

## a young person's guide to contraceptives

This brief guide groups contraceptives according to how often you have to remember to do something to make sure you're protected against pregnancy.

For some young people, this can be an important factor in their choice of method. Others might be more influenced by how the methods work, or by what side-effects they may have.

You might feel sure that you could remember to take a pill every day. Or maybe you think your life is too chaotic for that. Maybe you don't want to have to think about contraception every day - or even once a week.

You're the one who has to decide which method you're going to rely on. To help you with your decision, you can make an appointment to talk to a contraceptive nurse on **08456 50 51 52**.

In order to make an informed decision, you need to know about all the available contraceptives and their various pros and cons. You don't have to be having sex already to use this information - in fact, it's much better to have a plan about contraception before you start having sex.

You can learn more about contraceptives, and find clinics and services near you (including special clinics and services for young people), on these websites:

[www.sexualhealthcambs.nhs.uk](http://www.sexualhealthcambs.nhs.uk)  
[www.nhs.uk/worhtalkingabout](http://www.nhs.uk/worhtalkingabout)  
[www.fpa.org.uk](http://www.fpa.org.uk)  
[www.brook.org.uk](http://www.brook.org.uk)

Want to talk with someone? Try one of these special young people's helplines:

**Sexwise: 0800 28 29 30**  
**Brook: 0808 802 1234**  
**Sexual Health Direct: 0845 122 8690**

These helplines will be answered by people with experience of talking about sex and sexual health with young people.

**Remember: the NHS provides FREE, CONFIDENTIAL contraceptive services for men and women of all ages, including those under 16.**

To find your nearest contraceptive service go to [www.sexualhealthcambs.nhs.uk](http://www.sexualhealthcambs.nhs.uk)

## contraceptives: how they work

All contraceptives work in one of these three ways:

- 1 they put a physical barrier between sperm and egg (such as condoms);
- 2 they use hormones that stop the body releasing an egg and cause other changes that prevent a pregnancy happening (such as pills, patches and the IUS); or
- 3 they change the environment in the womb so that sperm die before they reach an egg (IUD/Coil).

**Remember: condoms are the only contraceptive that also offers protection against sexually transmitted infections (STIs).**

# SEX... are you ready?

You can always choose whether you want to have sex, whoever you're with. Just because you've done it before, even with the same person, doesn't mean that you have to do it again.

Working out whether you're ready is one of life's big decisions. You're the only one who can, and should, decide. Whether you're thinking about losing your virginity or having sex again, remember the following tips.

It's better to have an embarrassing talk about sex than an embarrassing sexual encounter before you're ready.

There are lots of things to think and talk about, such as:

- are you both ready?
- will you be having sex for the right reasons and not because of peer pressure?

Go to [www.urlife.org.uk](http://www.urlife.org.uk) and download a printable quiz called **R U READY?** that can help you decide whether you are really ready for sex - or not.

## emergency contraception

If you've had sex without using contraception, or you've forgotten to take your pill or think that your contraceptive may have failed, there are two emergency methods you can use:

- the emergency pill or "morning after" pill which should always be taken as soon as possible but can be used up to 3, or sometimes up to 5 days after unprotected sex. You can get it free from contraception clinics, GPs and some pharmacies. The sooner emergency contraception is taken the more effective it will be.
- You can have an IUD fitted up to 5 days after the unprotected sex. This is the most effective method of emergency contraception. It can be kept in to provide on-going contraception. It can be arranged through contraception clinics (phone **08456 50 51 52**) or some GPs.

For full details of where to go for emergency contraception see [www.sexualhealthcambs.nhs.uk](http://www.sexualhealthcambs.nhs.uk) Any of the helplines listed (left) can help you find services in your area.

## sex isn't everything

Sex isn't the only aspect of a relationship, and there are other ways of enjoying each other's company.

Discuss what you want and what you don't want to do. You can do other things that you both like, such as talking, meeting each other's family and friends, going to gigs or the cinema, doing sport, walking, and listening to music.

You need to have the confidence to work out how you want to respond if sex comes up, and how far to go. Ask yourself if you feel comfortable. Is it the right time, in the right place, and with the right person? Do you really trust the person, and do you feel the same way about one another?

## how to use a condom

- Check that the condoms have the BSI or CE kitemark on the pack 
- Check the use-by date.
- They come in different shapes and size's, just like penises do. Experiment to find the best fit.
- Take the condom out of the packet carefully making sure not to rip it with your nails, teeth or rings.
- Put the condom on after the penis gets hard - and before there is any genital contact between partners.
- Pinch the teat at the end to push the air out, and place the condom on the tip of the penis. Keep pinching while you unroll the condom over the head of the penis. Then continue unrolling all the way down.
- If you're using a water-based lubricant, now is the time to coat the condom. But be careful of oil-based lubricants or products as they can disintegrate the condom.
- After ejaculation, hold the condom on at the base until the penis is withdrawn and then take it off, wrap it in tissue and bin it (not down the toilet).
- Always use a brand new condom if you have any sexual contact again - they can only be used once.
- NEVER put lubricant (lube) inside a condom - it makes it more likely to slip off.
- If you use lube, make sure it is water-based lube. Any oil-based substance will weaken the condom.
- After he comes, the man should hold the condom in place and withdraw while still hard.

## bust those myths: pregnancy

You **CAN** get pregnant:

- the first time you have sex;
- during your period;
- even if you do not have an orgasm;
- even if the penis is pulled out before ejaculation;
- no matter what position you have sex in; and
- even if you douche (squirts liquid into the vagina). Douching can be harmful

## bust those myths: condoms

- Condoms **DO NOT** stop sensations. They are made of extremely thin latex or plastic and have little effect on the feelings during sex.
- Condoms **DO NOT** result in a loss of erection. If you lose your erection when you put on a condom, it is may be because you feel anxious. If you learns to focus on pleasure instead of performance, this problem usually disappears.
- Condoms **DO NOT** have microscopic holes in them that can allow sperm or STIs through. They **DO NOT** have holes in them, full stop.

a guide to  
contraceptives

free condoms for young  
people available through  
the c-card scheme. find out  
where and how to sign up  
at [www.ccardcambs.com](http://www.ccardcambs.com)



free  
condoms  
for young  
people



# a brief guide to contraceptives (and how often you have to remember them)

## think & act every day

## think & act once a week

## think & act once a month

### What is it? >>

#### Combined Pill

A pill containing two hormones (estrogen and progesterone). It is taken every day for 21 days, followed by a 7-day break.



#### Progestogen-only pill (or mini-pill)

A pill containing the hormone progesterone. It is taken every day with no breaks.



#### Patch

A small sticky patch containing progesterone and estrogen. It is worn on the skin and changed once a week.



#### Vaginal Ring

A small, flexible plastic ring (containing estrogen and progesterone) that you put into your vagina. After 21 days, you remove it, and 7 days later, you put in a new one.



### Advantages >>

- Can reduce bleeding, period pain and pre-menstrual symptoms
- Fertility returns quickly after stopping use

- Has no serious side-effects
- Can be used by women who can't use the combined pill

- Easy to use. Can help with heavy or painful periods
- Isn't affected by vomiting or diarrhoea
- Fertility returns quickly after stopping use

- You don't have to think about daily contraception
- Isn't affected by vomiting or diarrhoea
- Doesn't interrupt sex

### Disadvantages >>

- Can cause headaches, nausea, breast tenderness
- Missed pills, vomiting or diarrhoea can make it less effective

- Can cause acne, weight gain and headaches
- Not effective if taken over 3 hours late
- Vomiting and severe diarrhoea can make it less effective

- May be seen by others
- Can cause headaches, nausea, breast tenderness

- You need to be comfortable with putting it in and taking it out
- Can cause headaches, nausea, breast tenderness

## think & act every time you have sex

## think & act every time you have sex

### Male condom

#### What is it?

A sheath made of very thin rubber or plastic. It is put on the penis once it's hard, but before any genital contact between partners.

#### Advantages

- No hormones
- No side-effects
- Offers good protection against sexually transmitted infections (STIs)

#### Disadvantages

- Can interrupt sex
- Can slip off or split if used wrongly or if they're the wrong size or shape for the man



Used correctly, male condoms are **98%** effective against pregnancy (female condoms are **95%** effective). Condoms are the only contraceptive that also offers protection against STIs. Many people use condoms as well as contraceptives with new partners or whenever they think they might be at risk of STIs. Both partners need to know how to use condoms correctly (see overleaf).

### Female condom

#### What is it?

A soft, thin polyurethane sheath that loosely lines the vagina and covers the area just outside.

#### Advantages

- No hormones
- No side-effects
- Offers good protection against STIs
- Need not interrupt sex
- Controlled by the woman

#### Disadvantages

- Not very nice to look at
- Can be awkward to insert and remove
- Not as widely available as the male condom, and more expensive



## think & act occasionally

### What is it? >>

#### Injection

An injection of the hormone progesterone, usually in your bottom.



#### Implant

A small flexible rod that is inserted under the skin, usually on the inside of your upper arm. It slowly releases the hormone progesterone.



#### Intrauterine System (IUS)

A small, T-shaped plastic device put into the womb through the vagina. It slowly releases the hormone progesterone.



#### Intrauterine Device (IUD)

A small copper and plastic device put into the womb through the vagina. It changes the environment in your womb so that sperm die before they reach an egg.



### Advantages >>

- Lasts 12 weeks
- May help with heavy periods (some women stop bleeding altogether)

- Lasts 3 years but can be removed sooner
- Fertility returns immediately after stopping use

- Lasts 5 years but can be removed sooner
- Periods can become lighter, shorter and less painful
- Fertility returns immediately after stopping use

- Can last for 10 years but can be removed sooner
- Works as soon as it's put in
- Fertility returns immediately after stopping use

### Disadvantages >>

- Can't be removed once injected
- Fertility takes some time to return after stopping use
- May cause unpredictable or prolonged bleeding
- Not usually a first choice for women aged under 18

- Irregular bleeding affects about 40% of users
- It must be put in and taken out by a doctor or nurse
- Possible side-effects include acne and mood swings

- Irregular spotting or bleeding is common at first
- It must be put in and taken out by a doctor or nurse

- Periods can last longer, be heavier or more painful
- It must be put in and taken out by a doctor or nurse