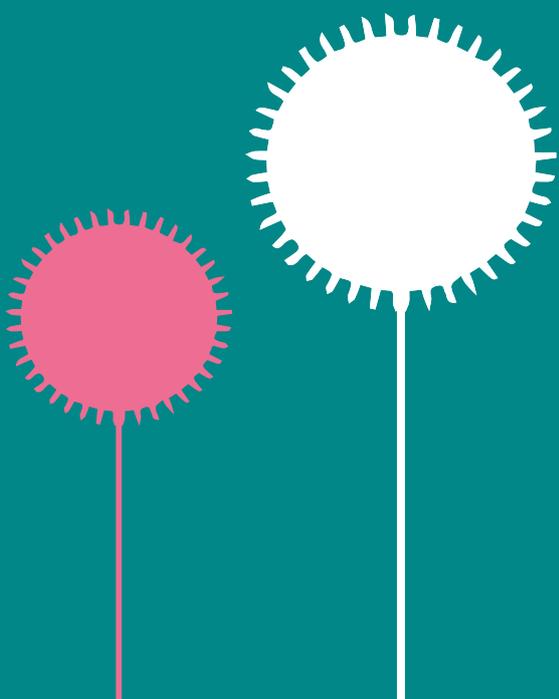


FACT SHEET CONTRACEPTION



CHILDREN'S RADIO
FOUNDATION

Fact Sheet Contraception

What is contraception?

Contraception: a range of birth control services, devices and practices to prevent pregnancy. Contraception works to stop the sperm and egg from joining in a variety of ways. Contraceptives must be used consistently and correctly to be effective.

Defining methods of contraception

Depending on your needs, you may find that a specific type of contraceptive may work best for you! Take a look at some of the many options, durations of protection, advantages and side effects of contraceptive methods.

Methods with **no 'user failure'** (i.e. they do not depend on you remembering to take or use them):

	<u>Contraceptive Injection</u>	<u>Implant</u>	<u>Intrauterine system (IUS)</u>	<u>Intrauterine device (IUD)</u>	<u>Male and Female Sterilization</u>
What is it?	An injection of progestin . Progestin thickens cervical mucus, making it difficult for sperm to enter the uterus and fertilise the egg.	A small, flexible rod put under the skin of the upper arm releases progestin.	A small, T-shaped, progestin-releasing, plastic device is put into the uterus.	A small plastic and copper device is put into the uterus.	The fallopian tubes in women or the tubes carrying sperm in men are cut, sealed or blocked.
Effectiveness	Perfect use: over 99% Typical use: 94%	Perfect use: over 99% Typical use: over 99%	Perfect use: over 99% Typical use: over 99%	Perfect use: over 99% Typical use: over 99%	Failure rate is about 1 in 200 or 1 in 500 for females (depending on method), and 1 in 2,000 for males.
HIV and STI protection	none	none	none	none	none
Advantages	Lasts for 8 or 13 weeks. You don't have to think about contraception during this time.	Works for 3-5 years but can be taken out sooner.	Works for 3-5 years but can be taken out sooner. Periods often become lighter, shorter and less painful.	Can stay in 5-10 years depending on type but can be taken out sooner.	Sterilisation is permanent with no long or short-term serious side effects.
Disadvantages	Cannot be removed from the body so side effects may continue while it works and for some time afterwards.	It requires a small surgical procedure to fit and remove it.	Irregular bleeding or spotting is common in the first six months.	Periods may be heavier, longer or more painful.	Should not be chosen if in any doubt about having children in the future.

Self responsibility means taking responsibility for the choices we make in our life. When we take ownership of our choices, we empower ourselves to find information, solutions, ask for help and celebrate all our accomplishments.

The "dual method" is the only reliable way to prevent pregnancy and sexually transmitted infections, including HIV. This means using condoms with another form of birth control (IUD, IUS, injections, implants, vaginal ring, etc.)

Fact Sheet Contraception

Defining methods of contraception

Methods with 'user failure' (i.e. you have to use and think about them regularly or before you have sex each time):

	Progestin-only pill (POP)	Combined pill (COC)	Female condom	Male condom	Vaginal ring
What is it?	A pill containing progestin, taken orally.	A pill containing estrogen and progestin, taken orally.	Soft, thin polyurethane sheath that loosely lines the vagina and covers the area just outside.	A very thin latex or synthetic rubber sheath, put over the erect penis.	A small, flexible, plastic ring put into the vagina releases estrogen and progestin.
Effectiveness	Perfect use: 99% Typical use: 91%	Perfect use: 95% Typical use: 79%	Perfect use: 95% Typical use: 79%	Perfect use: 98% Typical use: 82%	Perfect use: 99% Typical use: 91%
HIV and STI protection	none	none	Condoms are the best way to protect against STIs and HIV	Condoms are the best way to protect against STIs and HIV	none
Advantages	Can be used by women who smoke and are over 35, or those who are breastfeeding.	Often reduces bleeding and period pain, and may help with premenstrual symptoms	A female condom can be put into the vagina up to 8 hours before sex and thus does not have to affect the spontaneity of sex.	Male condoms come in a variety of shapes, sizes and textures	One ring stays in for three weeks – you don't have to think about contraception every day.
Disadvantages	Pills must be taken daily. Late pills, vomiting or severe diarrhoea can make it less effective	Missing pills, vomiting or severe diarrhoea can make it less effective.	Not as widely available as male condoms.	May slip off or split if not used correctly or if wrong size or shape.	You must be comfortable with inserting and removing it.

Perfect use means using the method **correctly every time**.

Typical use is when you **don't always** use the method correctly.

Emergency Contraception

- Emergency contraception is also called the "Morning-After Pill." It is taken after having unprotected sex to prevent pregnancy. It must be taken within five days for the emergency contraception to work, but the earlier it is used, the more effective it will be.
- There is no limit to the number of times you can use emergency contraception, but if it is used regularly, it is time to find a more reliable contraceptive.
- Emergency contraception does not protect against HIV or STIs so a test is recommended if you have had unprotected sex.
- The "Morning-After Pill" or emergency contraception does not abort a pregnancy, it prevents it.

(FPA.org)

Choosing not to have sex is called abstinence, or abstaining from sex. For some, this means avoiding vaginal, anal and oral-genital sex altogether. Others may choose to avoid any type of sexual or intimate contact, including hugging and kissing.

Advantages:

- Choosing not to have sex is free and available to all.
- Not having sex is the only 100% effective method of preventing STIs and unintended pregnancy.

Disadvantages:

- If you have made the choice not to have sex, and change your mind in the heat of the moment, you might not have birth control handy.

(Advocates for Youth)

Fact Sheet Contraception

Bust the Myth!

There's lots of information out there about contraceptives. There's also lots of misinformation that prevents people from accessing contraceptive services. Let's bust some myths!

Myth 1: "Providing contraception to young people encourages them to have sex."

Fact: There is no evidence that providing contraceptive information and services to young people makes them more likely to have sex. In fact, according to a survey by the [Contraceptive Choice Project](#), even providing free birth control to people did not result in increased sexual behaviour.

([Obstetrics & Gynecology](#))

Myth 2: "You can't get pregnant if you're on your period."

Fact: While there's a lesser chance of conceiving when you're on your period, it's not impossible. Conception (becoming pregnant) happens when a woman ovulates (around two weeks before you get your period), but if you experience short cycles or irregular periods, there's a chance you could become pregnant even on your period.

([Marie Stopes](#))

Myth 3: "Being on the pill too long will delay or harm your chances of becoming pregnant later in life."

Fact: False! Scientists have found no evidence to prove that being on the pill – whether for one year or 10 – has an effect on fertility. In fact, studies show that within one year of stopping the pill, 80% of women who want to become pregnant do.

([Marie Stopes](#))

Myth 4: "The pill is always effective immediately after you begin taking it."

Fact: In some women, one complete menstrual cycle is needed for the hormones in the pill (oral contraceptive) to work to prevent ovulation. Some doctors recommend using other methods of birth control, like condoms or diaphragms, during the first month of taking the pill.

([WebMD](#))

Myth 5: "Emergency contraception is the same as an abortion."

Fact: Emergency contraception prevents pregnancy, it doesn't interfere with an existing pregnancy. In medical terms, a pregnancy exists only if the fertilized egg is implanted in the uterus. If you take a morning-after pill, but are already pregnant, it does not harm the fetus.

([Health.com](#))

Empower yourself! Know your sexual and reproductive rights in South Africa

- ★ As young people, we have the right to access youth-friendly reproductive health information, services and support.
- ★ We have the right to access safe, effective, affordable and acceptable contraceptive methods of our choice.
- ★ According to the law, contraceptives may be provided to young people 12 years and older without the consent of their parents or caregivers.
- ★ [The Choice on Termination of Pregnancy Act of 1996](#) enables youth 12 years and older to have abortions on their own.

Fact Sheet Contraception

Facing the Challenges

Even though contraception is widely available in South Africa and policies protect people's rights to contraceptive services, there are still high numbers of unplanned and unwanted pregnancies, especially among youth. So why is this? Here are some of the challenges:

- Young people and adolescents lack easy access to youth-friendly contraceptive information, services and support.
- Gender inequality and discrimination puts young women, gender nonconforming youth and LGBTI people at a disadvantage when trying to access contraception information and services.
- Negative attitudes and disapproval of young people accessing contraception information and services makes many youth feel judged when they seek information and services.
- Existing misinformation or poor quality information about sex and contraception can lead to confusion and uninformed decision making, resulting in unplanned and unwanted pregnancy, especially for young people.
- Many young women in unequal relationships with men, especially older men, have difficulty negotiating their sexual and reproductive rights.

Tools and Resources

- ★ [How to find the best contraception for you!](#)
- ★ [Check out Marie Stopes' reproductive health tools made with your lifestyle in mind](#)
- ★ [Long Acting Reversible Contraceptives: The Easiest Birth Control Ever??](#)
- ★ [10 Facts about Contraception that Might Surprise You](#)
- ★ [Watch and learn more about IUDs](#)
- ★ [Emergency Contraception Myths](#)

Services

Marie Stopes has 14 centres across South Africa. To make an appointment for a contraceptive consultation [book online](#) or call 0800 11 77 85. Local clinics also have a range of contraceptives available.

"Young people are sexual beings. They have sexual needs, desires, fantasies and dreams. It is important for all young people to be able to explore, experience and express their sexualities in healthy, positive, pleasurable and safe ways. This can only happen when young people's sexual rights are guaranteed."

[Exclaim! Young People's Guide to 'Sexual Rights: An IPPF declaration'](#)

Radio Production Guide

Preparing for the show

Ways to talk about gender, stereotypes and teenage pregnancy

- ★ Choosing the contraceptive that works best for you
- ★ Who takes the responsibility of actually getting the contraceptive? You or your partner?
- ★ So what's stopping you from getting and using contraception?
- ★ Dual method - health professionals say it's the best way to prevent pregnancy and HIV

Choose an angle

Different ways to talk about: So what's stopping you from getting and using contraception?

- ★ If I take contraception my partner will think I'm cheating
- ★ My parents will find out
- ★ I'm a girl, I don't have the power to negotiate condoms or contraception
- ★ Nurses at the clinic judge me
- ★ It takes courage to stand up for my rights to get contraception - and I'm too shy to demand it
- ★ I don't want my body to change; I don't want to get fat

So what's stopping you from getting and using contraception?

Stereotypes can be changed

Bring out multiple points of view and stay out of the morality of this topic. You know you're dealing with morality when you hear the words "good" "bad" "shameful" "disgusting"

Radio Production Guide

format

Vox Pop

Vox pop's aim: To get many opinions on one topic

Who do you talk to: Anybody from the community

Question: So what's stopping you from getting contraception? / What stops young people from getting contraception?

Audio commentary

Audio commentary aim: To get people's opinion about a topic that they care deeply about.

Who do you talk to: Youth in the community who can talk about their experiences seeking out contraceptive information, services and/or support.

Audio profile

Audio profile aim: To get a first person account of someone's experience, passion and journey. Audio profiles often aim to inspire.

Who do you talk to: Talk to a young woman or adult who is open to talking about how she got started on contraception (ideally, someone who started their process as a young person).

- ★ How did you know when to start using contraception?
- ★ What did you know about contraception at the time?
- ★ How did you feel when you went to the clinic to ask for contraception?
- ★ Do you think being a woman affected your experience of accessing contraception? If so, how?
- ★ What do you think health professionals can do to make sexual and reproductive health services more youth-friendly?
- ★ What advice would you give to young people who are considering using contraception?
- ★ Does your contraceptive protect you from HIV?

Call-in Quiz

The aim of a Call-in Quiz: To invite listeners to participate in a fun learning opportunity and possibly offer a small prize (airtime, a shout out).

Voice 1: Hey listeners, think you know all there is to know about contraception? Let's put your knowledge to the test with a call-in quiz! Call the station at [STATION PHONE NUMBER]

Voice 2: Listen carefully and spot the myth. Which of the following statements about the pill is FALSE:

- A. The pill can help ease painful periods and address hormonal imbalances, acne and irregular periods.
- B. The pill can protect against STIs.
- C. The pill must be taken every day to be effective.

Voice 1: Call in at [STATION PHONE NUMBER] and tell us which of the following is FALSE. We want to hear from you!

Radio Production Guide

How to present your show

Use your produced radio features, your research, and the suggested script and questions to write your own script.

Suggested questions for your interview with a healthcare professional who has experience helping young people access sexual and reproductive health information and start using contraception (nurse, clinicians and doctors)

- ★ What are contraceptives?
- ★ How old do you have to be to start using contraceptives in South Africa?
- ★ How does a person know they should start using contraceptives?
- ★ What birth control methods are most affordable in South Africa?
- ★ How can young people figure out which methods work best for them?
- ★ Does a person have to be sexually active to start using certain contraceptives methods, like the pill or an IUD?
- ★ What advice would you give a young person who wants to start birth control but is afraid of judgement from parents or partners?
- ★ What can health professionals do to make sexual and reproductive health services more youth-friendly?

[INTRO:]

Host 1: It's just gone [TIME] and you're just in time for the [NAME OF SHOW] on [RADIO STATION]. My name is [NAME]...

Host 2: And my name is [NAME], and today's show is all about contraception!

Host 1: Yebo, we're bringing the contraception conversation right to you - 'cause we all have the right to make well-informed decisions about our own bodies. It's a confusing world out there, and the judgement, myths, and misinformation about contraception aren't making it any easier for us. It's time to clear the air and talk about why young people need access to youth-friendly contraceptive information, services and support.

Host 2: We'll be asking the question, "So what's stopping you from using contraception?"

Host 1: Let's hear more about the ways people negotiate using contraception.

[PRESENT WHO IS BEING INTERVIEWED]

[PLAY THE INTERVIEW]

[OUTRO:]

Host 1: Today, we've learnt so much about contraception! It's empowering to know that so many safe, effective and affordable birth control options are available - and we have a right to choose the ones that work best for us!

Host 2: Exactly! Contraception is all about personal choices. We have the right to live healthy lives! That means we have the right to access information, services and support we need to make informed decisions about our sexual and reproductive health. Have you thought about what contraceptive option works best for you? I'm certainly thinking about it now.

Host 1: Me too, hey! All I know is that having a baby while I'm young or getting an STI is not in my plans, so I'm really taking note here. Next week on [DAY] at [TIME] we'll be talking all about [NEXT WEEK'S SHOW TOPIC]. Until then, it's bye from us!

Once you've finalised your script, produced your radio features and finalised your "show clock" it's time to go live on air!

Prepare to present your show

Radio Production Guide

Show outline

General intro
Intro vox pop
Vox pop
Outro vox pop
Music transition
Intro audio commentary
Audio commentary
Outro commentary
Music transition & Jingle
Intro interview (or Intro audio profile)
Interview (or Audio profile)
Outro interview (or outro audio profile)
Music transition & Jingle
PSA
General outro
Music end

Ethics and consent

This is a sensitive topic, so make sure you inform your interviewees properly and get their full consent.



You must always introduce your show and radio features. Then once you've played your features, have a concluding statement for each one. Don't forget a final conclusion for the very end of the show.

Use links (facts, tips, did you know, music) to glue it all together.



Now write your radio script