



# Sexual Health & Contraceptives

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## What is Sexual Health?

"...a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled" (WHO, n.d).

## What is Consent?

Consent is an agreement between two or more individuals to engage in a sexual act. This communication allows individuals to set boundaries with their partner(s) before initiating a sexual act. Consent must be clearly and actively communicated. It cannot be given by someone who is underage, intoxicated, unconscious, or asleep. Coercion occurs when an individual feels intimidated or pressured to participate in a sexual act. Coercion is NOT consent. Enthusiastic consent is a new concept which focuses on the presence of a freely offered "Yes!" rather than the absence of a "No." Consent can be withdrawn at any time during a sexual interaction. This is true even if enthusiastic consent was given beforehand. Consent is not a black and white concept. It requires open communication with your partner(s) before, during, and even after a sexual activity has taken place (RAINN, 2021).

## Accessing Contraceptives

There are a variety of contraceptives and sexual health services offered free of cost to individuals under the age of 21 across the Lower Mainland. For example, at Options, "all services provided are free (excluding the cost of birth control) for patients who are enrolled in the BC Medical Services Plan (MSP)" (Options for Sexual Health, 2021). Individuals are encouraged to speak to a care provider to determine the best contraceptive for their needs. It is important to consider cost, effectiveness, the need for long vs. short-term options, and the possible adverse effects associated with each method. Additionally, only physical barrier methods prevent the transmission of STIs & STDs so some individuals may choose to use multiple forms of contraceptives in order to protect themselves and their partner(s) (My Health, n.d.).

## Transmission of STIs + STDs

Type:	Commonly Passed	Can be Passed	Not Commonly Passed	Not Passed
<b>Kissing</b>	Herpes (HSV)		Gonorrhea, Syphilis, and HPV	Chlamydia, Hep B, and HIV
<b>Giving / Receiving Cunnilingus</b>	Herpes (HSV), HPV, And Syphilis		Chlamydia, Gonorrhea, Hep B, and HIV* (Giving)	HIV* (Receiving)
<b>Giving / Receiving Fellatio</b>	Chlamydia, Gonorrhea, HPV, Herpes (HSV), and Syphilis		Hep B and HIV* (Giving)	HIV* (Receiving)
<b>Giving / Receiving Anilingus</b>	Hep A, Hep B, Herpes (HSV), HPV, and Syphilis		Chlamydia and Gonorrhea	HIV
<b>Penis-Vagina Intercourse</b>	Chlamydia, Gonorrhea, Hep B, Herpes (HSV), HIV, HPV, Syphilis		Hep C	
<b>Penis-Anus Intercourse</b>	Chlamydia, Gonorrhea, Hep B, Herpes (HSV), HIV, HPV, and Syphilis	Hep C		

Pustil, R. (2016).



# Choosing a Contraceptive

## WHAT ARE YOUR OPTIONS?

### EXTERNAL CONDOMS

"The external condom is a thin sheath that covers the penis" (Ottawa Public Health, 2021). Most are made of latex, although polyurethane, plastic and lambskin options are available. The "external condom is 85-98% effective at preventing pregnancy if used properly" (Ottawa Public Health, 2018).

### BIRTH CONTROL PILLS

Based on a 28-day cycle. Must be taken everyday around the same time (+/- 30 mins). Typically packaged as 3 active weeks and 1 week of sugar pills. This is the week when an individual would get their period. For this reason some opt to skip this week and start the next package. Contain estrogen and/or progestin. Estrogen stops ovulation while progestin interferes with the cervical lining to prevent implantation.

### INTRAUTERINE DEVICES

The IUD is a "T" shaped device that is inserted into the uterus by a health care provider. It's a long-term option, but it can be removed at any time with little impact on fertility. Hormonal versions contain progestin and are viable for 3-5 years. The copper IUD is effective for 10 years. IUDs are >99% effective at preventing pregnancy (Planned Parenthood, 2021).

### VAGINAL RINGS

A vaginal ring is inserted into the vagina. The placement will not impact its effectiveness. The ring works over a period of 3 weeks and on the first day of the fourth week, it is removed and the individual can expect to begin their menstrual period. At the end of the week a new ring is inserted to ensure the individual remains protected. The ring is 91-99% effective at preventing pregnancy (Health Link BC, 2020).

### CERVICAL SPONGES

The sponge is inserted into the vagina and covers the cervix. It contains spermicide which inactivates sperm and acts as a physical barrier preventing sperm from entering the cervix. It can be inserted for up to 24 hours and should remain in place for at least 6 hours after sex. The sponge is not reusable and is 76-88% effective at preventing pregnancy (ACOG, 2018).

### NEXPLANON AKA "THE IMPLANT"

The implant is a rod, about the size of a match stick, that is inserted into the upper arm above the elbow. It must be inserted/removed by a health care provider. It utilizes the hormone progestin and is effective for 3-4 years. The implant is 99% effective at preventing pregnancy, but there are some increased risks due to its location and it can leave a scar after being removed (Planned Parenthood, 2021).

### NATURAL & NON-HORMONAL

There are several popular fertility options that forgo the use of barrier methods and hormones. "The Calendar Method" or "Fertility Awareness" involves abstaining sex in the fertile window (~2 weeks before your period). This method works best with a regular and established cycle and is 77-98% effective at preventing pregnancy. *Withdrawal*, otherwise known as the "pull out method" works by removing the penis from the vagina before ejaculation. Used successfully, this will prevent sperm from entering the cervix. Unfortunately pre-cum can still contain sperm. Typically, this method is 80% effective at preventing pregnancy. Natural options do not prevent the transmission of STIs & STDs (Natural Cycles, 2019).

### INTERNAL CONDOMS

An internal condom is a soft polyurethane tube with a flexible ring on each end. The closed end is inserted into the vagina against the cervix or into the rectum. The ring of the open end must remain outside of the body cavity. If used properly, they're 95% effective at preventing pregnancy (Healthlink BC, 2019).

### SPERMICIDES

Contain the surfactant nonoxynol-9. Available as foams, creams, gels, suppositories, films, and sponges. Can be used alone or with other barrier methods. It takes 10-15 minutes to activate after insertion and is effective for 1 hour. It can be reapplied as needed (ACOG, 2018). Used alone, spermicides have a 28% failure rate. They're 88% effective at preventing pregnancy when used with a barrier method (Whelan, 2018).

### DIAPHRAGMS & CAPS

Diaphragms and cervical caps are small, dome shaped devices made from silicone or latex that fit inside the vagina and cover the cervix. They must remain in place for 6 hours after sex, but no more than 24 hours. They don't offer protection against STIs & STDs. Used alongside spermicide to prevent pregnancy (Marcin, 2017).

### DENTAL DAMS

Rectangular latex or polyurethane sheets placed between the mouth and vagina or anus during oral sex to prevent the spread of STIs & STDs. DIY dental dams can be created using a condom. Simply unroll the condom, cut off the tip + bottom ring, and carefully cut down one side of the condom to create a rectangle (CDC, 2021).

### THE PATCH

The patch is a slow-release birth control that's effective for 7 days. It's used on a 3:1 schedule, using a patch per week for 3 weeks and going 1 week without. The patch uses both estrogen and progestin. It can be worn on the lower abdomen, upper torso (excluding the breasts), on the buttocks, or upper arms (HealthlinkBC, 2020).

### DEPO-PROVERA AKA "THE SHOT"

The shot is often referred to as "Depo" or its brand name Depot-Provera. It uses the hormone progestin and is typically injected into the upper arm or buttocks by a health care provider. It's a long-acting birth control and is effective for 3 months. It can take 18 months to conceive after ceasing usage. This form of contraceptive does not protect against STIs & STDs. It is 99% effective at preventing pregnancy (HealthLinkBC, 2020).

### SURGICAL STERILIZATION

A *Vasectomy* is a surgical procedure where the Vas Deferens is cut, clamped, or tied off to prevent sperm from leaving the testicles during ejaculation. A *Tubal Ligation* involves the cutting, tying-off, or clamping of the fallopian tubes in order to prevent the release of eggs from the ovaries. This will have no impact on your cycle. A *hysterectomy* involves the full or partial removal of the ovaries, uterus, and fallopian tubes. A *complete hysterectomy* will result in menopause as the ovaries are responsible for manufacturing hormones such as progesterone and estrogen. Surgical sterilization is 99% effective at preventing pregnancy, but does not offer protection against STIs & STDs (Mayo Clinic, 2021).



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## List of Clinic Resources Available in VCHA and FHA:

- North Vancouver Options for Sexual Health Clinic: Parkgate Community Health Centre 2nd Floor, 3625 Banff Court North Vancouver.
- Every Women's Health Care Clinic: 210-2525 Commercial Dr, Vancouver.
- FHA Youth Clinics:
  - Burnaby Youth Clinic 4734 Imperial Street
  - New Westminster Youth Clinic: 38 Begbie Street
  - Shirley Dean Pavilion in Surrey: 9634 King George Boulevard