**Long-Acting Reversible Contraception (LARC) Questionnaire**

# **Birmingham Public Health Measurement Toolbox**

1. Are you planning on becoming pregnant in the next year?

[ ] Yes

[ ] No

[ ] Not sure

[ ] Not applicable

1. Are you using contraception currently?

[ ] Yes

[ ] No

[ ] Not applicable

1. What form of contraception are you currently using?

[ ] Contraceptive pill

[ ] Contraceptive patch/ring

[ ] Contraceptive injections

[ ] Condoms

[ ] Contraceptive coil/IUD

[ ] Contraceptive implant

[ ] Male/female sterilisation

[ ] Other *(Please specify)*:

1. Have you heard about Long-Active Reversible Contraception?

[ ] Yes

[ ] No

[ ] Not sure