SEXUAL HEALTH:
Safer sex and our health
Finding the right words

We understand the language used in a lot of mainstream sexual health guides can make some trans folk feel uncomfortable. In this booklet we have tried to use words that are inclusive of trans people and to reflect the way we talk about our bodies and sex. We have purposefully written non-gendered descriptions of safer sex to ensure it’s inclusive and accessible to all bodies.

This guide is available in large print by calling 0345 3 30 30 30 or email info@lgbt.foundation

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If the words we have used don’t work for you, we encourage you to cross them out and replace with words that do - when it comes to describing your body, the words you want to use are the most important!

We use **front hole** and **vagina** to talk about our **innies** and strapless, penis, cock and **prosthetic** to talk about our **outies**. We’ve also anal and bum hole. We’ve use the word **genitals** as a catch-all term, and **cum** and **pre-cum** to mean fluid that comes from anyone’s genitals during sex.
Glossary

**Trangender (Trans)**
relates to a wide range of people whose gender identity differs from the gender they were assigned at birth in some way.

**Asexual (ACE)**
people generally, don’t feel sexual desire or sexual attraction. Some people also define as greysexual or demisexual, and experience sexual attraction only in some circumstances.
**Intersex**
describes a person whose biological sex is ambiguous.

**Cisgender (Cis)**
is the opposite of transgender. Someone who is not transgender and is comfortable with their birth assigned gender.

**Non-Binary (NB)**
is an umbrella category for gender outside of the man/woman gender binary. Some of us identify as non-binary, genderqueer, genderfluid and agender.

**Gender Dysphoria**
refers to distress caused by a person’s birth assigned gender when it is not in alignment with the gender the person feels themselves to be. We may feel particularly dysphoric about their physicality, as it does not reflect that which society expects for someone of their gender, or they may feel dysphoric in certain social situations or hearing certain gendered words.
Safer sex

Having safer sex helps to keep our partner/s and ourselves healthy and happy, both inside and outside the bedroom. Having safer sex reduces the risk of getting a sexually transmitted infection and unwanted pregnancy.
In this section we discuss different ways to practice safer sex - so that you can be informed and get the most of out getting busy.

**Barrier methods**

**Condoms** are a barrier method that can be used for most kinds of penetrative sex to prevent STIs and pregnancy. They can be used on prosthetics, cocks, strapless and sex toys, as well as over fingers and hands. Part of the joy of condoms is how versatile they are - you’d be surprised how many different types of body parts, prosthetics, and sex toys they will effectively cover! It’s a great idea to get into the habit of always putting condoms over sex toys especially if you’re using them with different partners. Make sure you use a new condom each time you use your prosthetic, penis, sex toy, hands with a different partner and when switching body holes!
You can get condoms for free from sexual health (GUM) clinics and can buy them from most pharmacies, supermarkets and petrol stations.

**Internal condoms** are a contraceptive barrier method that can be used for penetrative sex to prevent STIs and pregnancy. They look like a pouch made from loose-fitting polyurethane with a soft ring at each end and are inserted internally before penetration. They can be used for frontal, vaginal or anal penetration. Internal condoms can be a good choice for people who have latex allergies as they’re always latex-free. They also allow the person who is being penetrated to be in charge of their own condom use. Some people say they make a ‘rustling’ noise, if you find this happens try adding a couple of drops of lube inside the condom, which can make the experience more pleasurable. Recently internal condoms have been made from a softer, more malleable material,
which means they’re more comfortable. Remember that sex often makes noises and that’s okay!

You can buy internal condoms online and from most pharmacies and supermarkets. Some sexual health clinics also provide free internal condoms.
Other safer sex tools

Lube can improve sex no matter what kind you’re having. Using your spit can be sexy but often it’s not enough. Luckily there are lots of lube options out there!

There are water based lubes, silicon based and water-silicon hybrids - explore them all and see which works for you! With latex condoms don’t use oil based lubes like Vaseline as these cause latex to dissolve. If you have a silicon-based prosthesis or silicon toys, you probably want to stick to water based as both silicon and oil lubes can damage silicon.

You can buy lube from most pharmacies and supermarkets. An exciting world of
lube exists online - you can also order testers to try before you buy!

**Gloves** are great if you do lots with your hands. They are best used with lube. You can get gloves made of latex or nitrile and they come in lots of different colours! If you’re a fan of fisting, gloves and lube should be permanent residents of your bedside cabinet. Just remember not to share them, to change your gloves when going between frontal and anal, and dispose of the gloves between partners.

You can buy latex and nitrile gloves from some pharmacies and suppliers online.

**Dental dams** are latex squares that can be placed over your or your partners’ genitals for oral sex, or over your or your partners bum hole for rimming. Dental dams can be expensive to buy, but you can make your own dental dam from a latex or latex-free condom. Dental dams can be purchased online or make them yourself with a condom!
Finger cots are like part of a glove, designed to cover only one finger. If you or your partner have had metoidioplasty or have natural cock growth from taking testosterone (T) and like to use this for penetration, a finger cot functions like a smaller condom and can be trimmed to the right size. You can make your own finger cots by cutting a finger or thumb off a latex or nitrile glove. If you have sensation in your cock, you can use a cock ring to help keep this in place but only if you can tell whether or not you’re cutting off circulation.

Finger cots can be purchased online, or make them yourself with a glove.

Keeping clean
Whatever kinds of sex you’re having, it’s important body parts, prosthetics, and sex toys are kept clean. It’s good to wash your hands and trim your nails before touching your or your partners’ genitals. People who have front holes and vaginas should wash
their genitals with water or emollient to avoid irritation. Don’t use shower gels as they can affect the natural PH of your genitals. Prosthetics and sex toys should be washed regularly with mild soap and water. Some sex toys can be put in the dishwasher but we recommend checking this with your housemates first!
Surgeries can change the relationship we have to our bodies and change the way we have sex.

If you’ve had an **orchidectomy** (surgical removal of testicles), you might find that you still pre-cum but don’t cum anymore, although you’ll still be able to orgasm. Some of us find we have more difficulty keeping it up after an orchi.

If you’ve had a **vaginoplasty** (surgical creation of a vagina), your vagina won’t self-lubricate so make sure you have plenty of lube on hand. Vaginal fisting will almost certainly be out of the question because it could cause prolapse. Check with your surgeon about anal sex and anal fisting post-op, as you may need to take a break for a few months or years. Many of the issues experienced by trans folks who’ve had vaginoplasties are due to not dilating regularly enough,
and most complications after surgery can be fixed by continuing to dilate. So keep dilating! Dilating before sex can make it easier and more enjoyable.

If you’ve had **phalloplasty** (surgical construction of a penis) or **metoidioplasty** (surgical repositioning of the genitals after natural growth from hormone replacement therapy, known as HRT) and are the insertive partner during sex, use a condom, finger cot, or the finger or thumb of a latex or nitrile glove.

Some of us find that if we’ve had a **urethral lengthening** (to pee from our cock), we pee a tiny bit during sex (which can be really hot!). If this happens to you and you’re planning to penetrate someone, pinch the tip of your condom, cot or barrier to leave room for the wee.

Enjoy your body and, if you’re comfortable with it, let your partner/s enjoy it too.
If you are not trying to conceive, it is important to take birth control measures if there is a possibility that you or your partner/s can get pregnant. Remember if you (or your partners) are undergoing hormone replacement therapy (HRT) pregnancy is still a possibility.

For some trans folk, hormonal birth control is out of the question because it can reduce the effects of HRT, and it also cause changes in your body, which might be upsetting if you experience dysphoria. However, some hormonal birth control can be used to stop periods.

A non-hormonal method of birth control that works well for a lot of trans people is the non-hormonal IUD, known also as a coil. This works by releasing copper, which prevents sperm from surviving inside your or your partners’ body.

A non-hormonal coil can be fitted at your GP Practice. Make sure you specify you want
a non-hormonal coil, as you can also get hormonal coils. Some people find having the coil fitted uncomfortable or painful but many people who use one end up really happy with their coil.

If you’re taking testosterone blockers, you can still get people pregnant so it’s important to use contraception if there’s a chance partner/s could get pregnant.
If you think you have had unprotected sex, or if a condom has broken and you think you could be pregnant, you can get **emergency contraception**.

Even if you are taking T and have been for a while, you can still get pregnant. There are two methods of emergency contraception - a pill and a coil.

Anyone can get emergency contraception **free** from sexual health clinics, contraception clinics, and GP Practices.
Pregnancy and abortion

If you do become pregnant, there are a number of decisions you can make. You may decide to end the pregnancy and have an abortion, or to continue with the pregnancy and have the baby adopted, or to continue with the pregnancy and keep the baby.

Whatever choice you make, it is important that it is your decision.

You can have an abortion up to week 24 of pregnancy so you have some time to decide if this is right for you. Abortions are very safe and common procedures.

Whatever you choose, you have the right to have your gender, your name, and your pronouns respected throughout the process.
Sex, drugs and alcohol

Any drug, including alcohol, can have an effect on your desire to have sex and your inhibitions. Some people never want to have sex whilst drunk or high because they feel like they cannot consent, while others enjoy it.

If you are having sex drunk or high, communicate with your partner/s about your boundaries while you’re sober rather than after drinking or taking drugs. If you are taking drugs be aware of the law and the consequences that can result from breaking the law.

Sometimes people refer to taking drugs to enhance or facilitate sex as chemsex. Chemsex often involves taking meth (methamphetamine/crystal meth/Tina), mephedrone (meow meow, m-cat) and GHB or GBL (G/Gina). Sometimes these are taken alongside other drugs.

Meth, GHB and GBL can make you feel horny and reduce your inhibitions, and
mephedrone can make you feel awake and connected to people. People have chemsex often find it makes them feel more sexually free and can make sex last much longer. However using drugs during sex can mean we’re less likely to have safer sex and more likely to do things we might feel shame about when we come down. If you are taking drugs make sure you research the effects, responses and risks associated with them before you take them. Also be aware of how drugs may interact with any medication you are currently taking, as some interactions can be very dangerous.
Tips for staying safe when drunk or high

- Take safer sex packs, including gloves and lube
- Make sure you have plenty of needles so you don’t need to share if you’re injecting
- Stay in control of your own dosage
- Tell a trusted friend where you’re going, when you expect to be back and what they should do if they haven’t heard from you
- If someone gets ill or reacts unexpectedly call an ambulance straight away

If you are struggling to have sex without drugs or alcohol, or want to change your behaviour around sex and drug use, there is support out there, including LGBT Foundation’s drug and alcohol service: lgbt.foundation/drugsandalcohol
Sexually Transmitted Infections

Talking about STIs can feel daunting but it’s important to be open with our partners about what’s going on with our bodies and how this may affect them. Most partners are supportive when we tell them about an STI. Many people will experience at least one STI in their lifetime, and plenty of people living with long term infections such as herpes and HIV have fabulous and fulfilling sex lives.

If you have an STI and feel too scared to talk to partners or former partners about it, you can give their details to a sexual health clinic that will pass the information on anonymously for you.
Getting tested

Visiting a sexual health clinic can be nerve wracking because of the worry that they will misgender us and not know how to talk to us about our bodies and the sex we are having.

Some people prefer using trans or LGBT specific sexual health services if they are available. Wherever you go to get tested, you deserve to be treated with dignity and to have your identity respected.

Before you get tested think about the words you want used about your body and sex. Practice phrases like ‘I use frontal to refer to that part of my body so let’s use that for the rest of this appointment’ so you feel prepared to say them on the day. If you feel very nervous, bring along a supportive (and preferably mouthy!) friend to lead by example.

It’s recommended to have a full sexual health screening every 12 months if you’re sexually active, and more if you’re having sex with multiple partners. It’s a
good idea to get tested regularly, even if we don’t have any symptoms.

When you go for a test, you’ll be greeted at reception where you may be asked to fill in a form with your details. Some clinics let you choose the gender of the clinician you see.

You’ll be taken into a clinical room and asked some questions about your sexual activity; including things like the type of sex you have (anal, frontal, vaginal, oral, fisting, using toys etc.), whether you use condoms, if you do sex work and the gender of your partners.
The tests you take will depend on how you have answered these questions. These tests may be:

- A urine sample
- A blood test
- A swab (like a cotton bud swiped over your genitals, bum, throat or other area you use for sex)
- An examination of your genitals

Sometimes you can do your own swabs, let the clinician know if you’d prefer this. They won’t usually need to do an
examination unless you have symptoms of an STI. After the tests, you’ll wait a few days or weeks for the results. You may be told by phone or by text, or might be asked to come back in person.

A rapid HIV test is a test for HIV where you get the results there and then, rather than having to wait for samples to be sent away to a lab. If you go for a rapid test for HIV, someone will talk to you about exposure and risk. To test you for HIV they will make a small prick on your fingertip and get a blood sample. The blood sample will be put on a testing strip and you’ll find out your results during the appointment.

Sometimes we can even home test for STIs from the comfort of our own bathrooms, if you’re not feeling up to visiting a GUM clinic.

For details of where to go for a full sexual health screening, a rapid HIV test or home testing kits go visit our website: lgbt.foundation/testing