

# Birth Control Basics

Grade 7 and 8, Lesson #14

## Time Needed

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50 minutes

## Student Learning Objectives

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To be able to...

1. List at least four birth control methods, including abstinence, with no prompt.
2. Name seven methods, given a description of each.
3. Explain that any method is more effective than not using a method and is safer than pregnancy and childbirth.
4. List at least two good reasons to communicate with parents and loved ones about birth control.

## Agenda

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1. Explain the relevance of today's lesson.
2. Brainstorm birth control methods, including abstinence.
3. Introduce 7 methods, focusing on what each is and how it reduces pregnancy risk. (Use the *Birth Control Reference Sheets 1 and 2* and, optionally, display actual methods.)
4. Have students, individually or in small groups, fill out the second page of *Reference Sheet 1*. Discuss and debrief it.
5. Answer students' verbal and anonymous questions.
6. Optional: Assign homework.

**Note:** The teacher's script is indicated by italics. This script is meant to be a guide for teachers who might find it helpful.

## **Materials Needed**

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### **Classroom Materials:** (1 per class)

- Optional set of birth control methods<sup>1</sup>  
(Should include a card with "NO".)

### **Student Materials:** (1 per student)

- *Birth Control Reference Sheets 1 and 2*
- OPTIONAL: *Family Homework Exercise: Birth Control*
- OPTIONAL: *Birth Control Worksheet*

## Activities:

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### 1. Explain the relevance of today's lesson.

Explain that today's lesson is focusing on PEOPLE, not just teens, and emphasize that you are not assuming that all your students - or even the majority - are having intercourse:

*Today's lesson is on birth control. We are doing this lesson for three reasons. Some people have intercourse in their teens. For them, knowing about birth control is important. That's one reason we're studying it. Other people choose not to have intercourse in their teens, but almost everyone - even those who wait until marriage or who are gay or lesbian - will have intercourse at some time in his or her life. So, the second reason we're doing this is that most of you will want to make decisions about birth control some day.*

*The third reason is that I want you to be able to help your friends and brothers and sisters figure out what's truth and what's myth. The teen community is one another's most common source of sexual information and, often, misinformation. Today, you can learn the difference, so you can help other people you care about to prevent unplanned pregnancies.*

### 2. Brainstorm birth control methods, including abstinence.

Ask the class, "**If a person wanted to NOT have a baby this year, what could he or she do?**" (Answer: Use abstinence or some other kind of birth control.)

Point out that each culture, religion and family has its own beliefs about which method(s), if any, are OK. Today you will focus on which ones are legally available, not on individuals' beliefs. Suggest that students find out what their religion (if they have one) and their parent(s) or guardian(s) believe.

Brainstorm all the kinds of birth control anyone in the class has heard of. If they include non-methods like douching (which doesn't work), male pills (which don't exist yet), or abortion (which doesn't prevent pregnancy and is therefore not counted as a method of birth control) list them separately from actual methods. This lesson will cover just 7 of the 17 methods<sup>2</sup> (see endnote for an explanation of why we chose these 7 to focus on) available in the United States – those bolded in the list here – but write on the board any of these that students may know about, **adding just the bolded ones** they may forget or not have heard of:

- BEHAVIORAL: **abstinence**, withdrawal, fertility awareness, **combining two methods** (e.g., condoms with a hormonal method, like the pill).
- BARRIER: “male” **condom**<sup>3</sup>, “female” condom<sup>4</sup>, diaphragm.
- HORMONAL: the **pill**, the patch, the vaginal ring, the **shot** (Depo-Provera), the **implant** (Implanon), hormonal IUD (Mirena intra-uterine device), emergency contraceptive (**Plan B**) pills.
- SPERMICIDES: foam, cream, gel, suppositories, tablets, film and the sponge.
- OTHER: copper IUD (intra-uterine device), sterilization.

**3. Introduce 7 methods, focusing on what each is and how it reduces pregnancy risk. (Use the *Birth Control Reference Sheets 1 and 2*, and optionally display actual methods.)**

Hand out the *Birth Control Reference Sheet 1*. Describe each of the 7 methods utilizing the *Birth Control Reference Sheet 2* for speaker notes. Emphasis should be on what each method is and how it reduces pregnancy risk. It is probably not necessary in 7th and 8th grade to go into much detail about how a method is used, its benefits, its side effects, its medical risks, its cost, etc. If questions about these issues are asked, do answer them to the best of your knowledge (or say "I don't know"), but we don't recommend raising them yourself.

If you have your district's approval, hold up each method as you describe it. We recommend this because students find them much easier to visualize if they can actually see them. We do not recommend passing the devices around. Very few middle school classes have sufficient maturity.

If you do not consider yourself knowledgeable enough to do such a lecture/demonstration, it is fine to use a guest speaker – your school nurse or a family planning educator -- instead (see page 8 in your *FLASH* binder for suggestions regarding working with guest speakers).

**4. Have students, individually or in small groups, fill out the second page of *Birth Control Reference Sheet 1*, using *Birth Control Reference Sheet 2*. Discuss and debrief it.**

Hand out *Birth Control Reference Sheet 2*. Allow students five minutes to try, individually or in small work groups, filling in the second page of the *Birth Control Reference Sheet 1*. Encourage guessing. It will help you uncover myths and misconceptions. Require pencil so students can correct any misunderstandings, incorrect guesses, and counter-productive attitudes in the discussion that will follow.

**Creative alternatives:** Post questions 1-7 around the room and have small groups rotate to the stations and use markers to propose answers (a different color marker for each small group). Debrief those seven questions. Then give each small group *either* question 8, 9 or 10. As they report back, everyone fills in their *Reference Sheet*.

As you debrief through discussion, elicit as much input from students as possible. Be careful to affirm students for contributing their answers, even when their answers are wrong. These are some points to raise and emphasize as you review the answers:

1. Which method of birth control works 100% of the time (if people are careful to "use" it all of the time)?
  - **Abstinence** ... *but only if sperm are not ejaculated on the woman's genitals.*
2. If a hundred couples had intercourse for a year without any kind of birth control, how many would start a pregnancy?
  - **About 85<sup>5</sup>** ... *in other words, MOST of them (Some of the other 15 couples out of the hundred are fertile, but it may take them longer to become pregnant. Some of the other 15 couples are infertile. Of the 85 couples, some got pregnant on their first*

*intercourse of year. Others got pregnant on the 5th, 12th, or 30th time of having intercourse, etc.)*

3. Of the seven kinds of birth control on the first side of this reference sheet, name three that are more than 90% effective in preventing pregnancy? (Accept any 3 of these 5)
  - **abstinence** ... *nobody really knows how well people do, on average, at sticking to the decision, but it works 100% of the time that it is actually accomplished*
  - **Implanon** (the implant) is 99.95% effective <sup>6</sup>
  - **combining two methods** (e.g., condoms with a hormonal method) ... *nobody has studied the effectiveness of combining two methods but it would be higher than either alone and it would also reduce STD risk*
  - **Depo** (Depo-Provera, the shot) is typically 97% effective <sup>7</sup>
  - **The pill** is typically 92% effective <sup>8</sup>

**Bottom line: These are 92-100% effective in actual use. So how many pregnancies would 100 average couples have after using one of these for a year? 8 or fewer!**

What if students ask about condoms and Plan B? *Condoms are almost as effective against pregnancy as these other 5 options (85% typically).<sup>9</sup> With Plan B it depends when she takes it. If a woman takes it in the first 24 hours after she has unprotected sex or after a condom breaks, it reduces pregnancy risk by up to 95%.<sup>10</sup> That percentage drops each day, though it can be used up to 5 days after sex.*

4. Which methods give the most protection from STDs (sexually transmitted diseases)?
  - **Abstinence**
  - **Condom**

**Bottom line: Only abstinence is a guarantee, but it has to mean abstaining not only from vaginal sex, but also oral and anal sex in order to really protect people from STDs.**

5. Which methods are safer than having a baby?

- **All of them** ... *and especially abstinence*

*Prescription methods are only safe under doctor's orders, of course.*

6. Which methods can teenagers get without parental consent?

- **All of these** ... *which is not to imply that this is ideal*

*Although we realize that in an ideal world every child could share this "coming-of-age" decision with his or her family, the law recognizes that some families can't / don't talk about sexual issues, and the most important thing is helping people prevent unintended pregnancy.*

7. What contraceptive method can be used to prevent pregnancy following unprotected intercourse or a birth control failure (e.g. if a condom breaks)? The sooner a woman takes it, the better it will work.

- **Plan B**

*To be most effective they must be taken as soon as possible, but within 120 hours (5 days) of unprotected intercourse. This can reduce the risk of pregnancy by 89% on average and up to 95% taken the first day. <sup>11</sup> Men and women age 17 or older can get them at a pharmacy or clinic without a prescription. <sup>12</sup> Women under age 17 can get them at clinics, doctors' offices and, in Washington and some other states, from some pharmacists. <sup>13,14</sup> People need to call ahead.*

8. Why is it good to talk with your parents, guardians or other trusted adults about birth control, if you can?
  - *avoids secrecy, lying, guilt, mistrust*
  - *may bring family closer together*
  - *may offer support in going to the doctor or pharmacy*
  - *may offer help in decision-making about intercourse or about birth control, from their experience*
  - *lets you share beliefs*
  
9. Why is it good to talk with your boyfriend/girlfriend/husband/wife about this if you can?
  - *avoids secrecy, lying, guilt, mistrust*
  - *may bring couple closer together*
  - *protects both from unintended pregnancy*
  - *may support each other in going to a doctor or pharmacy*
  - *can help each other use a method correctly, consistently*
  - *lets you share beliefs*
  - *can make decisions together*
  
10. Where else besides this class, could a person get accurate up-to-date information about birth control?
 

<ul style="list-style-type: none"> <li>• <i>Parents or Guardians</i></li> <li>• <i>Other trusted adults</i></li> <li>• <i>Family Doctor</i></li> <li>• <i>Gynecologist</i></li> <li>• <i>Family Planning Clinic, like Health Department or Planned Parenthood</i></li> <li>• <i>Facts of Life Line (sexuality educators are available to answer your questions live by phone Monday-Thursday, from 3-6pm Pacific Time at 888-307-9275; otherwise you get recorded information on various sexual health subjects)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Pharmacist</i></li> <li>• <i>Clergy</i></li> <li>• <i>Internet</i></li> <li>• <i>Public Library</i></li> </ul>
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**5. Answer students' verbal and anonymous questions.**

**6. Optional: Assign homework.**

Possible assignments might be...

- *A Family Homework Exercise: Birth Control*

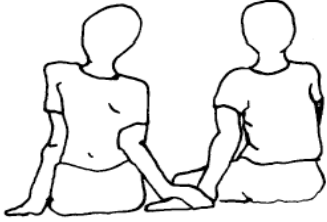

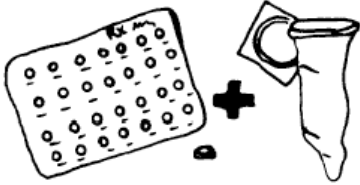

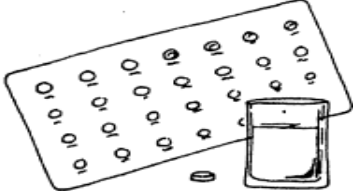




# Birth Control Reference Sheet 1

Name \_\_\_\_\_

Date \_\_\_\_\_

Seven of the ways people can reduce the risk of pregnancy.

 <p><b>abstinence</b></p>	 <p><b>Implanon or the implant</b></p>	 <p><b>condom PLUS another method</b></p>
 <p><b>Depo or the shot</b></p>	 <p><b>the pill</b></p>	 <p><b>condoms</b></p>
 <p><b>Plan B or emergency contraception</b></p>		

Birth Control Reference Sheet 1, continued ...

1. Which method of birth control works 100% of the time (if people are careful to “use” it all the time)?

\_\_\_\_\_

2. If a hundred couples had intercourse for a year without any kind of birth control, how many would start a pregnancy? Circle one.

15    35    55    75    85

3. Of the seven kinds of birth control on the first side of this reference sheet, name three that are more than 90% effective in preventing pregnancy.

\_\_\_\_\_  
\_\_\_\_\_

4. Which methods give the most protection from STDs (sexually transmitted diseases)?

\_\_\_\_\_

5. Which methods are safer for most people than having a baby?

A \_\_\_\_\_ of t \_\_\_\_\_

6. Which methods can teenagers get, without parental consent?

A \_\_\_\_\_ of t \_\_\_\_\_

7. What contraceptive method can be used to prevent pregnancy after unprotected intercourse or a birth control failure (e.g. if a condom breaks)? The sooner a woman takes it, the better it will work.

P \_\_\_\_\_ B

**Birth Control Reference Sheet 1, continued ...**

8. Why is it good to talk with your parents, guardians or other trusted adults about birth control, if you can?

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9. Why is it good to talk with your boyfriend/girlfriend/husband/wife about this, if you can?

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10. Where else, besides this class, could a person get accurate up-to-date information about birth control?

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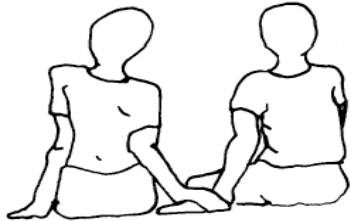
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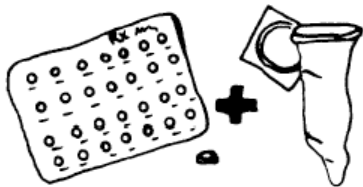
# Birth Control Reference Sheet 2: A Birth Control Glossary

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**Abstinence**, also called celibacy or "saying no," is the most effective way to not start a pregnancy. When it's used to prevent pregnancy, abstinence means not having sexual intercourse (not putting the penis in the vagina) and not ejaculating near the opening of the vagina.



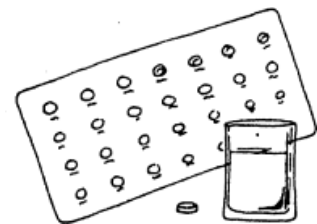
**Combining Two Methods** -- For extra protection, couples can combine a condom with another method of birth control (for example: birth control pills). A combination like this will help cut down the risk of pregnancy, HIV and many other sexually transmitted diseases (STDs).



**Condoms**, also known as rubbers, are like very thin, very strong gloves. A condom is worn over the penis to catch the sperm so they can't enter the uterus and fallopian tubes. Condoms can be bought in a drugstore. They can only be used once and then thrown away. They cut down the risk of pregnancy, HIV and other STDs.



**Pills**, also known as oral contraceptives, are hormones (like the ones already in her body) that keep a woman's ovaries from releasing eggs as long as she keeps taking them. They must be prescribed by a health care provider. She takes one pill by mouth at the same time every day (not just when she has intercourse).



**The Shot**, also known as Depo-Provera or depo, is made of hormones. It's given into a woman's muscle (in her arm or hip) and lasts 3 months. It keeps her ovaries from releasing eggs. The shot must be prescribed by a health care provider; she needs to get a shot every 12 weeks.



**The Implant**, also known as Implanon, is one small tube that is placed under the skin of a woman's upper, inner arm. It prevents pregnancy for up to 3 years by releasing a hormone that prevents her ovaries from releasing eggs. It must be prescribed by a health care provider (a doctor or nurse practitioner). The woman must go to her health care provider's office to have it put in or removed, which only takes a few minutes.



**Emergency Contraception**, also known as EC pills and Plan B, are two pills that, when taken soon after intercourse, can prevent pregnancy. Women who have had unprotected intercourse, whose method of birth control has failed (such as a condom breaking), or who have been forced to have intercourse can take EC pills to prevent pregnancy. This will not harm the pregnancy if she does become pregnant. EC pills are different from the "abortion pill". They do not work if a woman is already pregnant.



The pills should be taken within 120 hours (5 days) after intercourse, but the sooner that a woman takes the pills, the better chance she has at preventing an unplanned pregnancy (up to 95%).

They're available from a doctor, at many health clinics, at emergency rooms, and in Washington and some other states from some drug stores. The website <http://ec.princeton.edu> has information about nearby clinics and drug stores that have EC pills, but it is always a good idea to call ahead.

**Note:** Using the pill, the shot, the implant or Plan B alone does not protect against STDs or HIV. They can be used together with a condom to cut down the risk of HIV and other STDs.

# Family Homework Exercise: Birth Control

## ALL FAMILY HOMEWORK EXERCISES ARE OPTIONAL

**First:** The student has created the "*Birth Control Reference Sheet 1*" in class. The adult should begin by reading it, too.

**Next:** Discuss together what your culture, your religion, and the two of you believe about:

- **Family Size**  
 What is the ideal family size? Why?  
 If a couple chooses not to have children, are they still a family?  
 What is a good age to have a first child?  
 Who is responsible for the children?
- **Birth Control**  
 What kinds are OK, if any? Why?  
 Are some kinds of birth control wrong, in your opinion? Which kinds? Why?  
 Does it depend on whether a person is married?  
 What if they are developmentally delayed? otherwise disabled? have a genetic disease?  
 What if they just don't want a baby now?  
 Whose responsibility is birth control, the man's or the woman's?
- **Parental Consent**  
 Do you agree or disagree with the laws that say teens can get non-prescription birth control from any drug store without their parents' permission? Why?  
 What about prescription methods from doctors?  
 If you're a parent, would you hope your child would or would not tell you if he or she were using or wanted to use a birth control method besides abstinence?  
 Why?

**NOTE:** Turn in a Family Homework Confirmation Slip by \_\_\_\_\_, if you want credit.



### FAMILY HOMEWORK CONFIRMATION SLIP

We have completed "Family Homework Exercise: Birth Control".

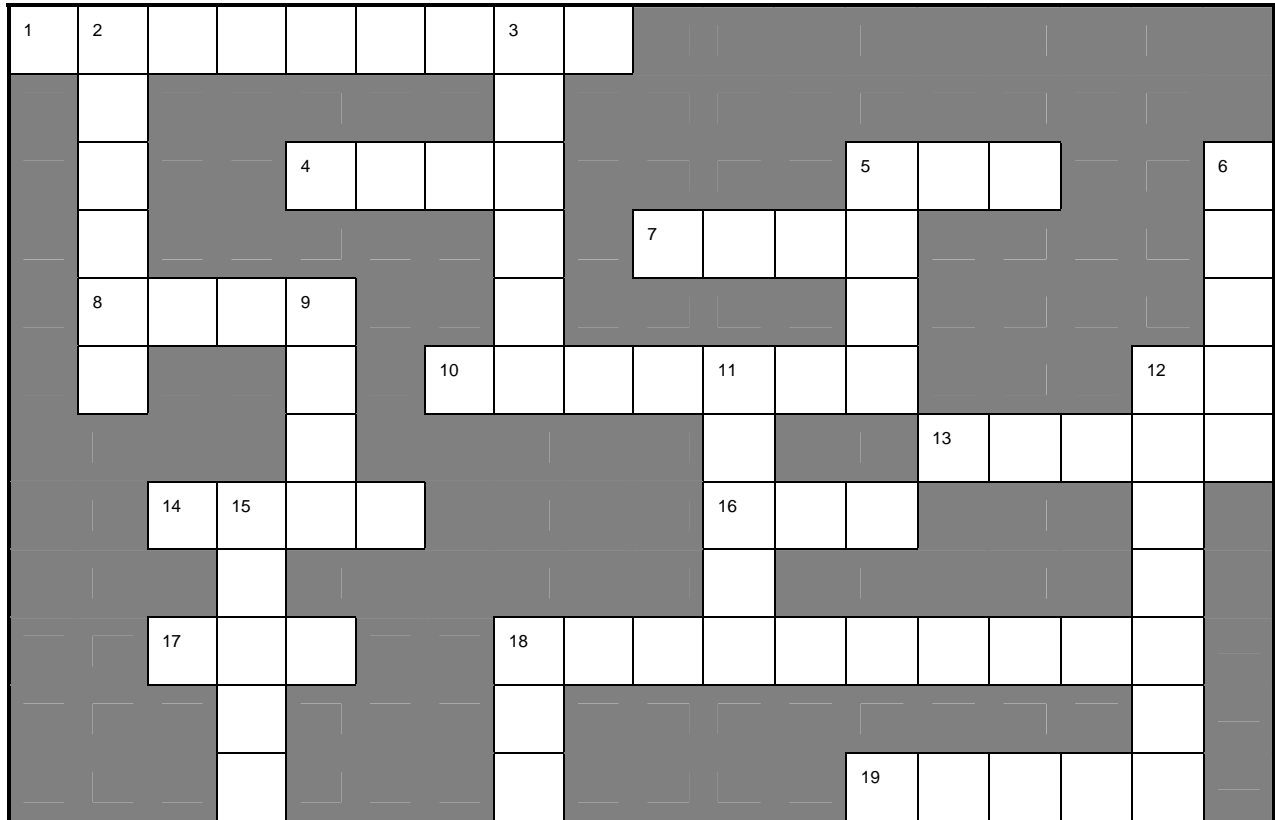
**Date:** \_\_\_\_\_

**Student's signature:** \_\_\_\_\_

**Adult's signature:** \_\_\_\_\_

# Birth Control Worksheet

Name \_\_\_\_\_ Date \_\_\_\_\_



## ACROSS

- |  |  |
|--|--|
| <p>1. Another name for Plan B is _____ contraception.</p> <p>4. The brand name for the kind of birth control that people use up to 5 days <b>after</b> sex is _____ B.</p> <p>5. Not all touch includes _____ and even sexual touch doesn't have to include intercourse.</p> | <p>7. People can use a condom _____ another method of birth control to increase their protection against pregnancy and <i>also</i> reduce their risk of giving or getting germs.</p> <p>8. If a person is too embarrassed to _____ about birth control, they might be happier waiting to share sexual touch.</p> |
|--|--|

**ACROSS**, continued ...

10. Implanon is the brand name for birth control that a health care provider can \_\_\_\_\_ just under the skin of a woman's arm to protect her from pregnancy for three years.
12. If you have correct information, even if you don't need birth control yourself, you can \_\_\_\_\_ a health educator for your friends and family.
13. Every kind of birth control is \_\_\_\_\_ than having a baby.
14. \_\_\_\_\_ people would start a pregnancy within one year if they had intercourse and did not use any kind of birth control. Some would even start a pregnancy the very FIRST time they had intercourse.
16. If a couple wants to be extra careful, they may \_\_\_\_\_ two methods of birth control at the same time ... like condoms and a hormonal method (such as birth control pills).
17. People \_\_\_\_\_ start a pregnancy the first time they have intercourse. They \_\_\_\_\_ even start one WITHOUT intercourse, if sperm are ejaculated on the genitals.
18. \_\_\_\_\_ is the only 100% perfect birth control, if people do it all the time.
19. Hormones that a woman can take by mouth, to keep from releasing any eggs, are called birth control \_\_\_\_\_.

**DOWN**

2. It takes less than a \_\_\_\_\_ to put a condom on or in. It can also take less than a \_\_\_\_\_ to start a pregnancy. Think about it.
3. A \_\_\_\_\_ or "rubber" is worn over the penis. It keeps the sperm away from the egg. It also cuts down both people's risk from germs that can cause STDs (sexually transmitted diseases).
5. Depo is another name for a \_\_\_\_\_ a woman can get every 3 months to keep from getting pregnant.
6. Even the least effective birth control is \_\_\_\_\_ than not protecting each other ... and the ones we studied today were all at least 92% effective.
9. If a couple wants to wait until they are older to start a family or they already have enough \_\_\_\_\_ they need to abstain (not allow sperm inside the woman's vagina) or else use birth control.
11. It's a good idea for teens to talk with a trusted \_\_\_\_\_ about birth control, if they can.
12. Each family and religion has its own \_\_\_\_\_ about birth control. Now is a good time to talk about them.
15. Birth control pills stop eggs from being release from a woman's \_\_\_\_\_ so they can't get fertilized by a sperm cell.
18. People of any \_\_\_\_\_ can get birth control in most states.

## NOTES &amp; REFERENCES

<sup>1</sup> A set of birth control methods may be purchased from Planned Parenthood education department or if you teach in King County, Washington, contact your local Health Educator at Public Health - Seattle & King County - see links below:

[http://www.plannedparenthood.org/pp2/wsgn/files/wsgn/educationoutreach/educational\\_publications](http://www.plannedparenthood.org/pp2/wsgn/files/wsgn/educationoutreach/educational_publications)  
<http://www.kingcounty.gov/healthservices/health/locations>

<sup>2</sup> The **FLASH** curricula introduce all 17 methods in high school (**9/10 FLASH**). We focus on these 7 in middle school for the following reasons:

- a) **abstinence**, because it is always available and protects against disease, although we don't know typical user effectiveness rates
- b) **combining condoms and a hormonal method**, in order to encourage BOTH pregnancy and STD prevention, although we don't know typical user effectiveness rates
- c) **condoms**, because they are effective against pregnancy (85% typical use rate; 98% perfect use rate, per Contraceptive Technology, 19<sup>th</sup> Rev. Ed., Hatcher, Robert A. et al, 2007) and also protect against disease
- d) **emergency contraception**, because it is all that's available after the fact and it is *very* effective if used soon after sex, reducing pregnancy risk somewhat for up to 5 days (WomensHealth.gov, a site run by the U.S. Department of Health and Human Services, explains, "*Consider that about 8 in 100 women who have unprotected sex one time during the fertile part of their cycle will become pregnant. If these 100 women take progestin-only ECPs [like Plan B], about 1 will become pregnant.*" Retrieved August 18, 2009: <http://womenshealth.gov/faq/emergency-contraception.cfm#c>)
- e) **the pill**, because it is very effective (92% typical use rate; 99.7% perfect use rate, per Contraceptive Technology, 19<sup>th</sup> Rev. Ed.) and a very common choice among teens (see the Centers for Disease Control publication "*Teenagers in the United States: Sexual Activity, Contraceptive Use, and Childbearing, 2002*" retrieved August 18, 2009: [http://www.cdc.gov/nchs/data/series/sr\\_23/sr23\\_024.pdf](http://www.cdc.gov/nchs/data/series/sr_23/sr23_024.pdf))
- f) **the shot** (Depo-Provera), because it is extremely effective (97% typical use rate; 99.7% perfect use rate, per Contraceptive Technology, 19<sup>th</sup> Rev. Ed.) and a very common choice among teens
- h) **the implant** (Implanon), because it is the *most* effective reversible contraceptive (99.95% in typical and perfect use, per Contraceptive Technology, 19<sup>th</sup> Rev. Ed.)

<sup>3</sup> Although this is called a "male" condom, it can be worn on a penis or used on a sex toy.

<sup>4</sup> Although this is called a "female" condom, it can be used by any gender, vaginally or anally.

<sup>5</sup> Hatcher, Robert A. et al (2007) Contraceptive Technology (19<sup>th</sup> Rev. Ed.) New York: Ardent Media, Inc.

<sup>6</sup> *ibid* (Hatcher is also cited here [http://www.acog.org/publications/patient\\_education/ab020a.cfm](http://www.acog.org/publications/patient_education/ab020a.cfm) by the American College of Obstetrics and Gynecology, retrieved August 18, 2009)

<sup>7</sup> *ibid*

<sup>8</sup> *ibid*

<sup>9</sup> *ibid*

<sup>10</sup> Office of Population Research & Association of Reproductive Health Professionals (2009) *Answers to Frequently Asked Questions About ... Effectiveness*. Retrieved August 18, 2009 from The Emergency Contraception Website: <http://ec.princeton.edu/questions/eceffect.html>

<sup>11</sup> *ibid*

<sup>12</sup> *FDA ... Lowers Age for Obtaining Two-Dose Plan B Emergency Contraceptive without a Prescription*. (2009) Retrieved August 18, 2009 from U.S. Food and Drug Administration web site: <http://www.fda.gov/Drugs/DrugSafety/PostmarketDrugSafetyInformationforPatientsandProviders/UCM109775>

<sup>13</sup> Washington State Pharmacy Association. *Service to Minors*. Retrieved August 18, 2009 from the Pharmacy Access Project Web site: [www.go2ec.org/pdfs/WA\\_ServiceToMinors.pdf](http://www.go2ec.org/pdfs/WA_ServiceToMinors.pdf)

<sup>14</sup> *Providing Health Care to Minors under Washington Law*. Retrieved August 20, 2009 from the Washington State Department of Health Web site: [www.doh.wa.gov/CFh/fprh/4-Resource-Exch/MinorCare-06.pdf](http://www.doh.wa.gov/CFh/fprh/4-Resource-Exch/MinorCare-06.pdf)