



Contraception

Key facts

People with intellectual disability have the same choices about contraception as other people. But, they will often need clear information and support to make choices.

Types of contraception

There are lots of types of contraception to choose from. Some common ones are:

Condoms - If condoms are used properly, they are a very reliable contraceptive. They should always be used with a water based lubricant. Condoms are the only contraceptive that help to stop the spread of sexually transmissible infections (STIs). A person may need to be taught how to use condoms just like teaching any other skill. The teacher can use pictures and help the person practise on an object shaped like a penis.

The pill - The contraceptive pill is a reliable contraceptive as long as the woman remembers to take it every day. The pill may not work if the woman has vomiting or diarrhoea or is taking particular medications (including some anti-epileptic medication). The pharmacist can put the pill into a blister pack or dosette box.

Contraceptive injection (eg Depo-Provera) - This is an injection that is given to a woman every three months.

Hormone implants (eg Implanon) - This is a small rod that is put under the woman's skin. It can stay in place for up to three years. It needs to be inserted and removed by a doctor.

IUD - An Intra Uterine Device is put into a woman's uterus by a specially trained doctor. The doctor can also remove it.

Deciding on contraceptive options

People with intellectual disability are more likely to understand about contraceptive options if they are clearly explained with the help of pictures.

Most contraceptives are medical treatments and so the doctor needs consent from the person. Adults can consent for themselves if they understand the general nature and effect of the contraceptive, eg it is a pill that will stop you getting pregnant if you have sex. If the person cannot consent, NSW law says that the doctor needs consent from a "person responsible" (usually a guardian or close family member).

Personal choice

People consider personal factors when deciding about contraception:

- Religious and cultural beliefs – Some religions say that preventing pregnancy is wrong and that people should avoid having sex altogether if they do not want to have a baby.
- Personal beliefs – For example, a person might be influenced by their own past experiences or the contraception being used by close family or friends.
- Relationships – For example, if a person is not in a long term relationship they may choose to use condoms.



- What suits the person –Sometimes people try a few different types before they find the right one for them and their partner. Sometimes the best choice of contraception may change as the woman gets older.

Sterilisation operations

Some operations are intended to make sure a person does not become a parent. A woman can have her tubes tied or blocked (sometimes called a tubal ligation) or a hysterectomy where her uterus is removed. A man can have a vasectomy.

Because these operations have such a big effect on a person's life, they need to be approached very cautiously. The doctor should make sure that the person has thought about the operation very carefully and can consent. The person needs a higher level of understanding than for a simple treatment.

In NSW, if an adult does not understand a sterilisation operation, it requires the consent of the Guardianship Tribunal. The Tribunal can only give consent if the operation is needed to prevent serious damage to the person's health. A child can only be sterilised with the consent of the Guardianship Tribunal or Family Court.

Role of professionals

A person's GP is the best place to start for information and to talk about which contraception is best for the particular person. Think about booking a longer consultation so there is enough time to ask questions.

Support workers and family have an important role in supporting the person with intellectual disability in this area of their life. Some carers feel uncomfortable discussing things like contraception. If so, you can contact Family Planning for advice or education.

For more information

See the places to get information and advice at the end of the [Sexuality](#) fact sheet.

You might be interested in these fact sheets

- **Consent to medical treatment**
- **Managing menstruation**
- **Sexuality**

*This fact sheet was updated in **May 2011**.*

The fact sheet contains general information only and does not take into account individual circumstances. It should not be relied on for medical advice. We encourage you to look at the information in this fact sheet carefully with your health professional to decide whether the information is right for you.