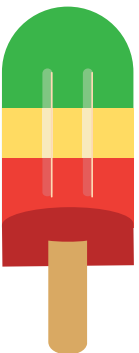
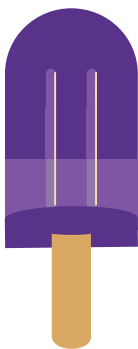
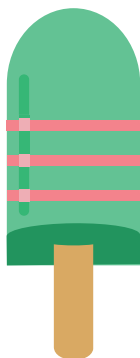
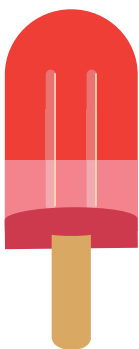


My Sex Life

INFO FOR YOUNG POZ PEOPLE





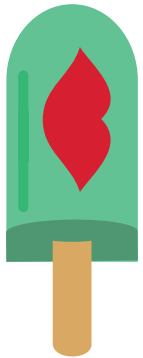
About this resource

My Sex Life is written primarily by and for young people living with HIV (poz young people) who represent a range of sexualities and gender identities. HIV is stigmatized and this can make sex and life more complicated. It can be hard to find trusted information that affirms our sexual and romantic desires. This resource addresses that challenge.

My Sex Life is a sexual health resource and a bit more. It is designed to help young people living with HIV navigate and explore sex. It may be just as useful for those of us with a lot of sexual experience as it is for those of us who haven't had a relationship or sexual experience. People who provide treatment, care and support to us and work with us may also find My Sex Life useful.

Talking about body parts and types of sex!

Penis, dick, cock, bits, vag, vagina, vulva and strapless. These are just some of the ways people refer to their genitals. In this resource, we are going to use “our bits” when referring to our genitals. For clarity, when explaining different levels of risk associated with HIV transmission, we will distinguish among anal, vaginal and frontal sex. Some transmen or people on the trans masculine spectrum call their genitals their front hole, and not a vagina. To acknowledge these important differences, we will use anus, vagina and frontal hole when we want to be more specific about people's bits.



Dating and relationships

Knowing we're positive, or just having found out we've tested positive for HIV can change the way we feel about ourselves and how we relate to others socially, emotionally, physically, romantically and sexually. Despite this, many of us want to date or be in relationships. Hanging out with someone who is into us and who we're into can be awesome and build confidence. Sometimes, though, people with HIV settle for someone that they may not like, because they think they can't do any better. Fuck that! We're worth it and deserve great partners.

The more comfortable we become with living with HIV and believing we deserve great partners, the easier it'll be to meet people we actually like. So while dealing with HIV sometimes seems like a burden (especially when we are younger) it doesn't have to be a downer on our dates.

“I want to be loved for all that I am, including HIV.”

Enjoyable sex is part of a good relationship, and deciding when to have sex is our choice. Everyone has different levels of comfort and confidence when it comes to sex. Some of us are just starting to think about dating and sex and are learning through masturbation. Others may be more

comfortable with intimacy but aren't as sure about sex. Still others may have lots of sexual experience.

Even if we know what we want, talking about sex may be awkward at first. But it builds intimacy and trust and hot sex usually happens when we are comfortable with ourselves and our partners. Talking helps us find out what we're both into so we can feel comfortable and do more of the stuff we like. Talking can be foreplay and it can be hot.

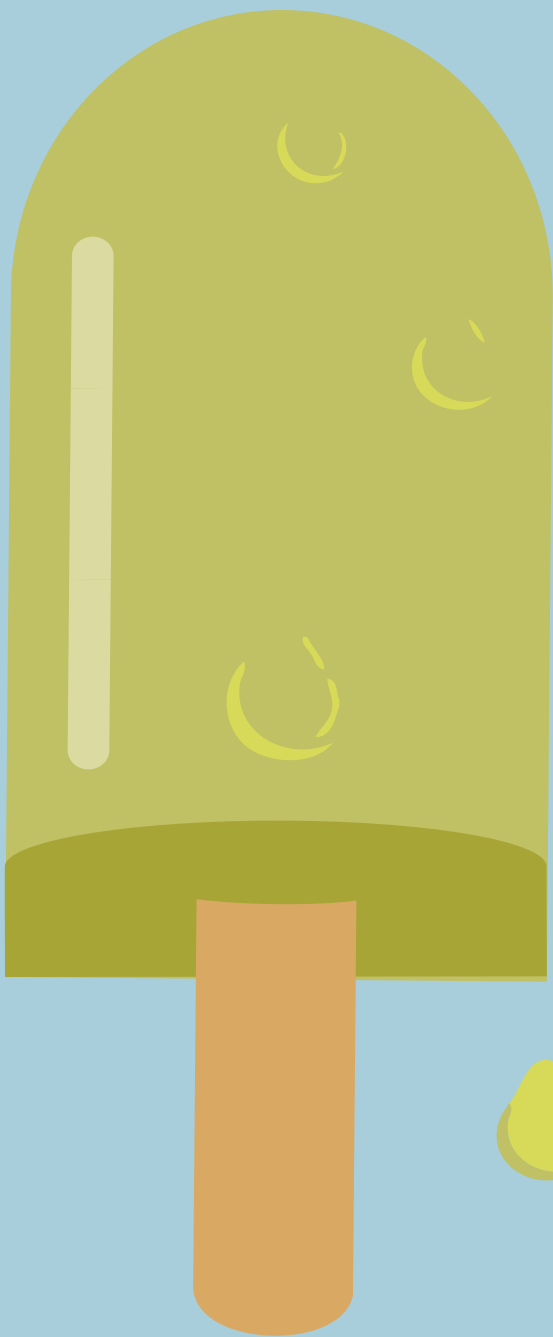
“Having hot consensual sex is a right!”

When we are ready to have sex, whatever kind of sex that is, both we and our partners must consent to whatever is happening. Consent means knowing everyone involved wants to do what they're doing—not just because they're drunk or high or afraid to say no. We should always check in with ourselves and ask our partners how they are feeling. If they say no or say nothing or don't seem into it, stop and talk about it.

Sex without consent is serious; it's sexual assault.

Having sex and making babies

Down the road, if we want and when we're ready, living with HIV shouldn't be a barrier to having a family. Things have changed! Vertical transmission (from parent to child) with effective prevention now occurs less than two percent of the time in Canada. HIV-negative children are born to HIV-positive parents every day. And for some people, adoption may be an option. While we might not be thinking about it now, know that even if we are living with HIV we can have a family with children who are not HIV-positive.



Makin' safer sex hotter sex

This section discusses some of the health risks related to sex. We provide some options and tips that others have found useful. It's up to us and our partners to discuss what level of risk we're comfortable with. So to get that fire started, or to keep it burning strong, read on about how to keep your sex life hot and healthy!

HIV transmission

Sex happens in different contexts. We might be going all the way with our first partner, or with someone we just met online. To make things less complicated in bed, it helps to remember how HIV is transmitted.

HIV transmission happens during many kinds of sex. Certain kinds of sex are riskier than others. Anal sex is the riskiest kind of sex for HIV transmission. Vaginal, or frontal sex for some trans guys, also poses a risk for HIV transmission.

How does HIV get passed from one person to another?

Only five body fluids can contain enough HIV to infect someone: blood, semen (cum and pre-cum), rectal fluid (ass juice), vaginal or frontal fluids, and breast/chest milk. Saliva and tears do not contain enough HIV to infect someone.

HIV can only get passed on to someone when one of these fluids containing HIV gets into the bloodstream of another person. This can happen through the opening of the penis or foreskin or the wet linings inside the body, such as the vagina, front hole or anus.

HIV cannot pass through healthy, unbroken skin. But keep in mind that cuts or scrapes can be tiny and hard to detect.

The two main ways HIV can get passed between us and others are:

- Through unprotected sex (vaginal, frontal or anal sex without a condom);
- By sharing needles or other equipment to inject drugs, hormones or steroids.

HIV cannot be passed by hand jobs and fingering, cybersex and sexting, or making out.



What to do if we think our HIV-negative partner has been exposed to HIV

PEP (Post-Exposure Prophylaxis)

PEP is a way for a person who may have recently been exposed to HIV to prevent HIV infection. It involves taking anti-HIV medications right after a potential exposure to HIV. Anyone in this situation should consult a healthcare provider as soon as possible and within 72 hours of exposure. Often this means an emergency hospital visit.

The sooner our partner starts PEP, the more likely PEP will be able to prevent HIV transmission. PEP is highly effective, but it's not for everyone. PEP has to be taken for 30 days and may cause uncomfortable side effects. Note: PEP is not available at all hospital emergency rooms, and unfortunately the cost (about \$800 to \$1,000 for the month) of the medication is not covered by all provincial or private health plans.

PrEP (Pre-Exposure Prophylaxis)

PrEP involves an HIV-negative person taking anti-HIV meds on an ongoing basis to prevent HIV infection. For many reasons, some serodiscordant couples (where one person is HIV-positive and the other is not) might not use a condom every time they have vaginal, frontal or anal sex. For these couples, PrEP helps reduce the chances of HIV transmission during sex. If you think that PrEP might be a good option for you and your partner, you should talk to your healthcare provider.

While the meds used in PrEP are approved in Canada for treatment of people living with HIV, at the time of this writing, they are not approved for use by HIV-negative people and it might be hard to find a healthcare provider willing to prescribe them. PrEP can cost between \$800 and \$1,000 a month and may not be covered by provincial or private insurance. You might think about getting the meds from another source, but know that you might not get the right ones or they might be knockoffs that are ineffective or contaminated.

Sexually transmitted infections (STIs)

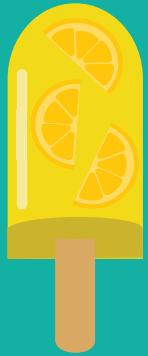
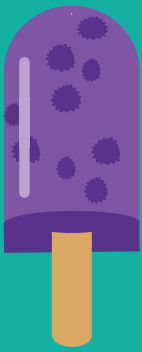
Like HIV, other STIs - including chlamydia, gonorrhea and syphilis - can be passed from person to person through vaginal, frontal or anal sex. Some STIs can be easily passed on during oral sex.

If we do get an STI (which happens to a lot of people), most of the time it's not a big deal. STIs are easily treated. When living with HIV, staying on top of our sexual health, protecting our bits and knowing about STIs can be important because:

- People can have STIs without having any symptoms.
- It can be easier for us to get other STIs and be sicker if we do. Not fun.
- If we are not using barriers like condoms or dental dams, it's easier for HIV to be passed to our sexual partners if we have an STI, because our viral load (a measure of the amount of HIV in our blood) might be increased. For example, a rectal STI can increase the amount of virus in our rectal fluid, even if the viral load in the blood is undetectable. This can increase the risk of HIV passing to others through anal sex.
- If we're not using barriers to cover our bits and our HIV-negative partner has an STI, our partner might be more likely to get HIV because the immune system is weakened by fighting the STI. Some STIs cause sores or openings in the skin that can be a route for HIV to get into the body more easily.

Using protection such as condoms, gloves and dental dams decreases the chances of getting or passing an STI.





Hepatitis C (Hep C)

Hep C is a virus that is passed by blood-to-blood contact and can be passed when you share substance-use equipment, when you have rough, unprotected sex, or when you share other things that could have blood on them like toothbrushes, razors and tattooing and piercing equipment.

“The good news is that unlike HIV, treatments for hep C can clear (cure) the virus.”

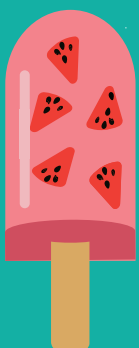
If you think you’re at risk for hep C, you may want to consider asking your healthcare provider to test you because hep C and HIV can be tricky to deal with at the same time.

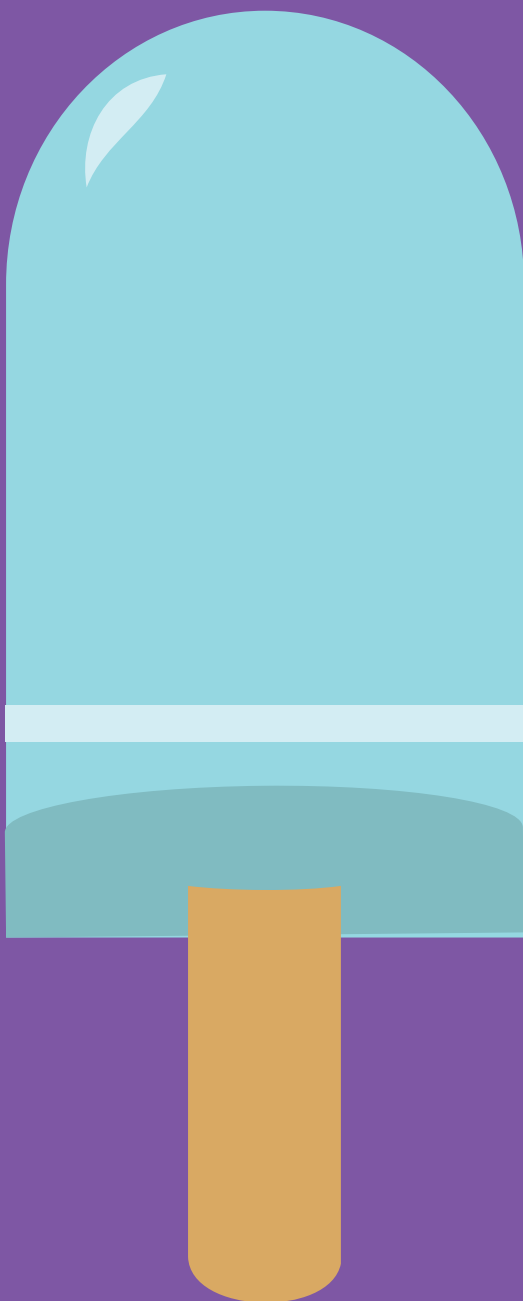
Getting tested

When we're living with HIV and sexually active, getting tested for STIs regularly (once a year or more frequently if we think we're at risk) is a great way to detect STIs early and get them treated. Between regular checkups, we should get tested immediately for STIs if we have symptoms or think we've been exposed. It's important to be in charge of our own sexual health regardless of what our partners tell us. It's also a good idea to encourage our sexual partners to get their regular checkups too.

“Testing is a good idea for everyone!”

It's our right to receive respectful and supportive healthcare, and our healthcare provider should provide testing to us when we ask for it. Sadly, this isn't always the case. If your healthcare provider is judgmental, asks too many questions, or will not provide you the tests you want, it may be time to find a healthcare provider who is more supportive. Get recommendations from people you trust. You can also check out the resource section of this booklet for agencies that can help connect you to testing.





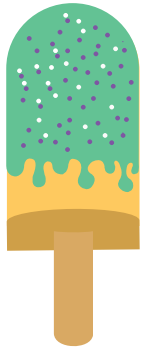
“My boyfriend talks dirty to me about how he is going to do me without a condom, just before we have sex. He tells me he is going to cum inside me, and I find it really hot. The whole time he is putting on a thin rubber and lubing his penis. Talking about it is hot, but we still need to protect each other.”

Keepin’ it safe and coverin’ your bits

Sometimes focusing on using protection can be a turnoff, so it’s a good idea to incorporate barriers into foreplay. Make it fun by thinking about having sex with your partner and how hot they are as you slip the barrier into place.

Condoms

Condoms are an effective way to prevent HIV. They come with the added bonus of preventing STIs and pregnancy. All that safety in one little piece of latex! If you and your partner have decided to use condoms and are struggling, don't give up! It can be hard to have protected sex all the time, so remember, having protected sex as often as possible is better than not at all!



Some people don't like to use condoms. They may use different strategies instead, like monogamy or sero-sorting (see below). Those kinds of decisions should be made with full knowledge of the risks involved and responsibility for those risks.

**“Having protected sex
as often as possible is
better than not at all!”**

If you are using safer sex materials like condoms, lubes, gloves and dental dams (more on these coming up), keep them close for those hot and heavy moments. If they are accessible, we're more likely to use them, especially if we have sex under the influence of drugs or alcohol.

Condoms

- The more we use condoms for sex, the more comfortable we will be using them. Everyone can practice putting them on their hands or on a sex toy. People with penises should practice using a condom while jerking off so that they can get comfortable being turned on while wearing one.

- Find a condom that's comfortable for you. Explore. This can be fun. Try different brands and types. Condoms come in different sizes, colours, flavours, thicknesses, shapes, sensitivities and materials. Find yours! You might even decide to use different kinds during the same encounter or different kinds with different partners.
- Some people have allergies to latex. Most manufacturers offer polyethylene or nitrile brands that are latex-free. Polyethylene and nitrile condoms have other benefits too. They are stronger and some people like the feel better. Polyethylene and nitrile condoms also make better covers for sex toys because the material is less likely to tear. Unlike latex condoms, which shouldn't be used with oil-based lubes (slide down to the lube section below for more info), polyethylene and nitrile condoms can also be used with all lube types, including oil-based lubes.
- Sometimes, the condom breaks or we switch partners during sex. In these instances, always make sure to use a new condom before getting back at it.

Insertive condoms

- Insertive condoms are condoms that can be put in the vagina, front hole or anus rather than on the penis. They can be inserted up to eight hours before sex.
- For many people, it feels odd the first time they use one. Practice inserting it and leaving it in long enough to get more comfortable. The material softens in about 15 minutes from the warmth of the body.
- Insertive condoms are also made of polyethylene or nitrile and have the same properties as polyethylene or nitrile penetrative condoms, although they are even stronger because the material is thicker.

Dental dams

Dental dams are squares of latex or other materials that can be used as barriers to cover your bits when performing oral sex. Dams can be made by cutting the head off a condom and slicing it along its length to make a barrier or by cutting medical gloves open.



Some people use non-microwaveable plastic wrap because it's cheaper, but it hasn't been proven scientifically to act as a barrier against STIs. Whatever barriers we use, we should make sure we know which side is ours and which is our partner's and keep using it that way.



Lube

Lube it up! Using lots of lube makes sex more enjoyable for everyone.

- Put a drop of lube inside the condom or on the head of the penis before putting on the condom. Not too much though, we don't want that condom to slip off!
- If you are doing it for a long time, pull out to have a look. Friction can wear down the condom and lube can dry, increasing the risk the condom will break. Don't be afraid to use or ask your partner to use more lube, whether you're giving or receiving!
- Friction can also cause tiny surface abrasions that can damage the inside (mucosal) linings during sex enough so they become places where STIs can be transmitted. Lube reduces friction.

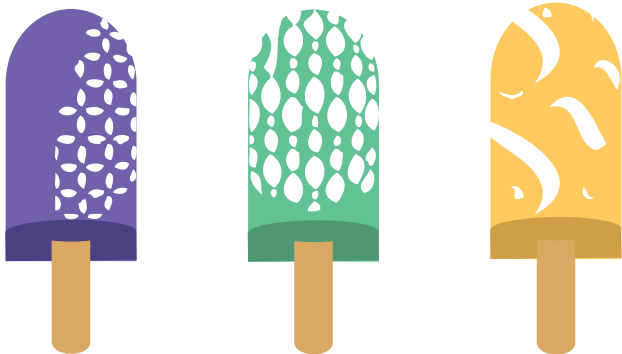
- There are more types of lube on the market than ever before. Water-based lube can dry up fast. Silicone-based lube is more expensive, but you'll need less and it doesn't dry up as fast. Try a bunch and see what you and your partners like.
- Make sure to use water-based and silicone-based lubes for latex condoms. Oil-based lubes can cause latex condoms to break.
- Be careful not to use silicone lube with silicone sex toys. It can dissolve the surface of the toy and make it sticky and hard to clean.

Sex toys

Sex toys can be a lot of fun. They are a great way to expand our pleasure solo or together with a partner. There are some things we need to consider when using them, though:

- Sex toys can get bodily fluids on them, which can carry viruses or bacteria. Hep C, in particular, is difficult to kill.
- If you are sharing sex toys with your partners, it's a good idea to clean them with soap and water and use them with condoms. You should do this every time a new person uses a toy or every time you switch from vaginal, frontal or anal sex to another kind of sex.

There is more variety available than ever before so try to do your research online and visit sex shops where you feel you can trust the service staff to answer your questions.



Oral sex

When a person living with HIV goes down on or gives head to their partners, the risk that HIV will pass to their partners is small. Oral sex is a much lower risk than vaginal, frontal or anal sex for passing HIV.

Oral sex is not all risk-free, though, because other STIs, like herpes, gonorrhea and syphilis can still be passed when we're going down on someone else.

If your HIV-negative partner goes down on you with cuts or sores in or around their mouth, or with bleeding gums, it increases their HIV risk. Waiting 30 minutes after brushing or flossing teeth before having sex can reduce risk because there can be bleeding from gums that you might not notice. Cuts, sores or abrasions in the mouth need longer to heal.

If you want someone to put their mouth on your bits:

- Be careful about deep throating. The back of the throat is more vulnerable to surface abrasion, especially if your penis has body jewellery in it.
- Cumming in your partner's mouth can slightly increase the chances that HIV gets passed on. To reduce the risk, pull out before cumming.
- The rougher your partners are when they lick your vagina or front hole, the greater the risk for HIV to be transmitted through tiny abrasions in your partner's mouth, especially if you have body jewellery or genital piercings.
- There is greater risk of HIV transmission when one person is on their period because of the increased presence of blood.



Other prevention strategies if condoms aren't right for us

Condoms are the best way to avoid HIV transmission to others, or reinfection with a different strain of HIV. People who decide to have condomless sex should consider these risk-reduction strategies:

- **Less risky forms of sex:** Anal sex has the highest risk of HIV transmission. We're not exactly sure what the risk is with frontal sex because no one has done the research, but it's probably similar to vaginal sex. It may actually be more risky than vaginal sex if you have recently had surgery and it hasn't fully healed yet. Oral sex is the least risky. And of course sex that doesn't involve penetration is safe, too. Let your imagination run wild!
- **Undetectable viral load:** Viral load is a measure of how much virus is in our blood. Keeping our viral load undetectable, or really low, is an important way to stay healthy. Taking our anti-HIV meds as prescribed, getting regular viral load blood tests, and getting our regular STI checkups help to make sure that our viral load is as low as possible. As an added bonus, an undetectable viral load appears to reduce HIV transmission during sex.
- **Sero-sorting:** Sero-sorting is having sex with someone with the same HIV status as ours. Some of us decide that we don't want to worry about transmitting HIV to a negative partner, so we choose to only have sex with other people living with HIV. Some of us decide to only have sex with other people living with HIV who have undetectable viral loads. If we decide to sero-sort, it's always a good idea to ask our partner's status to be sure. Two things to think about: sero-sorting doesn't reduce the risk of passing other STIs, and although it doesn't happen often, it's possible for people living with HIV to pass their strain of HIV to their partners.

- **Strategic positioning:** This strategy usually applies to guys who have sex with guys with a penis, or trans dudes who have had bottom surgery. Strategic positioning means assuming the insertive or receptive position for anal sex based on our or our partner's HIV status. We are less likely to pass HIV to an HIV-negative partner if we take the receptive role (bottom or passive) during anal sex.
- **Mix and match:** We might choose to use some of these strategies with one person and other strategies with other people. We might use different ones at different times. We might even combine more than one to reduce the risk of transmission. We should get as much information as we can about these strategies so that we can make an informed and responsible choice each time we have sex.



Staying hot, wet and hard!

Some meds and recreational drugs (including alcohol) can affect our sex drive (libido) and our ability to stay in the mood (staying wet or hard). Don't be shy about talking to your healthcare provider about the potential sexual side effects of your meds. Lots of people are dealing with this!

Tips for getting and staying in the mood:

- Watch porn together, if you're both into that.
- Give each other massages. You never know where it might lead!
- Prolong foreplay or use oral sex to arouse yourself and your partner before doing it.
- Be as relaxed and stress-free as possible.
- Use lots of lube.
- A cock ring or cock sling can help you keep your hard-on. Ask at your local sex shop. They come in a variety of styles and materials.

Having trouble using condoms and you've tried our tips above? Before giving up on condoms, you might want to talk to your healthcare provider about erection enhancers.

Tip!

Best to get a prescription for the real thing. Drugs sold on the street or over the internet may be ineffective, or worse contaminated.

The Big ‘D’... Disclosure

“Telling my best friend I was HIV-positive was hard, but now three years later, it’s easier to disclose.”

Telling people we care about that we are HIV-positive can be overwhelming and scary. HIV carries a lot of stigma, and telling someone may not always be right for us. It may not even be safe. Other times, telling someone can make things easier. We have to figure out when the right time is for us and who we want to tell.

“Thinking about telling people I’m HIV-positive was stressing me out big time. My support group, PYO, helped me because I could talk it out with others in the same situation.”

Some of us take the first step and disclose to a close friend who will be supportive. Others get connected with local or regional AIDS service organizations, or other agencies that serve young people. Some of us join peer support groups for youth living with HIV that make us feel less alone and where we can learn from the experience of others. It’ll be different for different people, so make the choice that’s right for you.

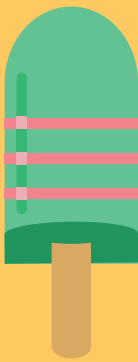


Disclosure and sex

Disclosing our status and having hot sex builds confidence and self-esteem. Being stressed about possibly infecting someone with HIV during sex can be a total turnoff. Worrying about giving HIV to our partners can impact our sexual pleasure, whether our partners know our HIV status or not. A way around that can be telling our partner we're living with HIV, so that we aren't worried about this stuff so much.

When we disclose, even if we feel better for having been upfront and responsible, we might get rejected. It's hard to have someone tell us that they don't want to be with us because of our HIV status, or to feel that's why, even if they don't say it directly. Having HIV may make us feel unsexy or unwanted by others. Don't be discouraged. It's not okay for anyone to make us feel down about ourselves for having HIV.

Sex should be a source of fun, pleasure and connection in whatever flavour we choose to express it. There are many people out there who are comfortable with HIV. There are also other people living with HIV who are looking to chat, meet, go on a date, or have hot sex!






HIV and the law


We couldn't write about disclosure without talking about the potential for criminal prosecution of HIV non-disclosure. This means that we can be criminally charged with HIV non-disclosure if we don't disclose our HIV status to our sex partners before sex.

The lowdown is this: In Canada, if we have HIV, we have a legal duty to tell our sex partner before having any kind of sex that poses a “realistic possibility” of transmitting HIV.

What does this mean?

Based on the law at this writing, we **do** have a legal duty to disclose our HIV status:

- Before having vaginal, frontal or anal sex without a condom, regardless of our viral load; or
 - Before having vaginal, frontal or anal sex when our viral load is not low, even if we use a condom.
-
- We **do not** have to disclose before having vaginal or frontal sex if our viral load is low or undetectable and we use a condom. It is not clear whether this also applies to anal sex.
 - It is also not clear how the law applies to oral sex (with or without a condom).
- 




You may not like what the law says and you may not agree with it. But it's still the law and the consequences can be severe. People with HIV have been convicted of serious crimes for not telling their sex partners they have HIV.

We hope the law evolves in a direction that is less stigmatizing for people living with HIV. We want to be able to protect ourselves and still have hot consensual sex.

The best advice we can give is this: know your rights and responsibilities so that you can make more informed decisions about your life and your sex life.

For current or complete information on HIV and the law, please contact:

Canadian HIV/AIDS Legal Network
416.595.1666
www.aidslaw.ca



Resources

This section is set up to get you started. While addresses change, most organizations try to keep the same phone number and URL. If they can't help you, it's likely they can refer you to someone who can.

NATIONAL RESOURCES

CATIE

Canada's Source for HIV and Hep C Information

Toll-free: 1.800.263.1638 (CATIE accepts collect calls from Canadian prisons, 416.203.7122)

www.catie.ca

www.hepCinfo.ca

Canadian Aboriginal AIDS Network (CAAN)

National Aboriginal Youth Council

www.caan.ca/youth

Toll-free: 1.888.285.2226

Canadian HIV/AIDS Legal Network

416.595.1666

www.aidslaw.ca

REGIONAL RESOURCES

Ontario

AIDS and Sexual Health Information Line (Ontario)

Toll-free: 1.800.668.2437

HIV/AIDS Legal Clinic Ontario (HALCO)

Toll-free: 1.888.705.8889

www.halco.org

Lesbian Gay Bi Trans Youthline (Ontario)

Toll-free: 1.800.268.9688

www.youthline.ca

Quebec

AIDS Community Care Montréal

514.527.0928

www.accmontreal.org

Atlantic Region

AIDS Committee of Newfoundland and Labrador

709.579.8656

www.acnl.net

AIDS Coalition of Nova Scotia

902.425.4882

www.acns.ns.ca

AIDS Moncton

506.859.9616

www.sida-aidsmoncton.com

AIDS New Brunswick

Toll-free: 1.800.561.4009

www.aidsnb.com

AIDS PEI Community Support Group Inc.

902.566.2437

www.aidspei.com

The Prairies

AIDS Calgary Awareness Association

403.508.2500

www.aidscalgary.org

AIDS Saskatoon

306.242.5005

www.aidssaskatoon.ca

HIV Edmonton

Toll-free: 1.877.388.5742

www.hivedmonton.com

Nine Circles Community Health Centre (Manitoba)

Toll-free: 1.888.305.8647

www.ninecircles.ca

Rainbow Resource Centre (Manitoba)

204.474.0212

www.rainbowresourcecentre.org

British Columbia

YouthCO (British Columbia)

Toll-free in Canada: 1.855.968.8426

www.youthco.org

Organizations and Services in Toronto

ACT (AIDS Committee of Toronto)

PYO (Positive Youth Outreach)

416.340.8484 ext. 265

www.positiveyouth.com

www.actoronto.org

Asian Community AIDS Services (ACAS)

Youth Education and Outreach Program

416.963.4300 ext. 229

www.acas.org

Black Coalition for AIDS Prevention (Black CAP)

Peer Youth Program

416.977.9955

www.black-cap.com

Hassle Free Clinic

416.922.0603 Men's/Trans

416.922.0566 Women's/Trans

www.hasslefreeclinic.org

Loft Community Services

Transitional Youth Program

416.979.1994

www.loftcs.org

Planned Parenthood Toronto

Youth HIV/AIDS Project

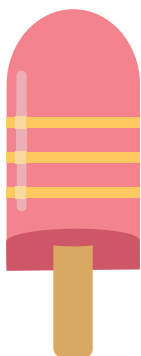
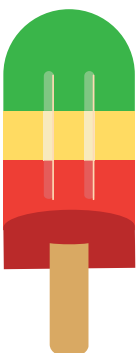
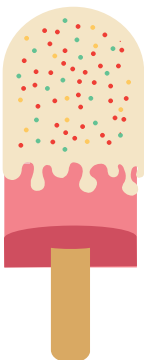
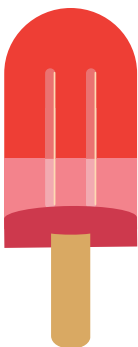
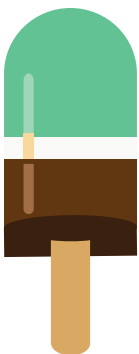
416.961.0113 ext. 162

www.ppt.on.ca/communityprogram.asp

Supporting Our Youth (SOY)

416.324.5077

www.soytoronto.org





For more information and resources on HIV or Hepatitis C please contact:

PYO

ACT (AIDS Committee of Toronto)
399 Church Street, 4th Floor
Toronto, Ont. M5B 2J6
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Email: pyo@actoronto.org

CATIE, Canada's Source for HIV and Hepatitis C Information

www.catie.ca
www.hepCinfo.ca
Tel: 1.800.263.1638

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