Lactational Amenorrhea Method (LAM) Toolkit

The Lactational Amenorrhea Method (LAM) is a modern, temporary contraceptive method based on natural infertility resulting from certain patterns of breastfeeding. All postpartum women who meet the following three criteria can use LAM:

1. Menstrual bleeding has not resumed; AND
2. The infant is fully or nearly fully breastfed frequently, day and night; AND
3. The infant is under six months of age

This toolkit, developed by the LAM Interagency Working Group, is for health policy makers, program managers, service providers, and others who are interested in adding or improving existing LAM services, or who need accurate, evidence-based information about the method. Expanding access to LAM with high quality services helps fulfill women’s right to contraceptive choice and can facilitate use of other family planning methods during a critical time in a woman’s reproductive life, following the birth of a child.

Links to resources about Essential Knowledge; Advocacy and Policy; Training; Information, Education, and Communication Tools (IEC); Program Experiences; Monitoring and Evaluation (M & E); and Research are available.

Of particular interest is a link to the Most Frequently Asked Questions about the method from USAID, the Institute for Reproductive Health at Georgetown University, and Jhpiego. This document, under Essential Knowledge, explains whether a woman who is HIV infected can use LAM.

Information about program experiences from Egypt, Ethiopia, Guatemala, India, and Mali can be found under the Program Experiences section. If you have an experience to share about provision or introduction of LAM, we invite you to tell us about it through the feedback form, where you can also suggest new resources. To find out if a resource has already been included in this Toolkit, type the title in the search box. Currently, there are resources from 10 organizations and publishers in this Toolkit.

Go to the About link at the top of this page to find more detailed information about this and other K4Health Toolkits. What are K4Health Toolkits?
Purpose and Audiences of this Toolkit

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Publishers of Resources Included in this Toolkit

What are K4Health Toolkits?

K4Health Toolkits are electronic collections of carefully selected information resources on a particular topic for health policy makers, program managers, and service providers. They are based on a continuous publishing principle that allows them to evolve after publication to capture additional resources and to identify and fill remaining information gaps.

Purpose and audiences of this Toolkit

This toolkit was developed by the InterAgency LAM Working Group which began in 2007 with the goal of repositioning LAM as a viable family planning method for postpartum women and as a gateway to other modern methods, in order to provide a supportive environment in which women will use LAM and transition to another family planning method.

The toolkit provides evidence-based practices about LAM as well as guidance and tools to update, expand or develop LAM service provision programs. Expanding access to LAM with high quality services helps fulfill women’s right to contraceptive choice and can facilitate use of other family planning methods during a critical time in a woman’s reproductive lifetime - the postpartum period.

The toolkit is intended for use by:

- Policy makers and program managers who are interested in adding or improving existing LAM services
- Providers who are looking for tools to help their clients use LAM correctly and transition to other family planning methods
- Potential clients, teachers, and students who are interested in accurate information about LAM

Types of resources in this Toolkit

- Advocacy materials
- Training materials for community-based, facility-based, and MCH programs
- Client and provider tools, IEC materials
- Program case studies
- Monitoring and Evaluation tools

How can I suggest a resource to include in this Toolkit?
We invite you to contribute to evolving and enhancing this toolkit. If you have developed or use quality resources that you think should be included in the toolkit, please use the feedback form to suggest them. The toolkit collaborators will review and consider your suggestions.

How can I make a comment or give feedback about this Toolkit?

If you have comments about the toolkit, please share them through the feedback form. Your feedback will help to ensure the toolkit remains up-to-date and is continually improved. For example, you can share ideas about how you have used the toolkit in your work so that others can learn from and adapt your experiences.

Toolkit Collaborators

The following international organizations have selected the most up-to-date and relevant information related to LAM for inclusion in this Toolkit:

ACCESS-FP
AED/Africa's Health in 2010
BASICS
Care
Carolina Breastfeeding Institute, UNC
Chapel Hill
ESD Project
IntraHealth
Institute for Reproductive Health
IYCF
Jhpiego
Macro International/CSTS Plus
Population Council
USAID
FHI 360
Macro International
PATH -- MCH/NUTR
Save the Children
UNFPA
URC-CHS
World Vision

Publishers of resources included in this Toolkit

Resources selected for inclusion in this toolkit were published by the following organizations working throughout the world to promote evidence-based best practices and improve the delivery of health services.

ACCESS-FP
Health Communication Partnership
Health Services Support Project [HSSP]
This section of the LAM Toolkit contains essential knowledge about the method including briefs and answers to frequently asked questions.

LAM is defined in this Toolkit as a method that can effectively protect a woman from pregnancy if she meets ALL of the following three criteria:

- Her period has not returned since her baby was born
- She is breastfeeding only
- Her baby is less than six months old
As soon as the woman no longer meets one of these criteria, she should begin using another method.

Have a suggested resource or comment about this section? Share it through the feedback form.

Resources:

- **LAM Reference Guide**

  This evidence-based reference manual contains all of the basic technical/clinical content presented in the LAM workshop and the LAM training course. It also includes job aids to reinforce key aspects of high-quality LAM counseling, as well as a tool for continued self- and peer-assessment. The content, scope and easy-to-navigate format of the manual make it a key resource for participants?both during the workshop/course and when they return to the workplace.

- **LAM Frequently Asked Questions (FAQ)**

  These FAQs provide an overview of common questions concerning the Lactational Amenorrhea Method.

- **The Lactational Amenorrhea Method (LAM): A Postpartum Contraceptive Choice for Women Who Breastfeed**

  The purpose of this brief is to guide health care service providers in offering quality LAM services within their maternal and child health, reproductive health and family planning programs.

**Other Helpful Links**
Looking for more information on LAM or related areas? The LAM Toolkit aims to provide the most up-to-date and essential information on LAM, but the materials available are not an extensive list of all LAM products. For additional information on LAM or related areas, here is a selection of other helpful links.

**Resources:**

- **Healthy timing and spacing of pregnancy (HTSP) Toolkit**

  Healthy timing and spacing of pregnancy (HTSP) is an approach to family planning that helps women and families delay, space, or limit their pregnancies to achieve the healthiest outcomes for women, newborns, infants, and children. HTSP works within the context of free and informed contraceptive choice and takes into account fertility intentions and desired family size.
  This toolkit for policy makers, program managers, and service providers includes:
  - research papers that discuss the evidence for the benefits of HTSP
  - international policy guidance from organizations such as the World Health Organization, UNFPA, and USAID
  - training manuals and materials and job aids
  - client and public education materials
  - resources for advocating with policy makers and community members.

- **Postpartum Family Planning (PPFP) Toolkit**

  Family planning offered in the first year postpartum provides an opportunity to meet the needs of women who want to prevent unintended pregnancies or who want to delay having more children. Yet, globally, nearly 65% of women in their first postpartum year have an unmet need for family planning services.
  This toolkit provides a comprehensive collection of best practices and evidence-based tools and documents on postpartum family planning (PPFP) developed through the ACCESS-FP Program and continued under the MCHIP project. The toolkit will assist policymakers, program managers, trainers, and service providers to develop and implement effective service delivery approaches that address the family planning needs of the postpartum women they serve.
  Information is presented in the following categories:
  - Global Materials
Linkages Project

USAID funded the 10-year LINKAGES Project (1996-2006) to provide technical information, assistance, and training to organizations on breastfeeding, related complementary feeding and maternal dietary practices, and the lactational amenorrhea method - a modern postpartum method of contraception for women who breastfeed. LINKAGES supported six long-term, large-scale country programs, reaching populations from 1 million to 15 million. The project helped another 30 countries implement smaller scale community activities, adopt policy initiatives, strengthen the capacity of health providers and community health promoters, conduct behavioral assessments, and develop behavior change communications.

Advocacy & Policy

Up-to-date family planning and reproductive health (FP/RH) policies and guidelines can help policy makers, program managers, and health care providers provide counseling and contraceptives safely and effectively. The following includes the most recent guidance from international and national documents (some with LAM-specific sections) that can help stakeholders to review, update, and disseminate LAM-related national policies and guidelines.

Have a suggested resource or comment about this section? Please share through the feedback form.
Resources:

- **Consensus Statement on Rationale for Operationalizing LAM Criteria**

  This two-page statement outlines the simplified criteria for LAM as well as the operational definitions for each criterion. These messages are given in the context of promoting LAM as a gateway family planning method to ensure continuous protection for the woman during the postpartum period. This statement was developed by the Interagency LAM Working Group.

**PowerPoint Presentations**

Resources:

- **Lactational Amenorrhea Method (LAM), Exclusive Breastfeeding and the Transition To Other Family Planning Methods**

  This presentation was given at the USAID technical meeting on integration of maternal, newborn and child health and family planning on March 30, 2011. It provides a case for why LAM is well positioned to contribute to integration of nutrition and family planning services.
The documents presented in this section include a variety of job aids, curricula, and other training tools.

The tools are organized by type of provider - Family Planning and MNCH. For each of these providers, resources are further divided between facility-based and community-based tools.

Have a suggested resource or comment about this section? Please share through the feedback form.

**Top Resources**

**Resources:**

- **Contraceptive Technology Update (CTU) on Transition from LAM to Other Methods**

  Transition Contraceptive Technology Update (CTU) for LAM Counselors Learning Resource Package (LRP) is a companion to two other LRPs:

  1. Lactational Amenorrhea Method (LAM): A Learning Resource Package (LRP) for Family Planning Service Providers and Trainers
  2. Lactational Amenorrhea Method (LAM): A Learning Resource Package (LRP) for Maternal, Newborn, and Child Health Service Providers and Trainers

  The Transition LRP contains the teaching aids necessary to provide more in-depth information about the family planning methods to which LAM users can transition when they are no longer using LAM.
Other Resources

Resources:

- **LINKAGES Project LAM Module**

  This module contains technical and programmatic information gathered from a variety of projects and organizations around the world. The information is in formats you can use to educate yourself, advocate with others, and integrate LAM into your reproductive health and maternal and child health programs.

- **LAM Self Study Module**

  The purpose of this module is to familiarize providers of family planning with information on the Lactational Amenorrhea Method of contraception, including information about counseling on LAM. Depending upon your background and needs, you may decide to use some or all of the information or supplement the module with information relevant to your local situation. Overall, this learning module is expected to take approximately 35 minutes to complete.

IEC Tools

Correct LAM use depends on the accurate understanding of providers and clients. This section provides access to information, education
and communication (IEC) tools on LAM.

Top Resources

Resources:

- **Counseling Guide for Teaching Women How to Use LAM**

  Two-page job aid, been designed for clinic level providers to assist them in teaching breastfeeding women how to use LAM as a family planning method.

- **Client Education Card**

  Two-page client card, contains essential messages provided during counseling with graphics and text for lower-literacy women.

Provider Job Aids

Resources:

- **Cue Cards for Counseling Adults on Contraception**

  The set of cue cards is designed to help a range of community- and facility-based providers to counsel adults on their contraceptive options. The cue cards address: Implants, Male Sterilization, Female Sterilization, Intrauterine Device (IUD), Lactational Amenorrhea Method (LAM), DMPA (injectables), Combined Oral Contraceptives (COCs), Progestin-Only Pills (POPs), Standard Days Method (SDM), Male Condom, Female Condom, and Emergency Contraceptive Pills (ECPs). The provider can use the front side of the cards to give information about all available options and, after the client chooses a method, the provider turns to the back side to give specific instruction on use.

- **Comic book training tool (India)**
This comic book, developed in India, is a training tool to help community health workers provide the Lactational Amenorrhea Method (LAM) and the Standard Days Method (SDM).

- **CHW Postpartum Family Planning Counseling Flip Chart (Afghanistan)**

  This Counseling Flip Chart for community health workers in Afghanistan includes messages on LAM and the transition to other methods.

- **Provider Tools by Save the Children (Guinea)**

  These tools were developed by Save the Children (SC) for their child survival health program in Upper Guinea.  
  The LAM Counseling Card pictorially shows the three LAM criteria.  
  The Transition Counseling Card is used to help the provider counsel the postpartum woman on the transition to another family planning method once she does not meet one of the three LAM criteria.

- **Lactational Amenorrhea Method: Tools for Creating Choices**

  This package of materials contains communication tools and job aids to support women in choosing LAM.

**Client Cards**

**Resources:**

- **Bolivia LAM Client Card**

  This client card is given to LAM users in Bolivia to remind them how to use LAM effectively.
Guatemala LAM Client Card

This brochure is given to LAM users in Guatemala to remind them how to use LAM effectively.

- India LAM Brochure

This brochure is given to LAM users in India to remind them how to use LAM effectively.

Program Experiences

This section of the LAM Toolkit contains country experiences with LAM.

Have a suggested resource or comment about this section? Please share through the feedback form.

Country Experiences

Resources:

- Global: FAM Project Brief, The Lactational Amenorrhea Method (LAM): An important option for mothers and
infants

This FAM Project Brief provides a description of current LAM activities in three countries - India, Guatemala, and Mali - where IRH is working to expand family planning options through fertility awareness-based methods.

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**Egypt: Enhancing correct use of LAM and Postabortion use of Family Planning**

Researchers with the Population Council's FRONTIERS program helped the Egyptian government build its capacity to promote the correct use of the lactational amenorrhea method.

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**Ethiopia: LAM Success Stories**

This story portrays two Ethiopian women's experience with LAM and the support that lead to successful use.

**M&E**

This section of the LAM Toolkit contains tools for monitoring and evaluating LAM programs. You can also find guidance on ways to measure LAM use in a variety of settings.
Indicators

Resources:

- Measurement of LAM through Programs, Surveys and Research: Recommendations from the MIYCN/FP Integration Working Group

This document reflects recommendations put forth from the Maternal Infant Young Child Nutrition and Family Planning (MIYCN/FP) Integration Working Group (Working Group) on measurement of LAM through program monitoring (HMIS and/or other monitoring systems), surveys and research studies.

Monitoring and Supervision

Resources:

- Knowledge Improvement Tool (KIT)

The KIT can be used to evaluate provider competencies in LAM provision. It can be administered individually by a supervisor or trainer. The information collected identifies concepts that need reinforcement and allows for adjustments in trainings to help meet specific provider needs.

- LAM "Transition" Checklist for FP Service Providers

This tool can be used during the course (as in the counseling demonstration and practice...
session) and after the course? by the learner for self-assessment, by colleagues for peer assessment and/or by the trainer or supervisor for comprehensive skills assessment.

- **LAM Counseling Checklist for MNCH Service Providers**

  This tool can be used by the learner for self-assessment, by colleagues for peer assessment and/or by the trainer or supervisor for comprehensive skills assessment.

- **LAM Assessment Tool**

  Designed to help programs plan LAM integration into services, this tool can be used by program managers both to assess the conditions before LAM integration or as an evaluation tool after LAM integration has taken place.

**Research**

This section of the LAM Toolkit contains resources including peer reviewed journal articles, presentations and research reports on LAM.

Have a suggested resource or comment about this section? Please share through the feedback form.
Abstract: If used properly, the lactational amenorrhea method (LAM) can be a valuable family planning tool, particularly in low-income countries; however, the degree to which LAM is used correctly and characteristics associated with its use have not been well documented. We therefore sought to use nationally representative data from Niger, where fertility rates are high and women may have limited access to alternative contraceptive methods, to describe the proportion of women who use LAM correctly and the characteristics associated with LAM use. We utilized cross-sectional data from the 2006 Niger Demographic Health Survey. Our sample included all sexually active, non-pregnant, breastfeeding women using some form of contraception (N = 673, unweighted). We used weighted frequencies to describe the correct use of LAM and logistic regression models to describe women who chose LAM for contraception. Among our sample, 52% reported LAM as their primary method of contraception, but only 21% of the women who reported using LAM used it correctly. Women who reported using LAM were more likely to live in certain regions of the country, to have no formal education, and to have delivered their most recent baby at home. They were also less likely to have discussed family planning at a health facility or with their husband/partner in the past year. Results indicated that few women in Niger who reported using LAM used it correctly. Our findings reinforce the need to address this knowledge gap, especially given Niger’s high fertility rate, and may inform efforts to improve family planning in Niger and in other low-income countries.

LAM Bibliography

This LAM bibliography contains key articles on LAM including those on effectiveness of the method, policy, training, transition evidence and other evidence supporting LAM.
A multicenter study of the Lactational Amenorrhea Method (LAM) was carried out to test the acceptability and efficacy of the method. Additionally, the data are used to test new constructs for improvement of method criteria. A protocol was designed at the Institute for Reproductive Health (IRH), Department of Obstetrics and Gynecology, Georgetown University Medical Center, a World Health Organization (WHO) Collaborating Center, and was reviewed and modified in collaboration with the co-sponsors, the World Health Organization and the South to South Cooperation for Reproductive Health, and the principal investigators from each site.

Research Reports

Resources:

- **LAM and the Transition Barrier Analysis Sylhet, Bangladesh**

The purpose of the ?LAM and the Transition Barrier Analysis? was to gain further insight and explore the facilitators of and the barriers to the transition from the Lactational Amenorrhea Method to other modern family planning methods. The analysis was conducted within an operations research study, entitled the Healthy Fertility Study (HFS), which examined the integration of postpartum family planning services. The HFS is a collaboration between ACCESS-FP, the Johns Hopkins School of Public Health, the Bangladesh Ministry of Health and Family Welfare and Shimantik, a local Bangladeshi nongovernmental organization. This analysis shows that perception around return to fertility, concerns about side effects, and perceived lack of social support from husbands and mothers-in-law for using a method are key barriers in users? timely transition from LAM to another modern FP method.

- **Postpartum Fertility and Contraception: An Analysis of Findings from 17 Countries**

Postpartum fertility and contraception are generally not well-understood by policymakers, health service providers or women themselves. Making use of existing Demographic and Health Survey (DHS) data for women in the first year postpartum, descriptive country profiles
for the extended postpartum family planning (PPFP) period have been developed for 17 countries in which the ACCESS-FP program has worked since October 2005. These postpartum family planning profiles highlighted unmet need, short birth-to-birth intervals, timing of key factors related to fertility return, and the relation of family planning use and maternal health care, as well as method mix. These profiles soon demonstrated their usefulness by succinctly describing key issues and findings that have been used both in the initiation of program activities among stakeholder and in the development of provider and community training materials. This paper aggregates some of the most compelling findings from the country profiles. The objective of this paper is to provide a synthesis of the country findings as well as identify key patterns of behavior related to postpartum family planning.

- **Revitalizing Lactational Amenorrhea Method (LAM) services in Burkina Faso and Mali**

The goal of this project was to revitalize LAM, by making quality LAM services effectively available in more large-scale health programs in Burkina Faso and Mali through pilot studies which could provide information on which to base future LAM expansion.

- **Technical assistance for implementing best practices in the Asia and Near East region**

This report summarizes the technical assistance provided by the Population Council to build the national capacity of the training institutions in Egypt to promote LAM as postpartum contraception, and ultimately develop a national postpartum postabortion family planning program.

- **Promote LAM for Postpartum Family Planning and Birth Spacing**

This brief is a summary of a two-year operations research project led by Population Council’s FRONTIERS program beginning in 2000 to test an intervention to improve knowledge and use of LAM for birth spacing in Kazakhstan.

- **Promoting the Lactational Amenorrhea Method (LAM) in Jordan Increases Modern Contraception Use in the**
Extended Postpartum Period

From late 1998 through 2003, the MOH collaborated with The LINKAGES Project to provide LAM services in all Ministry of Health MCH centers. This final report assesses the impact of LAM on continued modern method use by surveying 3,183 women in 11 child health centers in and around Amman, Jordan.

• Promoting Healthy Timing and Spacing of Births in India through a Community-based Approach

A Population Council study in India tested a model to increase use of postpartum contraception, including LAM, among young pregnant women with a parity of 0 or 1 to expand the interval between pregnancies.

Source URL: https://www.k4health.org/toolkits/lam