Birth control is an amazing tool that can not only prevent pregnancy, but may also provide other health benefits. If you are interested in birth control, it is important to talk to your provider about your options so that you can choose the method that is best for you.

**How Does Birth Control Work?**

It’s simple, really. If a sperm cell fertilizes an egg that has been released from an ovary into the fallopian tubes, and that fertilized egg successfully implants in the uterus, then a pregnancy occurs.

So, birth control can work in a few different ways, depending on the method, by:

- Preventing the ovaries from releasing an egg.
- Preventing sperm from reaching an egg.
- Preventing a fertilized egg from implanting in the uterus.

**What’s the Best Method for Me?**

The best birth control method for you is the one that can be used consistently and correctly.

Consider your day-to-day life and ask yourself the following:

- How effective is this method?
- Will it protect me against sexually transmitted infections (STIs), including HIV?
- What are the risks and side effects?
- How much does it cost?
- Can I hide it?
- Do I have to remember to use it?
- Will this method affect my periods?
- Will this method depend on my partner(s)?

Talk to your health care provider about these questions, and don’t be afraid to be honest—they are there to talk to you about this kind of stuff! You might use one method for a while, but if something isn’t working out, your health care provider can work with you to switch to a new method. If a provider is unable to give you the option you are interested in, ask them to direct you to a provider who can.

**Common Questions on Birth Control**

**Does birth control provide other health benefits besides preventing pregnancy?**

Some forms of hormonal birth control can make your skin clearer and your periods lighter or more regular. They can also help ease symptoms of endometriosis and protect against certain kinds of cancer.

**Can I get pregnant if I’m on my period?**

While chances are low, it is definitely possible to get pregnant on your period. Sperm can live up to 5 days in the body!

**Can pre-ejaculate (pre-cum) cause pregnancy?**

While there is no sperm in pre-cum itself, it is still possible for pre-cum to pick up sperm as it leaves the penis. So, even though it’s rare, it’s still possible to get pregnant from pre-cum.

**Costs**

Costs vary for different birth control methods. For example, an IUD can be costly upfront but inexpensive in the long run. Other methods, like the hormonal pill, cost a fixed amount that must be paid each month. Consider your budget and what you can afford to spend on a birth control method. If you feel safe and comfortable doing so, you might consider asking a partner to share the expense.

**STIs and HIV**

Remember: the only birth control methods that prevent STIs—including HIV—are condoms and abstinence.

No matter what type of sex you are having, it is important to get yourself tested at least once every year!

**Gender and Birth Control**

Regardless of your gender identity, it is important to visit a health care provider regularly if you can become pregnant or have a uterus. During your health care visit, if you feel comfortable doing so, be sure to tell your health care provider your pronouns and what you would like to be called. You can also tell them how you would like them to refer to your anatomy. You deserve inclusive and respectful health care!

**You Have the Right...**

- To be in a healthy, safe, and respectful sexual relationship.
- To decide what happens to your own body.
- To communicate your feelings to your partner(s).

If any or all of these rights are not being respected, speak to your health care professional, counselor, or other trusted person to get resources and support.
ABSTINENCE/OUTERCOURSE
How To Use It: Avoid having penetrative penile-vaginal sex with anyone.

100% Effective
Advantages: Free; Protects against some STIs, including HIV; Contains no hormones
Disadvantages: May be difficult to avoid sex; Requires partner communication/cooperation; Other methods may not protect against STIs transmitted through skin-to-skin contact

STERILIZATION (Tubal ligation or vasectomy)
How To Use It: Tubal ligation: surgery to permanently close or block fallopian tubes; Vasectomy: surgery to cut or block off the small tubes in the scrotum that carry sperm, preventing sperm from leaving the body.

99% Effective
Advantages: Cost effective in the long term; Doesn’t interrupt sex; Contains no hormones
Disadvantages: Permanent/not reversible; Some risks associated with surgery and anesthesia; Must use backup method for first 3 months

IMPLANT (Nexplanon®)
How To Use It: A health care provider inserts a small, flexible plastic rod under the skin of the upper arm (this method is only for people who have a uterus). This is a “set-it-and-forget-it” form of birth control.

99% Effective
Advantages: Long lasting (up to 3 years), easily reversible, and discreet; Cost effective in the long term; Contains no estrogen; Doesn’t interrupt sex; May reduce menstrual bleeding and cramping
Disadvantages: Possible hormonal side effects*; May cause heavier or irregular bleeding/spotting; May cause longer or heavier periods in some people; Not all providers are trained in insertion/removal

PROGESTIN IUD (Mirena®, Kyleena®, Liletta®, and Skyla®)
How To Use It: A health care provider inserts a small, T-shaped device into the uterus. This is a “set-it-and-forget-it” form of birth control.

99% Effective
Advantages: Long lasting (up to 12 years), easily reversible, and discreet; Cost effective in the long term; Contains no hormones; Doesn’t interrupt sex; Can be used as emergency contraception for up to 5 days (120 hours) after unprotected sex
Disadvantages: May cause heavier or irregular bleeding/spotting and increased cramping; Small risk of expulsion of the IUD in the first year; Small risk of infection; Small risk of tubal pregnancy and/or uterine perforation

COPPER IUD (ParaGard®)
How To Use It: A health care provider inserts a small, T-shaped device into the uterus. This is a “set-it-and-forget-it” form of birth control.

99% Effective
Advantages: Long lasting (up to 12 years), easily reversible, and discreet; Cost effective in the long term; Contains no hormones; Doesn’t interrupt sex; Can be used as emergency contraception for up to 5 days (120 hours) after unprotected sex
Disadvantages: May cause heavier or irregular bleeding/spotting and increased cramping; Small risk of expulsion of the IUD in the first year; Small risk of infection; Small risk of tubal pregnancy and/or uterine perforation

SHOT (Depo-Provera®)
How To Use It: A health care provider gives an injection/shot every 3 months (this method is only for people who have a uterus).

94% Effective
Advantages: Discreet and reversible; Doesn’t interrupt sex; Contains no estrogen; May reduce or stop periods
Disadvantages: Must get shot on time for it to be effective; May cause irregular bleeding/spotting; Possible hormonal side effects*; Delay in reversibility (average 9–10 months)
VAGINAL RING (NuvaRing®)
A small flexible ring placed in the vagina for 3 weeks, followed by a ring-free week. Each ring is effective for one month.

91% Effective

Advantages: Discreet and easily reversible; Doesn’t interrupt sex; Regulates menstrual cycle/eases menstrual cramps; Doesn’t have to be taken daily; Safe to use during oral sex; May improve acne

Disadvantages: Possible hormonal side effects*; Partner(s) may feel the ring during vaginal-penile sex; May cause increased vaginal discharge

PATCH
An adhesive square applied to the skin once a week for 3 weeks, followed by a patch-free week (this method is only for people who have a uterus).

91% Effective

Advantages: Easily reversible; Doesn’t interrupt sex; Regulates menstrual cycle and eases menstrual cramps; Doesn’t have to be taken daily; Depending on where it is applied, it can be discreet

Disadvantages: Must apply patch on time for it to be effective; Possible hormonal side effects*; Possible skin irritation at adhesion site

PILL (COMBINATION)
A pill that must be taken daily (this method is only for people who have a uterus).

91% Effective

Advantages: Easily reversible and discreet; Doesn’t interrupt sex; Regulates and/or decreases period and eases menstrual cramps; May improve acne

Disadvantages: Must be taken daily and around the same time every day; Possible hormonal side effects*; May not work as well if taking with other oral medications

PILL (PROGESTIN-ONLY)
A pill that must be taken daily (this method is only for people who have a uterus).

91% Effective

Advantages: Easily reversible and discreet; Doesn’t interrupt sex; Contains no estrogen; Regulates and/or decreases period

Disadvantages: Must be taken daily and at the same time every day; Possible hormonal side effects*; May not work as well if taking with other oral medications

EXTERNAL CONDOM
A latex (rubber) or non-latex (polyurethane, polyisoprene) cover that fits over the penis before sex. Use a new condom each time you have sex.

85% Effective

Advantages: Protects against STIs, including HIV; Convenient and available at stores or for free at clinics; Easily reversible and cost effective; Contains no hormones

Disadvantages: Must be used each time; Requires partner communication/cooperation; May break or slip off (use with silicone or water-based lubricants to reduce the chances of breakage); May decrease sensation; May interrupt sex

INTERNAL CONDOM
A non-latex (nitrile or polyurethane) tube that is inserted in the vagina before sex. Use a new condom each time you have sex.

79% Effective

Advantages: Protects against STIs, including HIV; Convenient and available at stores; Easily reversible and cost effective; Contains no hormones

Disadvantages: Must be used each time; Requires partner communication/cooperation; Can be costly; May be difficult to use; May decrease sensation; May interrupt sex
WITHDRAWAL (PULLING OUT)
Remove the penis from the vagina before ejaculating.

78% Effective

Advantages: Free; Contains no hormones; Easily reversible
Disadvantages: Must be willing and able to pull out at appropriate time; Interrupts sex; Requires partner communication/cooperation; Pre-ejaculate fluid may contain sperm

SPERMICIDE
Sperm-killing cream, gel, sponge, foam, inserts, or film inserted into the vagina just prior to sex.

71% Effective

Advantages: Convenient and available at stores; Easily reversible and cost effective; Contains no hormones
Disadvantages: Must be used each time; Can be messy; Can cause irritation and an increase in the likelihood of contracting HIV or other STIs; Requires partner communication/cooperation

EMERGENCY CONTRACEPTION PILLS
Pill(s) taken up to 120 hours (5 days) after unprotected sex (this method is only for people who have a uterus). The sooner it is taken, the better it works.

Effectiveness depends on type used
Advantages: Most types are available at stores without a prescription; Some types are available to anyone of any age or gender; Doesn't interrupt sex
Disadvantages: Shouldn't be used as the primary form of contraception; Possible nausea/vomiting, headache, and dizziness; May alter menstrual cycle; Prescription required for some types

Effectiveness is based on typical use instead of perfect use. “Typical use” is the actual use of the method, including inconsistent and incorrect use. “Perfect use” occurs when a method is used correctly all the time. Most people do not use methods consistently and correctly every time they have sex, which is why effectiveness with typical use is included in the chart above.

This chart lists the more common forms of birth control. Other forms, such as the fertility awareness method, the cervical cap, the sponge, and the diaphragm are available. For the most up-to-date and complete information and to discuss all forms of birth control, consult with your health care provider. This information was current at the time of printing (April 2018).

*Hormonal birth control can cause side effects, including weight gain, sore breasts, mood changes, irregular periods, headaches, decreased sex drive, acne, and nausea. If these side effects don’t ease up on their own after a few months, talk to your health care provider about switching to another form of birth control.

Resources
American Sexual Health Association
www.ashasexualhealth.org

Bedsider (online birth control support network)
www.bedsider.org

CDC Information on Sexual Health
800-CDC-INFO (800-232-4636)
(In English en Español)
TTY: 888-232-6348,
www.cdc.gov/sexualhealth

It’s Your Sex Life
www.itsyoursexlife.com

Planned Parenthood Federation of America
www.plannedparenthood.org

American College Health Association
(410) 859-1500 | www.acha.org

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