Pregnancy Prevention

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Ground Rules

- Respect each other
- Listen when others are talking
- Remember that what works for you may not work for everyone
- Keep an open mind
- No put downs
- Ask questions!

Objectives

At the end of this lesson, students will be able to:

- List at least 5 different contraceptive methods to prevent future pregnancies
- List 3 negative health outcomes related to pregnancies less than 18 months after birth

What methods of contraception/birth control can you name?

Different Methods of Contraceptives

Write down on separate document the pros/cons



Method	How well does it work?	How to Use	Pros	Cons
External Condom	82%	Use a new condom each time you have sex Use a polyurethane condom if allergic to latex	Can buy at many stores Can put on as part of sex play/foreplay Can help prevent early ejaculation Can be used for oral, vaginal, and anal sex Protects against HIV and other STIs Can be used while breastfeeding	Can decrease sensation Can cause loss of erection Can break or slip off
Internal Condom	79%	Use a new condom each time you have sex Use extra lubrication as needed	Can put in as part of sex play/foreplay Can be used for anal and vaginal sex May increase pleasure when used for anal and vaginal sex Good for people with latex allergy Protects against HIV and other STIs Can be used while breastfeeding	Can decrease sensation May be noisy May be hard to insert May slip out of place during sex

Method	How well does it work?	How to Use	Pros	Cons
Progestin IUD Liletta®, Mirena®, Skyla® and others	> 99%	Must be placed in uterus by a health care provider Usually removed by a health care provider	May be left in place 3 to 7 years, depending on which IUD you choose No pill to take daily May improve period cramps and bleeding Can be used while breastfeeding You can become pregnant right after it is removed	May cause lighter periods, spotting, or no period at all Rarely, uterus is injured during placement Does not protect against HIV or other STIs
Copper IUD ParaGard®	> 99%	Must be placed in uterus by a health care provider Usually removed by a health care provider	May be left in place for up to 12 years No pill to take daily Can be used while breastfeeding You can become pregnant right after it is removed	May cause more cramps and heavier periods May cause spotting between periods Rarely, uterus is injured during placement Does not protect against HIV or other STIs

Method	How well does it work?	How to Use	Pros	Cons
The Pill	91%	Must take the pill daily	Can make periods more regular and less painful Can improve PMS symptoms Can improve acne Helps prevent cancer of the ovaries You can become pregnant right after stopping the pills	May cause nausea, weight gain, headaches, change in sex drive — some of these can be relieved by changing to a new brand May cause spotting the first 1-2 months Does not protect against HIV or other STIs
Progestin-Only Pills	91%	Must take the pill daily	Can be used while breastfeeding You can become pregnant right after stopping the pills	Often causes spotting, which may last for many months May cause depression, hair or skin changes, change in sex drive Does not protect against HIV or other STIs

Method	How well does it work?	How to Use	Pros	Cons
Emergency Contraception Pills Progestin EC (Plan B® One-Step and others) and ulipristal acetate (ella®)	58 - 94% Ulipristal acetate EC works better than progestin EC if you are overweight Ulipristal acetate EC works better than progestin EC in the 2-5 days after sex	Works best the sooner you take it after unprotected sex You can take EC up to 5 days after unprotected sex If pack contains 2 pills, take both together	Can be used while breastfeeding Available at pharmacies, health centers, or health care providers: call ahead to see if they have it People of any age can get progestin EC without a prescription	May cause stomach upset or nausea Your next period may come early or late May cause spotting Does not protect against HIV or other STIs Ulipristal acetate EC requires a prescription May cost a lot

Let's Hear From You!

Raise your hand or type your answers in the chat box

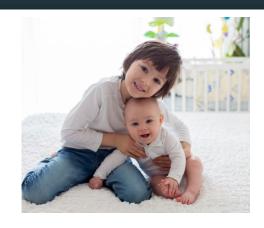
- Why is family planning important?
- having a second child too soon after the first?

What do you think are the risks of



The Importance of Birth Spacing video

Overview of Birth Spacing



- Birth spacing refers to the time from one child's birth until the next pregnancy, also known as the interpregnancy interval (March of Dimes, 2015)
- Between 2006 and 2010, about 33% of all pregnancies among women with a prior live birth in the U.S. occurred less than 18 months after the prior birth

Overview of Birth Spacing

Pregnancies starting less than 18 months after birth, are associated with negative birth outcomes including:

- Preterm birth
- Newborn death
- Low birth weight
- The placenta partially or completely peeling away from the inner wall of the uterus before delivery
 - Placental abruption

- Congenital disorders
 - Cerebral palsy, Down
 Syndrome, spina bifida, and
 cystic fibrosis
- Schizophrenia
- Maternal anemia, or iron deficiency

Overview of Birth Spacing - Planning Next Pregnancy

It is recommended to wait 18-24 months after your first pregnancy to have another child

Affordable Care Act provides financial assistance through health plans for women's health & family planning

Major categories of contraception include:

- long-acting reversible contraception (intrauterine devices, implants)
- hormonal methods (such as oral contraceptives)
- barrier methods (such as condoms or diaphragms)
- natural family planning (e.g. tracking ovulation)

Virtual Scavenger Hunt

- Find 5 local resources:
 - 1 place to get birth control
 - 1 place to get an IUD implanted
 - 1 place to get Plan B
 - 1 place for emotional help
 - 1 place to get condoms
- Submit your work via Google Form:
 https://forms.gle/28PJbhhLhUjnfUPq6



Wrap up: What is your preferred contraceptive method? Name the pros/cons with a partner

Exit Ticket - Google Form

https://forms.gle/BKzjXpCEDwgsT8Fu5

Any questions?

References

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