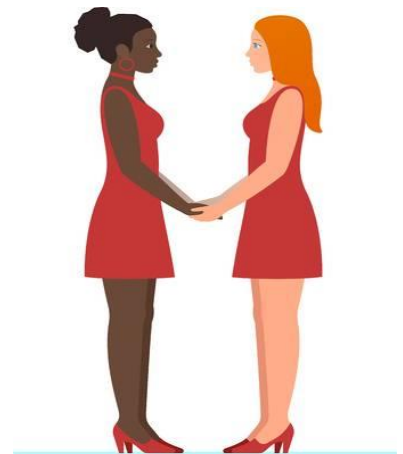
✓ **Bi gender**

A person who identifies as bigender has two genders

Sexuality

- Sexual orientation is about who you're attracted to and want to have relationships with. Sexual orientations include gay, lesbian, straight, bisexual, and asexual.
- Sexual orientation is about who you're attracted to and who you feel drawn to romantically, emotionally, and sexually. It's different than gender identity. Gender identity isn't about who you're attracted to, but about who you ARE — male, female, gender queer, etc.

- This means that being transgender (feeling like your assigned sex is very different from the gender you identify with) isn't the same thing as being gay, lesbian, or bisexual. Sexual orientation is about who you want to be with. Gender identity is about who you are.



Puberty

- Puberty is the period of sexual maturation and achievement of fertility.
- Puberty usually occurs in girls between the ages of 10 and 14 and between the ages of 12 and 16 in boys.
- Both genetic and environmental factors are involved in the timing of puberty.
- Body fat and/or body composition may play a role in regulating the onset of puberty.

Puberty facts

- Puberty is associated with the development of secondary sex characteristics and rapid growth
- Central precocious puberty (CPP) is puberty that occurs earlier than normal due to release of hormones from the hypothalamus of the brain
- Girls are more likely than boys to have precocious puberty
- Puberty may also be accompanied by emotional and mood changes
- Some medical conditions may worsen or first become apparent at puberty

Adolescent pregnancy

How does it affect?

- More likely to have severe complications during delivery
- More likely to die (both mother and baby)
- Not emotionally, physically (nutritionally) stable for childbearing and rearing
- Affects educational and employment opportunities country's economy
- Associated with higher levels of fertility increased population

Adolescent pregnancy: some facts

14 million +

adolescent girls give birth every year, mainly as a result of coerced sex and unwanted pregnancy

Source: International Center for Research on Women 2013

215,000

the number of maternal deaths per year that could be avoided through contraception use

Source: UNFPA 2004

60%

of adolescents in four sub-Saharan African countries did not know how to prevent pregnancy and more than 1/3 didn't know of a source for contraceptives

Source: UN 2012

40%

of women of childbearing age live in countries where abortion is banned, restricted or not accessible

Source: WHO 2003

215 million

women are not using contraception, even though they want to stop or delay having children

Source: International Center for Research on Women 2013

47,000

pregnant women die every year due to complications from unsafe abortions

Source: WHO 2003

31% of adolescents age 15-19 begin childbearing in Bangladesh

Contraception

- Contraception aims to control birth by using contraceptives
- Prevention of conception or fertilization of ovum during sexual intercourse is called contraception
- An ideal contraceptive should be user friendly, easily available, effective and reversible with no or least side effects



Contraception/Birth Control & Family Planning

- Contra (against) + (con)ception
- Aims to prevent conception (fertilization of ovum by sperm) during/following sexual intercourse
- Many methods are available (prescription vs. non-prescription)
- An ideal contraceptive should be user friendly, easily available and applicable, culturally acceptable, effective and reversible with no or least side effects
- Planning, provision and use of birth control is called family planning

- Making the right decision about contraception requires quite a bit of self-education and awareness. What form of contraception you choose should depend on your *general health, lifestyle, relationships and risks of contracting sexually transmitted infections.*

Broadly dividing there are 2 types of contraception

✓ Temporary method

✓ Permanent method

Temporary method

1. **Rhythm method** — This involves not using birth control and avoiding sex during fertile times of the month.
2. **Hormonal methods** — Includes the pill, vaginal ring or a hormone patch. They mimic natural hormones in a woman's body. They prevent ovulation and change the uterus and cervix so fertilization is much less likely to happen.
3. **Barrier methods** — Condoms, a diaphragm, sponge or cervical cap. The barriers stop sperm from reaching the egg.
4. **Injectable methods** — Progestin is injected every three months. Since the hormone dosage is less than other options, some patients prefer it. This method prevents conception similarly to other hormonal methods.

long-acting reversible contraceptive (LARC)

- 1. Intrauterine devices** — A T-shaped device is inserted into the uterus. The devices keep sperm from reaching the egg. There are two types of IUDs, hormonal and non-hormonal. Copper, non-hormone containing IUDs last approximately 10 years and hormone containing IUDs last 3 to 5 years.
- 2. Hormonal implants** — A match-stick sized plastic rod is implanted under the skin of the patient's upper arm. The rod releases a special contraceptive hormone. This delivery system has hormonal results similar to hormonal and injectable methods

Rhythm method

- I. Record the length of six to 12 of your menstrual cycles:** Using a calendar, write down the number of days in each menstrual cycle — counting from the first day of your period to the first day of your next period.
- II. Determine the length of your shortest menstrual cycle:** Subtract 18 from the total number of days in your shortest cycle. This number represents the first fertile day of your cycle. For example, if your shortest cycle is 26 days long, subtract 18 from 26 — which equals 8. In this example, the first day of your cycle is the first day of menstrual bleeding and the eighth day of your cycle is the first fertile day.

III. Determine the length of your longest menstrual

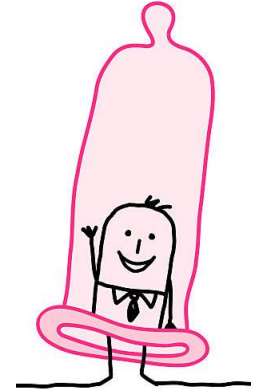
cycle: Subtract 11 from the total number of days in your longest cycle. This number represents the last fertile day of your cycle. For example, if your longest cycle is 32 days long, subtract 11 from 32 — which equals 21. In this example, the first day of your cycle is the first day of menstrual bleeding and the 21st day of your cycle is the last fertile day.

IV. Update your calculations every month: Continue recording the length of your menstrual cycles to make sure you're properly determining your fertile days.

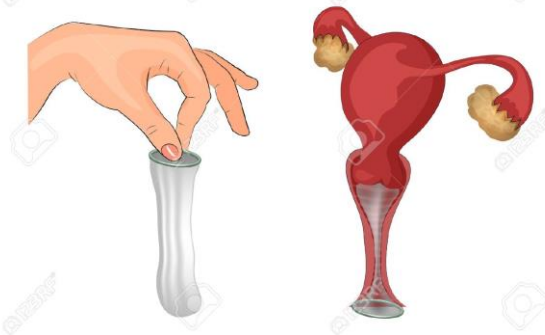
V. Plan sex carefully during fertile days: If you're hoping to avoid pregnancy, unprotected sex is off-limits during your fertile days — every month. On the other hand, if you're hoping to get pregnant, have sex regularly during your fertile days.

BARRIER METHODS

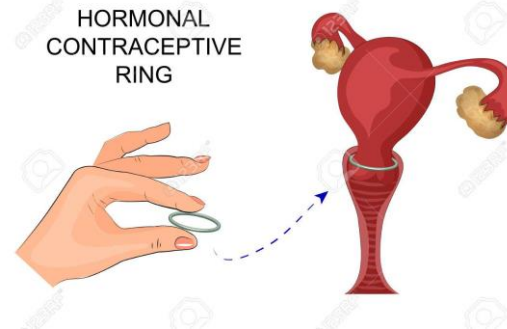
1. Male Condoms,
2. Female Condoms,
3. Vaginal Rings and
4. Diaphragms.



THE FEMALE CONDOM

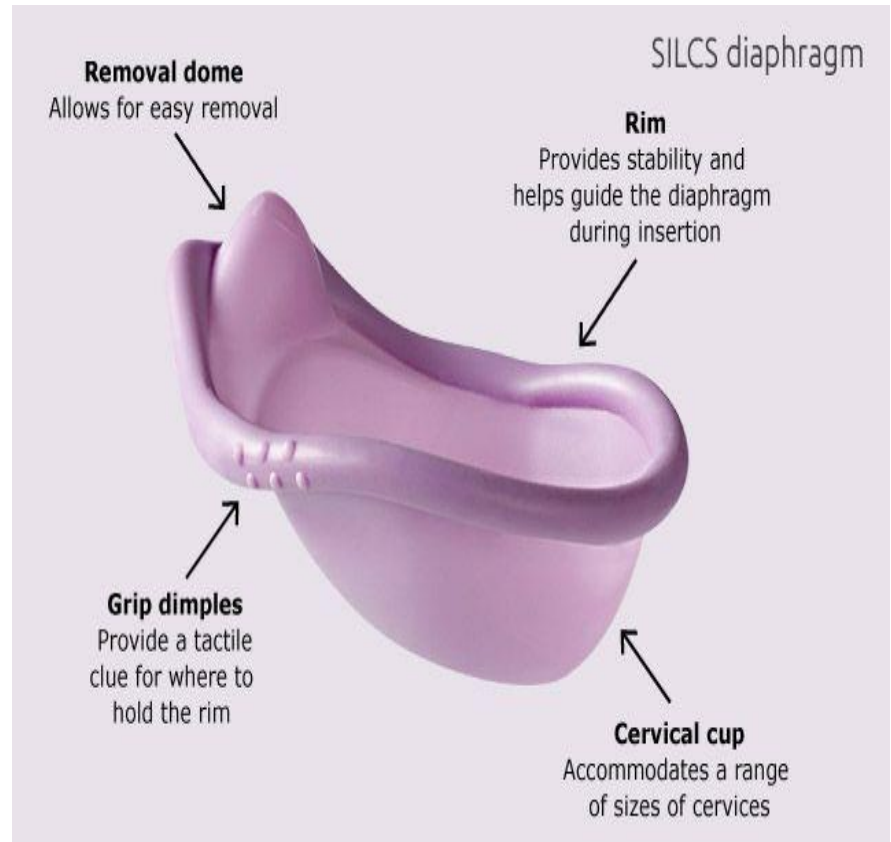
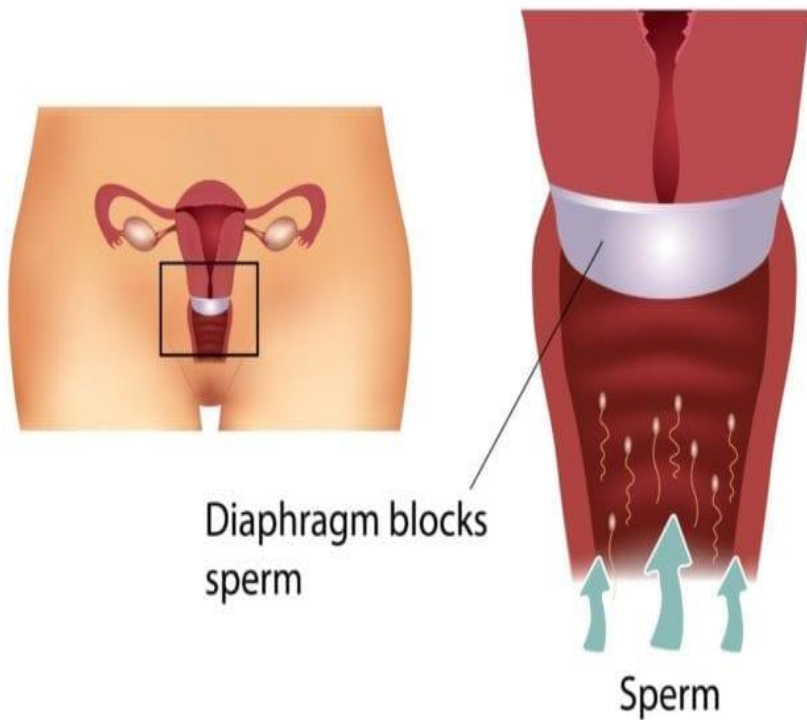


HORMONAL
CONTRACEPTIVE
RING



Diaphragm

Barrier method of birth control



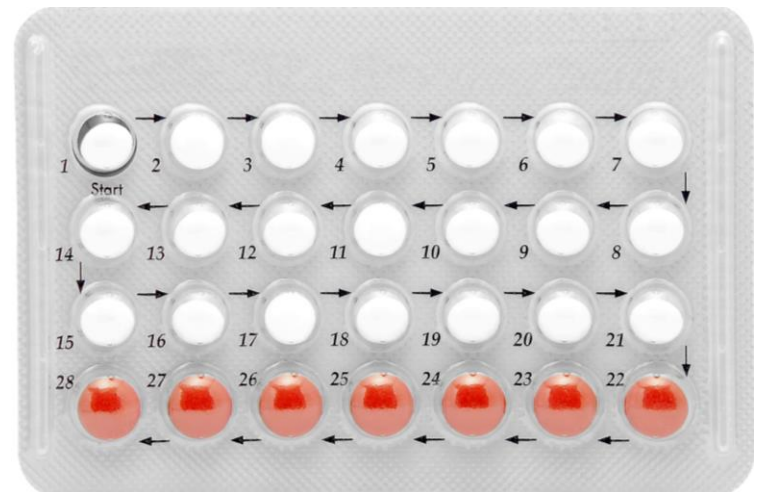
- Use of Condom is up to 98 percent effective and if used along with natural methods such as avoiding sex during fertile period, the effectiveness can increase further. Unless you are allergic to latex, this method does not have any side effects that other hormonal methods have such as headache, predisposing to breast cancer, heart attacks and brain stroke. The method is reversible. It protects you from sexually transmitted infections that your partner may have. No matter how “in love” you are, it is always better to protect yourself.

HORMONAL METHODS

1. Oral combined pills ('the pill'),
2. Mini-pills
3. Emergency pill
4. Depot injection,
5. Contraceptive patch,
6. Contraceptive implant,
7. Intrauterine device

ORAL COMBINED PILLS (OCPS)

- These contain Estrogen and progesterone hormones, which act by preventing ovulation. One have to take 21 pills for 21 days then stop and start taking the red pills. During this time there will be withdrawal bleeding. The red tablets have iron that makes up for the iron loss during menstruation



Facts

When to start: 1st days of menstruation

The pill may not be right for you if you

- ✓ Have **high blood pressure** that isn't well controlled
- ✓ Age **over 35** and **smoke**
- ✓ Have a history of **stroke, heart disease, circulation problems, or breast cancer**
- ✓ **Started breastfeeding** within the past month
- ✓ Have **migraine headaches** with aura
- ✓ Have **diabetes-related complications** like nephropathy, retinopathy, or neuropathy
- ✓ **Recently had surgery**
- ✓ Have **liver disease**
- ✓ Have **unexplained uterine bleeding**

'The pill' can cause temporary side effects at first, such as headaches, nausea, breast tenderness and mood swings, and if these do not go after a few months, it may help to change to a different pill.

MINIPILL (PROGESTERONE-ONLY PILL)

Progesterone (as Norgesterol) is the only component in this pill which must be taken everyday within a specific 3 hour time frame and has an effectiveness of 99 percent. It is suitable for use by women who cannot use combined pills (e.g. high blood pressure, previous blood clots), who are breastfeeding and nearing menopause

- Increases in your blood pressure, lighter, more frequent periods or periods stopping altogether are side effects and you may also get spotting between periods. This pill does not protect you against sexually transmitted infections (STIs) and you need to remember to take it at or around the same time every day. Remember certain types of antibiotics can make it less effective.

DEPOT OR INJECTION

- The injection is usually given by a medical practitioner or health worker every 8 weeks or every 12 weeks depending on the brand used.
- The advantages include its safety for breast feeding mothers, reducing heavy painful periods, giving protection from pelvic inflammatory disease (the mucus from the cervix may stop bacteria entering the womb) and may also give some protection against cancer of the womb.
- However, it will not protect from STIs, and results in side effects like headaches, nausea and weight gain, may lead to acne and osteoporosis. There may also be mood changes and some disruption of periods and you may gain weight.

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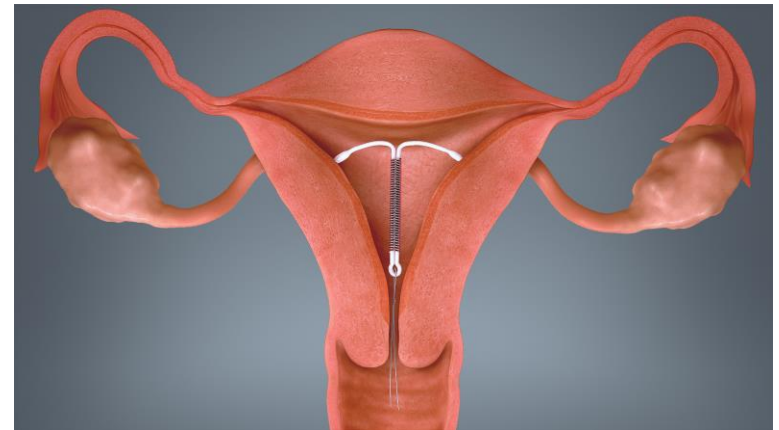
- CONTRACEPTIVE PATCHES

- Oestrogen and progesterone are the chemical components of the patch and it is greater than 99 percent effective.
- The first patch is applied on the *first day of the menstrual period*. Then a new patch is applied every *seven days for a total of three weeks*. The use of patches is stopped on the 4th week, and during that week there is withdrawal bleeding, like a period. However this may sometimes not happen. At the end of the week, the cycle is resumed again for another 4 weeks and continued.



INTRAUTERINE DEVICE

- More commonly known as copper T, this is a T-shaped *plastic device inserted into the womb by a trained professional*, at any time during your menstrual cycle and prevents pregnancy as long as it remains there. It is used for **maximum five years** and you do not have to stay at a hospital to insert or remove it.



Contraceptive implant

The contraceptive implant (Nexplanon) is a small flexible plastic rod that's placed under the skin in your upper arm by a doctor or nurse.

It releases the hormone progestogen into your bloodstream to prevent pregnancy and lasts for 3 years.



At a glance: the implant

- The implant is **more than 99% effective**.
- Once the implant is in place, you don't have to think about it again for 3 years.
- It can be useful for women who can't use contraception that contains oestrogen.
- It's very useful for women who find it difficult to remember to take a pill at the same time every day.

- The implant can be taken out if you have side effects.
- You can have it removed at any time, and your natural fertility will return very quickly.
- When it's first put in, you may feel some bruising, tenderness or swelling around the implant.
- Your periods may become irregular, lighter, heavier or longer

- A common side effect is that your periods stop (amenorrhoea). It's not harmful, but you may want to consider this before deciding to have an implant.
- Some medicines can make the implant less effective.
- It doesn't protect against sexually transmitted infections (STIs), so you may need to use condoms as well.

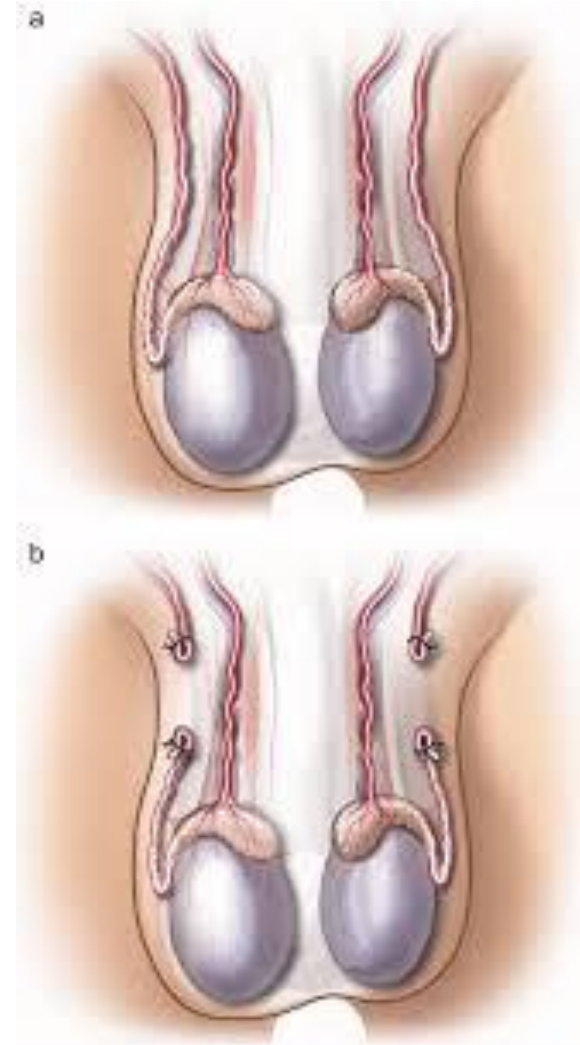
When it starts to work

- You can have the implant put in at any time during your menstrual cycle, as long as you're not pregnant.
- If the implant is fitted during the first 5 days of your menstrual cycle, you'll be immediately protected against becoming pregnant.

THE PERMANENT METHODS

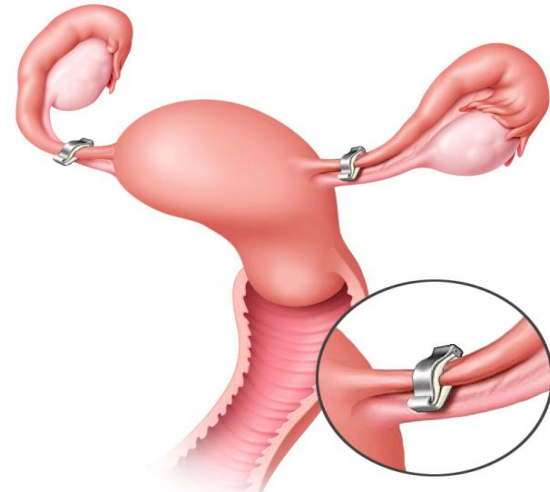
- VASECTOMY

A minor surgical procedure where the tubes that carry sperm from the testis may be cut or blocked so that they are no longer able to carry sperm. It is a simple procedure which takes around 30 minutes and patients can usually return home on the same day. This method is usually 100 percent effective after 20-30 ejaculations following surgery



TUBE LIGATION

- A surgical procedure by which the ducts which carry the eggs to the womb are occluded by clips, rings or more recently using prosthetic implants. They may also be cut and tied. It must be done by a qualified surgeon in a hospital or clinic. You may also ask your surgeon to ligate your tubes during your Caesarean section if you do not want more children.



Young people have a right to sexual and reproductive health care that meets their needs



Empower youth to protect their health with comprehensive sex education



Invest in high quality, youth-friendly health services



Combat stigma as a barrier to care

RTI's and STI's



What is STI

- According to WHO, “The sexually transmitted Infections (STIs) are a group of communicable diseases which are transmitted by sexual contact and caused by a wide range of bacterial, viral, protozoal, fungal and parasites.”
- It is an infection passed from person to person through intimate sexual contact. STIs are also called sexually transmitted diseases, or STDs.
- More than 1 million people acquire sexually transmitted infection (STI) every day.



- According to **WHO** estimates, **1 in 20 adolescents** worldwide acquires an **STD** each year.
- STDs deserve attention because they frequently go **undetected** and **untreated** and can result in serious **reproductive morbidity** and **mortality**.
- Extensive efforts devoted to **research** and **intervention** on HIV and AIDS, **very little attention** has been paid to other **STDs**.

Classification of STI

Bacterial	Viral	Fungal	Protozoal	Parasitic
Syphilis Gonorrhea Chancroid Chlamydia	Viral Hepatitis Hepatitis B Hepatitis C <ul style="list-style-type: none">▪ Herpes Simplex (HSV)▪ HIV/<i>AIDS</i>▪ HPV (<i>Human Papilloma Virus</i>)	Candidiasis	Trichomoniasis	Scabies

15-24 year olds account for half of all new STD Infections



Transmission of STI

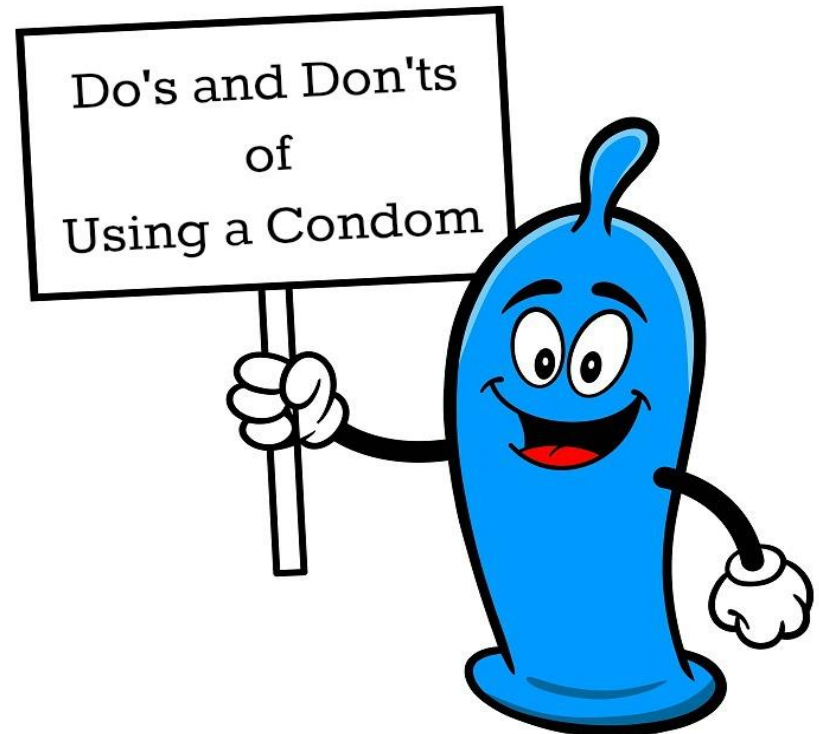
- **Sexual transmission** (genital-anal, genital-genital, oral-genital/anal)
- **Skin-to-skin contact** (i.e., kissing, non-penetrative sex, body rubbing)
- **Mixture of infectious body fluids** (blood, semen, vaginal secretions)
- **Sharing of needles** and other drug paraphernalia and needle stick injuries
- **Through breast milk**
- **From mother to child** during pregnancy and childbirth
 - **Infestations** (scabies and pubic lice) can also be transmitted through shared **clothing, bedding, linens** etc.

A person may have STDs/STIs if they have...

- An unusual or bad-smelling genital discharge
- Itching or painful genitals
- Sores or blisters on the genitals
- Pain during intercourse

High risk group

- **Commercial Sex Workers & Their Clients**
- Homo Sexual
- Frequent **Traveler** (e.g. bus driver, truck driver etc.)
- Drug Abuser
- Polygamy



How to Maintain Good Reproductive Health?

- Access to accurate information and **the safe, effective, affordable and acceptable contraception method** of individual's choice.
- Must be informed and empowered to protect from **sexually transmitted infections(STI)**.
- When decide to have children, women must have access to services that can help them have a **fit pregnancy, safe delivery and healthy** baby.

How to prevent STD's-

- ☐ Vaccination
- ☐ Screening
- ☐ Usage of Condom During Sex
- ☐ Avoid Casual Sex
- ☐ Health Education
- ☐ Safe Delivery of Baby
- ☐ Monogamy



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LGBT

- Any combination of letters attempting to represent all the identities in the queer community, this near-exhaustive one (but not exhaustive) represents:
 - Lesbian
 - Gay
 - Bisexual
 - Transgender
 - Transsexual





LGBT(Lesbian, Gay, Bysexual, Transgender rights in Bangladesh)

According to **Section 377** of the Bangladeshi Penal Code (law of the British colonial reign), "Whoever voluntarily has intercourse against the order of nature with any man, woman or animal, shall be punished with imprisonment for life, or with imprisonment of either description that is, hard labor or simple for a term which may extend to ten years, and shall also be liable to fine".

Gender identity/expression	No
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Discrimination protections	No
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○ Family rights:

Recognition of relationships	No
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Adoption	No
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Thank You!



