



## RESPONDING TO ZIKA IN THE CONTEXT OF FAMILY PLANNING

Along with the [OPA Zika Toolkit for Healthcare Providers: Providing Family Planning Care for Non-Pregnant Women and Men of Reproductive Age in the Context of Zika](#), this document is meant to provide family planning providers with guidance and resources for developing a plan for responding to Zika in the context of family planning that addresses:

- Staff Training
- Reproductive Life Plan and Client-Centered Counseling
- Risk Assessment
- Referrals and Linkages to Care
- Pharmacy Stocking
- Client Education and Outreach

### STAFF TRAINING

Family planning providers will play an important role in helping women and men make informed decisions about pregnancy and childbirth in the context of Zika. As such, client-facing staff should complete initial and ongoing training on the Zika-related health needs of women and men of reproductive age.

Family planning providers should have policies and procedures in place that establish that all client-facing staff understand core information about Zika virus and its implications for women's and men's family planning needs and that clinical staff understand CDC clinical recommendations related to Zika.

Suggested resources for meeting goals and objectives:

- [FPNTC Zika Virus Resources](#), including the [OPA Zika Toolkit for Healthcare Providers: Providing Family Planning Care for Non-Pregnant Women and Men of Reproductive Age in the Context of Zika](#)
- [CDC Zika Resources for Healthcare Providers](#)
- [CDC Zika Training for Healthcare Providers](#), including the [Zika Virus: Information for Clinicians](#)
- [MMWR Zika Reports](#)

## REPRODUCTIVE LIFE PLAN AND CLIENT-CENTERED COUNSELING

In the context of Zika virus transmission, it is important for women and their partners to plan their pregnancies. Family planning providers should discuss reproductive life plans, including pregnancy intentions and timing of pregnancy with women of reproductive age. Family planning providers should ensure that women who want to delay or avoid pregnancy have access to safe and effective contraceptive methods that best meet their needs.

Family planning providers should have policies and procedures in place that establish that all clients are screened for their pregnancy desires and/or reproductive life plan. Screening should encompass the full range of potential desires/intentions and should include the possibility of changing desires/intentions.

Suggested resources for meeting goals and objectives:

- [CDC Clinical Guidance for Healthcare Providers Caring for Women of Reproductive Age](#)
- [MMWR Interim Guidance for Preconception Counseling and Prevention of Sexual Transmission of Zika Virus for Persons with Possible Zika Virus Exposure – United States, September 2016](#)
- CDC Preconception Counseling Guide for Men and Women Living in Areas with Zika, available in [English](#) and [Spanish](#)
- CDC Counseling Guide for Women and Men of Reproductive Age Who Are Considering Travel to Areas with Active Transmission of Zika Virus, available in [English](#) and [Spanish](#)
- [FPNTC Providing Quality Contraceptive Counseling & Education: A Toolkit for Training Staff](#)
- [FPNTC Birth Control Method Options Chart](#)

## RISK ASSESSMENT

All female and male clients of reproductive age should be screened for exposure to Zika virus and educated about the risks of infection during pregnancy. Family planning providers should conduct individualized risk assessment for Zika infection with consideration for whether client or partner(s) live in an area with active Zika transmission, have traveled to an endemic area or whether they plan to travel to an endemic area.

Suggested resources for meeting goals and objectives:

- [OPA Zika Toolkit for Healthcare Providers: Providing Family Planning Care for Non-Pregnant Women and Men of Reproductive Age in the Context of Zika](#), including Job Aids #2 and 3

## REFERRALS AND LINKAGES TO CARE

### ZIKA TESTING

CDC currently recommends that any person with potential exposure to Zika and who develops symptoms compatible with Zika should be tested for the purpose of establishing a diagnosis. CDC does not recommend testing of asymptomatic men or women for the purpose of establishing that they are not infected with Zika or at risk of sexually transmitting Zika.

Family planning providers should have policies and procedures in place that establish how to obtain Zika testing for a client.

Suggested resources for meeting goals and objectives:

- [CDC Advice for People Living in or Traveling to Brownsville, Texas](#)
- [CDC Guidance for Travel and Testing of Pregnant Women and Women of Reproductive Age for Zika Virus Infection Related to the Investigation for Local Mosquito-borne Zika Virus Transmission in Brownsville, Cameron County, Texas](#)
- [CDC Testing for Zika Virus](#)
- [CDC Algorithm for U.S. Testing of Symptomatic Individuals](#)
- [CDC Updated Interim Pregnancy Guidance Testing Algorithm](#)
- [Texas DSHS Chikungunya, Dengue, and Zika PCR and Serology Specimen Criteria guidance document](#)
- [Texas DSHS Contact Information for Local and Regional Health Departments](#)

## OPTIONS COUNSELING

Additional steps should be taken for clients who are at risk for Zika infection with a positive pregnancy test. These women can be informed that microcephaly can sometimes be diagnosed during an ultrasound, but it might not be detectable until late in the second or early in the third trimester of pregnancy.

Family planning providers should have policies and procedures in place that establish that clients with a positive pregnancy test will be provided with neutral, factual information and nondirective counseling and referral on request regarding options including: prenatal care and delivery; infant care or adoption; and pregnancy termination.

Suggested resources for meeting goals and objectives:

- [FPNTC Putting the QFP into Practice Series: Pregnancy Testing and Counseling](#)
- [FPNTC Exploring All Options: Pregnancy Counseling Without Bias](#)
- [NFPRHA Abortion Provider Referral List](#) (NOTE: This list is intended to be used within a health care setting to assist with referrals for abortion, and further distribution or alternative use is prohibited)

## PHARMACY STOCKING

Helping women who want to delay or avoid pregnancy during the Zika virus outbreak is a primary strategy to reduce Zika-related adverse pregnancy and birth outcomes, including microcephaly and severe fetal brain defects.

Family planning providers should have policies and procedures in place that establish that a broad range of methods are offered on a same-day, on-site basis, including long-acting reversible contraceptive methods (IUDs and implant), emergency contraception, and condoms.

Suggested resources for meeting goals and objectives:

- [Intrauterine Devices & Implants: A Guide to Reimbursement](#), including [Obtaining Supplies](#) and [Lower Cost Supplies](#)

## CLIENT EDUCATION AND OUTREACH

Because individuals not currently at risk for Zika can develop new exposures over time, Family planning providers should develop client education and outreach materials to ensure that all clients—whether or not they have a known risk for Zika—will receive basic information about strategies to prevent Zika transmission.

Suggested resources for meeting goals and objectives include:

- [OPA Zika Toolkit for Healthcare Providers: Providing Family Planning Care for Non-Pregnant Women and Men of Reproductive Age in the Context of Zika](#), including Educational Handouts for Clients and Outreach Materials
- [CDC Zika Virus Communication Resources](#), including [Infographics](#), [Print Resources](#), and [Toolkits](#)