



	How long does it last?	How reliable is it?	Does it contain a hormone?	How should I use it?	Will it affect my period?
MALE AND FEMALE STERILISATION	Forever	Male sterilisation: 1.5 per 1,000 women get pregnant  Female sterilisation: 5 per 1,000 women get pregnant	No	Usually involves a surgical procedure under a local anaesthetic. A method for women called hysteroscopic sterilisation does not involve surgery, although local anaesthesia may be required	No
COPPER COIL OR INTRAUTERINE DEVICE (IUD)	Up to every five or ten years, depending on the type chosen (but can be removed by a doctor or nurse at any point)	Over 99% effective with typical use. Typical use is the same as correct use	No	Inserted in the womb by a trained doctor or nurse	Some women experience heavier, longer and sometimes more painful periods
INTRAUTERINE SYSTEM (IUS)	Up to three or five years (but can be removed by a trained doctor or nurse at any point)	More than 99% effective with typical use. Typical use is the same as correct use	Progestogen	Inserted in the womb by a trained doctor or nurse	For the first three to six months after placement, women may experience irregular bleeding, with the bleeding being heavier than usual at first. Over time, periods can gradually become lighter and shorter and may stop altogether
SUB-DERMAL IMPLANT	Up to three years (but can be removed by a doctor or nurse at any point)	More than 99% effective with typical use. Typical use is the same as correct use	Progestogen	Inserted into your upper arm by a trained doctor or nurse via a short surgical procedure	Can cause irregular bleeding in both intensity and duration. Some women may stop bleeding altogether, however the bleeding pattern experienced during the first three months of use is broadly predictive of future bleeding patterns.

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CONTRACEPTIVE INJECTION	8 to 13 weeks, depending on the injection given	94% effective with typical use More than 99% effective when used correctly. Correct use means never missing the next scheduled injection	Progestogen	Injected by a doctor, nurse or yourself into the muscle in the buttocks or under the skin in the upper thigh or abdomen. Sometimes it may be given in the upper arm	Some women experience heavier bleeding during their period and between their regular periods. However some women may stop bleeding altogether
CONTRACEPTIVE VAGINAL RING	Every 28 days, after which a new ring can be inserted	91% effective with typical use More than 99% effective when used correctly. Correct use means making sure the vaginal ring is in place and replaced when needed	Progestogen and oestrogen	Self-application: inserted into the vagina for three weeks (21 days) and is then removed for seven days	Some women bleed during the seven day ring-free interval
CONTRACEPTIVE PATCH	28 days, if the patch is replaced each week for 3 weeks	91% effective with typical use More than 99% effective when used correctly. Correct use means making sure the patch doesn't fall off and changing the patch every week	Progestogen and oestrogen	Self-application: stick it on a clean, dry, hair-free place on your body once a week for three weeks (21 days) and remove for seven days	Some women may bleed during the patch-free week, which is usually regular, lighter and less painful than a normal period
CONTRACEPTIVE PILLS	This will depend on the product used, tablets must be taken daily and as described in the product literature.	91% effective with typical use Up to 99% effective when used correctly. Correct use means always remembering to take the pill at about the same time. The effectiveness may also be reduced as a result of taking antibiotics, vomiting or diarrhoea	The combined pill (COC) contains progestogen and oestrogen.  The progestogen-only pill (mini pill) is available in different forms which contain different types of progestogen hormones	Depending on the type of pill, you will either need to: take a pill every day for 21 days, then break for 7 days before starting a new pack, or take one every day of the month with no break between packs	Some women experience lighter, less painful, regular bleeds with the COC  You may not have regular periods when taking the POP; they may be irregular, lighter, more frequent or stop altogether

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MALE AND FEMALE CONDOMS	Only at the time of sex	Up to 82% effective with typical use Up to 98% effective when used correctly. Correct use means using every time you have sex and making sure the condom is worn correctly before/during sex	No	Self-application: a male condom fits over a man's erect penis and a female condom is put in the vagina to loosely line it	No
DIAPHRAGM OR CAP WITH SPERMICIDE	Only at the time of sex, but it must be kept in place for six hours afterwards	88% effective with typical use 94% effective when used correctly. Correct use means using with spermicide every time you have sex, making sure the cap is in the right place before sex and ensuring it is left in place for 6 hours after you have had sex	No	Self-application: inserted into the vagina with spermicide. Must be left in place for at least six hours after sex	No
NATURAL FAMILY PLANNING	Regular monitoring and careful planning is needed	75% effective with typical use Up to 99% effective when used correctly (depending on the method used). Correct use means learning to read the signs of fertility accurately and abstaining from sex (or using another contraceptive) at some points during your monthly cycle	No	Only on the advice of a trained family planning specialist	No