Birth control site content:

**Female Condom**

Efficacy (when used correctly): 95%

What is it? The female condom is similar to a male condom, but with rings at both ends. One end is closed and one is open, and they’re connected by thin, plastic-based material.

How Does It Work? It works by creating a barrier between you and your partner’s genitals and bodily fluids. In terms of preventing pregnancy, the sperm are prevented from entering the vagina and instead collect inside the condom (which itself sits inside the vagina). In terms of preventing Sexually Transmitted Infection, it keeps potentially infected body parts or fluid from coming into contact with your partner(s).

Risks: Female condoms, like male condoms, can only be used once, and tend to less effective because they are less firmly anchored in the vagina than a male condom is on a penis—in other words, it’s easy for them to slip around. To minimize your risk while using female condoms, consider combining them with spermicide, having your partner pull out of you before ejaculation, or both. Never use both a ale condom and a female condom at the same time—the friction of rubber on rubber makes them both more likely to break—YIKES! Be careful when combining lube with condoms—only water and silicone-based lubes are safe to use. Oil-based lubes weaken condoms and make them more likely to break.

Where Can I Get It?: You don’t need a prescription to buy a female condom anywhere, though they can be harder to find than male condoms, and they vary in price, starting at just a few dollars per box.

Side Effects: Potential latex allergy (in this case, use an alternative material, such as polyurethane). Avoid any potential discomfort by combining condoms with (water or silicone-based) lube.

**Oral Contraception**

Efficacy (when used correctly): 99.9%

What is it? The Oral hormonal birth control pill—commonly just called ‘The Pill’—is made up of varying synthetic female sex hormones, usually estrogen and progestin. Dosages and kinds of synthetic hormones vary between pill types and brands, and different combinations of hormones can have different sets of side effects.

How Does It Work: All birth control pills work in three ways. The hormones in the pill are the hormones that the female body naturally produces when pregnant, so the pill is essentially telling your body that it’s already pregnant. This stops your ovaries from releasing any eggs at all, so there’s nothing for sperm to fertilize. The pill also changes your uterine lining so that it’s less hospitable to a fertilized egg, should one happen to be released, and it thickens the mucus of the cervix to make it difficult for sperm to get through from the vagina to any potential eggs that may have been released, despite the pill’s best efforts.

Risks: To max out the pill’s effect, your prescription should be taken at the same time every day, and you can’t miss or skip any pills without endangering the efficacy of your medication. Birth control pills DO NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom. Any hormonal birth control will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous.

How Do I Get It? You need a prescription from a medical professional to get your hands on the pill, and you’ll need to pick it up from a pharmacy. Depending on your health insurance, birth control pills may be free or low-cost. Public Health Organizations like Planned Parenthood can help you if you are concerned about the cost of your medication or if you don’t have health insurance.

Side Effects: Side effects vary greatly between birth control types and from person to person, but the most commonly reported side effects are: nausea, weight gain, moodiness/increased risk of mood disorder like depression and anxiety, improvement in PMS symptoms and/or lighter cramping and bleeding, sore breasts, altered bowel movements, bloating, fatigue, dizziness, change in facial skin texture or appearance, and decreased sex drive.

**Condom**

Efficacy (when used correctly): 98%

What is it? A condom is a thin, flexible plastic tube with a secure ring at one end. The condom unrolls onto a penis and covers it entirely.

How Does It Work: The condom works by creating a physical barrier between you and your partner’s genitals and bodily fluids. In terms of preventing pregnancy, the sperm are prevented from entering the vagina and instead collect inside the condom. In terms of preventing Sexually Transmitted Infection, it keeps any potentially infected body parts or fluid from coming into contact with your partner(s).

Risks: Condoms, when used perfectly, are effective at preventing pregnancy 98% of the time—but humans are not perfect. Condoms may be expired, they may break, be rolled on incorrectly, or be the wrong size, all of which can contribute to escape of sperm from their plastic prison. To minimize your risk while using condoms, make sure you roll it on correctly, leave a bubble at the tip for sperm to collect in, buy the correct size, and consider combining condoms with spermicide, pulling out of your partner before ejaculation, or both. Be careful when combining lube with condoms—only water and silicone-based lubes are safe to use with condoms. Oil-based lubes weaken condoms and make them much more likely to break.

How Do I Get It? You don’t need a prescription to buy a condom anywhere, and they vary in price, starting at just a few dollars per box.

Side Effects: Potential latex allergy (in this case, use an alternative material, such as polyurethane). Avoid any potential discomfort by combining condoms with (water or silicone-based) lube

**Vaginal Ring**

Efficacy (when used correctly): 99%

What is it? The Vaginal Ring is a flexible plastic ring that sits at the top of your vagina right against your cervix. You insert a new one every 28 days, and take it out for a few days every month to have your period.

How Does It Work? It works similarly to the pill by continuously releasing synthetic hormones (like estrogen and progestin) that prevent your ovaries from releasing an egg at all. These hormones also weaken the uterine lining and thicken the cervical mucus, which both make it very difficult to fertilize an egg, should one be released.

Risks: Any synthetic hormone birth control will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous.

Where Do I Get It: You’ll need a prescription from a medical professional to get your hands on the patch, and you’ll need to pick it up at a pharmacy.

Side Effects: Some people, both the wearer and their partner, report that they can feel the ring during sex. In some rare cases, the ring may fall out or move around during sex or very intense physical activity, so it’s good to regularly check with your fingers to make sure that it’s still in place. As with the pill, common side effects can include nausea, weight gain, moodiness/increased risk of mood disorder like depression and anxiety, improvement in PMS symptoms and/or lighter cramping and bleeding, sore breasts, altered bowel movements, bloating, fatigue, dizziness, change in facial skin texture or appearance, and decreased sex drive, as well as vaginal itchiness, dryness, or altered vaginal discharge.

**Non-Hormonal IUD**

Efficacy (when used correctly): More than 99%

What is it? Non-hormonal Intrauterine Devices (IUDs) are usually made out of plastic and copper, and come in various shapes, most commonly a T-shape. The IUD sits inside your uterus, with the arms fully inside the womb and the stem of the T extending down into your cervix. The flexible plastic threads at the bottom of the T hang slightly down through the cervix and into the vagina so that a medical professional can remove the IUD when you need to get it changed or if you decide to stop using this method.

How does it work? It functions by prompting your body to produce an immune response in the uterus and cervix where the device sits. The resulting fluid made by your body is toxic to sperm, and makes it impossible for them to survive inside of you. Gnarly. It also makes the mucus of the cervix thick and sticky, adding an extra level of difficulty for those little wrigglers. The copper IUD can be effective for 5-10 YEARS, depending on which brand you choose, and can be used as an emergency contraceptive if it is inserted up to 3 days after any kind of WHOOPS (aka accidental exposure to sperm).

Risks: There is a very minimal risk that the IUD could move around after you have it inserted. In very extreme cases, the IUD can perforate your uterus and migrate outside of your reproductive system, which is a very serious health condition that should be addressed immediately. But, again, that is extremely rare. IUDs DO NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom.

Where do I get it? Any kind of IUD must be inserted in a doctor’s office by a medical professional, preferably an OBGYN with lots of experience. Its cost depends on your healthcare coverage.

Side Effects: Most women experience mild discomfort during insertion, and some women report more extreme pain, although this is not the norm and it usually only lasts a few seconds while the device is being inserted. Common side effects include heavier, longer, and more painful periods, more frequent lower backaches, abnormal vaginal discharge, and potential pain during sex.

**Injection**

Efficacy (when used correctly): 99%

What is it? The shot, often called by its brand name Depo-Provera (or simple ‘Depo’), is an injection of hormones that goes into your upper arm or butt cheek (peach emoji).

How Does It Work: The shot delivers a large does of the synthetic hormone progestin, which circulates throughout your body over the life-cycle of the shot and prevents your body from releasing any eggs (aka ovulating), so nothing can be fertilized. The shot is typically administered every 12-14 weeks. But it is recommended to get it every 12 weeks EXACTLY (3 months) for full pregnancy prevention, as missing time in-between shots lessen the effects of the hormones in your body.

Risks: The shot, like any hormonal birth control, will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous. Long-term use of the shot has been linked to bone density loss, which can lead to osteoporosis in later life. The shot DOES NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom. It’s not clear whether the shot may be less effective if you are overweight or obese, so consult with your doctor about whether or not this option is right for you.

Where Do I get It: The shot must be administered in a doctor’s office by a healthcare professional every three months. The cost varies based on your healthcare coverage.

Side Effects: The most common side effect is a change in your period—many women experience a change in the rhythm or timeline of their cycle, including spotting at unexpected times, and many women who get the shot stop getting their period after about a year of using it. Your period goes back to normal within a few months after your last shot wears off. Other possible side effects of the shot include: nausea, weight gain, acne, more frequent headaches, decreased sex drive, sore boobs, loss of head hair and/or increase in hair on the body, slight bruising where the shot was given, increased risk of depression and anxiety, loss of one-density, and rarely, a small, permanent dent in the skin where the needle entered you skin.

**Implant**

Efficacy (when used correctly): 99%

What is it? The implant is a small, rod-shaped device about the size of a matchstick that is surgically inserted under the skin of your upper arm. It is effective for up to 3 years, after which it needs to be removed and replaced. It involves a very minor surgery for a doctor to put in—one that can be completed within 15 minutes and that you don’t have to stay in the hospital for.

How Does It Work: The implant continuously releases doses of the synthetic hormone progestin into your bloodstream. This prevents your body from releasing any eggs (aka ovulating) so nothing can be fertilized.

Risks: The implant DOES NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom. The shot, like any hormonal birth control, will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous. It’s not clear whether the implant may be less effective if you are overweight or obese, so consult with your doctor about whether or not this option is right for you.

Where Do I get It: The implant must be put in by a healthcare professional, in a doctor’s office. The implant tends to be a more expensive birth control option, although this depends on your healthcare coverage.

Side Effects: Most people experience minor pain, swelling, and tenderness at the site of the implant for a few days after the procedure. Other longer-term side effects include irregular menstrual cycle, an increased risk of depression and anxiety, decreased sex drive, nausea, weight gain, acne, sore boobs, more frequent headaches, and dizziness.

**Diaphragm**

Efficacy (when used correctly): 92-96%

What is it? The diaphragm, sometimes called a cervical cap, is a plastic-based cap that is inserted in the vagina before sex. It is similar to a female condom, but only covers the opening of the vagina into the cervix, not the whole vagina. It can easily be inserted manually up to several hours before you have sex.

How Does It Work: It works by preventing any sperm from moving from the vagina into the uterus to access any awaiting eggs. While it covers the cervical entrance, it doesn’t provide any physical barrier between the rest of your genitals and your partner’s, so it provides pretty limited protection against STIs. A doctor or nurse will fit you and give you the correct size diaphragm, and show you how to insert, remove, and clean your diaphragm. The diaphragm should be used in conjunction with spermicide, which increases the effectiveness of both methods.

Risks: Using a diaphragm can increase your risk of urinary tract infections (UTI’s) and yeast infections, and again, diaphragms DO NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom. The diaphragm may get knocked out of place during sex, so it’s important to consider using another method, such as a condom, in case this happens. Always check your diaphragm for signs of damage or tearing before using it, and always cleanse with warm water and mild soap after using.

Where Do I Get It: You can get fitted for a diaphragm and receive the device from your healthcare practitioner. You do not need to pick it up from the pharmacy. Cost is usually quite low, but depends on your healthcare coverage.

Side Effects: Some people may experience discomfort while using a diaphragm, so consider using lube to feel more comfortable. Make sure you feel comfortable using your diaphragm before having sex with it as your primary birth control option.

**Pull-out method**

Efficacy (when used correctly): 96%

What is it? ‘Pulling out’ is when your male partner pulls his penis out of your vagina as he ejaculates (aka cums) and directs his semen (cum) elsewhere, outside of your vagina.

How Does It Work: This method, when used correctly, means that no semen come into contact with the vagina, meaning sperm can’t get into the uterus to fertilize an egg.

Risks: The pull-out method can be very difficult to get right 100% of the time, so it’s a pretty high-risk birth control method. All of the responsibility is on the male partner to know himself well enough to pull out in time, so that is something to keep in mind. The pull-out method DOES NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom. It’s a great idea to combine the pull-out method with any other kind of birth control, just to be safe, and you can practice the pull-out method while wearing a condom to get a feel for whether or not it might be right for you.

Where Do I Get It: Between you and your partner, you have to decide whether your relationship’s trust, intimacy, and communication is strong enough to feel confident in this method of preventing pregnancy.

Side Effects: None

**Fertility Tracking**

Efficacy (when used correctly): 76%

What is it? Fertility tracking requires a woman to monitor her menstrual cycle so she can predict the time windows during which she is fertile, and then abstain from sex during that time.

How Does It Work: Women using this method track their cycle by counting days on the calendar (hence the name ‘calendar method’) and/or recording her body temperature. At certain times in her cycle and according to her body temperature, a woman may be able to track when she is ovulating, which is when she is most likely to get pregnant. By not having sex during this time, she can decrease her risk of getting pregnant.

Risks: Very few women have a perfectly timed menstrual cycle, and this method is heavily reliant on extreme diligence and almost scientific levels of measurement on the woman’s part. Needless to say, this can be very difficult and can be pretty inaccurate, which is what make sit the least reliable method of birth control. Fertility tracking DOES NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom

Side Effects: None

**Vaginal Douche**

Efficacy (when used correctly): 85%

What is it? A vaginal douche is a bottle of liquid, usually some mix of water, vinegar, antiseptic, and perfume, that a woman will squeeze through a tube into her vagina to supposedly ‘flush out’ the sperm after intercourse.

How Does It Work: It doesn’t. As soon as a penis ejaculates inside you, millions of sperm are already on their way up into your uterus, and no matter how fast you hop up and grab your douche, there’s no way you could flush them all out in time. Douching still remains thought of as a birth control method, but it’s about at reliable as using no birth control at all.

Risks: The efficacy of a vaginal douche is about the same as using no birth control at all In addition to not being very effective at preventing pregnancy, vaginal douches increase your risk of yeast infection and urinary tract infection (UTI), as well increasing your risk of contracting Pelvic Inflammatory Disease (PID). Some evidence has also shown that women who douche more than once a week may have more difficulty getting pregnant when they DO actually want to get pregnant, and are at higher risk of ectopic pregnancy (when the embryo start growing inside your fallopian tube instead of inside the uterus)

Where Do I get It: Douches can be bought at any drugstore and start at just a few dollars per box.

Side Effects: The risks associated with vaginal douching are pretty high (see above). Additionally, the vagina is really good at regulating it’s own health, and vaginal douching disturbs its balance, so it’s just generally bad for your vagina to use one.

**Patch**

Efficacy (when used correctly): 99%

What is it? The patch is a small, band-aid like patch that is attached to your bare skin somewhere that it won’t be disturbed, such as the buttocks, belly, or upper arm. You wear a batch for a week, and then replace it with a new one every day for three weeks. For the fourth week, you don’t wear the patch, and this is when you have your period.

How Does It Work: The patch provides a continuous dose of synthetic estrogen and progestin through the skin and into the bloodstream. These hormones prevent your ovaries from releasing an egg, and also weaken the uterine lining and thicken the cervical mucus. Both of these effects make it very difficult for sperm to fertilize an egg should one be released.

Risks: The patch DOES NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom. The patch, like any hormonal birth control, will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous.

Where Do I get It: You’ll need a prescription from a medical professional to get your hands on the patch, and you’ll need to pick it up at a pharmacy.

Side Effects: Include sore boobs, more frequent headaches and increased risk of menstrual migraine, rash or irritation at the site of the patch, nausea, more intense menstrual cramps, increased risk of depression and anxiety, fatigue, weight change, unusual vaginal discharge, and decreased sex drive.

**Spermicide**

Efficacy (when used correctly): 80%

What is it? A spermicide is a chemical that can come in many forms, such as a jelly, foam, cream, tablet, or suppository (solid thing that you put into your vagina).

How Does It Work: These chemicals a specially designed to kill sperm or stop them moving effectively so they can’t swim up into your uterus and fertilize any eggs.

Risks: spermicides are only about 80% effective when used on their own, but can be added to any other birth control method, like a condom or a diaphragm, to increase the efficacy of that form of birth control. Spermicides DO NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom.

Where Do I get It: Spermicides, in their many forms, are available in any drugstore near you and start at only a few dollars a box.

Side Effects: Frequent use of spermicides may cause irritation or tearing of genital tissue for both partners—is this happens, stop using it and ask your doctor how to proceed.

**Emergency Pills**

Efficacy (when used correctly): 98%

What is it? The emergency pill, also known as the ‘morning-after’ pill, is a medication you can take when your primary method of birth control has failed, like if the condom broke or your partner didn’t pull out in time, and you’re afraid you might be at risk of getting pregnant.

How Does It Work: The emergency pill contains similar hormones to those found in the regular contraceptive pill, and stops your body from releasing an egg and may stop an already fertilized egg from implanting into the uterus.

Risks: The emergency pill is most effective the sooner you take it after having unprotected sex, but can be taken up to 5 days after accidental exposure to sperm (each day, however, the effective of the medication decreases). If taken within 72 hours after sex, most women only have a 1-2% chance of getting pregnant. The emergency pill DOES NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom.

Where Do I get It: You can buy the emergency pill at a drug store, from a pharmacist. Some kinds of the pill may require you to be older than 17 in order to buy the medication.

Side Effects: People who take the morning-after pill often report nausea, abdominal pain, cramping, fatigue, and change sin your period for several months after taking the pills. Like any hormonal option, the emergency pill will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous.

**Hormonal IUD**

Efficacy (when used correctly): Over 99%

What is it? Hormonal Intrauterine Devices (IUDs) are usually made out of plastic and synthetic hormones, and come in various shapes, most commonly a T-shape. The IUD sits inside your uterus, with the arms fully inside the womb and the stem of the T extending down into your cervix. The flexible plastic threads at the bottom of the T hang slightly down through the cervix and into the vagina so that a medical professional can remove the IUD when you need to get it changed or if you decide to stop using this method.

How Does It Work: The IUD, similarly to the vaginal ring, continuously releases synthetic hormones (like estrogen and progestin) that prevent your ovaries from releasing an egg at all. These hormones also weaken the uterine lining and thicken the cervical mucus, which both make it very difficult to fertilize an egg, should one be released. Depending on the brand of IUD and the hormones in the device, your period is likely to be much lighter or possibly go away entirely, and can last anywhere from 3-5 years.

Risks: Any synthetic hormone birth control will slightly elevate your risk of developing a blood clot, which is a very serious medical condition. You should always talk to your doctor and make sure you do not have a pre-existing medical issue that would make taking this medication dangerous. There is a very minimal risk that the IUD could move around after you have it inserted. In very extreme cases, the IUD can perforate your uterus and migrate outside of your reproductive system, which is a very serious health condition that should be addressed immediately. But, again, that is extremely rare. IUDs DO NOT prevent any kind of sexually transmitted infection (STI)—to avoid getting an STI, ALWAYS use a secondary barrier method, like a condom.

Where Do I get It: Any kind of IUD must be inserted in a doctor’s office by a medical professional, preferably an OBGYN with lots of experience. Its cost depends on your healthcare coverage.

Side Effects: The hormonal IUD can cause similar side effects to the pill, which include nausea, weight gain, moodiness/increased risk of mood disorder like depression and anxiety, improvement in PMS symptoms and/or lighter cramping and bleeding, sore breasts, altered bowel movements, bloating, fatigue, dizziness, change in facial skin texture or appearance, and decreased sex drive. With the hormonal IUD however, these side effects are most common within the first few months after insertion and usually go away. Most women experience mild discomfort during insertion, and some women report more extreme pain, although this is not the norm and it usually only lasts a few seconds while the device is being inserted. Common side effects can include abnormal vaginal discharge and potential pain during sex.

**Surgical Sterilization**

Efficacy (when used correctly): 100%

What is it? Surgical sterilization can come in two forms: Tubal ligation (having your ‘tubes tied’) or hysterectomy. Tubal ligation involves severing your fallopian tubes—the tube that connects each of your ovaries to your uterus. A hysterectomy involves the removal of your ovaries and uterus, and is the much more invasive of the two procedures.

How Does It Work: If you get your tubes tied, the eggs that your ovaries produce can no longer be sent though you fallopian tubes and into your uterus, so there are no eggs for any sperm to fertilize. With a full hysterectomy you no longer have any of the equipment that it takes to make any kind of baby whatsoever, so you’re all covered.

Risks: The risks associated with surgical options are similar to those associated with any surgery. There is significant recovery time involved with both options, and both are permanent. With tubal ligation there is a slight risk of ectopic pregnancy (when an embryo starts to grow in your fallopian tube instead of in your uterus) if the surgery was performed incorrectly.

Where Do I get It: You can receive these surgeries in a hospital under the care of your medical provider. Both are pretty major operations, so require health insurance or significant funds.

Side Effects: Extensive recovery time is necessary after these surgeries, and side effects of these surgeries may include lasting hormonal imbalances and pelvic pain.

FAQ

Different Kinds of Hormonal Birth Control

Sort by: Effectiveness; hormonal and not hormonal