Tech Brief Principal Preparers: Victoria Jennings and Rebecka Lundgren, IRH

Standard Days Method: A Simple, Effective Natural Method

The Standard Days Method (SDM) is an effective new natural method of family planning developed through scientific analysis of the fertile time in the woman's menstrual cycle. With its simplicity, low supply cost, and attractiveness for couples not previously using contraception, more and more programs are including it among the options they offer.

What is the SDM? The SDM is based on the fact that there is a "fertile window" during the woman's menstrual cycle—several days before ovulation and a few hours after—when she can become pregnant. To prevent pregnancy, users avoid unprotected sex by using a condom or abstaining on cycle days 8–19 of the cycle—a formula based on computer analysis of 7,500 menstrual cycles.¹ An efficacy trial found that the SDM was more than 95% effective with correct use and more than 88% with typical use among women who reported regular recent cycles of 26–32 days.² This is similar to the efficacy of most other user-dependent methods.³ The SDM is appropriate for women who can avoid unprotected sex on fertile days and usually have cycles between 26 and 32 days long (approximately 80% of cycles are in this range).⁴ CycleBeads, a color-coded string of beads used with the SDM, represent the days of the cycle and help the woman track her cycle days, know which days she is fertile, and monitor her cycle lengths (see photo).

Main Positives: The SDM can be included in a wide variety of programs and offered by different levels of providers without significant additional resources. It has the potential to expand contraceptive prevalence by bringing new users to family planning.⁵ Because the SDM involves using condoms or not having sex on days 8–19 of the cycle, it necessarily involves men. This gives programs an opportunity to develop strategies for reaching men with a variety of reproductive health messages. The color-coded beads are a low-cost, one-time purchase⁶ and also can be used to teach fertility awareness to adolescents and others. The SDM can help couples achieve or avoid pregnancy.

CycleBeads help women use the SDM.

Main Negatives: Some women have cycles outside the 26–32 day range. For them the SDM will be less effective. Women who are breastfeeding or recently have used contraceptive injections need to wait a few cycles to begin using the SDM. Successful use requires male participation, which can be challenging. Efficacy is highly dependent on continuing correct use.

New Evidence:

- Most women can learn to use the SDM in a single counseling session of about 20–30 minutes.⁸ A follow-up session after one cycle of use is helpful but not essential.⁹
- Most women who choose the SDM have not used a modern family planning method before; others have been dissatisfied with other methods. Almost all women who choose the method do so because it is "natural" and does not have side effects. 10 Follow-up interviews with both current and previous users found high levels of satisfaction with the method among women and their partners. 11



- Women who start using the SDM and then find it is not appropriate for them (because of cycle length or personal preference) are very likely to switch to another effective method, thus creating an entry point for family planning.
- Programs report that SDM counseling presents an opportunity—and a comfortable context—to
 encourage and discuss condom use. Studies conducted in 6 countries found that more than half of
 people who use the SDM use condoms on fertile days.

Unjustified Barriers: Primary barriers are providers' perceptions that natural methods are ineffective, difficult, and time-consuming to teach, that few clients will choose them, and that women who otherwise would use other contraceptive options may choose the SDM instead. Some assume that the SDM requires abstinence during the fertile time. In fact, most programs offer it with condoms.¹² Provider bias can be overcome with training and experience. With appropriate information, education, and communication strategies, potential users can learn about the method and ask providers for additional information.

Program Ideas: The SDM can be incorporated into the existing menu of methods with relative ease. Experienced providers can be trained quickly—in 2–10 hours, depending on experience and education. The SDM can be offered either in clinics or community-based programs. It is low in cost, can facilitate clients' acceptance of another barrier method and poses little logistical burden since it does not require re-supply. Once a member of an organization has been trained, that person can use the training resources available to train colleagues or interested individuals from other organizations. In Peru, Guatemala, Rwanda, and the Philippines, the SDM is already making a significant contribution to expanding contraceptive choice and increasing prevalence.

Resources are available to train providers and help programs incorporate the SDM into their services. These include on-line training, training manuals, videos, CD-ROMs, examples of program experiences in several countries, and an implementation guide.

- ¹ M. Arevalo et al. "A fixed formula to define the fertile window of the menstrual cycle as the basis of a simple method of Natural Family Planning," Contraception 60 (1999); 357-60.
- ² M. Arevalo et al. "Efficacy of a new method of family planning: the Standard Days Method," Contraception 65 (2002) 333-338.
- ³ R. Hatcher, ed., et al. Contraceptive Technology, 18th edition, 2004.
- ⁴ M. Arevalo. 1999, op cit.
- ⁵ J. Gribble. "The Standard Days Method of Family Planning: A Response to Cairo," International Family Planning Perspectives 29 (2003).
- ⁶ J. Gribble, et al. "Mind the Gap: responding to the funding crisis in family planning," Journal of Family Planning and Reproductive Care 30 (2004); 155-157.
- ⁷ J. Cachan and R. Lundgren. "Reference Guide for Counseling Clients in the SDM," 2003.
- ⁸ M. Monroy. "Lessons Learned in Provision of the Standard Days Method," Proceedings from a workshop held in Teguicigalpa, Honduras, July 2003.
- ⁹ E. Pinto, et al. "Introducing the Standard Days Method in CEMOPLAF," Final Report, 2003.
- ¹⁰J. Gribble. 2003, op cit.
- ¹¹M. Monroy. op cit.
- ¹²J. Gribble. 2003, op cit.

Where to get more information: Resources for the SDM are available on the website for the Institute for Reproductive Health/Georgetown University at www.irh.org. For additional Global Health Technical Briefs, see www.maqweb.org.

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