

El Camino

Safer Sex for LGBTQ+ Young People

It's important to make sure that LGBTQ+ young people are included in conversations about safer sex. This means talking about all kinds of sex—not just penile-vaginal sex and ways young people can protect themselves from STIs and prevent pregnancy.

STI prevention

There can be a lot of misinformation about STI risk among LGBTQ+ people, for example, "lesbians can't get STIs" or "only gay men get HIV." It's important to emphasize that anyone having sex can get an STI, and different kinds of sex come with different STI risks that vary based on whether or not a barrier method, such as condoms or dental dams, is used. This information can help young people make informed decisions about the kinds of sex they want to have and how to protect themselves from STIs.

Barriers are a great way to prevent STIs and can be used for all kinds of sex, not just penile-vaginal sex. Condoms can be used during penile-vaginal sex, penile-anal sex, and oral sex with a penis. Dental dams can be used during oral sex with a vagina or anus or during vulva-to-vulva contact. Lubricant makes barriers more effective by preventing them from tearing.

- <u>Safer Sex</u>: information on STI risk for different kinds of sex and strategies for safer sex, including barrier methods, lubricant, and medication
- **Dental Dam Use**: instructions on how to use a dental dam for oral sex and how to make a dental dam from a condom

HIV prevention

PrEP (Pre-Exposure Prophylaxis) is a medication that protects people if they come into contact with HIV. It can be taken daily as a pill or every two months as a shot. PrEP is mostly talked about in the context of queer men, but anyone who is concerned about contracting HIV can take it. PrEP is safe to take for people on hormones.¹

• <u>Pre-Exposure Prophylaxis (PrEP)</u>: collection of resources about what PrEP is, how to determine if it is right for someone, and how to obtain and pay for it

If someone who isn't on PrEP has unprotected sex and is concerned about getting HIV, they can take **PEP** (post-exposure prophylaxis). It is available at the emergency room or sexual health clinics.² PEP should be taken within 72 hours of potential exposure to HIV and is taken daily for 28 days.

• <u>Post-Exposure Prophylaxis (PEP)</u>: collection of resource about what PEP is, how to determine if it is right for someone, and how to obtain and pay for it

Safer sex during transition

Geder-affirming hormone therapy can affect someone's ability to get pregnant or get someone else pregnant, but it is not an effective contraceptive option. When talking with young people, emphasize the importance of contraception for anyone who is having penile-vaginal sex with someone who can get pregnant or get them pregnant, even if they're on hormones. There are no evidence-based guidelines on choosing contraception for people on testosterone, and all methods are currently assumed to be safe.³

- <u>Birth Control across the Gender Spectrum</u>: guidance on choosing a contraceptive for trans people
- <u>Safer Sex for Trans Bodies</u>: guide to safer sex practices for trans and gender nonconforming people

¹Cairns, G. (2022, September 12). *Interactions between PrEP and gender-affirming hormone therapy*. NAM Publications. <u>https://www.aidsmap.com/about-hiv/interactions-between-prep-and-gender-affirming-hormone-therapy</u>

² Centers for Disease Control and Prevention. (2021, May 25). PEP (*post-exposure prohylaxis*). U.S. Department of Health and Human Services. <u>https://www.cdc.gov/hiv/basics/pep.html</u>

³ Boudreau, D., & Mukerjee, R. (2019). Contraception care for transmasculine individuals on testosterone therapy. *Journal of Midwifery & Women's Health, 64*(4), 395-402. <u>https://doi.org/10.1111/jmwh.12962</u>