

IT'S ALWAYS  
A GOOD IDEA  
TO HAVE A  
BACK UP PLAN.





# ABSTINENCE



## You May Have Heard People Talk About Abstinence in Different Ways.

Some people think of abstinence as including other kinds of sexual activities that don't lead to pregnancy. This is better described as outercourse and may not protect you from STIs.

Some people define abstinence as not having any kind of sex play with a partner. This method—used continuously—is 100 percent effective in preventing pregnancy and STIs.

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Being continuously abstinent is the only way to be absolutely sure that you won't have an unintended pregnancy or get an STI

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## Is Abstinence Right for Me?

Abstinence can be difficult for some people. Women and men need to be clear about their reasons to stay abstinent. If you are tempted to have sex play, it helps to remember why you made the decision to be abstinent in the first place.

## Most People Stop Being Abstinent at Some Point in Their Lives.

When you decide not to be abstinent, ask yourself:

- Do I have information about other methods of birth control and do I have access to them?
- Do I know how to protect myself from STIs?

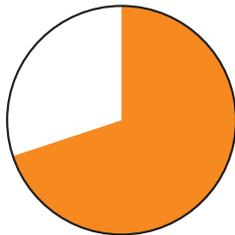
More than 99% of women aged 15-44 who have ever had sexual intercourse have used at least one contraceptive method.

People may find it difficult to abstain for long periods of time and may end their period of abstinence without being prepared to protect themselves against pregnancy or infection.

The **BACK UP PLAN** book is here to explain all available options for effective methods of contraception.

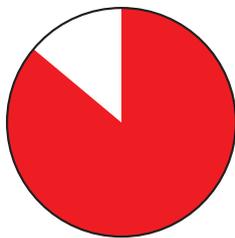
# ★ CONTRACEPTION STATS ★

Among 62 million U.S. women in their childbearing years  
(Aged 15-44 years)



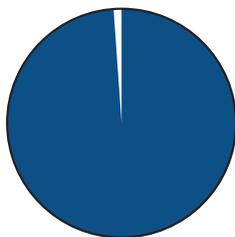
**70%** Are at risk of unintended pregnancy.

Couples are sexually active and do not want to become pregnant, but could if they fail to use a contraceptive method correctly and consistently.



**85%** Chance of pregnancy over the course of a year

Among couples who do not use contraception.



**99%** More than 99% of women aged 15-44 who have ever had sexual intercourse have used at least one contraceptive method.

The proportion of women at risk who are not using a method is highest among 15–19-year-olds (18%) and lowest among women aged 40–44 (9%)

## Modern Contraception Works!

The two-thirds of U.S. women at risk of unintended pregnancy who practice contraception consistently and correctly account for only 5% of unintended pregnancies.

# *How do you choose?*

**It's important to consider a few things when choosing the right birth control method for you *and* your partner.**

- Number of sexual partners and frequency of sexual activity.
- Concerns about STIs.
- Whether you're comfortable with hormonal side effects.
- How comfortable you are talking to your partner(s) about birth control.
- If you want to avoid additional doctor's visits.
- Whether you want to get pregnant in the near future.

**Having a solid understanding of your belief system, your life aspirations, and a sense of self-worth, all contribute in making educated decisions about your reproductive health.**

- Did you know you are entitled to privacy even if you are on someone else's health plan? (parent, guardian, or spouse) To arrange for confidential communications with your insurance provider visit: [www.myhealthinfo.org](http://www.myhealthinfo.org)
- Did you know that anyone under the age of 18 has a legal right to arrange these confidential communications?

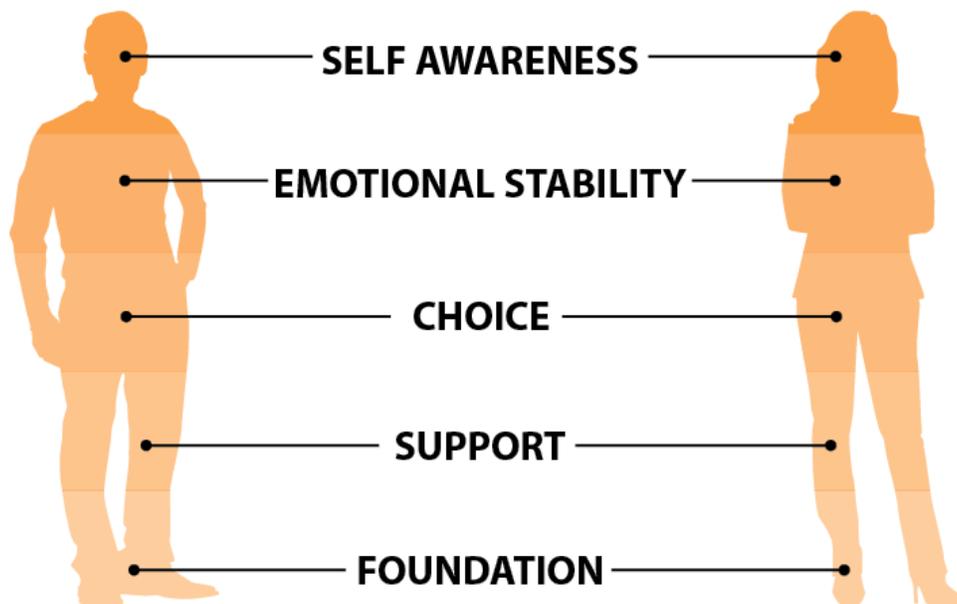
If you are under 18 you have the right to:

- Birth control, including emergency contraception
- Testing and treatment for STIs/STDs
- Pregnancy testing and prenatal care
- Abortion services
- HIV/AIDS testing

**You do not need anyone's permission, including:  
a parent/guardian, boyfriend, girlfriend, or spouse.**

It's your right to get these health services confidentially—the clinic or doctor cannot tell anyone why you were there—unless you say it's okay.

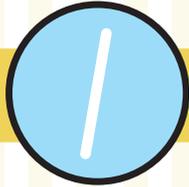
## **What is Reproductive Freedom?**



# IMPLANT METHODS

## IMPLANT

### How it Works



Tiny rod inserted under the skin of a woman's upper arm.

Releases progestin (hormone) into the body over the course of three years.

Prevents ovulation and makes implantation in the uterus more difficult (if an egg is accidentally released).



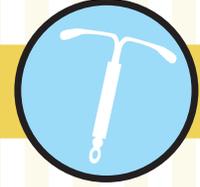
- 99% effective at preventing pregnancy
- Low maintenance
- Not permanent



- No STI protection
- Possibility of pain or infection at insertion site

## I.U.D.

### How it Works



Small T-Shaped device placed inside the uterus by a doctor.

There are two types:  
Hormonal (containing progestin), or  
Non-Hormonal (made of copper)



- More than 99% effective at preventing pregnancy
- Effective for 5-10 years
- Low maintenance
- Not permanent



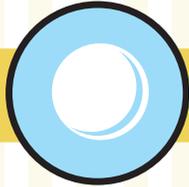
- No STI protection
- Possibility of bacterial infection at time of insertion
- Possibility of irregular periods. Hormonal device can cause acne, breast tenderness, headaches, and nausea



# • HORMONAL METHODS •

## THE PILL

### How it Works



Woman takes a pill at the same time each day. Available as progestin-estrogen combo, or progestin-only.

Prevents ovulation and makes implantation in the uterus more difficult (if an egg is accidentally released).

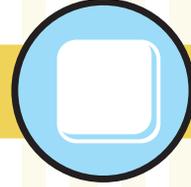
- 91-99% effective at preventing pregnancy
- Non-invasive, simple to use
- Not permanent
- Can help prevent acne, ovarian cancer, iron deficiency anemia, cysts (breast and ovarian) PMS, painful menstrual cramps, and bone thinning.
- Progestin-only pill can have fewer side effects



- No STI protection
- Must be taken at the same time every day to be most effective
- Not advised for women who smoke or are age 35+
- May increase the risk of high blood pressure, blood clots, stroke and heart attack
- Possible side effects: weight gain, mood changes/depression

## THE PATCH

### How it Works



Woman applies a small patch worn on the skin of either the lower abdomen, rear end, or upper body.

Releases hormones progestin and estrogen to prevent ovulation.

Patch is changed 1x/week for three weeks. During the fourth week, no patch is worn for period to occur.

- 91-99% effective at preventing pregnancy
- Non-invasive, simple to use
- Not permanent
- Can help prevent acne, ovarian cancer, iron deficiency anemia, cysts (breast and ovarian) PMS, painful menstrual cramps, and bone thinning



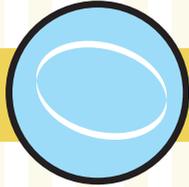
- No STI protection
- Risk of side effects similar to those of the pill
- Less effective for women weighing 198+ pounds



# • HORMONAL METHODS •

## THE RING

### How it Works



Woman places a 2 inch, soft, flexible transparent contraceptive ring inside vagina.

Prevents ovulation by releasing progestin and estrogen.

Worn for three weeks, taken out for the fourth week for period to occur, and replaced with a new ring.

- 91-99% effective at preventing pregnancy
- Not permanent
- Can help prevent acne, ovarian cancer, iron deficiency anemia, cysts (breast and ovarian) PMS, painful menstrual cramps, and bone thinning



- No STI protection
- Risk of side effects similar to those of the pill



## THE SHOT

### How it Works



Doctor injects shot of progestin in woman's arm or rear end to prevent ovulation.

Hormone progestin prevents ovulation.

Each injection last 3 months.

- 94-99% effective at preventing pregnancy
- Not permanent
- Doesn't contain estrogen (which some women are sensitive to)
- Some women stop having a period



- No STI protection
- Not advised for women who smoke or are age 35+
- No way to reverse the shot once given. May take 1 year to get regular periods or get pregnant after stopping use



# BARRIER METHODS

## SPERMICIDE

### How it Works



Stop sperm from moving (helps prevent fertilization).

Available in several forms: foam, gel, cream, film, suppository.

- 72-82% effective at preventing pregnancy when used alone
- Not permanent
- Can be used with any other method of birth control
- No prescription or doctor's visits needed

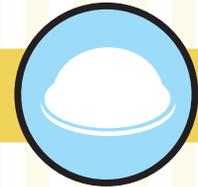


- No STI protection
- Less effective at preventing pregnancy when used alone



## DIAPHRAGM

### How it Works



Woman inserts silicone cap into vagina before sex to cover the cervix. "Blocks" sperm from entering uterus.

Requires the use of spermicide.

Can be inserted hours ahead of intercourse and worn for up to two days.

- 84-94% effective at preventing pregnancy
- Not permanent
- Can be reused up to two years
- No medical side effects



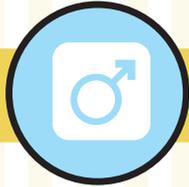
- Some STI protection
- Doctor visit for fitting required
- Can be difficult to insert properly at first, but improves with practice
- Can slip out of place during intercourse
- Some women/men may be allergic to silicone rubber or spermicide



# BARRIER METHODS

## MALE CONDOM

### How it Works



Man wears condom over penis to catch sperm.

Prevents sperm from entering partner's body.

Typically made of latex.  
Polyurethane condoms available for people with latex allergies.

- 82-98% effective at preventing pregnancy
- Not permanent
- Latex (and newer synthetic condoms) help prevent HIV and other STIs
- No prescription or doctor's visits needed

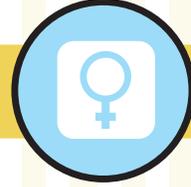


- "Natural" or "Lambskin" condoms might not protect against STIs
- Can't be reused. Must be put on after penis is erect
- Latex condoms can't be used with oil-based lubricants (like massage or baby oil, lotion, petroleum jelly), which will weaken condom and cause tears



## FEMALE CONDOM

### How it Works



A woman inserts a small "pouch" into her vagina leaving extra ring & material on the outside.

Prevents sperm from entering.

Can be inserted up to eight hours before sex.

- 75-95% effective at preventing pregnancy
- Not permanent
- Helps prevent HIV and other STIs
- No prescription or doctor's visits needed



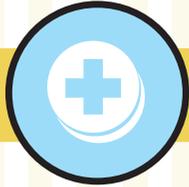
- Can cause irritation or slip out of place during intercourse
- Can't be reused. Must be in place before intercourse



# MORE METHODS

## EMERGENCY PILL

### How it Works



One pill to be taken within 72 hours of unprotected intercourse.

Same chemicals as in birth control pills, most brands are progesterone only.

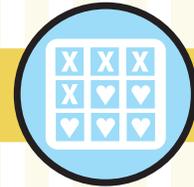
- 89% effective at preventing pregnancy
- Not permanent
- Many over-the-counter options, some require a prescription
- Can be used if you miss three or more days of birth control pills, if a condom breaks or if you weren't using birth control at the time



- No STI protection.
- To be most effective, must be taken within 72 hours after unprotected intercourse
- Some women may experience nausea, diarrhea or headaches
- If you are pregnant, have a history of heart attack or stroke, a blood clotting disorder, breast cancer, or serious medical disorder such as diabetes, liver or kidney disease you should not use this method

## RHYTHM

### How it Works



Woman charts monthly fertility patterns to prevent pregnancy by avoiding sex when most fertile.

Fertility charts available from your doctor or smartphone apps which are free or inexpensive.

- 75-96% effective at preventing pregnancy
- Not permanent
- No medical side effects or doctor visits



- No STI protection
- Requires vigilant tracking and is less effective for women with irregular periods



**At *The Clinic!* your sexual and reproductive health is always YOUR CHOICE.**



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*No Appointment Necessary!*

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