

# Emergency Contraception

## Introduction

This lesson will provide factual information on emergency contraception.

## Grade Level

Grades 7-9

## Learning Outcomes

Students will be able to:

1. Define and describe emergency contraception.
2. Explain two potential side effects and one benefit to using emergency contraceptive pills.
3. Distinguish between the two types of EC pills as well as ECP and the abortion pill.
4. Identify at least three ways of obtaining emergency contraceptive pills.
5. Describe three situations in which the use of emergency contraceptive pills would be an option.

## Prerequisites/Prior Learning

Students should have already learned about other forms of contraception.

## Materials

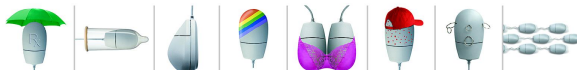
The fact sheet (web page) from the [www.sexualityandu.ca](http://www.sexualityandu.ca) web site, [Emergency Contraception After Sex](http://www.sexualityandu.ca) (www.sexualityandu.ca)  
[What is Emergency Contraception](#) (Canadian Federation for Sexual Health)  
[Where can I get ECP?](#) (Canadian Federation for Sexual Health)  
[FAQ's on ECP](#) (Canadian Federation for Sexual Health)

## Time Required

One class period

## Lesson Procedure (With Suggested Discussion Points/Content)

<ol style="list-style-type: none"><li>1. Explain the lesson's purpose and relevance.</li><li>2. Distribute the assigned readings and Emergency Contraception Facts Worksheet. Have students complete the worksheet individually in class.</li><li>3. When all students have finished, have the students exchange the worksheets and correct each other's work. Discuss the questions and answers using the Answer Guide to Emergency Contraception Facts Worksheet.</li><li>4. Divide students into small groups to work on the "Teen Hotline" call scenarios. Have the students share their work in the whole class.</li><li>5. Debrief and summarize the learning activities.</li></ol>	
---	--



## Closure

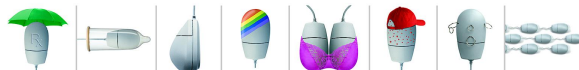
Emphasize the Emergency Contraception is not an alternative to abstinence or to other forms of contraception.

## Follow-up/Enrichment

Ask the students to locate the clinic closest to them using the [clinic locator](#) on the [www.sexualityandu.ca](http://www.sexualityandu.ca) web site. Ask them to record that clinic information in their [Student Health Journal](#).

## Assessment/Evaluation Criteria/Tools

Ask the students to complete the [Individual/Group Participation Sheet](#) and keep it in their [Student Health Journal](#). As the teacher, you should take notes on the participation of students and record them in your [Student Evaluation Tracker](#).



## Emergency Contraception Facts Worksheet:

**Note:** Emergency contraceptive pills are often called ECPs or simply EC (which can mean either type of emergency contraception- an IUD or pills) Here "EC" is referring to the pills.

**DIRECTIONS:** Record the 10 answers you collect from classmates by putting hatch marks in the boxes to the right of each answer. When you are done with the survey, add up the hatch marks and record the number on the line to the left of the answer.

### Emergency Contraceptive Basics

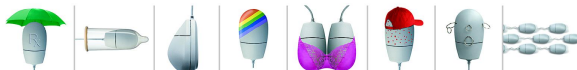
- When does someone need to use EC to prevent an un-planned pregnancy?  
 a. before sexual intercourse .  
 b. after sexual intercourse .
- How many days after unprotected intercourse does a woman have for EC to be effective at preventing a pregnancy?  
 a. 24 hours (the next day) .  
 b. 72 hours (3 days)  
 c. 120 hours (5 days)
- About how well does EC work?  
 a. about half of the women who take EC will still get pregnant (it's 50% effective)  
 b. Only a quarter of the women will get pregnant (it's 75% effective) .  
 c. None of the women will get pregnant (it's 100% effective) .
- True or False: The sooner a woman takes EC, the more effective it will be at preventing pregnancy.  
 a. True .  
 b. False .
- True or False: The emergency contraceptive pill is the same as the "abortion pill".  
 a. True .  
 b. False .
- EC pills are two pills; the directions for taking them are: a woman takes both pills as soon as possible.  
 a. True .  
 b. False .

### Side Effects / Benefits

- True or False: EC is a good form of regular birth control.  
 a. True, it works just about as well as birth control pills at preventing pregnancy .  
 b. False, there are many other methods of birth control that are better.
- True or False: EC has serious medical risks.  
 a. True .  
 b. False .
- True or False: If a woman is already pregnant and takes EC, it could harm the pregnancy.  
 a. True .  
 b. False .
- True or False: Taking EC after unprotected intercourse will also protect a woman from getting some sexually transmitted infections (STIs).  
 a. True .  
 b. False .

### Getting Emergency Contraception

- A woman can get EC in the following way(s):  
 a. from a doctor or other health care provider .  
 b. from a clinic (like Planned Parenthood or the Public Health Department)  
 c. from a pharmacy .



- d. from a school nurse or in-school clinic .
- e. from an Emergency Room .
- f. by calling an EC hotline number (1-888-NOT-2-LATE) to find out where to get it.
- g. by going to a website (<http://www.not-2-late.com/>) to find out where to get it

12. How much does EC cost?

- a. between \$75.00-\$100.00 .
- b. between \$8.00-\$50.00 .
- c free .

13. True or False: A person can get EC to have on-hand just in case they may need it.

- a. True .
- b. False .
- c. True, but only in some places.

14. True or False: Teens need their parents' or guardians' permission to get EC.

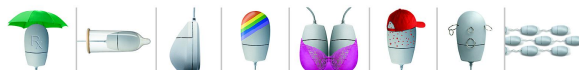
- a. True .
- b. False .

### When to use Emergency Contraception

15. In which of the following situations would EC **not** be effective?

- a. A woman misses two or more of her regular birth control pills
- b. An external or male condom broke or slipped off
- c. During intercourse, the male did not pull out in time
- d. A woman is more than a week late for her Depo shot
- e. A woman was forced to have sex
- f. A woman is pregnant
- g. The couple did not use any birth control method during intercourse
- h. An internal or female condom was put in or taken out wrong leading to the spilling of semen, or the penis was accidentally put in between the internal condom and the wall of the vagina

16. What are some feelings that a person trying to get EC might experience and how can they deal with these feelings?



**ANSWER GUIDE**  
**Emergency Contraception Facts: What do you know?**

Emergency Contraceptive Basics

1. When does someone need to use EC to prevent an un-planned pregnancy?

**b. after sexual intercourse**

EC is to be taken after intercourse; also it will not protect a woman from pregnancy if she has unprotected intercourse in the days or weeks after taking EC.

2. How many days after unprotected intercourse does a woman have for EC to be effective at preventing a pregnancy?

**c. 120 hours (5 days)**

EC is sometimes called the “morning-after-pill”, which is misleading since it is effective for more than just within 24 hours after unprotected intercourse. Previously thought to be only effective within 72 hours, EC is now known to be effective up to 120 hours after unprotected intercourse.

3. About how well does EC work? (How effective is it?)

**a. Only a quarter of the women will get pregnant (it's 75% effective)**

Women will have about a 75% less chance of becoming pregnant. EC reduces risk of pregnancy by 75% to 89% if it's taken 2 to 5 days after sex, depending how soon it's used.<sup>1</sup> Although there is still some risk of pregnancy even after EC is taken, the chance is **greatly** reduced.

4. True or False: The sooner a woman takes EC, the more effective it will be.

**a. True**

If taken within 24 hours, there is a **95% to 98%** less chance of becoming pregnant

5. True or False: The emergency contraceptive pill is the same as the “abortion pill”.

**b. False**

There are a lot of misunderstandings about EC, some people think that EC pills cause an abortion. EC pills and the “abortion pill”, also known as RU-486, are completely different medications with completely different effects. EC does not work if a woman is already pregnant ... but sometimes a woman gets pregnant soon after intercourse and other times, because sperm can live inside her body for up to 5 days, she may not get pregnant until she happens to release an egg. She could have sex on Sunday and not get pregnant from it until Thursday or Friday! She could take EC on Monday and stop her ovary from releasing that egg at all. EC mainly works like birth control pills; it stops (or delays) ovulation and thickens cervical fluid, blocking sperm. The abortion pill is actually two kinds of medicines a doctor can prescribe *after* a woman is already pregnant to induce a miscarriage; it is not the same as EC. Wider use of EC could potentially **prevent** millions of abortions that occur each year from un-planned pregnancies. <sup>1</sup> In the U.S. up to half of pregnancies are unintended and 50% of those end in abortion. Researchers estimate that 1.5 million of the 3 million unintended pregnancies each year could be prevented, and as many as 700,000 abortions could be avoided, if women had information and timely access to emergency contraception.

6. EC pills are two pills; the directions for taking them are: a woman takes both pills as soon as possible.

**a. True**

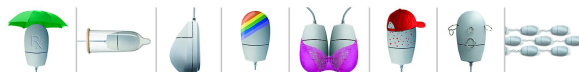
EC, known by the brand name “Plan B” is taken in this way. The previous instructions were to take one of the pills as soon as possible and the other one 12 hours later, but many people forgot to do this, so now it is recommended to take both pills as soon as possible; it works just as well.

Side Effects/Benefits

7. True or False: EC is a good form of regular birth control.

**b. False, most other methods of birth control are more effective.**

EC is meant for emergency situations and not for use as a regular method; it's better than nothing but it doesn't even come close to 100% protection. It is not nearly as effective as other regular birth control methods such as condoms or hormonal methods. For example, if a woman used EC repeatedly as her only method for a year, her



risk of pregnancy would be 35%; this is lower even than contraceptive methods like foam and withdrawal. 1 Plus the side effects might not make this a comfortable method to use regularly.

8. True or False: EC has serious medical risks.

**b. False**

There are **no serious medical risks** in taking EC. There can be side effects however such as nausea, vomiting, headaches and changes in menstrual bleeding of the next cycle. 1 Side effects are temporary and less common with “Plan B” than with the kinds of EC that were available in the past. A woman’s period may come a few days earlier or a few days later. If it does not come within 3 weeks, the woman should go to her health care provider for a pregnancy test. EC is usually even safe for women who can’t normally take hormonal birth control methods. 1

9. True or False: If a woman is already pregnant and takes EC, it could harm the pregnancy.

**b. False**

If a woman does become pregnant and has taken EC, EC does not cause birth defects or any harm at all to the pregnancy. 1

10. True or False: Taking EC after unprotected intercourse will also protect a woman from getting some sexually transmitted infections (STIs).

**b. False**

EC only works to prevent pregnancy, thus couples are still at risk for sexually transmitted infections (STIs), including HIV. It may be a good idea for couples to get tested for some STIs right away following unprotected intercourse. An HIV test would have to wait until their bodies had time to build up antibodies; it would be very accurate after three months.

Getting Emergency Contraception

11. A woman can get EC in the following way(s):

**a. from a doctor or other health care provider**

**b. from a clinic** (*NOTE TO TEACHERS: if you can, check which local clinics that may carry EC, such as Planned Parenthood or the Health Department*)

**c. from a pharmacy**

**d. from a school nurse** (*Note: check to see if this is available in your school*)

**e. from an Emergency Room**

**f. by calling an EC hotline number to find out where to get it**

**g. by going to a website to find out where to get it**

Call the Planned Parenthood Federation of Canada's bilingual hotline, 1-866-373-7732, for guidance about getting Emergency Contraception in your area. Or use our [clinic locator](#) on the [www.sexualityandu.ca](http://www.sexualityandu.ca) web site.

12. How much does EC cost?

**b. between \$8.00-\$50.00**

**c. free**

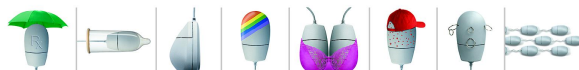
At some clinics, EC pills are free. Sometimes EC is covered by insurance. Otherwise the cost is usually between \$8.00-\$50.00. As of 2005, \$50.00 is the cost of Plan B in a pharmacy without a prescription. Going to a clinic or doctor’s office may be cheaper.

13. True or False: A person can get EC to have on-hand just in case they may need it.

**b. True, but only in some places**

Many doctors and clinics are providing EC to women before they may need it. Because it is important to take EC within a certain timeframe, it is safer to give EC to women so that they may have it on hand on weekends or evenings when clinics and pharmacies may be closed. Women who have EC on-hand are more likely to use it to prevent un-planned pregnancies. Women can request EC or a prescription for EC from their doctor or clinic to have on-hand when they might need it. 1

14. True or False: Teens need their parent’s permission to get EC.



**c. False**

By law, minors in Canada have the right to get EC without the consent of their parents. Although the most important thing is preventing un-planned pregnancies, it is ideal if teens can talk to their parents about EC.

When to use Emergency Contraception

15. In which of the following situations would EC **not** be effective?

**f. A woman is pregnant**

All of the other situations are examples of unprotected intercourse, birth control method failure or forced intercourse, in which EC can be effective in reducing the risk of an un-planned pregnancy.

*Finally, ask students to brainstorm some answers to the following question, recording answers on the board.*

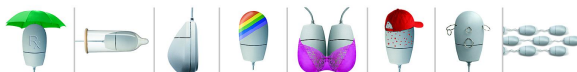
16. What are some feelings that a person trying to get EC might experience and how can they deal with these feelings?

Examples include: embarrassment, shame, guilt, fear of pregnancy or of HIV or another STI, confusion about where to get EC, frustration at trying to get EC, feel like a failure, concerned what others may think of them when they are asking for it (especially if it is happening for a second time), feeling judged or put-down by pharmacists or health care providers (even if it turns out they are nice and respectful, the person might *anticipate* a judgmental interaction), rape survivors will feel traumatized.

First this person might want to:

- realize that these feelings are all normal.
- acknowledge that they are being mature and responsible by taking care of their health and taking measures to prevent a more difficult situation.
- remember that mistakes happen to everyone and they can learn from them. Mistakes happen even when a person is being responsible, since no birth control method is 100% effective in preventing pregnancy except abstinence.
- consider that dealing with judgmental health care providers is preferable to dealing with the consequences of an un-planned pregnancy; this will help in dealing with getting access to EC.
- (in the case of birth control method failure) think about how they could prevent this in the future, (for example, by combining condoms and the pill or another hormonal method)
- (in the case of no method) decide what type of method they want to use in the future.
- (in the case of sexual assault) talk with a rape counselor (for example, at the National Sexual Assault Hotline 1-800-656-HOPE) In the state of Washington, Emergency Rooms have to offer EC to a woman who has come in for treatment who has been raped. Laws vary state to state, but women who have been forced to have sex can always get EC in the ways mentioned above.

Ask students if there is anything they learned that surprised them. Ask students if they have any questions.



Andre calls at 6:00 p.m. on Friday afternoon:

*“Hello, can I talk to someone about some questions I have about umm...a problem I have....oh, OK, well I am calling with my wife here and we are both kind of embarrassed. My wife was on Depo, the shot, for like a year. She was supposed to go to the clinic here at our university two weeks ago for her next shot, but decided to go off of it because it wasn't making her feel so good. I guess we didn't really think about it, but we just had sex, four days ago without a condom or anything. We heard about a “morning after pill” or something like that, but it is like 4 mornings after. I saw some ads up around campus for “Plan B” too...I don't really know what that is...I don't know if it is too late or what, but we really don't want to have a child right now, is there anything we can we do?”*

**Things to consider in giving your advice:**

Explain why EC is or is not an option in this situation.

Are there any other options, besides EC, that would be good for this person's situation?

What kind of information is it important that this person has **right now** if they choose to take EC?

What might this person be feeling right now and how can you help address possible concerns regarding both their situation and concerns about taking EC?

What would the steps involve if this person chooses to take EC, how can you give them the information they need to take these steps?

What kind of advice could you tell this person that may help them avoid a situation like this in the future?

---

**Write your response on the back of this page or on a separate piece of paper:**

*“Well, Andre, first let me say that you did a brave thing by calling the Hotline to get advice and ask questions today....”*

