Trans Women’s Safer Sex Guide
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+inspired us: Thanks!

+contents

describe me: Words, Body Parts, and Identities ................................................................. 4
talk to me: Disclosure and Negotiation ............................................................................. 7
  + T is for Talk: When should I disclose my trans status?
    What about my STI status? ...................................................................................... 8
  + Wrap it Up: Negotiating condoms and dams
    with sex partners ............................................................................................... 8
fuck me: Tips for Safer Sex ............................................................................................... 11
  + Fucking ass and vag ............................................................................................... 11
  + Sucking and licking ............................................................................................... 13
  + Rimming .................................................................................................................. 13
  + Scissoring .............................................................................................................. 13
  + Fisting ..................................................................................................................... 14
  + Fingering and hand jobs ....................................................................................... 14
  + Toys ......................................................................................................................... 15
  + Lube ........................................................................................................................ 15
doctors & me: Talkin' to your Doc ................................................................................ 17
surgeries & me: Info for trans women who have had genital surgeries......................... 18
  + What can I do? What can't I do? .......................................................................... 18
  + HIV and other STIs: risks for post-op vag .............................................................. 18
inject me: Needles, Silicone, and STIs ......................................................................... 21
pay me: Additional safety tips and tricks for trans sex workers .................................... 22
break it down: Sexually Transmitted Infections ............................................................ 24
describe me: Words, Body Parts, and Identities

Let’s face it: trans folks love words. We’re creating new words and meanings to describe our identities, our bodies and our lives all the time. And that’s awesome! But it also makes it hard to be super inclusive of everyone all the time. In writing this guide, we’re going to try to keep things simple and use the broadest language possible, but no matter what words we use, we’re going to end up leaving someone or some word out. We’re really sorry if we’ve used any language that doesn’t include you or doesn’t feel like the most comfortable for you and your body. Feel free to cross words out that you don’t like, and write in new ones!

Talking about identities! This guide is for trans women and their sex partners! When we use the term trans women in this guide, we’re talking about people who identify on some level as any of the following: woman/womyn/girl/female/feminine/femme but were assigned male at birth.

Though we’ll be focusing on trans women, this guide will also mention people who identify on some level as any of the following: man/boy/boi/male/masculine/butch/stud but were assigned female at birth. We’ll use trans guys to talk about them.

The word trans is used to include people who might also call themselves any of these very different words: transsexual/transgender/gender queer/gender fluid/bigender/queer/cross-dresser/drag queen/drag king. And it can also include some people who identify as Two-Spirit.

We’ll also be talking about people who aren’t trans – that is, people who were assigned one gender at birth and more or less still identify with that gender. We’ll use the words cisgender and cis to describe these people (ie, cis women and cis men). There are also people whose bodies don’t fit into any of these categories, or might fit into a few of them, and we’ll be using the word intersex to talk about them. When talking about people who are living with HIV, we’ll use the word poz.

Talking about body parts! Girl-dick, cock, big clit, citasaurus-rex, unicorn, boy bits, strapless, the Kraken. These are just some of the words used by trans women to talk about the genitals we were born with. For the purposes of this guide, and for clarity, we’ll be using the word strapless. When talking about the genitals of trans women who have had sexual reassignment surgery (SRS), we’ll be using the terms vag, vagina and vulva.

Trans guy’s genitals also have a lot of names: dick, cock, t-dick, manhole, cunt, pussy, front hole. For the purposes of this book, we’ll be using the words t-dick and front/frontal hole. Some trans guys have phalloplasty or metoidioplasty to create cocks.
This part’s going to talk about TALKING! The stuff that usually happens before and sometimes during sex!

**T is for TALK:** *When should I disclose my trans status?*

Figuring out when to tell a potential sex partner that you’re trans can be tough! Some trans women tell right away, while others might never tell their partners. For those of us having sex with cis men, there is often a concern about potential violence. It’s a decision we have to make for ourselves in each situation.

Trust your instincts! If you think potential partners will be cool, tell them. If you think they might be violent, put on your running shoes and book it! Here are some things to ask yourself when deciding if it’s the right time to disclose, even if you think your potential partner will be cool:

- Can you easily leave where you are?
- Are you in a place where you feel comfortable and safe, such as a public place?
- Does anyone know where you are and who you’re with?

It can be helpful to let someone you trust know that you’re planning to disclose to someone before you do, so that if anything goes wrong you’ve got someone you can turn to or who can help find you.
**What about my STI status?**

Some trans women have HIV or other STIs (sexually transmitted infections), like syphilis or herpes. So, in addition to disclosing that you’re trans, you might also have to decide when and how to disclose your STI status.

**HIV & the Law**

If you have HIV, you’ll also need to consider that not disclosing before having sex is illegal in Canada.

If you have HIV, you have a legal duty to tell your sex partner(s) before having any kind of sex that poses a “realistic possibility of transmitting HIV.” People with HIV have been convicted of serious crimes for not telling their sex partners they have HIV. Based on the law:

- **You do** have a legal duty to disclose your HIV status:
  - before having vaginal or anal sex without a condom, regardless of your viral load; or
  - before having vaginal or anal sex when your viral load is not undetectable (or not low), even if you use a condom.
- **You do not** have a duty to disclose before having vaginal sex if your viral load is low or undetectable and you use a condom. It is not clear whether this also applies to anal sex.
- It is not clear how the law applies to oral sex (with or without a condom). It is also not clear how the law will be applied to trans people.

For more information on HIV and the law, contact the Canadian HIV/AIDS Legal Network. It may be able to refer you to a lawyer but cannot provide you with legal advice.

www.aidslaw.ca  |  info@aidslaw.ca  |  416.595.1666

**WRAP IT UP: Negotiating condoms and dams with sex partners**

Negotiating safer sex is all part of making sure everyone involved is consenting. Consent is knowing everyone wants to do what they’re doing and not just because they are afraid to say no or because they are drunk or high. Check in with yourself and ask your partner. If they say no or say nothing or don’t seem into it, stop and talk about it. Sex without consent is sexual assault.

For some people, negotiating safer sex can be about more than just HIV and STI prevention. It can also be about self-esteem, personal boundaries and pleasure. Some of us might not see ourselves or our bodies as worthwhile, so using condoms might not be a priority for us. Even if you don’t value your health, remember that you’re putting all of your partners at risk, too.

It’s important to know what your limits are. For some people, having strict boundaries can help them overcome past bad experiences around sex and intimacy. If your partner insists on using condoms, gloves or dental dams for particular sex acts, make sure to respect their boundaries, just as you’d want yours to be respected.

**This resource mentions different types of protective barriers.**

**Penetrative Condoms:** Sometimes referred to as male condoms. Used on strapless for vaginal or anal sex. Can be cut to be used as dental dams.

**Insertive Condoms:** Sometimes referred to as female condoms. Can be used by women in their vaginas, trans guys in their front holes and everyone in their asses. Can be cut in half to be used as dental dams.

**Dental Dams:** Mostly used to protect both partners during oral sex.

**Latex Gloves:** Can be cut up to be used during mutual masturbation by trans guys on their t-dicks and as dental dams for people having oral sex. Some trans guys who haven’t had phalloplasty find that dental dams don’t work well after they’ve been on T for a long time (or if they have had a metoidioplasty), so one solution is to cut a glove on the thumb-side from the wrist to where the thumb starts. This can cover their t-dick, while the rest can hang down and be used as a dental dam.

**Non-microwaveable Plastic Wrap:** Non-microwaveable plastic wrap is not as effective at preventing transmission of STIs as dental dams and condoms are, so it should only be used when condoms or dams aren’t available. If you’re using non-microwaveable plastic wrap because condoms don’t stay on during sex, it probably means you’re using the wrong size condom, so try using a smaller or bigger one. Make sure to use lots of lube too. Friction can make condoms fall off during sex. If you do use plastic wrap during sex, make sure it’s non-microwaveable since the microwaveable kind is porous (has holes) and won’t be effective. Can be used during oral sex.

If you want to protect yourself and your sex partners against HIV and other STIs, you’ll both need to use condoms, dental dams and/or gloves where appropriate. But sometimes getting a partner to use them can be tricky. Our two big tips are: **BE CLEAR and BE FIRM.**

**BE CLEAR** when you explain that you want to use condoms, dental dams or gloves. It’s about your health and theirs.

**BE FIRM** about it! Stop sex if you have to. Some sex partners might try to tell you that they don’t want to use condoms, dental dams or gloves for any number of reasons, including:
“They don’t fit! It feels too tight for my size!” Condoms come in larger sizes, however regular condoms can be stretched to fit over an adult’s head, so this reason is total BS! You can also try using insertive condoms, which might feel better for you and your partner.

“I’m allergic to latex!” That’s okay because you can always use polypropylene brands (such as Skyn or Bare) or polyurethane condoms/dental dams/gloves. So make sure to have some on hand!

“I can’t feel anything when I use those!” Sometimes people don’t feel as much with latex condoms and dental dams. Polyurethane condoms and dental dams are thinner and give more sensation! Give them a try!

“But I’m clean/safe/disease-free!” Often people don’t experience symptoms of HIV and other sexually transmitted infections (STI) right away or at all. Also, many people haven’t ever been tested for HIV or other STIs. And even if they show you a transcript of their latest HIV test or STI screening, if they’ve had sex since then (or even up to three months before an HIV test), you could still be at risk! (For more information, please see break it down: Sexually Transmitted Infections, page 24.)

“But if you loved me, you wouldn’t ask me to do that!” The truth is, if someone loves you, they would want to protect your health. So, if they really love you, they will use a condom, dental dam or glove. Plus, lots of folks enjoy using barriers like condoms and dental dams, because they find it hot or they feel more relaxed because they don’t have to worry about risk, so your partner should hopefully respect that!

No matter what their reason is, your health is worth more than sex or money! If a sex partner refuses to use condoms, try suggesting a hand job instead of a blow job or anal/vaginal/frontal sex. If they still refuse, end the session, and if they are a client give them back some or all of their money, make up an excuse for leaving and get out of there!

“+fuck me: Tips for Safer Sex”

THE BASICS

Here’s what it comes down to: body fluids can transmit HIV and other STIs. This means cum/semen (including pre-cum), blood, vaginal fluids, rectal fluids (bum juice) and breast milk. People can have STIs and not know it, and pass them to others. Most STIs don’t have signs or symptoms. Getting an STI can suck, but most are treatable and some can be cured, especially if caught early on! That’s why it’s really important to see a doctor or go to a sexual health clinic if you think you may have been exposed.

FUCKING ASS and VAG

The old in-out, in-out! Getting fucked in the ass or vag with a cock, a strap-on or a toy, and fucking people in the ass or vag with your strapless, a strap-on or a toy can be powerful. Just remember that especially with cocks and strapless, this can be one of the highest risk sex acts if you’re not using a barrier like a condom! It’s pretty much high risk for HIV and every other STI. Get fucked hard and safely by following these easy tips:

• Wrap it up! Use a condom. This means on your strapless and strap-on too!

• Change condoms between holes and between partners! This helps prevent the spread of bacteria and STIs between different body parts and partners.

• Use lube! Water-based lubes are best, especially if you’re using latex condoms. This helps prevent tears in the anal and vaginal lining, and helps keep the condom from breaking, which will help prevent you and your partner from getting HIV or other STIs.

• Barebacking (not using condoms) is popular in porn, but beware! This is a high risk way to have sex. Respect your body and your partner’s body by using condoms and lube.

• Use condoms when you’re fucking a cis woman or a trans man with your strapless if you don’t want to get them pregnant and they aren’t using birth control. Dipping, or fucking for a while before putting on a condom, is just as high risk! Nobody has to cum for HIV and other STIs to be transmitted, because precum and vaginal fluids can pass STIs too.

“They don’t fit! It feels too tight for my size!” Condoms come in larger sizes, however regular condoms can be stretched to fit over an adult’s head, so this reason is total BS! You can also try using insertive condoms, which might feel better for you and your partner.

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SUCKING and LICKING

Wet, wet, wet! Sucking, licking, eating out – it’s all the same thing. Oral sex (using your mouth and tongue on someone’s crotch) is really hot! Oral sex is low risk for HIV transmission, but you could still be at risk for other STIs including: herpes, gonorrhea, and syphilis. Don’t worry, though, you can suck and lick safely to your heart’s delight with these simple tips:

• Use a condom for t-dicks and strapless. Put some lube on the inside of the condom for extra sensation! Trans men who have had phalloplasty should also use condoms.
• Use a dental dam or gloves for vag and t-dicks.
• If you’re not using a condom:
  o If you have a sore throat or any cuts or sores in your mouth, you may be more likely to get an STI by giving oral sex.
  o Don’t floss or brush your teeth or rinse with mouthwash for at least 30 minutes before sucking or licking. Oral care can cause tiny cuts inside your mouth which increase your risk of spreading STIs.
  o Make sure to try to avoid swallowing cum and precum, if you decide to go without a condom.

RIMMING

Eating ass can be super-hot. And while it’s a low risk for spreading HIV, rimming is high risk for transmitting parasites (worms) or some STIs such as chlamydia, gonorrhea, syphilis, HPV and hepatitis (A and B). Using a dental dam, non-microwaveable plastic wrap or a condom cut up the middle can really help reduce risks!

SCISSORING

When two people with vulvas rub their genitals together, we usually call this scissoring or tribbing. Trans women who are partnered with cis women and trans men who have not had phalloplasty often enjoy this, especially if the trans woman has had sexual reassignment surgery. This is low risk for spreading HIV, but can be a risk for spreading syphilis, gonorrhea, HPV and herpes! There are a couple of different ways to reduce your risk, though:

• Try wearing underwear and/or pants while tribbing to reduce contact with fluids.
• Using non-microwaveable plastic wrap with lube is probably the safest way to trib!
FISTING

Now you see it, now you don’t! Fisting is like a magic trick. This is what we call it when you insert your entire hand (or just most of it) into your partner’s ass or vag/frontal hole. Trans women who have had sexual reassignment surgery should check out our section on genital surgeries (page 18) before being fisted. For the person receiving, fisting can increase the risk for spreading or getting HIV or STIs during other sex acts for up to two weeks after being fisted.

If you’re the person doing the fisting, there is a very low risk for HIV transmission, as long as you don’t have cuts or sores on your hand. Remember that sometimes cuts (like hangnails) can be hard to notice. There are a couple of different ways to reduce your risk while fisting:

• Use gloves!
• Use lube! This will decrease the tears and rips in the anal or vaginal/frontal lining that make it easier to catch or spread HIV and other STIs. Water-based lubes are better, especially if you are using a latex glove.
• Condoms are the best way to reduce the risk of STI transmission. Fisting can increase the chance of passing HIV and other STIs because it can be damaging to the walls of the ass and vag.
• Clip your nails! Long nails are more likely to cut the person being fisted.

FINGERING and HANDJOBS

Stick a finger in it, or put your hand around it! No matter the shapes of genitals involved, this is usually low risk for transmitting HIV, but you could still be at risk for getting or spreading warts or even herpes! To reduce your risk even further:

• Wash your hands before sex! Soap and water, nice and easy.
• Check carefully to make sure you don’t have any open cuts or abrasions! It can be really hard sometimes to see or feel very small cuts and abrasions.
• Wear gloves! Especially if you’re penetrating a vag, frontal hole or ass. Make sure to switch gloves between each hole and each partner so that you don’t pass any bacteria or viruses between genitals and partners.
• Don’t use another person’s cum/ juices as lube to finger or give yourself a handjob.

TOYS

Dildos, vibrators and even cucumbers can be fun and sexy in the bedroom! They are also pretty much no risk for spreading HIV or other STIs as long as you follow these simple suggestions:

• Put a condom or non-microwaveable plastic wrap over it!
• Change the condom or non-microwaveable plastic wrap between holes and between partners! This will prevent spreading bacteria and STIs between body parts and partners!
• Clean the toy after using it! After use, silicone dildos should be boiled for up to five minutes or washed with antibacterial soap. Rubber and cyber-skin cocks are porous, so you can’t fully sterilize them – so make sure to always use a condom with them!
• Vegetables can be toys, too! Cucumbers, or even a butternut squash if you’re really ambitious, can work great as toys. Just make sure to wash them thoroughly with soap and water before inserting them, and check to make sure that they’re still good. If they look a bit expired, beware! Expired vegetables can cause yeast infections – ew!

LUBE

For anal and vaginal sex and fisting, lube can be an essential part of having a good time. Using lubricants can reduce tearing of the anal or vaginal lining. Small tears increase your risk of contracting or spreading HIV and other STIs.

Recommended

Water-based lubes (such as Astroglide).

Silicon-based lubes: they’re safe with latex and polypropylene/polyurethane condoms, and tend to last longer than water-based lubes. You shouldn’t use silicone-based lubes with silicone toys as they will degrade the toys. And be careful – they can stain fabrics like sheets or clothes!

Not Recommended

Vaseline, water, spit, massage oils, lotions, cooking oils (like Crisco) and other oils are NOT recommended! Vaseline is made from petroleum and will degrade the anal or vaginal lining, increasing your risk of getting an STI. Water, spit and oils tend to be absorbed quickly by the body, meaning you’ll get dry fast, which also increases your risk.

And remember: Even if you’re using a spermicidal lubricant, you still need to use a condom or glove to prevent the spread of HIV and other STIs! Plus spermicidal lubricant can degrade your lining, too, and that can increase your risk.
Talking to your doctor can be really hard as a trans person, and/or as someone having sex with a trans person. This is especially true if you aren’t sure if your doctor is both trans-friendly and sex-friendly. But if you want to have incredibly hot, healthy sex, at some point you’ll need to talk to your doctor. Here are some things to bring up with your doctor or at a sexual health clinic:

- If you are having any kind of sex (including blow jobs), you should get tested regularly for HIV and other STIs. Some people get tested every few months, while others feel they only need to get tested once a year. Remember that even if you’re in a long-term monogamous relationship, you should still get tested for HIV and STIs at least once a year!
- If you’re poz, you should still keep getting tested for other STIs! Remember, you can still get and spread other STIs, and getting them could really hurt your immune system. They may also be a bit trickier to treat if you’re poz. Let your doctor know if you have other STIs so they can help keep you healthy.
- Talk to your doctor about any discharges, itchiness or unusual odours you find coming from your genitals, throat or ass.
- Trans people should talk to their doctors about vaccinations. You may qualify for free vaccinations against hepatitis (A and B).
Many trans women love the genitals they were born with and don’t feel they need to alter them, while others can’t afford to have the surgeries they’ve decided would be best for their bodies. Still, some trans women both want and are able to have genital surgeries, such as orchidectomy (removing the balls) or sexual reassignment surgery (SRS)/vaginoplasty. If you are a woman who has had or wants to have one of these surgeries or if you are sleeping with one of these women, this section is for you!

WHAT CAN I DO? WHAT CAN’T I DO?

Orchidectomy – An orchidectomy (orchi) removes the balls, which produce most of the testosterone in the body. They also create semen. So, if you’ve had an orchi, you might find that this changes sex a bit. First off, you might still pre-cum, but might not be able to cum anymore. Just because you can’t cum doesn’t mean that you can’t have an orgasm, though! And it also doesn’t mean that you’re no longer at risk for STIs! You might find that you’re unable to maintain an erection after having an orchi. If you can, use a condom when having sex with your strapless. If you find that you can’t get a condom to stay on, it’s usually because it’s not the right size or you haven’t lubed up enough. Try a different sized condom or lube up more to see if this keeps the condom on. If it doesn’t, as a last resort, use non-microwaveable plastic wrap.

HIV and other STIs: risks for post-op vag

Sexual Reassignment Surgery/Vaginoplasty – So you have a vagina! Your new vag and vulva were probably created with skin from your penis, testicles, thighs and maybe even your colon! There are a few things to keep in mind:

- You’re still at risk for getting or spreading HIV and other STIs! Depending on the kind of surgery, you might even be at a higher risk than you were before (such as when a surgeon uses parts of your colon). So make sure that your partners use condoms, dental dams and/or gloves.
- Trans vag doesn’t usually self-lubricate. While some trans women self-lubricate a bit, most don’t get any self-lubrication and those of us who do don’t lubricate as well as cis women or trans men. So make sure to use lube, which will reduce tears and rips in your vaginal lining and make sex a whole lot easier!
- Trans women’s vaginas are less stretchy and more delicate than cis women’s vaginas and trans men’s frontal holes, so there are some things that you might not ever be able to do sexually. The number one among them is vaginal fisting. You might also be advised against anal sex and anal fisting for a number of years (usually two years) post-operatively, or for life. Check with your surgeon. One of the reasons for this is that it could cause a vaginal prolapse – that means that your vagina could fall out. You could also cause a fistula – a hole between the anal and vaginal linings, which can be very hard to repair and dangerous to your health! So be careful! When you are having anal sex, take it slow and easy at first, and stop if you feel irregular pain.
- Don’t forget to dilate! Dilation is the insertion of a plastic stent (fancy medical term for dildo) into the vagina on a regular basis to keep the vagina open and flexible. Not dilating regularly can lead to loss of both depth and width, which means your vagina might become too small for penetration (sex). The reduction in size that may accompany a lack of dilation may be completely irreversible, so follow your surgeon’s guidelines for dilation schedule. If you experience any complications after surgery, most are fixable as long as you continue to dilate. So keep dilating!
- If you experience pain or tightness while getting fucked, try dilating an hour or two before you have sex. It can be hard to predict this sort of thing, but dilating before sex can really help make sex easier and more pleasurable!
- If you’re being penetrated, try different positions to find ones that work best for your body. Some positions work better than others for trans vag, but it varies between women.
- Your vagina can also get yeast infections, so be careful that anything going into your vag is clean!
- The jury is still out about whether or not your new vag will need Pap smears. Some doctors say yes, and some say no. Some kinds of HPV can lead to cervical or anal cancers, and your new vag may be able to contract these! Better to be safe than sorry! Ask your doctor about getting a Pap smear done.
needles, silicone, and STIs

Needles can be an essential part of our lives as trans women, especially if we’re using them to inject hormones or if we decide to have silicone injections to change our bodies. They can also be part of our lives if we use drugs such as crystal meth or heroin.

Injections don’t have to be a danger to your health. There are ways to help you significantly reduce the risk of developing abscesses and infections or getting HIV and hepatitis C when you inject.

Here are some things to keep in mind:

• Make sure to keep your injection sites (wherever you’re putting needles into your body) clean by washing your hands with soap, swabbing the injection site with alcohol before injecting, and using band-aids after.

• Always use a new, clean needle every time you inject. You can get free new needles and injecting supplies from needle distribution programs through your local community health centre.

• Hormones are usually injected with a different gauge (size) of needle and with a bigger syringe than drugs. Hormones are usually injected with muscular gauge needles (needles for injecting into muscle), so make sure to have some on hand! You can purchase these at any pharmacy or pick them up from your doctor’s office or community health centre.

• Don’t just throw needles out! You can pick up a biohazard needle collection bin in many different places like a pharmacy or your doctor’s office. If you don’t have a hazardous waste bin nearby, put used needles in a plastic water bottle. You can return these at a pharmacy, your doctor’s office or a needle distribution program. Many community centres have hazardous waste bins in their bathrooms, too.
Additional Safety Tips and Tricks for Trans Sex Workers

Sex work can be a viable (and sometimes fun) way to support yourself and pay for hormones and surgeries. Some of us do sex work just to make money, while others find it can also be a self-esteem boost, validating our identities and bodies as desirable.

Like some other types of work, sex work can occasionally be risky. It’s important to have a plan to protect yourself if ever these situations arise.

Before a Date
- Check out the Bad Date Book from your local sex workers’ organization. This contains information on bad clients who have been violent with other sex workers.
- Find a trustworthy friend to call before and after dates. Let them know the client’s name, phone number, email and/or license plate number (or pretend to do this in front of the client), in case the date goes bad. This lets the client think that there will be someone out there who knows where you’re supposed to be and who will alert the police if you go missing.
- Working in pairs or in groups can help if you’re working on the street. Write down the license plate numbers of the clients your friends go with, and have your friends do the same for you.
- Always carry condoms and lube! Don’t rely on the client to bring these. You can get free condoms from most community centres and sexual health clinics.
- Wearing lip gloss or lip balm can help prevent you from getting cuts or tears on your lips, especially during the winter. Cuts and tears on your lips will increase your risk of getting HIV and other STIs.
- Avoid wearing necklaces or scarves! These can be used to choke you if the date goes bad.

On a Date
- Never believe the client! Always assume that clients might be lying to you.
- If you can, carry only your health card for ID so that if you get robbed you won’t lose your other ID, but if you need to go to the hospital you’ll be able to get care.
- Be clear and firm about your prices and your limits! If you prefer to use condoms for blow jobs, be firm about it, even if they offer you extra money or say they won’t have sex with a condom on. Better to lose the money and find another client than to risk your health!
- Get money first, get down second! No pay, no play. Make sure that your clients pay you upfront.
- Dates with more than one client at a time can be risky! If you feel uncomfortable, get out of there right away.
- If you feel threatened or uncomfortable, get out of there as fast as you can! Call 911 if you feel safe doing so, or report the incident to your local sex workers’ organization or trans organization.

After a Date
- If something goes wrong on a date that makes you feel unsafe, consider reporting it to your local sex workers’ organization or to the police.
+break it down:
Sexually Transmitted Infections

Getting an STI isn’t the end of the world. But, left untreated, it can damage your health and your partners’ health. This chart gives some basic information on a few different STIs, how they are transmitted, how to reduce your chances of getting and giving them, and how they can be treated.

HIV (Human Immunodeficiency Virus)

How you get it:
+ Unprotected anal or vaginal/frontal sex (without a condom).
+ Sharing needles or other equipment to inject drugs (including hormones).
+ HIV can be passed:
  - by sharing needles or ink to get a tattoo
  - by sharing needles or jewellery to get a body piercing
  - to a fetus or baby during pregnancy, birth or breast-feeding. But vertical transmission (from parent to child) with effective prevention now occurs less than two percent of the time in Canada.

How they treat it:
+ Talk to your doctor.
+ There is no cure for HIV, but there is treatment. With proper care and treatment, most people with HIV can avoid getting AIDS and can stay healthy for a long time.

How to reduce your chance of getting and giving it:
+ Use a condom for fucking.
+ Make sure to use new needles and not to share needles.
+ Avoid contact with blood and semen.

Syphilis

How you get it:
+ Unprotected oral, anal or vaginal/frontal sex.
+ Wet kissing (much less commonly).
+ Contact with a syphilis sore.
+ It can be passed from parent to child during birth.

What it can feel like:
+ Many people do not initially have symptoms.
+ Some people get a painless open sore on or inside their body (genitals, anus or mouth being the most common places).
+ Some people experience hair loss, rashes (especially on the hands and feet), fever, swollen glands and muscle and joint pain. If left untreated syphilis can cause serious damage to major organs.

How they treat it:
+ Talk to your doctor.
+ Syphilis is usually curable with antibiotics.

How to reduce your chance of getting and giving it:
+ Use condoms for anal, oral and vaginal/frontal sex with t-dicks, strapless and strap-ons.
+ Use dental dams for oral sex with vag or frontal parts.

Genital Herpes

How you get it:
+ Skin-to-skin contact with the infected area, even if there are no symptoms.
+ Unprotected oral, anal or vaginal/frontal sex.
+ Kissing.

What it can feel like:
+ Many people do not have symptoms, but if they do, the symptoms may occur one week after transmission.
+ Itching or tingling in the ano-genital area or mouth.
+ Tender, swollen glands.
+ One or more blisters that may turn into painful sores.
+ Headaches, fever, muscle pain.

**How they treat it:**
+ Talk to your doctor.
+ There is no cure for genital herpes, however there are antiviral drugs that can help reduce or prevent symptoms.
+ Keep the area clean and dry; avoid tight synthetic underwear and pants.
+ Bathe quickly and use a hairdryer, instead of a towel, to dry around the sores.

**How to reduce your chance of getting and giving it:**
+ Use condoms for anal, oral and vaginal/frontal sex with t-dicks, strapless and strap-ons.
+ Use dental dams for oral sex with vag or frontal holes.
+ Try to avoid having sex during an outbreak.

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**Gonorrhea**

**How you get it:**
+ Unprotected oral, vaginal/frontal or anal sex.
+ It can be passed from parent to child during childbirth.

**What it can feel like:**
+ Some people do not have symptoms, but those who do may notice them two to five days after transmission.
+ Yellow discharge from t-dick, strapless, vagina, front hole or anus.
+ Sore throat.
+ Pain during penetration.
+ Blood in your shit.
+ Burning or painful sensation when you pee.
+ Pain in your lower abdomen, fever and chills.

**How they treat it:**
+ Talk to your doctor.
+ Gonorrhea is treatable with antibiotics.
+ Untreated, gonorrhea can lead to pelvic inflammatory disease, which can cause infertility.

**How to reduce your chance of getting and giving it:**
+ Use condoms for anal, oral and vaginal/frontal sex with t-dicks, strapless and strap-ons.
+ Use dental dams for oral sex with vag or frontal holes.
+ If you have gonorrhea, talk to your doctor to get antibiotics. Take them exactly as directed.

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**Human Papillomavirus (HPV, Genital Warts)**

**How you get it:**
+ Skin-to-skin contact with the infected area.
+ Unprotected oral, anal or vaginal/frontal sex.

**What it can feel like:**
+ Many people do not have symptoms.
+ Single wart or clusters of warts on, in and around the genitals and/or anus.
+ Warts may be round, flat or a cauliflower shape that are flesh-coloured or grey.

**How they treat it:**
+ Talk to your doctor.
+ HPV has no cure, but once warts are present, you can choose to freeze them, burn them or use topical creams to get rid of them.
+ Without treatment, some strains of HPV can lead to anal or cervical cancers. While most trans women don’t have cervixes, they may still need Pap smears. This is especially true if they have had an HPV infection in the tissues that make up their new vagina. These Pap smears screen for changes in the vagina rather than other Pap smears which screen the cervix. Talk to your doctor about whether you’re a trans woman who needs a Pap smear.

**How to reduce your chance of getting and giving it:**
+ Use condoms, dental dams and/or gloves for oral, vaginal/frontal and anal sex, and for hand jobs.
+ Warts from the hands can be transferred to the genitals.
+ Get regular Pap smears to screen for cervical abnormalities.
+ Talk to your doctor about getting a vaccine to protect you from warts and some strains of HPV.

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**Chlamydia**

**How you get it:**
+ Unprotected oral, anal or vaginal/frontal sex.
+ It can be passed from parent to child during birth.

**What it can feel like:**
+ Some people do not have symptoms, but for those that do, symptoms may appear 1-3 weeks after transmission.
+ Abnormally watery or thick discharge from the penis, strapless, or vagina, front hole.
+ Pain during sex or while peeing.
+ Pain in abdomen.
+ Fever.

**How they treat it:**
+ Talk to your doctor.
+ Chlamydia is treatable with antibiotics.
+ Untreated chlamydia can lead to pelvic inflammatory disease, which can cause infertility.

**How to reduce your chance of getting and giving it:**
+ Use a condom for oral, vaginal/frontal, and anal sex.
+ Use a dental dam for oral sex with vagina or front hole.
+ If you have chlamydia, talk to your doctor to get antibiotics.
need more info?

The 519 Church Street Community Centre
Toronto, Ontario
www.the519.org

2-Spirited People of the 1st Nations
Toronto, Ontario
www.2spirits.com
416.944.9300

Head and Hands
Montreal, Quebec
www.headandhands.ca/programs-services/
health/hormone-treatment/

Rainbow Resource Centre
Winnipeg, Manitoba
www.rainbowresourcecentre.org
204.474.0212

Action Santé Travesties et Transsexuelles du Québec (ASTT(e)Q)
Montreal, Quebec
www.astteq.org
514.847.0067 x207

Trans Health Clinic, Klinic Community Health Centre
Winnipeg, Manitoba
www.klinic.mb.ca
204.784.4090

Transgender Health Program, Vancouver Coastal Health
Vancouver, British Columbia
www.transhealth.vch.ca
866.999.1514

Trans Sask Support Services
Regina, Saskatchewan
www.transsask.org

Need more information and resources on HIV or hepatitis C?
Contact CATIE: 1.800.263.1638 | www.catie.ca | info@catie.ca

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