Birth Control Kit

Instructions & Speaker Notes

A Birth Control Kit is a tool that can help support learning about birth control and safer sex in community and school settings. Seeing and touching items can build understanding and support informed decision-making.

Making and Updating a Birth Control Kit

You may have access to a pre-made kit through your agency, school or school board. If using such a kit, be sure to follow safety precautions. For example, ensure all items are returned intact after the lesson.

It may be more practical to make your own kit to keep at your site.

To make your own kit:

1. Gather items listed in this document.
    - Using actual condoms (internal, external) and dental dams is preferable to images to support learning.
    - For all other items, if you do not have access to placebo demonstration items, using laminated color images may be preferable to physical items due to potential safety concerns.
    - Consider using empty boxes/packages in lieu of images or actual products.
2. Print out this document.
3. Put these items and this document in a box or bag labelled “Birth Control Kit.”
4. Because birth control products and information changes over time, periodically check the currency of this information against updated information from a reputable, Alberta health source such as: https://myhealth.alberta.ca/sexual-reproductive-health/birth-control.

Using a Birth Control Kit

- Not all groups necessarily require teaching about all methods or content included in this document. E.g., younger community groups may not need information on methods unavailable to them

- Items are listed in alphabetical order. You are encouraged to order items in a way that makes the most educational sense for your group. E.g., items with similar ways of working (hormone, barrier, other) or frequency of use (daily, weekly, monthly, quarterly, multi-year, all the time)

- There isn't one correct way to use a Birth Control Kit. Refer to the following pages for talking points about each item in the kit. Then consider:
    - Assigning each student/group of students an item from the kit to learn about. They then teach the class about the item.
    - Holding up each item and leading a class discussion about the item.
    - Using a lesson plan and demonstration videos such as those at teachingsexualhealth.ca. ***If you are a teacher in Alberta schools, ensure that teaching and learning resources are approved by the Minister and by your school board administration.***

Alberta Curriculum

The concepts of birth control and STI are introduced in the Grade 6 Alberta curriculum, but *the detailed information in this kit may not be developmentally appropriate for elementary-age students*.

The birth control kit aligns specifically with curriculum outcomes related to birth control/contraception, STI, safer sex and sexually healthy behaviors and actions in the current Grade 8, 9 and CALM curricula and in the pilot Grade 7 curriculum.

List of Contents & Speaker Notes

General Discussion Points

- Pregnancy can occur anytime there's direct contact between a penis or semen and the vaginal area.
- 8-9 out of 10 people having vaginal sex without using birth control will get pregnant within a year.
- STI can be passed when there is physical contact between one person's body and another person's genital area, semen, vaginal fluid, blood or breast/chestmilk.
- The only 100% way to prevent pregnancy and STI is to abstain from (not do) the type of sexual activity that could cause pregnancy and STI.
- Age, lifestyle, medical history, values and preference are important things people think about when choosing birth control. Talking with a healthcare provider about these things can help people choose birth control that right for them.
- **Many types of birth control are available for free at sexual health clinics and youth serving clinics. People can also ask their doctor to help them get free birth control.**
- Birth control needs to be used as directed for it to work properly. E.g., combining two types of hormone birth control at the same time is unsafe and ineffective.
- "Typical use" of birth control means how people usually use it. "Perfect use" means when people use it exactly like they're supposed to without ever making mistakes.
- **L**ong **A**cting **R**eversible **C**ontraceptives (IUD and implant) are more effective than other types of birth control because of how they work and because perfect and typical use rates are very similar.
- The only birth control methods also giving STI protection are abstinence and condoms.
- Using a condom plus another effective birth control method gives STI protection and further lowers chance of pregnancy.
- Using a dental dam during oral sex on a vulva or anus lowers the risk of STI. People can also lower the risk of STI by:
    - limiting the number of sexual partners,
    - getting regular testing and treatment as needed,
    - vaccination against Hepatitis B and HPV,
    - talking with partners and health providers about sexual history and safer sex.
- Abortion isn't a type of birth control. Abortion ends pregnancy; birth control prevents it.

Abstinence

What it is and how it works

- Abstinence means choosing to not do something
- Sexual abstinence can mean different things to different people
- To have no risk for STI, abstinence means having no contact between one person's body and another person's anal/genital area, semen or vaginal fluid
- To have no risk for pregnancy, abstinence means having no contact between a penis or semen and the vaginal area

How to use it

- The person chooses to not have sex
- It is easier to use abstinence when:
  - the person understands their reasons for choosing abstinence
  - partners have clear, open and honest communication about limits

Effectiveness

- 100% protection from pregnancy and STI when used correctly and consistently

Other information:

- Abstinence can be chosen any time and can last for as long as a person wants it to
- People who have had sex before can still choose to be abstinent

Birth Control Implant (Nexplanon)

What it is and how it works

- The implant is a small, flexible rod that goes just under the skin on the inner arm; it has a hormone (body chemical) called progestin in it
- It stops ovulation (release of an egg), makes it harder for sperm to reach the egg and stops implantation (fertilized egg attaching to the uterus)

How to get and use it

- Prescribed by a healthcare provider and put in by a healthcare provider; it may need to be bought at a pharmacy and taken back to the healthcare provider or the healthcare provider may prescribe it and put it in at the same time
- Once it's in, it starts working and the person doesn't need to do anything else
- It lasts for 3 years; it can be replaced or removed then or it can be removed earlier

Effectiveness

- Pregnancy prevention – 99.9%
- STI – no protection

Other information

- Can cause minor pain and bruising where it was put in
- Some people using the implant get period changes like spotting between periods, shorter/lighter periods, heavier periods or not getting periods
- If there are other side effects, they're usually minor and go away within 2 or 3 months

Birth Control Injection (Depo Provera)

What it is and how it works

- The birth control injection is a hormone (body chemical) called progestin that comes in a needle
- It makes it harder for sperm to reach the egg, stops implantation (fertilized egg attaching to the uterus) and may stop ovulation (release of an egg)

How to get and use it

- Prescribed by a healthcare provider and a healthcare provider uses a needle to put it into a large muscle
- It may need to be bought at a pharmacy and taken back to the healthcare provider or the healthcare provider may prescribe it and put it in at the same time
- The person goes back to get a new injection every 12-13 weeks (3 months)

Effectiveness

- Pregnancy prevention – 94% typical use; 99.8% perfect use
- STI – no protection

Other information

- Some people using the injection get period changes like spotting between periods, shorter/lighter periods, heavier periods or not getting periods
- May increase risk of thinning bones; this is usually temporary and goes away when you stop using this product; calcium and vitamin D supplements are recommended
- When injections stop, people may be able to get pregnant right away or it may take several months or more

Combined Hormonal Contraceptives (CHCs)

What it is and how it works

- CHCs are types of birth control that contain 2 hormones (body chemicals), estrogen and progestin
- They stop ovulation (release of an egg)
- The birth control patch, ring and most birth control pills are CHCs

How to get it

- It is prescribed by a healthcare provider and bought at a pharmacy; sometimes a healthcare provider can prescribe it and give it to you at the same time
- Some pharmacists can prescribe birth control and sell it to you at the same time

How to use it

- Combined Hormone Birth Control Pills – swallow ***at the same time each day***, the medicine goes in through the digestive system
- Birth Control Patch – put on the skin as directed and replace every 7 days; the medicine goes in through the skin
- Birth Control Ring – put it high into the vagina and leave for 21 days; the medicine goes in through the walls of the vagina; it can be removed for a short time during sex if wanted

Effectiveness

- Pregnancy protection – 91% typical use; 99.7% perfect use
    - if you made a mistake using it, talk to a healthcare provider or call 811 to find out what to do
    - it works right away if started first day of period; otherwise use a backup (e.g. condoms, abstinence) for 7 days after starting CHCs
- STI – no protection

Other information

- Often used for 21 days followed by 7 day hormone-free break that causes a period
- Some can be used to safely stop periods – talk to the healthcare provider about this
- May help with periods and acne
- May lower risk of some cancers
- Side effects, if any, are usually minor and go away within 2 or 3 months

Condom (External Condom)

What it is & how it works

- A condom is a latex or non-latex barrier that's put on the penis so the penis and semen do not touch another person's body

How to get it

- Buy it at pharmacies, convenience, grocery and big box stores
- Often is free at teen clinics, sexual health clinics and youth serving agencies
- People don't need to be a certain age or gender to buy condoms

How to use it

- Check to make sure the expiration date on the package has not passed
- Check to make sure there are no holes in the package by squeezing to make sure there's air trapped in it
- Push the condom to the bottom of the package then open package carefully
- Holding the condom tip, look down at the condom to check that the crease folds in around the tip - like a rolled up toque
- Pinch the tip of the condom to leave space for the semen to go
- Place the condom onto the penis and roll down as far as it will go on the penis
- After sex, as soon as the person ejaculates, remove the condom carefully
- Tie it in a knot and throw away in the garbage

Effectiveness

- Pregnancy prevention - 82% typical use; 98% perfect use
- STI – good protection

Other information

- Comes in a variety of colors, sizes, scents, flavors, and textures
- There are many non-latex condom choices for those allergic to latex
- Most condoms fit most penises:
    - Non-lubricated or a snug-size condoms are useful if a condom is too loose
    - Putting a drop of water-based or silicone-based lubricant, using a different condom brand or a larger-fit condoms or using a internal (vaginal) condoms may be useful if a condom feels too tight or doesn't go down all the way
- Use one condom at a time (do not "double bag")
- Use a new condom for each sex act, E.g., if switching from oral to vaginal sex
- Oil based products (e.g., lotion, lube), heat and freezing can break down condoms

Condom - Internal (Vaginal Condom)

What it is and how it works

- An internal condom is a non-latex barrier put into the vagina so that sperm does not touch the inside of the vagina

How to get it

- Buy it at pharmacies, convenience, grocery and big box stores
- Do not need to be a certain age or gender to buy
- May be free at teen clinics, sexual health clinics or youth serving agencies

How to use it

- Check to make sure the expiration date on the package has not passed
- Check to make sure there are no obvious holes or tears in the package
- Open the package carefully
- Squeeze the inner ring and put it into the vagina
- Use the finger to push the ring in as far as it will go and to push in extra condom material
- The outer ring stays outside the body covering part of the vulva
- Hold the outer ring in place when the penis goes into the vagina
- People may choose to keep holding condom in place during sex to make sure it doesn't get pushed into the vagina
- After sex, twist the outer ring to keep semen inside the condom and gently pull to take out the condom
- Tie it in a knot and throw away in the garbage

Effectiveness

- Pregnancy prevention - 79% typical use; 95% perfect use
- STI – very good protection

Other information

- Use one condom for each sex act and one condom at a time
- Can be put in up to several hours before sex; may need to move the outer ring out of the way to urinate (pee)

Dental Dam *Please note that this item protects from STI but is NOT a birth control method*

What it is & how it works

- A dental dam is a barrier put on the vulva or anus to stop the mouth from directly touching the anus or vulva during oral sex which stops STI from spreading

How to get it

- May be available for purchase at "adult: or sex stores
- Cheaper and may be more practical to make out of condoms (external)
- There are videos online from credible sources that can show how to make a dental dam out of a condom

How to make and use it

- Get a condom (external)
- Check that the expiration hasn't passed
- Check that there are no holes by squeezing the package to make sure there's air trapped in it
- Open the package carefully
- While the condom is still rolled up, cut off the tip
- Keep the condom rolled, put the scissors through the middle and cut through one side of the ring – this will give a rolled up piece of condom material
- Unroll the material
- Place over the vulva or anus
- Hold in place during oral sex
- After sex, fold the material from the outside in then throw it away in the garbage

Effectiveness

- Pregnancy prevention – NO PROTECTION
- STI – good protection during oral sex on a vulva or anus – does not work for oral sex on a penis

Other information

- Use one dental dam for each sex act and one dental dam at a time
- Oil based products (e.g., lotion, lube), heat and freezing can break down condoms
- Purchased dental dams are often latex; can be made out of latex or non-latex condoms
- Putting a drop of water-based or silicone-based lubricant between the dental dam and the vulva or anus can help keep the dental dam in place

Diaphragm (not commonly used; may be limited availability)

What it is and how it works

- A diaphragm is a latex or silicone cup
- It acts as a barrier to sperm that is used in combination with a special type of gel intended to kill sperm
- Some are "fitted"; some are one size

How to get it

- Fitted diaphragm - needs sized & prescribed by doctor, purchased at a pharmacy and traditionally used with a spermicidal jelly that's no longer available in Canada
- One size diaphragm - available without prescription at some pharmacies and online; used with a gel that may be available at the pharmacy

How to use it

- Gel is applied to the diaphragm which is put into the vagina before sex; left in 6 hours after sex

Effectiveness

- Pregnancy prevention – may be about 84% effective
    - some sources list higher effectiveness rates for fitted diaphragms but those are based on use with a gel that isn't available in Canada
    - exact effectiveness of one-size diaphragms isn't known
- STI – no protection; spermicidal products may increase risk of STI

Emergency Contraception – Copper IUD

What it is and how it works

- A copper IUD is a small, soft, T shaped medical device with copper in it that's put into the uterus within 7 days after sex
- Stops sperm from getting to the egg and stops implantation (fertilized egg attaching to the uterus)

How to get and use it

- Within 7 days after sex, people go to a clinic that offers Copper IUD as emergency contraception where a healthcare provider will prescribe it and put it in

Effectiveness

- Pregnancy prevention – 99%
- STI – no protection

Other information

- Weight does not affect effectiveness
- May cause spotting and light cramping for a couple of days
- Can be left in to give ongoing birth control or the person can go back to the clinic and have it removed after the next menstrual period

Emergency Contraception Pills (ECP) – Levonorgestrel

What it is and how it works

- Levonorgestrel ECP is a hormone pill taken AFTER sex
- Stops ovulation (release of an egg) and stops implantation (fertilized egg attaching to the uterus)

How to get it

- No prescription needed
- Buy it off the shelf near condoms at pharmacies or stores with pharmacies in them
- Some locations keep it behind the counter so you have to ask for it
- Talking with the pharmacist can be useful as they may have cheaper brands behind the counter than the ones they have on the shelf
- Often available for free from teen, sexual health and some other clinics
- May be available at urgent care or emergency departments in some areas
- You do not have to be a certain age or have a prescription to buy this

How to use it

- Swallow pills following directions on the package or a healthcare provider

Effectiveness

- Pregnancy prevention - 50-90%
    - The sooner it's taken, the more effective; up to 5 days after sex
    - May not work as well for people over 165 lbs.
- STI – no protection

Other information

- Not designed for frequent use
- Does not end pregnancy
- Side effects, if any, are usually minor
- People may have spotting (light bleeding from the vagina) for a day or two; their next period may be earlier, later, heavier or lighter than usual

Emergency Contraception Pills (ECP) – Ulipristal Acetate

What it is and how it works

- Ulipristal Acetate ECP is a hormone pill taken AFTER sex
- Stops release of egg and stops implantation (fertilized egg attaching to the uterus)

How to get it

- It is prescribed by a healthcare provider and bought at a pharmacy; sometimes a healthcare provider can prescribe it and give it to you at the same time
- Some pharmacists can prescribe Ulipristal Acetate ECP and sell it to you at the same time
- May be available free from teen, sexual health and some other clinics

How to use it

- Swallow pills following the direction of the healthcare provider

Effectiveness

- Pregnancy prevention – 85% up to 5 days after sex
    - May be less for people with a BMI 35+
- STI – no protection

Other information

- Not designed for frequent use
- Does not end pregnancy
- Side effects, if any, are usually minor
- People may have some spotting (light bleeding from the vagina) for a day or two; their next period may be earlier, later, heavier or lighter than usual

Fertility Awareness Based Methods (FAB, Natural Family Planning)

What it is and how it works

- FAB is when someone uses specific knowledge about reproduction and their own body to know when they are most likely to get pregnant and they don't have sex during that time
- People are most likely to get pregnant from sex in the 7 days BEFORE ovulating (releasing an egg) until ovulation has finished – this is because sperm can live up to 7 days in the cervix, uterus and fallopian tubes

- People often ovulate:
  - About 14 days before the start of their next period AND
  - Around the time they have a lot of clear, slippery cervical mucous AND
  - Around the time their basal (morning) body temperature goes up slightly

How to use it

- The person:
  - Tracks their periods so they get an idea of when their next period will probably start AND
  - Checks their cervical mucous every morning before they get up to see what it's like AND
  - Takes their basal (first thing in the morning) body temperature every day AND
  - They put that information together to know when they are most likely going to ovulate AND
  - They do not have sex 7 days BEFORE ovulation (release of an egg) until after ovulation has finished
- This is easier to figure out with training from a healthcare provider, regular menstrual cycles and clear signs of ovulation

Effectiveness

- Pregnancy prevention – 76% typical use; 95% perfect use
  - generally FAB is less effective for:
    - teens
    - people with irregular periods
    - people who are breast/chestfeeding or are post-partum
    - people in perimenopause (years leading up to menopause)
- STI prevention – no protection
- It is easier to use FAB when:
  - partners are able to clearly set, communicate and respect limits
  - partners agree to not have sex when pregnancy is most likely

Other Information

- Tracking periods alone is not enough to use FAB effectively
- Some people use calendars to track periods and signs of fertility
- There are apps available to help people track periods and other fertility signs; it's important to remember that information shared on apps is not private as the company owns the personal information put on it

Intra-Uterine Device (IUD) – Copper

What it is and how it works

- A copper IUD is a small, soft, T shaped medical device with copper in it that's put into the uterus by a healthcare provider
- Stops sperm from getting to the egg and stops implantation (fertilized egg attaching to the uterus)

How to get it

- Prescribed by a healthcare provider and put in by a healthcare provider; it may need to be bought at a pharmacy and taken back to the healthcare provider or the healthcare provider may prescribe it and put it in at the same time
- May be available free from teen, sexual health and some other clinics

How to use it

- In a clinic, a healthcare provider inserts it into the uterus through the vagina
- Can be easier to put in during someone's period
- Can be uncomfortable or painful to get it put in; there are things the healthcare provider can do to help manage pain
- Lasts 3-10 years depending on type
- Can be removed anytime by a healthcare provider in a clinic
- People may be encouraged to check the strings at the back of the vagina monthly to make sure it's still in place

Effectiveness

- Pregnancy prevention – 99.2% and starts working right away
- STI – no protection

Other information

- May make periods heavier, longer and crampier

Intra-Uterine Device (IUD) – Hormone

What it is and how it works

- A hormone IUD is a small, soft, T shaped medical device with a hormone (body chemical), progestin, in it
- Makes it harder for sperm to reach the egg, stops implantation and may stop release of eggs

How to get it

- Prescribed by a healthcare provider and put in by a healthcare provider; it may need to be bought at a pharmacy and taken back to the healthcare provider or the healthcare provider may prescribe it and put it in at the same time
- May be available free from teen, sexual health and some other clinics

How to use it

- In a clinic, a healthcare provider inserts it into the uterus through the vagina
- Can be easier to put in during someone's period
- Can be uncomfortable or painful to get it put in; there are things the healthcare provider can do to help manage pain
- Lasts 3 or 5 years depending on type (but may last longer – talk with healthcare provider)
- Can be removed anytime by a healthcare provider in a clinic
- People may be encouraged to check the strings at the back of the vagina monthly to make sure it's still in place

Effectiveness

- Pregnancy prevention – 99.2-99.8% (ask doctor if it will work right away or not)
- STI – no protection

Other information

- May cause spotting for 3-6 months
- People may get lighter, fewer or no periods

Lactation Amenorrhea

What it is and how it works

- Lactation amenorrhea means no periods during breast/chestfeeding
- In certain situations, breast/chestfeeding stops ovulation (release of an egg)

How to use it

- LAM may work as birth control when all of the following are present:
  - The person hasn't had a period yet
  - The baby is less than 6 months old
  - The baby is fully breast/chest fed (no food, bottles - even of expressed milk, sippy cups etc.)
  - The baby feeds often & well
- It's important to talk with a healthcare provider about using this method correctly

Effectiveness

- Pregnancy prevention – 98% perfect use
- STI – no protection

Progestin Only Pills (POP, 'mini-pill)

What it is and how it works

- POP is a pill with one hormone (body chemical), progestin, in it that makes it harder for sperm to reach egg, stops implantation (fertilized egg attaching to the uterus) and may stop ovulation (release of an egg)

How to get it

- Prescribed by a healthcare provider and bought at a pharmacy
- May be available at some teen and sexual health clinics

How to use it

- Swallow at the same time each day
- There are no hormone free breaks

Effectiveness

- Pregnancy prevention – 91% typical use; 99.7% perfect use
- STI – no protection

Other information

- If there are side effects, they're usually minor and go away within 2 or 3 months

Sponge

What it is and how it works

- A sponge is a single use, spermicide soaked sponge put in the vagina before sex
- Is intended to kill sperm and stop sperm from getting into the uterus

How to get it

- May be available off the shelf at some pharmacies

How to use it

- Follow instructions on the package; often needs to be moistened and squeezed to make it foamy
- Put into the vagina before sex and leave in for 6 hours after sex

Effectiveness

- Pregnancy prevention – 68% typical use; 80% perfect use
- STI – no protection; spermicides may increase STI risk

Other information

- Using it often may cause tissue irritation which increases the risk of infection

Surgery - Tubal Ligation (getting "tubes tied")

What it is and how it works

- A tubal ligation is an operation that that closes the fallopian tubes so the sperm and egg don't meet

How to get it

- Talk to a doctor who can refer you to a surgeon who will do the operation in a special clinic
- In the clinic, the person is given special medicine so they don't feel anything; sometimes the medicine makes people go to sleep
- After the surgery, the person stays for a few hours in the clinic while they wake up and to make sure they feel ok
- When the person goes home, they need someone to help take care of them for a day or two
- Some people get a tubal ligation when they have a baby through caesarian section (operation where a doctor gets the baby out through a cut in the abdomen)

How to use it

- Tubal ligations work right away,
- People need some recovery time before sex is safe and comfortable
- After recovery, there is nothing the person needs to do

Effectiveness

- Pregnancy prevention – 99.5%
- STI – no protection

Other information

- Considered permanent; reversals don't always work and can be costly
- People need to be sure they don't want children or the doctor won't do the surgery
- Is generally unavailable for teens

Surgery - Vasectomy

What it is and how it works

- A vasectomy is a small, low risk operation that blocks the vas deferens; this stops sperm from coming out in the semen

How to get it

- The person makes an appointment with a vasectomy clinic
- At the clinic, they use medicine to numb the area
- After the surgery, people stay in the clinic for a short time to make sure they feel ok
- Alberta Health Care covers part of the cost, but most clinics charge extra clinic fees of $200-$400

How to use it

- After the operation, the person has to wait about 3 months until it starts working; they'll often be asked to come back to the clinic to make sure it's working

Effectiveness

- Pregnancy prevention – 99% once 3 months has passed since the operation
- STI – no protection

Other information

- Considered permanent; may be reversible but this can be costly
- People need to be sure they don't want children or the doctor won't do the surgery
- Generally unavailable for teens
- Semen is still ejaculated (comes out); it just doesn't have sperm in it

Vaginal Spermicide (not commonly used; only discuss if asked about)

What it is and how it works

- Vaginal spermicide is a gel, foam or dissolving strip that has a chemical called nonoxynol-9 in it that's intended to kill sperm

How to get it and use it

- It may be sold at some stores with pharmacies
- Put it into the vagina before sex as directed on the package

Effectiveness

- Pregnancy prevention – 71% typical use; 82% perfect use
- STI – no protection; may increase STI risk

Other information

- Using it often may cause tissue irritation which increases the risk of infection

Withdrawal – "Pulling Out"

What it is and how it works

- Withdrawal is pulling out the penis from the vagina before ejaculation (semen coming out)
- Ejaculating away from the vaginal area means that most sperm can't reach the egg
- Because there is always sperm in pre-ejaculatory fluid, anytime a penis touches the vaginal area, there is risk of pregnancy even if someone is using withdrawal

How to use it

- Before a person feels like they are going to ejaculate, they pull the penis from the vagina and ejaculate somewhere else
- Talk with a healthcare provider about ways to use withdrawal more effectively

Effectiveness

- Pregnancy prevention – 78% typical use; 96% perfect use
- STI – no protection

Other information

- It can be hard for people to know when they are about to ejaculate