

Smaller families

Bigger future

### What is Sterilization?

**What is female sterilization?**  
Tubal ligation (TL) or having the fallopian tubes or the permanent female surgical sterilization operation. It is a simple operation in which a surgeon blocks the fallopian tubes which carry the eggs from the ovaries to the uterus (womb). When the tubes are blocked, the newly formed sperm cannot reach the egg with which to fertilise the woman's egg. The egg pregnancy is prevented.



**Why does a woman choose voluntary sterilization?**

1. She and her partner do not want to use other methods of contraception.
2. She wants to enjoy sex without fear of unwanted pregnancy.
3. Further pregnancy carries a health risk to either mother or baby.

**Where can a woman go if she wants to be sterilised?**  
Ask at the local Health Centre for referral to the nearest surgery point, or ask your family doctor/gynaecologist. The operation is free of charge at every State Hospital in South Africa.

**Important!**  
We would like a guaranteed 100% effective, free after sterilisation there is a tiny risk of pregnancy but total exclusion is the nearest thing to 100% in the way of permanent contraception for women.

**Remember!**  
Sterilisation prevents pregnancy but not infection with Sexually Transmitted Diseases including HIV/AIDS. Therefore, if at risk use a condom!

**Think of your future. Have only the children you can afford.**

**How is the operation done?**  
The surgeon uses either an incision of least 2cm or two small incisions to prevent pain. A general anaesthetic which puts the patient to sleep. The tubes may be reached through one tiny hole in the tummy using an instrument like a telescope with a light on the end. Usually the tubes, rings or clips are applied which block the tubes on both sides. One or two self-absorbing stitches are used to close the skin. This is called laparoscopic sterilisation. Sometimes the surgeon will choose a third approach using a tube through one of the bigger holes - this is called mini-laparotomy. The tubes are then closed in the same way as the other two. This approach is commonly chosen if the woman is obese or has had previous abdominal surgery. If the operation is done using the third hole, the tubes are simply cut and tied. This and results are the same for both operations. The woman may go home the same day or may require an overnight stay.

**What is vasectomy?**  
It is the same operation as the permanent male surgical sterilisation operation. This is a simple procedure in which a doctor cuts and ties the vas deferens - the tubes which carry the sperm produced by the testicles to join with the fluid which together form the sperm into a specimen. Necessary sperm is made to enjoy making love without the fear of fertilisation.



**Why does a man choose vasectomy?**

1. He and his partner have all the children they want and wish for.
2. He and his partner do not want to use other methods of contraception.
3. He wants to enjoy sex without fear of unwanted pregnancy.
4. Further pregnancy carries a health risk to either mother or baby.
5. Vasectomy is a simple and simple operation than female sterilisation.

**How is vasectomy done?**

1. The surgeon inserts the vas (tube) in the scrotum (testis) between the testicles.
2. Local anaesthetic is injected under the skin to prevent pain.
3. When the area is numb, the vas is cut and a small piece is removed. The ends are then sealed together using a special method.
4. The incision can be closed by tying and sewing.
5. The operation is not effective immediately. It takes approximately 10 ejaculations to get rid of all the sperm stored in the tubes.

**Remember!**  
Vasectomy is considered to be permanent and irreversible so he must be absolutely sure.

**Important!**  
After the operation he should have someone to assist using some reliable form of contraception. A woman may still be pregnant shortly after the operation. He will be told whether it is safe to rely on the vasectomy for contraception. Vasectomy is taken early (one sperm is made a day). Do not rely on vasectomy until you are told it is safe. This can only be determined by waiting the full 10 weeks to be sure.

**Remember!**  
Sterilisation prevents pregnancy but not infection with Sexually Transmitted Diseases including HIV/AIDS. Therefore, if at risk use a condom!

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This poster is placed on a dark blue background (one can also use black) which provides good contrast and the pink and blue borders increase the contrast, drawing the eye into the informative text. The white headline lettering on the pink and blue paper also echoes the contrast. The decorative borders are simple squares, placed at an angle to form a diamond shape and circles, in alternating colours. Remember to use pieces of sellotape on the corners of the reverse side of the poster before you use Prestik to stick items down. This will avoid greasy marks which will spoil the look of your display.

# information

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## Graphic Designer

Our beautiful blue planet, Mother Earth, will soon be overburdened with excess population and we will reach a point of standing space only. Surely we want our children to live a comfortable life with all our resources intact and not depleted.

To this end the Association for Voluntary Sterilisation of South Africa (AVSSA) has produced some excellent promotion material for Sterilisation Week that runs from 24-28 July. (See **CL** Jan/Feb 2006 page 54.)

We have put together an example display which we hope will inspire you to give the posters, forwarded by the regional librarians, maximum impact in your libraries. The posters are large, so if you have a space problem they can be split into two separate displays. We suggest the information poster containing the details be placed where people can easily read about the facts. For example, a small table placed against a wall would be suitable for the boxes and brochures, with the poster placed above at eye level to maximise readability. The brochures should be available for people to take home to spread the information as widely as possible particularly to those who do not visit the library. If you deplete your supplies make sure you have photocopied a master from which to make more. Indicate with a small sign that brochures may be taken.

The other posters with photographic

images (below) should be close by so that there is continuity. To ensure this we have added a decorative border of squares and circles in blue and pink which are the colours of the brochures and are also used on the other display. These colours will help to link your displays. If you are in the fortunate position to have a large display area, you can have these displays side by side.

We chose the lettering sheet ABC 3 which you will also receive shortly. The typeface is clear, bold and legible which suits the serious subject. Follow the instructions in the article on page 43.

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AVSSA is a non-profit organisation founded in 1975 by a group of health professionals. In the context of today's smaller families many couples have all the children they

want before the mother is 30 and then face the necessity of taking contraceptive precautions for another 15-20 years. Sterilisation is one answer for these families. It is a simple operation for men and women and is done free of charge at many public sector hospitals.

AVSSA promotes sterilisation by providing information to bring about a better understanding of the benefits of sterilisation. It supplies hospitals, clinics, community organisations, factories, health personnel, et cetera, with posters, pamphlets and videos, as well as giving presentations and loaning exhibition equipment. As a non-profit organisation AVSSA relies on donations from the business sector and private individuals to assist them in their work.

For more information telephone (021) 531 1665 or e-mail <avssa@corpdial.co.za>.

