What is contraception?
Contraception (or birth control) is used to stop you getting pregnant.

Who needs contraception?
If you:
- have started your period
- have sex (even the first time)
- and do not want to get pregnant
You should use contraception every time you have sex

You do not need contraception to prevent pregnancy if:
- you do not have sex
- you have had a hysterectomy or had your ovaries removed
- you have reached menopause you can stop using contraception:
  - if you are over 50 years of age and have not had a period for more than one year
  - if you are under 50 years of age and have not had a period for more than two years.

Will contraception stop me getting an STI (sexually transmissible infection)?
Most contraception does not protect you from getting an STI.
The best way to reduce your chance of getting an STI is to use a condom every time you have oral, vaginal or anal sex.

How do I know which contraception is best for me?
The contraception you choose depends on things like your health, the cost, how easy it is to use, how well it works, your sexual relationship/s.
You should talk to a doctor or women’s health nurse to help decide what will suit you best.
What are the types of contraception?

Barrier contraception

**Male condom**: a rubber sheath which is put onto the erect penis before sex, to prevent semen entering the vagina.
- can prevent pregnancy
- needs to be put on before contact between the penis and the vagina and should be used every time you have sex
- reduces the risk of STIs
- cheap and easy to get

Other barrier contraception includes the female condom and the diaphragm.

Hormonal contraception: pills and rings

Some contraceptives contain hormones (oestrogen and progesterone) that change the way the body’s hormones work and the messages they send. This can stop an egg being released from the ovary and/or change the fluid at the opening of the womb making it harder for sperm to get into the uterus.

**The Pill**
(Combined oral contraceptive pill)
- very effective at preventing pregnancy
- might help with heavy and/or painful periods
- needs a prescription from the doctor
- has to be taken every day
- does not protect against STIs
- can have some side effects

**What happens if you miss a pill?**
- If you forget the pill or take it more than 24 hours late and you have sex, you can get pregnant. Talk to the doctor about emergency contraception.

**The Mini Pill**
(Progestogen only contraceptive pill)
- effective at preventing pregnancy but needs to be taken at the same time each day (within 3 hours)
- can be used by most women
- might be better than the pill if you have migraines, smoke or have high blood pressure
- can be used if you are breastfeeding, needs a prescription from the doctor
- does not protect against STIs
- can have some side effects

**What happens if you miss a pill?**
- If you forget the pill or take it more than 3 hours late and you have sex, you can get pregnant. Talk to the doctor about emergency contraception.
Yarning about contraception

NuvaRing (Contraceptive vaginal ring)
The NuvaRing is made of soft plastic and slowly releases hormones into the vagina and then into the blood stream. You insert the ring into the vagina yourself and leave it there for three weeks. You then take it out, have your period and replace it with a new one a week later.

- very effective at preventing pregnancy
- easy to insert (like a tampon)
- needs a regular prescription
- does not protect against STIs
- may cause side effects
- might not be suitable for women with some health conditions

Implanon (Contraceptive implant)
Implanon is inserted under the skin on the inside of the upper arm. It slowly releases a low dose of the hormone progestogen into the blood stream. It stops ovulation (the release of an egg each month) and changes the mucus in the top of the vagina making it harder for sperm to enter the uterus.

It is:
- very effective at preventing pregnancy
- needs to be replaced every three years.
- suitable for most women (if you have heart disease or have had a blood clot talk to a doctor)
- cheap
- can be easily removed if it doesn’t suit you
- good if you have painful periods
- does not protect against STIs
- can have side effects
- not suitable for women who have had breast cancer

Depot - contraceptive injection
Depot is an injection given into the muscle every 12 weeks.

- Very effective at preventing pregnancy can stop periods
- Can help painful periods
- Not suitable for women who have had breast cancer
- Might not be suitable for women with some health conditions, see a doctor to discuss
- Does not protect against STIs

IUD (intrauterine device)
There are two kinds of IUD or intrauterine device, one is hormonal called Mirena and one is a copper IUD. An IUD is placed inside the uterus (womb) to prevent pregnancy. The hormonal IUD slowly releases the hormone progestogen for up to five years. The copper IUD is non hormonal and should be replaced every five years.

- Very effective preventing pregnancy
- Mirena is good for painful and heavy periods
- Can be removed easily
- Lasts for a long time
- does not protect against STIs

Emergency contraceptive pill
If you have unprotected sex (without contraception) and want to avoid becoming pregnant you can get the emergency contraceptive pill at the chemist without a prescription from the doctor.

- it’s a pill containing the hormone progestogen
- it can be taken up to 5 days after unprotected sex but it is best if taken in the first 24 hours after sex

The emergency contraceptive pill can make you feel sick so you might need tablets for nausea.
Permanent contraception (sterilisation)

For women

Tubal ligation or ‘getting your tubes tied’ is a surgical procedure for a woman that blocks the fallopian tubes so that the egg can't get from the ovary to the uterus and the sperm can't get to the egg.

If it doesn't stop the periods pregnancy is possible (about 5 women in every 100 who have had their tubes tied), but is not likely.

For men

Vasectomy is a surgical procedure that blocks the tube (the vas) that carries sperm from the testicles to the penis. The chances of pregnancy after having a vasectomy are around one in 1,000. A man will still be able to have an orgasm after a vasectomy. The operation is quite quick and is done with local anaesthetic or with the man asleep.

Further information:

**Sexual Health & Family Planning Australia** is the national peak body for sexual health and family planning organisations (our Member Organisations) across Australia. These organisations provide a range of sexual and reproductive health clinical services, community education programs, professional training and research. Information sheets about contraception can be found on the state member organisations’ websites.

[www.shfpa.org.au](http://www.shfpa.org.au)