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| Method | How it Works | Effectiveness | **Advantages** | **Possible Problems** |
| Levonorgestrel  Intra-uterine system (IUS)  (Hormonal IUD) | Inserted into the uterus by a health care provider. Device containing progesterone hormones, prevents release of egg, thickens cervical mucus, and prevents the implantation of a fertilized egg. | **97-99% effective against pregnancy. No protection from STIs.** | No daily pill; nothing to put in place before intercourse; may reduce menstrual cramps and bleeding; may be left in place for up to five years. | Possible spotting between periods; possible displacement of IUS. Very light or no periods. |
| Copper bearing  Intra-uterine device (IUD)  (Non- hormonal) | Inserted into the uterus by a health care provider. Contains copper, prevents fertilization and/or implantation of fertilized egg. | **97-99% effective. No protection from STIs.** | No daily pill; nothing to put in place before intercourse; no hormonal side effects; may be left in place for up to twelve years. Can be used as emergency contraception. | Increase in cramps; heavier and longer periods; possible displacement of IUD. |
| Implant  (Nexplanon) | Inserted under the skin of arm by a health care provider, effective for 3 years. Prevents release of egg, thickens cervical mucus and prevents implantation of a fertilized egg. | **99% effective against pregnancy. No protection from STIs.** | Nothing to put in place before intercourse; lasts for 3 years. | Irregular bleeding possible loss of periods. Must be implanted/removed by a health care provider. |
| Birth Control Shots  (Depo-Provera®\*, 12 week injection, DMPA) | Injection once every three months. Prevents release of egg, thickens cervical mucus and prevents implantation of a fertilized egg. | **99.7% effective. No protection from STIs.** | No daily pill; reduces cramps; nothing to put in place before intercourse; protects against some cancers. | Loss of monthly period, irregular bleeding, depression, increased appetite, change in sex drive. May cause delay in getting pregnant after shots are stopped. Recommended for  2 year use because it can decrease bone density. |
| The Patch | Apply a new patch each week. Prevents release of egg, thickens cervical  mucus and prevents implantation of fertilized egg. | **95-99% effective. No protection from STIs.** | No daily pill. | Skin reactions at site of application, breast tenderness. |
| The Ring (NuvaRing®)\* | Insert into the vagina once a month. Prevents release of egg, thickens cervical mucus and prevents implantation of a fertilized egg. | **95-99% effective. No protection from STIs.** | No daily pill; does not require a “fitting” by a health care provider. | Increased vaginal discharge; vaginal irritation; may be uncomfortable for some women to insert. |
| The Pill | Take a pill each day. Prevents release of egg, thickens cervical mucus and prevents implantation of fertilized egg. | **95-99% effective. No protection from STIs.** | Nothing to put in place before intercourse. Less cramping; may regulate periods; protects against some cancers. | Must be taken daily. Irregular bleeding and breast tenderness. |
| Method | How it Works | **Effectiveness** | **Advantages** | **Possible Problems** |
| Condom | Following package instructions, place over penis before intercourse to create a barrier; prevents sperm joining egg. | **86-98% effective.**  **Some protection against STIs.** | Provides some protection from  infection and pregnancy; available at many locations. Sold over the counter. | Latex allergies; polyurethane condoms available; loss of sensation, and breakage due to user error. |
| Female Condom  (Reality®)\* | Inserted into vagina to create a barrier; prevents sperm from joining egg. | **79-95% effective. Some protection**  **from STIs.** | Provides some protection from infection and pregnancy; sold over the counter; can be used by people allergic to latex. | May be noisy and may be difficult  to insert. |
| Spermicide (foam, cream, jelly, film, sponge, or suppository) | Following package instructions, apply before intercourse. Immobilizes sperm to prevent them from joining egg. | **50-94% effective. No protection from STIs.** | Sold over the counter. | Can be messy; using product with nonoxynol-9 more than three times a day may be irritating. |
| Diaphragm or Cervical Cap | Inserted into vagina to create a barrier, preventing sperm from joining egg. | **80-94% diaphragm**  **60-90% cervical cap**  **No protection**  **from STIs.** | No major health concerns; no hormonal side effects; method can last  several years. | Must be put in place before intercourse; can be messy; can be difficult to fit; latex allergies. |
| Fertility Awareness Method (Basal Body Temp. Standard Days Billing’s Method) | Checking temperature and cervical mucus daily to attempt to predict ovulation. | **75-99% effective. No protection from STIs.** | No medical or hormonal side effects. | Ovulation difficult to predict. Precise record keeping necessary. Requires periods of abstinence. |
| Emergency Contraception Pills | Prevents release of egg, thickens cervical mucus and prevents implantation of a fertilized egg if taken up to 120 hours after unprotected sex. | **75-89% effective against pregnancy. No protection from STIs.** | Can be used if primary birth control failed or if you had unprotected sex. | Only effective for the most recent act of unprotected intercourse. More effective when the first dose is taken within 72 hours. |
| Continuous Abstinence | Not having oral, anal or vaginal contact with a partner. Prevents sexual body fluid contact, which prevents pregnancy and STIs. | **100% effective against pregnancy and STIs.** | No medical or hormonal side effects.  No risk of infection or unintended pregnancy. | May be difficult to abstain from sex for long periods of time; may be unprepared to use protection when abstinence ends. |
| Sterilization (Vasectomy or Tubal Ligation) | An operation that permanently blocks either a man’s tubes that carry sperm or a woman’s tubes where a sperm fertilizes an egg. | **95.5-99.9% effective. No protection**  **from STIs.** | Permanent protection against pregnancy, no lasting side effects, no effect on sexual pleasure, and protects women whose health could be threatened by pregnancy. | Risks of minor surgery; not  usually reversible. |

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