BIRTH CONTROL AND PROTECTION

Linking Lives

Health Education Program

CENTER FOR
Latino Adolescent and Family Health
NYU SILVER SCHOOL OF SOCIAL WORK

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Even if you decide to wait until you are much older before having sex, you are still going to hear all kinds of things about birth control and condoms from your friends and other people. You need to be able to tell what is true and what isn't, so here are the facts.

WHAT METHODS OF PROTECTION DO TEENS USE?
The most popular methods of birth control for teens are condoms, the birth control pill, periodic abstinence (waiting until a “safe” time of the month to have sex), and withdrawal (or pulling out). When teens first start having sex, they usually use condoms. After they have been sexually active for several months or are having sex regularly, they may start using the “pill,” or another hormonal method of birth control. Hormonal methods are very effective at preventing pregnancy, but do not protect against sexually transmitted infections. These methods are most often used by older teens and must be prescribed by a doctor or health clinic, so we don't cover them here.

ARE CONDOMS EFFECTIVE?
The answer to this question is complicated. We will give you details below, but the main things you need to know are: (1) latex condoms greatly lower the chances of pregnancy and of getting many sexually transmitted infections (STIs), including HIV, if they are used the right way, but (2) they are not perfect and the best way for teens to protect themselves is by not having sex.
HERE ARE THE DETAILS:

1. If they are used correctly every time someone has sex, latex condoms are very effective in preventing pregnancy. A big problem is that people may not use condoms every time they have sex. And people may not use them correctly. Once in a while, a condom might break or slip off. Sometimes people re-use condoms (which they should never do). Some people put on the condom after sex has started or take it off before having an orgasm, which can also increase the chance of pregnancy. For all of these reasons, condoms seem to “fail” to protect against pregnancy more often than they should.

2. For couples who use condoms over a period of one year, about three out of twenty end up getting pregnant (about 15 percent). This “failure” rate is probably higher for young teens who are not very experienced using condoms.

3. If women used no protection at all for one year while having sex, about 17 out of 20 will get pregnant. So the chances of a pregnancy are a lot higher without the use of condoms.

4. Some sexually transmitted infections are passed through semen while others are passed through skin-on-skin contact. If used correctly and consistently, condoms are very effective in preventing STIs that are passed through semen.

5. Condoms are less effective in preventing STIs that are passed by skin-on-skin contact, but they can offer some protection. For example, if a boy has a herpes sore and the girl comes into contact with it, the girl can get herpes. If a condom covers the sore and prevents contact, then this will help to prevent the passing of the STI. But, sometimes contact is made before the condom is put on. Or, sometimes the condom will not cover the sore because the sore is at the base of the penis or somewhere else. Another STI besides herpes that is passed by skin-on-skin contact is called HPV. It can cause cervical cancer. Again, if a condom covers the infected area, then it offers protection against HPV (and cervical cancer).

In summary, latex condoms can be very effective in preventing HIV (the virus that causes AIDS) and other viruses and bacteria passed through semen (like chlamydia). They are less effective in preventing diseases passed through skin-on-skin contact. The bottom line is, if you plan to have sex, you should use protection—like a latex condom—every time.
THE “SAFE” TIME OF THE MONTH. Some teens have sex only when they think it is a “safe” time of the month, when the girl is not ovulating. Unfortunately, many teens (and adults) do not understand how ovulation really works.

When a girl reaches puberty, she begins to ovulate. This means that a tiny egg is released each month from her ovaries so that the egg can be fertilized and a baby can develop. The egg travels through a tube called the Fallopian tube and into the uterus, which is a small area located just inside the vagina. In most cases, the egg’s journey through the tube starts about two weeks after a girl’s period and takes about three or four days to reach the uterus. If the egg is not fertilized, it is absorbed into the lining of the uterus that has prepared itself for the egg. The fluid and tissue that come out of a girl’s body during her period is the unneeded lining of the uterus that contains the unfertilized egg.

It is during the three or four days of ovulation that a girl is most likely to get pregnant. But here is the catch: It is very difficult for a girl to know when she is ovulating. Although many girls and women ovulate about two weeks after their period, some ovulate as early as five days after their period. Other girls and women ovulate as late as 30 days after their period. Also, the timing of ovulation can change from one month to the next.

A girl may ovulate two weeks after her period one month but three weeks after her period the next month.

Equally as important, sperm can live in a girl’s body for as long as five to seven days. This means that if a boy and a girl have sex one week before, the girl can become pregnant the next. But most teens do not realize how long sperm can live in the body.

So not only is it difficult to figure out a safe time of the month to have sex, many teens don’t even understand the basic facts about “safe days.” This method also offers no protection against sexually transmitted infections. It is a method that should not be used by teens. The safest course for teens is to avoid sexual intercourse.

WITHDRAWAL. Withdrawal occurs when a male pulls his penis out of a female just before he is about to “come,” or have an orgasm. This method relies on the boy having a great deal of self-control and being able to judge exactly when he is about to have an orgasm. This method also can fail because the penis often “leaks” sperm well before orgasm occurs. This means that sperm can still be deposited in the girl even if the boy pulls out before having an orgasm. Still another problem is that the withdrawal method does not protect against sexually transmitted infections. This method should not be used.
WHY TEENS DON'T ALWAYS USE PROTECTION

Some teens think they have “good” reasons for having unprotected sex. You need to understand there is never an acceptable reason for not using protection. If you are going to have sex, then you must use protection. It’s as simple as that. The best protection of all, of course, is to avoid sex altogether! Here are reasons teens sometimes give for not using protection.

• Birth control is too much of a hassle to get; it’s just too inconvenient.
• I could never get my boyfriend/girlfriend to agree to use a condom.
• If I buy condoms in our neighborhood, I’m afraid my parents will hear about it.
• I don’t always have a condom with me when I’m going to have sex.
• Just one time isn’t going to matter!
• I don’t have enough money to use condoms every time I have sex.
• If I’ve been drinking, I sometimes forget to use condoms.
• If I suggest we use a condom, my girlfriend/boyfriend might think I have a disease.
• Sometimes I have sex without planning on it, so I’m not prepared to use condoms or another form of birth control.
• If I carry condoms with me, boys/girls will think I’m looking for sex.
• Sex doesn’t feel as good with a condom.
• My boyfriend/girlfriend might think I’ve been unfaithful or that I don’t really love him/her.

The best protection of all, of course, is to avoid sex altogether!
NONE OF THESE ARE GOOD REASONS.

Unprotected sex can give you a sexually transmitted infection that you could be stuck with for life or that could prevent you from having children later in life. You can get AIDS and die from it. You can get pregnant or get someone pregnant, which will affect your life in ways you can’t begin to imagine. The above reasons are lame excuses in light of this. Remember this and do not have unprotected sex.

SAYING “NO” TO AN UNCOOPERATIVE PARTNER

If you plan to have sex but you have a partner who refuses or forgets to use protection, you should refuse to have sex. Or, you should insist on using a condom. A partner who respects you will not pressure you to have unprotected sex. Most teens don’t want to get into a big argument about this with their partner. They just want simple “one-liners” that will let them make their point and get out of an uncomfortable situation. What would you say, for example, if your partner says, “Come on, if you really love me, you’ll do this for me?” Or, “You know I’m clean—and I’ll pull out.” Or, “I won’t let anything bad happen to you.” Think about some one-liners that would be effective in these situations. Maybe something like, “If you really care about me, you will use protection,” or “I’m just not willing to take the chance.” Don’t be forced to think “on the spot.” Plan ahead for these situations so you do NOT end up having unprotected sex.
ABOUT CONDOMS
Because condoms are the most common type of birth control used by teens and because they also provide protection against sexually transmitted infections, we want you to have accurate information about them. Of the methods we present here, condoms are the best option for teens because they can prevent both pregnancy and sexually transmitted infections. Even if teens are using the pill or another hormonal method, they should also use condoms to help protect against infection. Here are some important facts about condoms.

WHAT ARE CONDOMS AND HOW DO THEY WORK?
The condom is a sheath that is placed over an erect penis before it is inserted into the vagina. When the man has an orgasm, the sperm stay in the condom, which is then removed when the man pulls his penis out of his partner. This prevents sperm from being released into the woman’s body.

WHAT KINDS OF CONDOMS ARE AVAILABLE?
There are hundreds of types of condoms on the market, differing in size, shape, thickness, the presence or absence of lubricants, and the presence or absence of spermicide inside or outside the condom. A female condom also is available. The female condom is a polyurethane sheath or pouch that is worn by a woman during sex. Condoms are available in pharmacies, supermarkets, convenience stores, clinics, some public restrooms, and on the Internet.

WHICH KIND OF CONDOM IS BEST?
Condoms are made of latex rubber, plastic (like polyurethane) or lambskin. Latex condoms are the best condoms to use because they are cheapest, they give the best protection against sexually transmitted infections and they prevent pregnancy. But some people are allergic to latex. They should use condoms made of plastic, rather than lambskin, because lambskin condoms are not effective protection for a number of sexually transmitted infections.

There are no good reasons for having unprotected sex.
HOW TO USE A CONDOM. The condom should be put over the penis before the penis comes into contact with the vagina. This is because a small amount of sperm escapes from the penis before ejaculation (the release of semen from the penis or “coming”). Condoms can tear. However, you should not try to test for a tear, because you may create one with your fingernail. Roll the condom all the way to the base of the erect penis (Note: If the condom does not roll it has probably been put on inside-out. Throw it away and get a new one). If you do not roll it down completely, you increase the chances that it will fall off. You should also leave about a half-inch of empty space at the tip of the condom (that is, don’t pull it down tight). You can do this by pinching the tip of the condom as you roll it on. Be sure not to leave air in the tip, as this might cause a tear.

CONDOM PACKAGING. Some condom manufacturers package condoms in a way that allows people to feel more comfortable carrying them. For example, there are condom “envelopes” that contain a single, packaged condom that have attractive photos and designs. Some have positive messages like, “In case you forgot yours,” and, “Because I care.” Another product is the condom key ring, which stores a single, packaged condom inside a key chain.

USING PROTECTIVE CREAMS. To increase protection, most health care professionals recommend that condoms be used with a spermicidal cream. Some condoms are sold with spermicidal cream already on them, but it can also be bought separately. Condoms should be inserted when the vagina is well lubricated, because a condom can tear if the vagina is dry. If extra lubrication is needed, use a contraceptive foam, jelly, or lubricant designed for use during sex. Do not use petroleum-based products (such as Vaseline) or shortening, as these make condoms much less effective. Nonoxynol-9 is an ingredient used in some spermicides. It was thought to help reduce the risk of HIV infection, but it does not. Studies have shown that it may actually increase the risk. Check the condom package to make sure this ingredient has not been used as a spermicide on the condom.

REMOVING A CONDOM. After ejaculation, the penis should be withdrawn immediately, while holding onto the rim of the condom at the base. If the condom is not removed immediately, the penis may not remain erect and sperm can escape from the loose-fitting condom. If the base is not held while removing it, the condom may fall off in the vagina.
NEVER RE-USE A CONDOM. Use a new condom every time you have sex (that is, remove and throw away the condom after each orgasm). Re-using a condom increases the chances that it will leak or break.

TAKING CARE OF CONDOMS. Do not store condoms in warm places (for example, inside a wallet kept in one’s pants pocket or in a car) because this can weaken the rubber. Keep unused condoms sealed. If condoms are kept sealed, they will be good for about five years. Don’t open a condom package with your teeth or scissors, as this could damage the condom.

IMPORTANT THINGS TO REMEMBER:

• NOT having sex is the best way to protect yourself and your partner from pregnancy and disease.
• There is NO safe time of the month to have unprotected sex—it’s just too hard to know.
• Withdrawal, or pulling out, is NOT an effective method of birth control and it does NOT protect you or your partner from disease.
• Latex condoms provide protection against pregnancy, HIV, and other sexually transmitted infections, but ONLY if you use one every time and you use it correctly.
• There are NO good reasons for having unprotected sex. You have the right to say no to a partner who refuses to use protection.
ACKNOWLEDGEMENTS

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The Linking Lives Health Education Program is an initiative of the Center for Latino Adolescent and Family Health (CLAFH) at the NYU Silver School of Social Work. CLAFH is a research center that investigates the role of the Latino family in shaping the development and well-being of Latino adolescents. CLAFH’s research addresses key issues that affect Latino families. Specifically, CLAFH seeks to: 1) foster the development, evaluation, and dissemination of evidence-based family interventions designed to prevent and/or reduce problem behaviors among Latino adolescents; 2) develop, evaluate, and disseminate family interventions for positive youth development approaches to Latino adolescent development and well-being; 3) examine issues of immigration related to the experiences of Latino families; and 4) promote the economic well-being of the Latino community. Strategically based in New York City, CLAFH addresses the needs of New York’s diverse Latino communities in both national and global contexts. The Center serves as a link between the scientific community, Latino health and social service providers, and the broader Latino community.

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