



Title: Contraception (V4)

Level: THIRD

Code: 3.12

Links to Curriculum for Excellence

Experiences and outcomes	Benchmarks
Using what I have learned I am able to make informed decisions and choices that promote and protect my own and others' sexual health and wellbeing. HWB 3-47b I know how to manage situations concerning my sexual health and wellbeing and am learning to understand what appropriate sexual behaviour is. HWB 3-49a	<ul style="list-style-type: none"> Identifies negotiation skills required to have safe and enjoyable sex, for example, knowing when the time is right, mutual responsibility to prevent unintended pregnancy, use of contraceptives, confidence to refuse unwanted sexual contact. Knows how to access confidential information, guidance and help.

Learning Intentions

- Young people understand the reasons why contraception may be used.
- Young people learn how to access local sexual health services, information and advice.

Success Criteria

- I can explain what contraception is.
- I can name the main methods of contraception a young person might use.
- I know how to access information and advice from sexual health services.

Resources to support this activity

- PowerPoint slides
- Birth Control Basics: Condoms, The Pill and Patch* (duration 2 minutes 9 seconds) animation from amaze.org <https://youtu.be/50vmQzjRkuk>

Whenever you use content on a platform like YouTube please cue the film you intend to play in advance, check it is the film you want to view, and skip adverts.

NOTE: There are a series of learning activities at Third Level that might usefully be delivered as a package of learning. Delivered as a group there is more flexibility in terms of how long to give each activity, depending on the conversation generated this learning activity and the others may not each need a 50-minute slot – or you might return to review learning after working through several. The other activities alongside this activity on **Contraception** are:

- 3.11 Getting pregnant/truths and myths**
- 3.13 Condoms**
- 3.14 Sexual health: Getting advice and support**

Young people need an understanding of conception/how people have sex in order to undertake this learning activity. If needs be, material is available on this at Second Level (2.11 and 2.12)

Teachers/educators should find out in advance what local services young people can access for contraceptive information, advice and supplies so that this can be shared. Include access to Emergency Contraception in your pre-lesson research.

Activity

1. Introduce the activities along these lines: The session is about contraception. Explain that there is no assumption that people are having a relationship, or having sex, or even thinking about it yet. *This is about thinking ahead to a time when the young people might need this information.* Use the introductory slide.

Why do people use contraception?

When a man and woman have sex (which includes the man putting his penis in the woman's vagina) then the man can ejaculate sperm in to the woman's vagina.

If the sperm meets the woman's egg, she may become pregnant.

If a woman and man don't want to have a baby, then they can use contraception.

2. **Questions about contraception.** Give the young people some paper and ask them to work with a partner to think of and write down any questions they have about contraception. They can keep these, no need to collect them in. Explain that you will come back to their questions toward the end of the class to make sure they have been answered – and if not, you will write the questions down and come back with answers in the next session.
3. **The most common contraception used:** Acknowledge that there are many different kinds of contraception, the next set of slides mention the most common used by young people today starting with contraception used by women, then talking about condoms. Explain that when a young person goes to a clinic, drop-in or GP they will help them decide what works best for them. So, this is just some basic info to get young people thinking about the choices they will face. Take questions and check understanding as you go.

Contraception that a woman can use: These are the most commonly used contraceptives for women....

- **Contraceptive Pill.** There are different kinds of contraceptive pills. It works by releasing a hormone in to your body. The pill is available from a doctor or Sexual Health clinic.
 - **Contraceptive Pill.** Pills are over 99% effective at preventing pregnancy if taken correctly. You need to remember to take a pill every day.
- **Patch:** This is a very sticky patch that you stick on your body. It works by releasing a hormone in to your body.
 - **Patch.** Each patch lasts for 1 week. You change the patch every week for 3 weeks, then have a week off without a patch. The patch is over 99% effective at preventing pregnancy.
- **Implant.** A little plastic rod put under the skin on the arm. It works by releasing a hormone in to your body. The implant lasts for up to 3 years.
 - **Implant.** The doctor puts it in for you. The implant is over 99% effective at preventing pregnancy. After 3 years, the doctor can take it out and put another implant in for you.
- **Injection.** An injection is given by a nurse at a doctor's surgery or Sexual Health clinic. It works by releasing a hormone in to your body.
 - **Injection.** The injection can last anywhere between 8 to 13 weeks. You then go back to the nurse for your next injection. The injection can be over 99% effective if you get your injections in time.

- **Condoms for men (male and women (female)).** Condoms do 2 things – they protect both men and women from sexually transmitted infections and they are also a contraceptive (they stop the sperm meeting the egg).
 - **Male condom.** Condoms work by collecting the semen and sperm when the man ejaculates during sex. This stops the semen and sperm travelling up the vagina and meeting the egg. Condoms are 98% effective at preventing pregnancy if used correctly.
 - **Female condom.** A woman's condom fits inside her vagina. When the man puts his penis inside her vagina during sex and ejaculates, the semen and sperm collect in the condom. Female condoms are 95% effective at preventing pregnancy if used correctly.

4. **Emergency contraception:** Ask, have the young people heard of Emergency Contraception? They might say 'the morning after pill' – acknowledge this if they do but say actually there's some important information about this, so it's not really *just* a morning after thing. The set of slides explains what this is and how it works.

Emergency contraception

- You may need Emergency Contraception if you have had *unprotected sex*. Unprotected sex is sex without using any contraception, or if your contraceptive has failed – for example, your condom split. Emergency contraception is for emergencies only. It cannot be used as a regular method of contraception. There are 2 types of emergency contraception.
 - **The emergency contraceptive pill.** Some pills can be taken up to 72 hours (3 days) after sex. Other pills can be taken up to 120 hours (5 days) after sex. The emergency contraception pill works better if you take it as soon as possible after sex.
 - **The IUD is sometimes called the coil.** It is a small copper and plastic device which is put into the uterus. This must be fitted by a doctor or nurse. The I.U.D. should usually be fitted within 5 days of sex. The IUD works better if you have it fitted as soon as possible after sex.
 - You can get emergency contraception for free. You can get the emergency contraceptive pill from a sexual health clinic or a local pharmacy. You can get the IUD/coil fitted at a sexual health clinic.
5. Watch the animation *Birth Control Basics: Condoms, The Pill and Patch* (duration 2 minutes 9 seconds) It's funny and reinforces the messages of this activity, focusing on some key methods. (as a US production it mentions Planned Parenthood, you can say that this is a US service and later in the class local services will be identified) <https://youtu.be/50vmQzjRkuk>
6. **Who is responsible for contraception?** Ask the young people to think about the question – give them a few moments to chat and find out views in the room. After some discussion share the slides/quotes (over 2 slides), taken from research with young people in Scotland who were asked the same question. What do the young people think of what's said?

Who is responsible for contraception?

- "I'd assume they (the girl) were using contraception".
- "Boys just expect girls to use contraception".
- "Some people don't use anything and think pregnancy will never happen".

Who is responsible for contraception?

- *“I think it’s both of your responsibility. I think it’s ok for girls to refuse having sex, and guys as well, if their partner doesn’t want to be protected. You have to share the responsibility and the result if it goes wrong (like getting pregnant) equally”.*
- *“The most important thing that helps make sure that young people plan and use contraception is talking about it together.”* (Sexual Health Nurse)

7. A few things to remember. Use the final series of slides to deliver key points – encourage questions or comments as you go, you can use these to affirm where to go and confidentiality offered.

A few things to remember

- The only way to prevent a pregnancy is not have penetrative sex or plan and use contraception.
- Young people have a right to information and to get contraception and condoms. You can go to a clinic or visit your GP and talk about contraception before you start to have sex.
- Talking about contraception and/or condoms with your partner is important. It’s important to discuss what contraception you will use before you have sex, and not make assumptions about whose responsibility it is. Both women and men can share responsibility for making good choices about contraception.
- Contraception won’t protect you against STIs - you should use condoms as well.
- If you have these discussions beforehand, then the experience of sex will be more relaxed, safe and enjoyable.

Then use the next slide to affirm the importance of consent.

- **Remember the importance of consent.** Just because someone has sorted contraception or got condoms, it doesn’t mean they want to have sex. it just means they are planning ahead. You still need to talk and pay attention when it comes to consent.

8. Local services. The teacher/educator should insert information in this final slide which guides young people to local services and provides information about availability of emergency contraception.

9. To end: what about your questions? Ask young people to take a look at the questions they wrote down earlier. Check in their pairs if they have been answered. Some people might be happy to share what they wrote earlier and give the answer they understand now. Ask if there are any questions that haven’t been answered – this might be this has been missed and you can respond; it might be that you and the young person need to do a bit of research and get back in the next session.

Connecting with home

The text below could be used to communicate with home about this activity.

We are continuing our learning about relationships, sexual health and parenthood. We will be giving information to young people about what contraception is and where they can access information, advice and contraceptive supplies. As with all our learning we are providing this information now so that young people have it and understand the importance of preventing pregnancy when they need to be so informed. If you are able to support this learning at home, you can encourage your child to find the best information available – and when they are ready you can help them get to good professional advice. There are sites like those below that give information:

<http://www.healthyrespect.co.uk/CondomsAndContraception/Pages/ContraceptionQuickGuide.aspx>

Practitioner Notes

