check out reproductiveaccess.org.
birth control methods, abortion, or miscarriage.
If you want to learn more about

A CONVERSATION ABOUT CONTRACEPTION
Two of my friends from chemistry class were going to a free birth control workshop at the school health center. I started the birth control pill when I was 16, mostly to help with my acne and period cramps. I never thought about other options, so I tagged along to see what they had to say.

That was so much information! Now I’m wondering if I want to try something different from my pill.

Well I don’t know what the deal was with my last clinician, but I’m making an appointment tomorrow at the health center to get a copper IUD!

I was the one who asked about the diaphragm. But actually, it doesn’t sound like such a terrible method.

Yeah they all seem like they have pluses and minuses. I’m so glad you told me about this!
Thank you everyone for your questions and for listening, and please feel free to reach out if you want to talk about any of these methods or anything else!

Also, we are handing out this Birth Control Choices Sheet from the Reproductive Health Access Project that covers all the methods we discussed today.

I joined my friends Jem and Kai in the crowded meeting room.

I have a lot of questions! I’ve been trying to get an IUD for ages, but the clinician I went to made it sound like a bad idea.

Kai already put like three questions in the box!

Why would it be a bad idea?
Okay we’re going to get started! Today we’re here to talk about all the options for birth control.

If you or your partners do not want to get pregnant or want to enjoy the extra benefits of birth control like how they impact your monthly bleeding, there are many options that will meet different needs.

There is a lot to think about when choosing a birth control method. Some methods require a prescription, some you have to get inserted or administered by a clinician, some you take every day and others you don’t have to think about for years. Some cost more than others.

There is something for everyone and by learning about all the methods and talking with a clinician you trust, you can find a method that will work for you, your body, and your life.

Someone wrote, My mom told me about the diaphragm. What is that?

The diaphragm is a silicone cup that you cover with spermicide and insert each time you have vaginal intercourse. You need a prescription for the diaphragm.

We have time for one more question from the Q&A box.
The last non-prescription method is withdrawal, which is when you pull the penis out of the vagina before ejaculating each time you have vaginal intercourse.

Progestin emergency contraception is also available without a prescription. It can be used up to 5 days after having sex to prevent pregnancy.

There is also a form of emergency contraception called ulipristal acetate that is available by prescription.

Now let's learn about some of these methods and then we'll go to the question and answer box.

There are three methods that are popular, that all require a prescription, and they all contain the hormones estrogen and progestin:

The Birth Control Pill

The Ring

The Patch

You take the pill every day,

change the patch every week,

and insert the ring into your vagina for 3 weeks each month.

These methods can help with cramps and monthly bleeding. All three contain estrogen, which some people who take testosterone prefer to avoid.

There are also progestin-only pills that you take every day and contain no estrogen.
Great question! People who want something that works on its own may choose LARG.

Long Acting Reversible Contraception

This type of birth control includes:

But what if I don’t want to have to worry about taking a pill every day or changing a patch every week?

The copper intrauterine device, or IUD for short

The copper IUD lasts for 12 years and contains no hormones.

the progestin IUD

The progestin IUD lasts for 3–7 years, depending on the type you get.

IUDs are inserted into the uterus by a clinician.

and the progestin implant

The progestin implant is inserted into the arm by a clinician and lasts up to 5 years.

These are the methods that work best to prevent pregnancy.

Now let’s turn to the Q&A box. Someone asked:

What methods can I use without a prescription?

Then there’s fertility awareness, sometimes called natural family planning. With this method, a person tracks their periods, takes their temperature daily, and/or checks their cervical mucus regularly.

Condons are sold without a prescription.

These all help the person predict which days they’re at risk for getting pregnant. They avoid vaginal intercourse, use a condom, or spermicide on these days.

This method works for people who have regular periods and can stay on top of tracking all the data.
I also wanted to mention a method called the shot or Depo.

You get the shot once every three months.

You can either get the shot at a clinic or get a prescription for a type that you inject yourself at home. People like the shot because it’s private, but some people have side effects that turn them off. The shot has no estrogen, only progesterone.

In my gender studies class we learned that many people in the Latinx and Black communities have been targeted and pressured to use the implant, IUD, and other methods. That sounds wrong.

Great point! The reproductive justice movement addresses these abuses and others against Black and Brown folks.

We want you to learn about all methods, ask us any questions you have, and decide what is best for you! It’s great to work with a clinician you trust.
None of the options we’ve discussed so far prevent sexually transmitted infections, or STIs.

For that, we turn to

Condoms

There are external condoms

and internal condoms.

Both prevent pregnancy and STIs. You use a new condom each time you have insertive sex.

You can use condoms with any other method to protect against pregnancy AND prevent STIs.

Is there any reason why a clinician might tell you that an IUD is a bad idea?

There could be a reason that is unique to your body. In the past, we thought that IUDs work only for people who have given birth, but that is not true.

If a clinician argues against your birth control choices for reasons other than your own health issues, you can always ask them to explain their advice or switch to a clinician who respects your wishes.

At the school health center, we do patient-centered birth control counseling, which basically means that we give you all the info you need to make the best choices for your own body, and we support you in getting what you need.